



raising performance
through workforce
engagement

Meeting the Challenge: Successful Employee Engagement in the NHS





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Introduction

There is growing recognition of the importance of employee engagement across all sectors. It is increasingly clear that engagement is linked to positive outcomes – both for individuals and for organisations. Employee engagement is rising up the agenda for employers; and nowhere more so than in the NHS where Michael West and others have clearly shown the direct line between engaged employees and both better care and happier patients.

The NHS workforce is massive; 1.3 million staff, doing more than 300 jobs, working at 1,000 different employers. Their expertise and experience is matched only by their commitment and dedication.

But these are challenging times for the NHS and for its workforce. Employees are facing ongoing pay-restraint, increasing work intensity and seemingly constant organisational change. After years of growth, the service is facing a sustained funding freeze whilst cost pressures continue to rise inexorably. This is creating what the Institute of Fiscal Studies has called an ‘unprecedented squeeze’ which is unlikely to ease at any point soon. Yet at the same time, in this post-Francis world, the NHS is expected constantly to drive up both quality and safety of its care.

The pressure is being felt at NHS trusts up and down the country. Yet many are rising to the challenge. Employee engagement has actually increased over the past two years despite these difficult times.

Employee engagement will be absolutely crucial for the NHS over the coming years. Trusts which effectively engage their workforce have more satisfied staff, better clinical outcomes and are more efficient. If services are to be improved within a tight budget, trusts will have to unlock the immense potential creativity and innovation of their employees. And when change happens, staff need to be right at the heart of decision-making.

This report – commissioned by the Healthcare People Managers Association and NHS Employers – aims to set out how this can be done. In the spirit of shared learning, it draws on best practice in employee engagement from high performing trusts across the country.

We hope that it will be of use to NHS trusts and that it can go some way towards helping them engage with their employees so they can together manage the challenges to come.



Nita Clarke, OBE

Director IPA

April 2014



Executive Summary

Employee engagement is increasingly being seen as a priority for employers from all sectors. Nowhere more so than in the NHS where there is a growing body of evidence that links engagement both to employee wellbeing, patient satisfaction and clinical outcomes. It's increasingly clear that engagement is vital to high quality care in the NHS.

The NHS workforce has faced significant challenges in recent years. Yet despite this, employee engagement has stayed relatively stable and even increased slightly. However, there remain significant variations between trusts and much scope for improvement.

This report examines what might be done to improve engagement in the NHS. It is based on in-depth case studies of eight NHS Trusts which have either sustained high levels of engagement or improved engagement significantly over time. We also spoke to a number of leaders, experts and stakeholders in the NHS, conducted a literature review of evidence in the area and analysed the NHS Staff Survey.

We found that high performing trusts tend to have a strong set of **organisational values**, developed in partnership with employees. Trust values should be consistently communicated to employees and mainstreamed throughout the organisation, informing HR processes. In order to reinforce the values, both senior leaders and managers throughout the organisation need to be seen to live them out and demonstrate them in their behaviours and decisions.

Senior leadership play an important role in setting the tone at the top of the organisation. They need to be visible and approachable throughout the organisation, and to ensure there is regular and effective communication between senior leaders and employees, using a variety of channels. Although senior leaders set the tone, **line managers** are the people who really make the difference to engagement. They need to coach and support employees, helping remove the barriers that get in the way of their teams doing their jobs. Line managers must ensure effective appraisals, as part of a year-round process of performance management, and encourage team working. Line managers themselves need to be engaged, and they often need training and support in order to better engage their teams.

There must be a strong **employee voice** throughout the trust. Employees need to be able both to raise concerns if they have them, to offer suggestions for the improvement of their services, and to be involved in decision-making across the trust as a whole. Responsibility for decision-making should be devolved as close as possible to the frontline, with employees given a say over both how they do their jobs and how their services are delivered.

Finally, given the high level of union membership, **partnership working** is also important in providing the foundations for employee engagement in the NHS. Partnership requires a mutual recognition of shared interests and of the benefits of working together. As well as supporting *structures* for partnership working, both sides need to support a *culture* of partnership working based on trust, early engagement, and real involvement in decision-making.

The NHS is facing an unprecedented squeeze on resources. This is feeding through to trusts and there is a real risk that employee engagement may be undermined by ongoing pay restraint, increasing job intensity and constant organisational change. Yet although the situation represents a challenge to engagement, it also makes engaging with employees more important than ever before.

Engagement during times of change is vital in order to both inform decision-making and to ensure the buy-in of employees to the process. Through engaging with employees, trust can help unlock their potential for innovation, allowing them to make services safer, more effective and more efficient.

Through focusing on driving up employee engagement, NHS trusts will be able to manage the challenges of the next few years, and continue to improve services to patients in these tough times.

Methodology and Acknowledgements

This research is based on in-depth case studies of employee engagement at eight NHS trusts:

- Countess of Chester Hospital NHS Foundation Trust
- Derbyshire Healthcare NHS Foundation Trust
- Frimley Park Hospital NHS Foundation Trust
- Guy's and St Thomas' NHS Foundation Trust
- Kingston Hospital NHS Foundation Trust
- Oxleas NHS Foundation Trust
- The Royal Marsden
- Salford Royal NHS Foundation Trust

The case studies examined the state of employee engagement at the trusts, the approach to engagement and the outcomes associated with engagement. They were based on in-depth interviews with Executive Directors, Staff Side representatives and others; focus groups with line managers and frontline staff; a review of written material and analysis of the NHS Staff Survey. We've included excerpts from the case studies throughout the report but they are also available in full on our website www.ipa-involve.com.

The case studies included a variety of trust types. The trusts were identified through analysis of the NHS Staff Survey from 2010 – 2012, selecting both consistently high performers and recent improvers. We also examined other data sets including patient satisfaction (Inpatient Survey 2012), CQC Intelligent Monitoring reports, Monitor assessments of financial risk and governance, and mortality and staff absence (Health and Social Care Information Centre). The trusts selected were high performing both in terms of employee engagement, patient satisfaction, clinical outcomes and governance.

In addition to the case studies, we conducted a literature review of 18 publications on employee engagement in the NHS and analysed the NHS Staff Survey results from 2010 – 2013. We also conducted expert interviews with a number of senior leaders in the NHS, trade union national officers, academics and others. These included:

- Barrie Brown, Unite
- June Chandler, Unison

- Kevin Croft, Healthcare People Managers Association
- Amber Davenport, Foundation Trust Network
- Jeremy Dawson, University of Sheffield
- Karen Didovich, Royal College of Nursing
- Jon Skewes, Royal College of Midwives
- Jan Sobieraj, NHS Leadership Academy
- Steven Weeks, NHS Employers
- Michael West, Lancaster University Management School

We would like to thank these people for contributing to the work. We would also like to thank the senior leadership team at the case study trusts and all the staff who took the time to speak to us.

Most of all we would like to thank the Healthcare People Managers Association and NHS Employers for supporting the project and in particular we are grateful for the support of Kevin Croft and Steven Weeks.



1. What is employee engagement?

Employee engagement has been growing in prominence in recent years. Driven by mounting evidence of the link between employee engagement and positive outcomes, it has increasingly been seen as a priority for employers.¹

There are a variety of definitions of employee engagement. Some see it as an attitude held by employees towards their job, their colleagues and their organisation. Others see it more as an approach by employers to working with their staff. The following definition from the Institute of Employment Studies, which we took as the definition for this report, adequately sums up both:

*"A positive attitude held by the employee towards the organisation and its values. An engaged employee is aware of business context, and works with colleagues to improve performance within the job for the benefit of the organisation. The organisation must work to develop and nurture engagement, which requires a two-way relationship between employer and employee."*²

The NHS Staff Survey, which takes place annually across all NHS trusts, began measuring employee engagement in 2009. Based on sound academic evidence, the engagement figure is a compound measure made up of three key findings from the staff survey. Each of these key findings is in turn made up of three separate questions:

Staff Advocacy:

- perceptions that care of patients/service users is the trust's top priority
- recommendation of the trust as place to work
- recommendation of the trust as a place to receive treatment

Motivation:

- staff looking forward to going to work
- being enthusiastic about their job
- time passing quickly when they're at work

Involvement:

- opportunities to show initiative
- ability to make suggestions to improve the work of the team/department
- ability to make improvements happen
- The overall employee engagement score is given as a number between one and five.

2. How engaged are employees in the NHS?

Employee engagement in the NHS has remained relatively stable over the last few years. As the graph shows, following a slight dip in 2011, levels of engagement have increased in the last two years. This is a notable achievement given the significant challenges facing the NHS. As Steven Weeks of NHS Employers commented, *'even through the last two or three years of difficulties and financial challenges, and despite rising workloads, people have maintained that high level of identification with and commitment to their jobs.'*

There is significant variation in engagement by trust type. Acute trusts and mental health and learning disability trusts have similar levels of engagement, close to the average for the NHS. Specialist trusts though tend to have higher levels of engagement whilst ambulance trusts fall well below the national average. There is also significant variation within trust types. For example, employee engagement at acute trusts varies from 3.41 in two trusts to 4.05 at Salford Royal, one of our case study trusts.

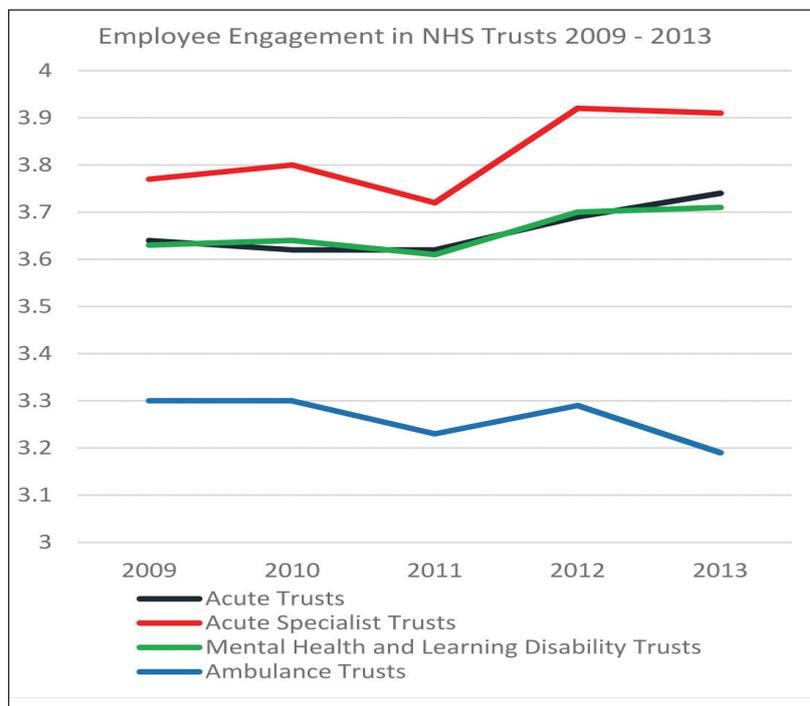
Similar patterns are seen by staff group, with ambulance staff scoring far lower in terms of engagement. Managers have slightly higher levels of engagement which is largely driven by higher levels of involvement and task discretion.

Looking at the individual elements of engagement from the latest NHS Staff Survey (2013), in terms of **staff advocacy**, staff are more likely to recommend

their trust as a place to receive treatment (65%) than a place to work (59%). Seven in ten (68%) believe that patient care is their trust's top priority with just 14% disagreeing. In terms of **motivation**, whereas three quarters (76%) say time passes quickly at work, only just over half often or always look forward to going to work (54%). This perhaps reflects the increasing intensity of work in the service. Seven in ten employees (69%) say they are enthusiastic about their jobs. Finally in terms of **involvement** a large majority of employees believe their role gives them opportunities to show initiative (71%) and to suggest improvements in the way they work (75%). However, fewer employees (56%) feel able to make improvements actually happen.

In terms of the perceptions of engagement among NHS leaders, a recent survey of trust Chief Executives by the Point of Care Foundation found that one in five rate engagement at their trust as high with the majority (61%) saying it is mixed. Seven in ten believe staff engagement is improving, a fact supported by the direction of the results in the Staff Survey.³

However, despite some progress in the last two years, there is some evidence that engagement in the NHS is somewhat lower than in the wider labour market. A recent study by the CIPD found that just one in three (32%) workers in the NHS were engaged by their measure, significantly below the rest of the workforce (37%). They also found that levels of engagement were lower still amongst nursing staff, among whom just one in four (27%) were engaged.⁴



3. Why does engagement matter?

There is a growing body of evidence across different sectors that demonstrates the importance of employee engagement. Engagement is correlated both to individual wellbeing and to organisational success⁵. In the NHS though, there is particularly compelling evidence of the importance of engagement.

First, employee engagement in the NHS is linked to **staff health and wellbeing**. As Michael West and Jeremy Dawson have shown, staff with higher levels of engagement have lower levels of both absence and 'presenteeism' – turning up for work despite being unwell. They are less likely to report suffering from work-related stress and they rate their own health and wellbeing more highly. There is also a link to turnover with engaged employees being less likely to want to leave their trust.⁶ Evidence from our case studies tended to reflect these patterns with seven of the eight trusts having lower than average levels of staff absence. Several of the trusts pointed to high levels of staff retention which they related to their high levels of engagement.

This is particularly important in a sector with significant levels of work-related ill health. The most recent staff survey showed that 38% of employees had suffered from work-related stress in the last year and 25% said they'd felt pressure to work when feeling unwell. Both of these figures have increased over the last few years. As the Point of Care Foundation have highlighted, *'healthcare professionals generally suffer higher rates of stress, depression and burnout than their counterparts in other areas of the public sector.'*⁷

Having healthier staff with higher levels of wellbeing is obviously good for employees themselves. But it also matters for the NHS as a whole. As the Boorman review showed, if sickness rates were reduced by a third, it

'From an evidence perspective, out of all of the indicators in the staff survey, the one that most predicts outcomes for staff in terms of wellbeing and absence, and for trusts in terms of their CQC performance and mortality rates in the acute sector and patient satisfaction; it is engagement. The evidence is that engagement is a very important indicator of the outcomes that really matter in the NHS.'

Professor Michael, West Lancaster University Management School

'The staff are the ones that are dealing with frontline care. You need those people feeling well motivated and that they can make the difference to patient care. If they're not engaged, they won't be giving the care they could do'

Kevin Croft, Healthcare People Managers Association

would provide an additional 3.4 million working days a year for NHS staff, equivalent to 14,900 full-time staff, saving an estimated £555 million.⁸

Secondly, employee engagement is linked to **patient satisfaction**. Again, West and Dawson find a strong statistical relationship between employee engagement and patient satisfaction.⁹ This is not in itself surprising; the NHS is a service after all, where the relationship between staff and patients is absolutely fundamental.

It also reflects evidence from other sectors where engagement has been shown to predict customer satisfaction. As Jeremy Dawson explained, *'you're not going to get good quality patient care without looking after your staff well.'* Although one could argue that the causality could go both ways, with patient satisfaction potentially leading to higher employee engagement, as Maben et al have shown *'individual staff wellbeing is best seen as the antecedent rather than as a consequence of patient care performance.'*¹⁰

Again, this trend was evident in our case study trusts. Of the six acute and specialist trusts we looked at which had data on patient satisfaction from the Inpatient Survey, all six scored higher than the average in terms of patients' overall ratings of their experience. The five acute trusts scored 8.10 on average in this area, far higher than the overall average for acute trusts of 7.84. Staff and leaders at the trust saw a clear relationship here. As Sir Ron Kerr, Chief Executive at Guy's and St Thomas' NHS Foundation Trust described *'an effectively engaged workforce ends up with effective patient care and satisfied patients.'*

Thirdly, and perhaps less obviously, there is a strong relationship between employee engagement and **clinical outcomes**. Higher levels of employee engagement are linked both to lower levels of mortality and lower hospital acquired infection. West and Dawson have shown that for an 'ordinary' (one standard deviation) increase in engagement, mortality rates would be 2.4% lower. Trusts with higher

levels of employee engagement also tended to have higher CQC ratings on both quality of services and financial performance¹¹. Again, the trusts we looked at performed well in this area, with three of the five acute trusts getting the top ranking in the CQC intelligent monitoring reports.

Given the weight of evidence showing the importance of employee engagement in the NHS, it is little wonder that it is increasingly being seen as a priority. The NHS Constitution implicitly recognises the importance of employee engagement. The Point of Care Foundation found that 68% of trust Chief Executives saw engaging staff as one of their top three strategic priorities.¹² A separate survey by Unipart and the Foundation Trust Network shows that 60% of trusts had gathered solid evidence of staff engagement leading to improvements in how they operate or to quality of care.¹³

Again, this was reflected in our case study trusts where leadership and staff identified positive associations between employee engagement and a number of outcomes from staff-wellbeing, patient satisfaction and clinical outcomes, to efficiency.

'All staff should have rewarding and worthwhile jobs, with the freedom and confidence to act in the interest of patients. To do this, they need to be trusted, actively listened to and provided with meaningful feedback. They must be treated with respect at work, have the tools, training and support to deliver compassionate care.'

NHS Constitution

As we shall see in Chapter 9, employee engagement is particularly important for the NHS in the current circumstances. Trusts are facing a difficult financial environment with extremely challenging savings targets. At the same time they are being asked to deliver higher quality and safer services. Only through focusing on employee engagement will trusts be able to meet this challenge whilst improving the quality of care they offer.

4. Values

One of the key themes shared across all of the case study trusts was the importance of organisational values. Having a strong set of values was seen as important in terms of demonstrating the purpose of the organisation and providing employees with something to identify with.

The MacLeod Report identified having a strong and coherent set of organisational values – a ‘strategic narrative’ – as one of the key enablers of employee engagement.¹⁴ The importance of this in the NHS was reinforced in the Francis Report into the crisis at Mid-Staffordshire which called for an ‘*emphasis on and commitment to common values throughout the system by all within it.*’¹⁵

The NHS Staff survey showed that 68% of employees believe that care is their organisation’s top priority with 14% disagreeing. However, employees are less confident about their leaders with only one in two (54%) saying that senior managers are committed to patient care. This is reflected in a CIPD survey which showed that only 46% of employees believe Chief Executives always or mostly act in line with organisational values. The same survey found that 53% thought their trust’s values were strong or very strong, while 12% saw them as weak or very weak.¹⁶

Encouragingly, there seems to be evidence that culture change is possible. A recent CIPD survey asked NHS staff if there had been a culture change initiative led by senior executives in the organisation to improve patient care within the last 12 months. Of the trusts where there had been a culture change initiative, two in three employees (64%) said it had been effective.¹⁷

Our case study trusts performed far better in this area, with employees on average 10% more likely to say senior managers are committed to patient care compared to the average for the trust type. Almost all of the case study trusts we looked at had done some work to identify and establish a set of trust values. There were a number of common themes between their approaches.

Crucially, organisational values must emphasise the **centrality of patient care**. Although this may sound self-evident, the Francis Report highlights how the failure to do this lay behind the crisis at Mid Staffordshire. It describes how the trust was focused largely on financial issues and the pursuit

of Foundation Trust status, paying insufficient attention to quality of service delivery. One of its key recommendations therefore was to ‘*foster a common culture shared by all in the service of putting the patient first.*’¹⁸

It is important for the process of identifying organisational values to be very much **staff-led**. A common theme across the trusts we looked at was the extent of involvement of frontline employees in defining and shaping the trust values. Many undertook an extensive consultation with staff in order to get their views, including using workshops and focus groups. Having staff involvement in the process is seen as important in making the values authentic and impactful. According to David Grantham, Director of Workforce and OD at Kingston NHS Foundation Trust ‘*the ownership of the whole culture needs to be shared across the whole organisation. If you just set the culture and values from the top, people aren’t going to engage in it.*’

When it comes to embedding organisational values, **senior leaders** seem to have an important role to play. Again, this is set out in the Francis Report; ‘*the common culture and values of the NHS must be applied at all levels of the organisation, but of particular importance is the example set by leaders.*’¹⁹ Michael West highlighted this point too, explaining that ‘*what leaders say and do needs to be aligned; when leaders talk about quality of care being the top priority, that’s what they then need to focus on, monitor, reward and pay attention to it.*’

Evidence from the case studies as well as the literature and expert interviews highlighted the importance of senior leaders being seen to live the organisational values. Leaders need both consistently to communicate the values to employees and to use them as a reference point when explaining decisions, particularly during difficult times. Leaders at the case study trusts reflected this, emphasising the importance

‘If the leadership say something is important, then they have to pay attention to it. Staff have to see that leaders don’t just say things but act and behave accordingly.... If staff hear me talking only about waiting times and the financial position, they’d soon realise that we weren’t authentic, we’d be saying one thing and doing something completely different.’

Sir David Dalton, Chief Executive, Salford Royal NHS Foundation Trust

of consistency between stated values and their focus. As Sir David Dalton, Chief Executive of Salford Royal NHS Foundation Trust described, *'it's of huge importance to pay attention to the things you said you were going to pay attention to.'*

Aside from ensuring senior leaders live the values, another key theme across the case study trusts was the extent to which the organisational values were **embedded in HR processes**. Many of the trusts we spoke to had recently introduced values-based recruitment, under which applicants are asked to explain how they have demonstrated the trust's values in their work. This is seen as being important both in terms of ensuring that trusts recruit people with the right values, and in setting out right from the start the expectation in terms of values. Case study trusts also tended to have a strong focus on organisational values in the induction process in order to reinforce this further.

Several trusts we spoke to have introduced their values into the appraisal system. Both Guy's and St Thomas' and Kingston now measure employees both on achievement against objectives and how they have demonstrated trust values in their work. As David Grantham explained, including the values in appraisals *'gives people the idea that it's not just what we do but the way we do it.'* As part of this, many trusts have involved staff in setting out the behaviours that map on to the values. Guy's and St Thomas' worked with hundreds of their staff to set out the behaviours that matched their trust values, and what they would mean for staff at each level from frontline staff to senior leaders. They found that doing so really engaged staff in the process by helping make the values tangible and real.

Several trusts have also introduced awards systems based on their values. At Kingston, the staff awards scheme is based on their four trust values, with staff being nominated by colleagues for going above and beyond in demonstrating one of them in their work.

Values as more than just a picture on the wall: Derbyshire Healthcare NHS Foundation Trust

For Steve Trenchard, Chief Executive at Derbyshire Healthcare, having a clear set of organisational values is particularly important in the NHS. With many healthcare workers seeing their job as a vocation it's important to have *'absolute synergy between your personal values and your organisational values.'* These values act as a psychological contract between employer and employee, a set of principles to guide behaviour and a tool to influence organisational performance.

Employees, alongside patients and carers, were very much involved in developing the values. As Steve explained, the fact that they were *'organically grown'* means there is a *'real sense of ownership over them.'* The values at Derbyshire Healthcare are deeply embedded in the organisation and intended to underpin everything the Trust does. Ifti Majid the Chief Operating Officer described how they wanted to go beyond *'just having them as a picture on the wall.'*

Values form a central part of recruitment, with applicants assessed on alignment to Trust values at the first stage in the process, even before technical competency is looked at. This underlines the importance of the values at the organisation and sets an explicit expectation for new staff. The appraisal system has recently been overhauled and is now based on the Trust values. Anna Shaw, Deputy Director of Communications explained how they *'weave the values into all of our messages.'* There is an effort to ensure that the values guide decision-making. According to Steve Trenchard, the values act as a moral compass; *'we always check to see if our decisions are in-line with our values at every level, right up to the board.'*

This approach to embedding the values across the organisation seems to have had an impact. Derbyshire Healthcare scores far higher than the average in terms of staff perceptions that patient care is the Trust's top priority. As Steve Trenchard sees it, the values *'really do become that glue that holds everything together.'* **Read the full case study here.**

Values and behaviours: Guy's and St Thomas' NHS Foundation Trust

Drawn up in partnership with staff in 2006, the values initially seemed to have a limited impact. The Trust sought to address this by developing, along with employees, a behaviours framework in order to make the values more tangible and real. 500 members of staff took part in the process through a series of focus groups and workshops. The product was a detailed values and behaviours framework, listing the expected behaviours and actions under each of the Trust's five values. The framework has different levels, for frontline staff, supervisors, department managers and directors – all are expected to demonstrate the values in everything they do.

Through setting out both the values and also the behaviours associated with them, the Trust has been able to embed them into the work of the organisation. As Ann Macintyre, Director of Workforce and OD said *'it's absolutely integral to what we do, it's not a stand-alone piece of work.'* The Trust has recently introduced values-based recruitment with applicants asked to demonstrate how they conform to the Trust's values. The values also play a significant role in induction. As Sir Ron Kerr, the Chief Executive explained, this sends the clear message; *'these are the values we have at Guy's and St Thomas', if you want to stay here, we expect you to live them out.'*

Importantly, the values also now form the basis of the performance development review (formerly appraisal) process. Ann Macintyre, Director of Workforce and OD, described how this grew out of staff saying *"we don't want to be measured on just whether we meet our objectives, but also on how we do it."* Employees are asked to self-assess using the values and behaviours framework, which is then the basis of a discussion with their line manager about how they are living out the values. They are assessed then, not just on meeting their objectives but also on how they demonstrate the values of the Trust in their everyday work.

The values have been revamped following the integration of the community staff from Lambeth and Southwark into the Trust. Hundreds of staff took part in the process, to ensure that the values were fit for purpose and resonated with them. As one member of the community team described; *'it's not just been set out by management, it's been set out in partnership with the Trust.'*

The approach to developing Trust values has been hugely successful at Guy's and St Thomas'. Both leaders and employees at the Trust point to the strong focus on values in explaining the high levels of engagement. Guy's and St Thomas' comes second out of 141 acute trusts in the country in terms of staff saying that patient care is the Trust's top priority, 18 per cent above the average. **Read the full case study here.**

5. Senior Leadership

Evidence from both the literature, the expert interviews and the case study trusts suggests that senior leaders play a fundamental role in employee engagement in the NHS. As mentioned above, leaders have to live the organisational values. But they must also communicate effectively, inspire trust, empower and involve their employees.

Key to effective and engaging leadership is leaders themselves **understanding the importance of engagement**. The growing evidence of the links between engagement and outcomes in the NHS has supported this and a recent survey by the Point of Care Foundation found that 68% of Chief Executives saw employee engagement as one of their top three strategic priorities. But this leaves a significant minority who do not appear to see engaging their staff as such a priority.²⁰

It matters how senior leaders approach engagement. Having a commitment to engaging with staff at the top of the organisation is important, but it needs to be a shared and strategic priority. Instead of being owned by a single individual, or by the Human Resources team, engagement must be a shared priority, with all senior leaders, middle and line managers, and Staff Side playing a part. Instead of being a separate initiative, engagement should be at the heart of the organisation and its culture. As Sam Greenhouse, Assistant Director of Organisational Development at the Royal Marsden explained *'you need to integrate things so that it's more like "this is what we do here" rather than it being just an initiative.'*

Effective communication between senior managers and staff is absolutely vital to employee engagement. The graph below shows a very strong relationship between engagement in the NHS and perceptions of effective communication between senior managers and staff. Unfortunately, this is an area of relative weakness for the NHS with under two in five employees (38%) saying communication between senior managers and staff is effective.

The case study trusts, which tended to score far higher than the average on communication, used a wide variety of communication channels. Most had a regular personal email from the Chief Executive to all staff and some like the Countess of Chester had started to use social media and blogs. However, all emphasised the importance of face-to-face communication

'The culture or climate of an organisation is significantly influenced by the Chief Executive and his or her top management team. It is they who must determine and communicate a compelling vision of how the organisation can provide high quality patient care; they who provide supportive and inspiring leadership; and they who must encourage a strong sense of organisational pride and identity that will facilitate the different departments and professions in working together to provide high quality patient care.'

Michael West et al, 'Working together'

between senior leaders and frontline staff, including town hall style meetings and walkabouts. Leaders at the case study trusts emphasised the importance of transparency in communication. Being open and honest with staff at all times – including about the challenges the trust faced – was seen as being important in inspiring trust and engagement.

In addition to communicating effectively with the frontline, senior managers need to ensure that they are visible and approachable. There was a strong emphasis on this at the case study trusts, with senior leaders doing regular open forums and town hall meetings, as well as going to see staff in their actual place of work through walkabouts and 'back to the floor' type initiatives.

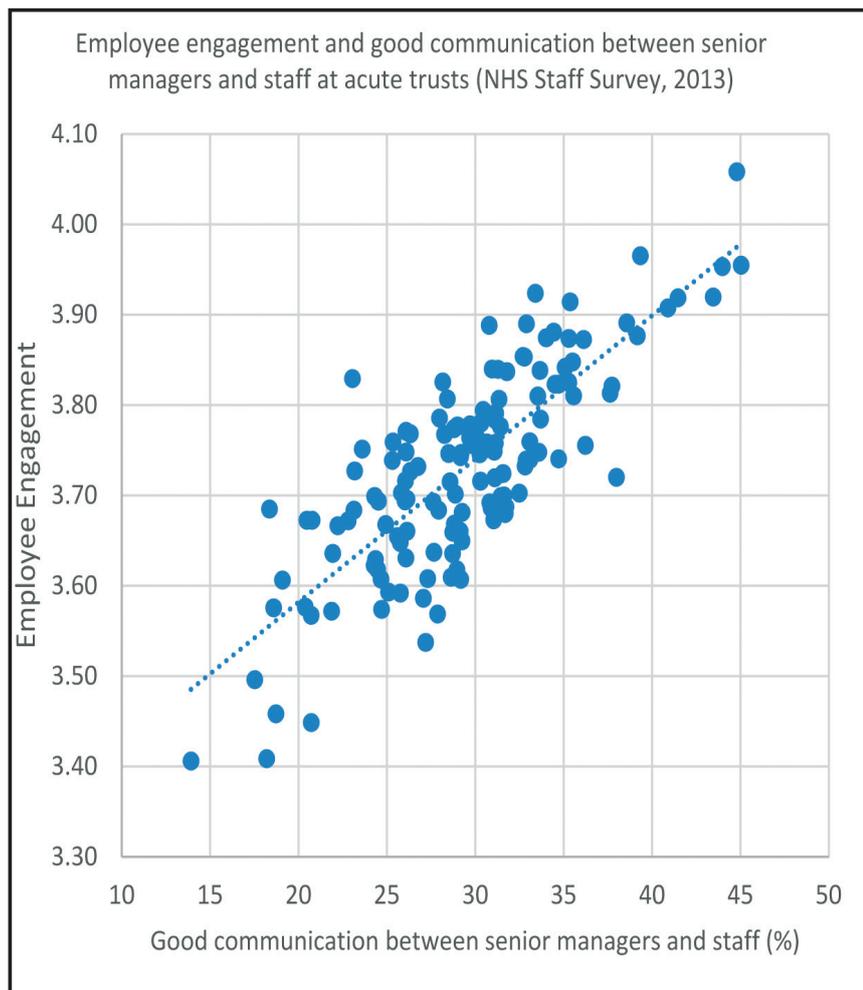
Such measures were seen to be effective at raising the profile of senior managers and making them more visible in the trust. This helps break down some of the boundaries and, as Cally Palmer, Chief Executive of the Royal Marsden explained, stops management being seen as *'stuck, isolated in an ivory tower somewhere.'* This can also help employees feel more confident that senior leaders have a full understanding of what it's like on the frontline, and that they can make informed and fair decisions. As June Chandler, National Officer at Unison explained, *'some people just say it's window*

'[You need to do] something that changes the relationship between the senior leadership and the staff on the ward so that the senior leaders are seen to be out and about, and actually listening and actually responding to the issues raised by staff. Just being visible isn't enough, they need to be seeking out feedback and acting on that feedback.'

Steven Weeks, Policy Manager, NHS Employers

... dressing, but I quite like it when chief execs and board members spend time in different parts of their organisation and understand exactly what goes on. When people are genuinely wanting to understand, that's the best thing they can do.'

Finally, leaders at many of the case study trusts argued that **stability and experience** at the top are important for employee engagement. Having a stable leadership team allows leaders really to get to know the organisation, and to have the time actually to make a difference. It allows for greater consistency, rather than having new leaders with changing visions and approaches. And having consistency at the top allows leaders to build up trust. Andrew Morris, Chief Executive of Frimley Park Hospital NHS Trust, is one of the longest serving in the NHS, having been in the job for 25 years. As he explained, *'most chief execs have a life expectancy of two or three years. That's rubbish – it takes you that long to really understand an organisation, then it takes you another five years really to pull off any long-term change.'*



Not just faceless bureaucrats: Leadership at Oxleas NHS Foundation Trust

The senior leadership team at Oxleas play a significant role in driving employee engagement. Although engagement is seen as a shared responsibility across all levels, Stephen Firn the Trust's Chief Executive believes that *'the responsibility for setting, maintaining and modelling the cultures sits with the senior leaders.'* Simon Hart Director of HR & OD explained how it was important for senior leaders to act as role-models and be seen to live the Trust's values; *'you can have as many fancy pictures of your values stuck up on a wall as you want, but unless it's lived and believed, it's meaningless.'*

The relative stability at the top of the organisation is seen as an advantage in terms of engaging with staff. This has allowed them to build up recognition and trust with the workforce.

In order to build the relationship with staff from the very start, Stephen Firn is the first person new recruits see at their induction. He welcomes staff to the organisation, talks about the Trust's values and his journey from Healthcare Assistant to Chief Executive.

Board members at Oxleas undertake regular visits to services. These were introduced in the wake of the Francis Report, with its description of a board at Mid Staffs that was distant and out of touch with what was going on the shop floor. Stephen Firn explained that although the board had regular updates on care quality, finances and HR, *'you can still read all of those bits of information and not know that in parts of the organisation, staff might be unhappy.'* Every member of the board – both Directors and NEDs – now undertakes a visit to a service between each board meeting. The emphasis of the visits is on finding out what's going on in the service and how staff are feeling, as well as identifying and resolving problems. They then feed back to the board to share the knowledge.

As well as being seen as an important tool by board members, employees seemed really to value these visits. They described how the visits help staff get to know the senior leaders, making them seem more approachable and breaking down barriers. Employees said it helped them feel they could raise issues with senior leaders, whatever their role and that it *'makes people feel that Pinewood [the head office] is not made up of faceless bureaucrats.'* Employees also explained that the visits help the senior team get to know staff and build their knowledge about the services they provide. One described how it builds the perception that *'these people who are going to be making decisions about staffing and money and all these over-arching important things, actually understand what it's like to deal with Mr Bloggs on a rehab ward.'* The visits are seen as a commitment to the frontline; as one employee saw it, *'it's such a small thing to do but it's really important.'*

The approach of the leadership team is clearly effective. In addition to the positive feedback from the interviews, the Trust far out-performs the average in terms of senior leadership. Compared to the average for mental health and learning disability trusts, staff at Oxleas are far more likely to recognise senior managers; they are more positive about communication and involvement in decision-making; and they are more likely to say that senior managers are committed to patient care. **Read the full case study here.**

Visible and engaging leadership: Countess of Chester Hospital NHS Foundation Trust

Several employees at the Countess of Chester highlighted the visible and accessible leadership team as key to engagement at the Trust. One said *"there's a feeling that the exec team are very open. They're accessible and approachable; you feel like you can go and talk to them and ask them a question."*

There are a number of ways in which the Trust leadership cultivates this sense of openness. Tony Chambers, Chief Executive at the Trust, and his fellow Executive Directors all do regular walkabouts to see what's really happening on the shop-floor and to get the views of both staff and patients. Employees thought these walkabouts made a real difference, with one saying it helps staff realise that those at the top *"are not some ethereal group that exists behind the scenes, they're real people you can have a conversation with. It really breaks down barriers."*

Tony also makes good use of technology to connect with staff. He writes a regular interactive blog which both celebrates successes and openly sets out the challenges to the Trust. Both Tony and the Trust have twitter accounts and they encourage staff and patients to engage in dialogue with them through these.

In addition to these channels, the sense of openness and accessibility is also built on a culture and set of behaviours. When Tony joined the Trust, he made it his mission to meet every consultant in the first three months. He and other senior leaders ensure they speak to all staff at induction to welcome them to the organisation and set the tone right from the start.

They see a number of benefits in having visible and approachable leadership. According to Sue Hodgkinson, Acting Director of HR and OD, it shows management *"are not in an ivory tower"* and that the quality of care and the way staff are feeling matters to them. It also gives leaders *"a sense of what's really going on in the Trust."*

Read the full case study here.

6. Engaging Managers

As shown above, senior leaders play an important role in setting the tone for engagement. But it is immediate line managers who have a much more direct relationship with employees, and who arguably have a bigger impact on engagement.

The staff survey shows employees in the NHS rate their immediate managers relatively highly in terms of helping in a personal crisis (73%) or with a difficult task (70%), as well as in their support for team working (71%). However, employees are slightly less positive in terms of getting clear feedback from their manager on their work (59%) and managers asking for their opinions before making a decision (53%). These figures really matter. Perceived support from line management in the NHS correlates with staff engagement, health and wellbeing, patient satisfaction and clinical outcomes such as mortality²¹. As Kevin Croft of Healthcare People Managers Association explained, *'we need to think about what good line management really means, and how we get every line manager in the organisation doing it day in, day out.'*

One of the peculiarities of management in the NHS is the fact that although only three per cent of employees are officially classed as managers or senior managers, more than 30 per cent of staff have responsibility for managing people.²² Most of these would combine this role with clinical or other responsibilities, but wouldn't necessarily see themselves as managers. However, this group represents a large population of people managers who have an important role to play in engaging employees, and they need to be supported to do so.

An essential prerequisite for having engaging managers is for the managers themselves to be engaged. As Sir Ron Kerr, Chief Executive of Guy's and St Thomas' explained, *'unless local managers are properly engaged, then I think you've got a real difficulty.'*

Effective people management is absolutely crucial to employee engagement. Having strong Human Resource Management processes in place, overseen by engaged and engaging line managers makes a real difference. As Kevin Croft of HPMA put it, *'you need good, basic people management at the frontline. For me, engagement is the outcome of good people management.'*

Part of effective human resource management, and a key role for line managers, is ensuring employees have a regular and **effective appraisal**. The evidence from the NHS Staff Survey shows a strong relationship between effective appraisals and both employee engagement and wider outcomes. Quality matters here; those who receive an effective appraisal have far higher levels of engagement than those who have not received one. But employees who have had a poor appraisal tend to be less engaged still. As West and Dawson explain, *'this suggests that an appraisal meeting which is not well-structured can be counter-productive, leaving the employee feeling less motivated about his/her work and organisation.'*²³

In order to be effective, appraisals need to be seen to be useful in terms of improving how people do their job; they need to set clear and stretching objectives; and they need to leave the employee feeling that they and their work is valued. There is substantial room for improvement here. Of those who have received an appraisal in the last year, four in five (78%) said it helped them agree clear objectives. However, only three in five (63%) said it made them feel valued and just one in two (54%) said it helped them improve how they do their job. This means that although the vast majority (84%) of NHS staff had been appraised in the last year, just two in four (39%) are deemed to have had effective appraisals. Beyond the appraisal itself, as has been shown above, just three in five (59%) say they get clear feedback from their manager on their work.

The case study trusts we looked at tended to perform far higher in terms of staff having had effective appraisals. They tended to make this a clear organisational priority. There was a clear expectation on managers to carry them out, and provision of support and training to help them do so effectively. The trusts tended to emphasise that the appraisal was not a one-off, but part of an ongoing process of support and performance management for staff. There was also a focus on providing all employees with access to training and development opportunities in order to progress in their career, something which employees often highlighted as important for engagement. As Jeremy Dawson explained, they should not be *'annual events but part of a constant process of discussion and evaluation and encouragement.'* As mentioned above, many of them had integrated their trust values into the appraisal system, allowing staff both to see meaning in

their work and to see their role as contributing towards the overall aims of the trust.

Line managers have a crucial role to play in **supporting team-working**. Analysis of the staff survey has shown that effective team working is linked to higher levels of employee engagement. While those working in well-structured teams had far higher levels of engagement, those working in poorly functioning 'pseudo-teams' were less engaged than those not working in teams at all.²⁴ So again, as with appraisals, it's not just the presence of team working but the quality that matters. There is also a link with clinical outcomes with Michael West claiming that a five per cent increase in staff working in 'real teams' is associated with a 3.3 per cent drop in mortality, equivalent to around 40 deaths a year in the average acute hospital.²⁵ As Jan Sobieraj of the NHS Leadership Academy explained, 'teamwork saves lives. Highly valued teams work better and deliver better results.'

'There is a strong link between team working and engagement. Teams where there are clear objectives, where people have clear roles and they have to work together to achieve those objectives, where the teams meet to discuss how they're doing; these are the groups that have the highest levels of engagement. In groups where they feel they are a team but they don't have these things, they tend to have lower engagement than people who do not work in teams at all.'

Jeremy Dawson, University of Sheffield

The definition of a 'real team' – those associated with high levels of engagement – are ones in which team members have a set of shared objectives, where team members meet to discuss the team's effectiveness, and where team members communicate closely with each other to achieve the team's objectives. The vast majority of NHS staff (96%) work in a team. But of those who do, only four in five agree that they have to communicate closely with colleagues over team objectives (79%) and have a set of shared objectives (77%). Just three in five (62%) regularly meet to discuss the team's effectiveness.

Line managers have the crucial role to play here. They must ensure that their teams have clear and shared objectives and that they meet regularly to discuss performance. When work intensity is rising and with ever-growing pressure on the frontline, this can be a

challenge. But the evidence shows that regular team meetings are essential to build teams and increase engagement. In addition to supporting this, managers must look to identify and remove barriers their teams encounter, and ensure they are supported in working towards their objectives.

Line managers have a fundamental role to play in **employee involvement**. Employee involvement, covered in more detail in Chapter 8, is one of the three elements of employee engagement measured in the staff survey. Along with engagement itself, involvement is linked to numerous positive outcomes. The approach of the line manager is really important here. According to Michael West, 'it is the relationship with one's immediate line manager or one's team which is most influential in encouraging involvement.'²⁶ Line managers need to adopt participative approaches and, where possible, devolve decisions and responsibility down. Managers must encourage and support their employees to put forward their ideas and to identify solutions to the problems they face. This represents a culture change from traditional styles of management. The Foundation Trust Network has called for a move from 'command and control' to 'coach and enabler.'²⁷ Two of the case study Trusts – Derbyshire Healthcare and Kingston Hospital – have done work to promote a coaching culture at the trust and to support line managers in adopting these approaches.

'All front line managers should be trained and supported to devolve decision-making appropriately and to work with staff in making decisions that affect their work. They should also constantly encourage their staff to develop and implement ideas for new and improved ways of working and delivering care to patients.'

Michael West et al., 'Working Together: Staff involvement and organisational performance in the NHS'

In order to carry out this important role though, line managers often need appropriate **training and development**. As Kevin Croft of HPMA explained, 'often people get put in to team leader or first line manager roles without knowledge of how to manage teams effectively.' Newly promoted managers need to be trained and supported to develop the skills and confidence to engage with their staff. There should also be ongoing training for all people managers to ensure they are able to lead their teams.

The nuts and bolts of good people management: Frimley Park Hospital NHS Foundation Trust

There is a clear understanding of the importance of effective people management at Frimley Park. Although the Trust performs very well in terms of engagement overall, they are forensic in looking at engagement on a team by team basis to see where there may be gaps. According to Eleanor Shingleton-Smith, their Assistant HR Director, where teams are less engaged, the difference is usually the manager.

There is a strong focus on what Eleanor called 'the nuts and bolts of good people management.' Line managers are offered support to ensure they are all capable of engaging with their staff including a year-long Managing People programme. Managers are encouraged to hold regular team briefings to feed key messages down to their staff and involve them in discussions about the priorities and challenges both for the team and for the Trust as a whole. Regular face-to-face communication between employees and their immediate manager is seen as vital to engaging staff, ensuring they feel listened to and valued. Appraisals are also seen as particularly important in building engagement; helping employees understand their role and identify what support they need.

*There is also a very strong sense of team working at the Trust. Several employees talked about the 'Frimley family'; the sense of common purpose and mutual support that there is at the Trust. Andrew Morris, Chief Executive at Frimley Park, described how they have tried to 'instil in people that if you work as a team, you get better results. People rely on one and other.' Again, this comes out in the staff survey with the trust coming 4th out of 141 Trusts in terms of effective team working. The sense of strong team working is seen as being supported by effective line management, good appraisals and inclusive team briefings. **Read the full case study here.***

Creating a coaching culture: Kingston Hospital NHS Foundation Trust

There is a really strong emphasis on coaching at Kingston. Kate Grimes, Chief Executive at the Trust, is aiming to 'create a coaching culture across the organisation.' This is based both on the evidence linking coaching approaches to engagement, and on Kate's personal experience of training as a coach, something which she found changed her approach and greatly enhanced her management skills. The exec team has now also been through coaching training, as have many middle managers and senior clinicians, and the Trust is developing a coaching strategy. They have a specialist coach on site one day a week for staff to work with.

This is all seen as fundamental to the approach to line management at the organisation. Kate wants to build a culture where, 'instead of managers telling their direct reports what to do, they help their reports work out what they want to do for themselves.'

To help line managers develop their approach, the Trust has recently introduced a feedback questionnaire for line managers. This is built in to the appraisal process of everyone with line management responsibility. Direct reports are asked to score their line manager on a number of areas, based on the key things that evidence shows make for good people management, and to add comments on what they would like their managers do more of. This process is seen as important in both setting out what the Trust sees as good people management, and providing feedback to managers on how they're doing. This is then used to inform objective setting, personal development and training needs. It also enables senior managers to identify areas of strength in terms of people management across the organisation, and where there might be issues. As Kate explained, 'it's already had a benefit, particularly in terms of some people who've never had feedback before or never even seen themselves as a people manager.'

Read the full case study here.

Supporting engaging managers: Oxleas NHS Foundation Trust

Oxleas has taken action in the last few years to improve support for managers. This includes a specific induction for managers and clinical leaders and a development programme to help them build their skills and confidence. They are working on a performance management framework which will bring in both hard data and soft data such as feedback from staff, patients and colleagues.

Managers were positive about the support on offer to them. As one explained, 'if you don't get supported as a manager, you can't support your staff, and your staff can't support the patients; it just flows like that. With Oxleas, I find that I get supported.' Frontline staff also tended to be very positive about their immediate supervisors, saying that they were supportive and that supervisions and Personal Development Reviews were carried out effectively.

Oxleas performs very well in terms of line management, coming in the top 20% for mental health and learning disability trusts on support from immediate managers and scores far higher than the average in terms of staff having a well-structured appraisals. There was also a strong sense of team working at the Trust, reflected in the staff survey where Oxleas again comes in the top 20%. **Read the full case study here.**

7. Employee Voice and Involvement

Employee voice – identified as one of the four enablers of engagement in the MacLeod Report – seems to be particularly important in the NHS. The Francis Report into Mid Staffordshire made clear how, although many people had concerns about the quality and safety of care, they did not feel empowered or safe to speak up. There appears to be a desire for greater voice among NHS staff. A recent CIPD survey found that employees saw greater consultation and engagement as the most effective way of improving patient care.²⁸ There is also a strong correlation between perceptions of employee voice and employee engagement in the NHS Staff Survey.

'An effective and empowered employee voice. Employees' views are sought out; they are listened to and see that their opinions count and make a difference. They speak out and challenge when appropriate. A strong sense of listening and of responsiveness permeates the organisation, enabled by effective communication.'

David MacLeod and Nita Clarke, *Engaging for Success*

There are three main aspects of employee voice that are important in the NHS. The first is ensuring employees are able to **raise concerns**. One of the key recommendations of the Francis Report was to ensure openness, *'enabling concerns to be raised and disclosed freely without fear, and for questions to be answered.'*²⁹

Despite the work done in this area, there seems to still be some way to go. Although the NHS Staff Survey shows the vast majority (84%) agree that their organisation encourages the reporting of errors, near misses and incidents, just three in five (62%) believe actions would be taken in response and under half (47%) believe the organisation treats staff reporting such incidents fairly. Although there were a significant portion of 'don't knows,' the lack of confidence among many employees in reporting incidents must be seen as a concern. A CIPD survey of NHS employees showed that enhanced whistleblowing protection was the second most commonly highlighted measure that could improve care, after greater consultation and engagement with staff.³⁰

The case study trusts we looked at tended to score higher than the average in terms of both the percentage of staff reporting incidents they saw, and

in perceived fairness and effectiveness of procedures. Leaders at these trusts emphasised the importance both of structure and of culture. First, you need to have robust and effective procedures in place with staff aware of these. But you also need to ensure that the culture throughout the organisation is open, and that staff feel both encouraged to raise concerns and safe in doing so. Ann Macintyre, Executive Director of Workforce and OD at Guy's and St Thomas' explained that they emphasise that staff who raise concerns aren't *'dobbing anyone in – it's what we expect people to do. It's adult-to-adult and it's about continuous improvement rather than whistleblowing.'* The way whistle-blowers are treated matters; staff will be less confident to speak up if they are worried about negative repercussions. Kate Grimes, Chief Executive of Kingston recalled how she had gone out of her way to praise a whistle-blower. She linked this back to the trust values which emphasise making patient safety the top priority and staff taking responsibility. In doing so she hoped to set an example for others and make clear that staff who speak up and act when they see something will be welcomed rather than victimised.

The second aspect of employee voice is ensuring staff are able to **offer suggestions for improvements**. This is absolutely vital, both to employee engagement and to innovation and quality of care and it is recognised in the NHS Constitution which pledges that *'all staff will be empowered to put forward ways to deliver better and safer services for patients and their families.'* Frontline employees have an immense amount of knowledge of the services they deliver and the needs of their patients. As Jon Skewes of the Royal College of Midwives explained, *'you get the best ideas from the people on the ground. The experts in most areas are the people carrying out the work – the professionals and those in support roles.'* They will have ideas every day as to how to improve their services and patient care.

'There can be no more powerful source of innovation in the organisation than the staff and therefore it is vital, for this reason alone, that managers at all levels, constantly and supportively, encourage staff to contribute their ideas for new and improved ways of working and of delivering care to patients. And then, by persistence, find ways of ensuring their ideas (wherever appropriate) are implemented.'

Michael West et al, *Working Together*

By encouraging them to express these ideas, and by acting on them, trusts will both help their staff feel more listened to and involved, and they will unlock a massive source of innovation and improvement. Trusts need to ensure employees have task discretion over their own work, with opportunities to suggest and implement improvements in their services.

As we've shown above, although three quarters (75%) of NHS staff feel able to suggest improvements in the way they work, employees are less confident in their ability actually to make improvements happen with just over half (56%) agreeing. This leaves a lot of scope for improvement.

In terms of how this is done, there are well established approaches and initiatives such as Listening into Action (LiA). Some trusts have used measures such as 'Dragons Den' events where employees are encouraged to pitch ideas and then supported to implement them. However, in addition to specific initiatives, the case study trusts we spoke to emphasised the importance of having employee involvement as part of the core culture of the organisation. Senior leaders have a role to play in setting the tone from the very top, making it clear that employees' suggestions are vital and valued. Line managers though play a more significant role in encouraging their teams to offer their ideas. As June Chandler of Unison explained, line managers need to be *'having that as an everyday discussion with your teams in your meetings – is there anything we could be doing better or smarter, taking up those ideas and then feeding back to them.'*

The last bit of this process – feeding back to staff – is seen as particularly important. If staff are asked for their ideas but they do not get a response or see any consequence from their suggestions, this can be corrosive to engagement and they will be unlikely to offer suggestions in the future. As Paul Renshaw, Director of OD and Corporate Affairs at Salford Royal described, *'there's nothing worse than listening and not doing anything about it, not following through.'* Responding to employees' suggestions – even if they can't be implemented – and closing the feedback loop is vital.

Some of the case study trusts including Salford Royal and Countess of Chester used continuous improvement (CI) techniques in order to involve staff in service improvement. Both trusts had in-house CI teams and training for staff to support them with the

process. Continuous improvement is one of the four values at Salford Royal, reflecting the importance of this to the Trust.

The final aspect of employee voice is **involvement in organisational decision-making**. The importance of this is recognised in the NHS Constitution which pledges to *'engage staff in decisions that affect them and the services they provide.'* Again though, current performance here leaves something to be desired. Just over half (53%) agree that their immediate manager seeks their opinions before making decisions that affect their work. However under one in three (32%) believe that senior managers try and involve staff in important decision-making.

'The NHS workforce is one the most extraordinarily skilled, extraordinarily intelligent, extraordinarily well trained and motivated workforces you will find in any sector. Why on earth are we not spending our time consulting with them to find out what their definition of the problems is and what their solutions are and what their innovations are instead of adopting hierarchical cultures where we command people and control people.'

Michael West, Kings Fund Lecture

There were some common approaches to involvement in decision-making across the case study trusts. Employees were involved early in the process, allowing them time to have an input before decisions were made. The need for change was clearly set out, with trusts explaining the situation, the challenge and the aim. Employees were involved both individually and collectively through the unions. Crucially, there was a genuine commitment to listen to staff and to allow them to shape the outcome of the process. Finally, the trusts ensured they always fed back to staff on the outcome of the process and how employees had shaped this. Involvement in decision-making during times of change is examined in more detail in Chapter 9.

In terms of how organisations **communicate with staff** and encourage employee voice, most of the case study trusts had a regular direct email from the chief executive to all employees. These were seen as important in increasing awareness of senior management and an easy way of maintaining regular communication in large organisations. Several of the Chief Executives we spoke to aimed to make the emails

personal and engaging rather than corporate in style, and invited employees to respond directly and to engage in dialogue.

However, the trusts were well aware of the limitations of email. As Sam Greenhouse, Assistant Director of Organisational Development at the Royal Marsden explained, *'in a busy healthcare environment, you can send out as many emails as you want but really it's the same people who read them and the same people who don't.'* In addition therefore there needs to be channels for face-to-face communication. As explained above, it is important for senior managers to have direct, regular and meaningful contact with frontline colleagues. Most of the trusts we spoke to used open forum and town-hall style meetings to which all staff were invited. Most also held regular walkabouts and 'in your shoes' type visits. Line managers too need to ensure there is regular face-to-face communication with their teams, and that they get them together both to discuss progress and to identify any issues or potential improvements in their services.

The NHS Staff Survey is another tool to understand employee voice. The survey is academically rigorous and allows trusts to identify issues for staff, track engagement through time and benchmark against other trusts. In order to ensure the survey contributes to increasing employee engagement, staff must be given feedback on the findings, involved in discussing both what they mean and what the trust should do in response to address any issues. They must also *'experience real change in their working lives and in their capacity to offer improved patient care as a result of changes prompted by the surveys.'*³¹ A good example of this was found at Kingston where frontline staff were involved in both analysing the findings of the survey, developing an action plan to address the issues, and then holding managers to account over its implementation. The Foundation Trust Network found that 54% of the trusts use additional methods to survey staff opinion more frequently than annually, something they identify as being associated with higher levels of engagement.³²

Trade unions play an important role in representing collective employee voice. This is examined in detail in the next chapter.

In addition to employees having a voice, **involvement and empowerment** are also vital for employee engagement. There is strong evidence linking involvement and empowerment to positive outcomes. Employees in the NHS who report high levels of involvement are more committed to their work and organisations, they are more satisfied with their jobs and they are more innovative and cooperative.³³

Managers at all levels have a role to play in promoting greater involvement and empowerment. Senior leaders should look to set the overall objectives of the organisation, but to reduce levels of hierarchy and devolve authority downwards to more junior managers and to frontline employees themselves. Case study trusts tended to focus on encouraging strong clinical leadership within the organisation, and on devolving power and responsibility to clinicians. Line managers should also devolve decision-making to staff where possible and encourage them to come up with and implement ideas to improve care. As West et al argue, *'managers at all levels must let go of some power and control in a way that ensures staff can provide better patient care. This requires a strict control over the ends the organisation aims to achieve, at all levels, but more freedom within safe limits – being given to frontline teams in the means they use to achieve those ends.'*³⁴

This approach was amply demonstrated at the Countess of Chester where employees are encouraged to, in the words of their Chief Executive Tony Chambers, *'proceed until apprehended'* by taking ownership of their services, coming up with ideas for change, testing and implementing them.

This approach would represent a substantial culture change for many trusts. The traditional approach to leadership in the NHS has been one of 'command and control' or 'pace setting' which, although it can deliver results, does not necessarily lead to engagement. Instead, managers at all levels need to adapt their styles to be more participative, coaching and engaging.

Involvement and Continuous Improvement: Salford Royal NHS Foundation Trust

Involving employees is a central part of the culture at Salford Royal. This is reflected in the Trust's structure. There is no Director of Operations or COO. Instead, responsibility and decision-making are devolved to clinical divisions. These divisions are very much clinically led, something that is seen as important both for the quality and credibility of decision-making.

Continuous improvement is seen as crucial both to service quality and employee engagement and it is one of the Trust's four core values. The principal behind this is that employees are best placed to lead on change. As Chief Executive Sir David Dalton described, *'we've decided that the people who know the solutions to the problems we've got and how we might be able to improve are the staff themselves.'*

There is an established and effective methodology for continuous improvement. Employees are encouraged to think about how they might be able to deliver their service more effectively and efficiently, to get teams together to work on their ideas collaboratively, and to test them, measuring their impact. As well as encouraging employees to take this approach, they are also offered extensive support. There is an in-house Quality Improvement team to support employees and an array of training in improvement techniques which over 2,000 employees have been through so far.

This approach is clearly successful. The staff survey shows that employees at Salford Royal feel far more positive about their involvement in decision-making and their ability to make improvements in the area of their work. The Trust also has one of the best records on patient safety and patient satisfaction in the country. **Read the full case study here.**

Listening to staff and learning the lessons of Francis: Guy's and St Thomas' NHS Foundation Trust

The Francis Report was traumatic for the NHS. At Guy's and St Thomas' though, there was a determination to channel the concern it generated into something positive. Following the publishing of the report, the Trust undertook a large-scale listening exercise. Fronted by the well-respected Chief Nurse Eileen Sills, a series of events were held, attended by more than 600 staff. These sessions aimed to both communicate the findings of the report and to involve staff in exploring what they meant for the Trust. As well as these Trust-wide discussions, service managers were encouraged to hold local events to engage with their staff. All in all, some 2,000 staff took part in the listening exercise; a significant proportion of the total workforce.

As so many staff had taken part, it was important that they saw some result come out of it. The findings of the exercise were presented to the Board in April 2014 and formed the basis of the Trust's response to Francis. It also led the Trust to develop its 'Showing we Care' strategy, which set out a series of 'pledges' to patients and staff based on the pre-existing values, brought together into a film. All of this was thoroughly communicated to staff to show their ideas had been listened to. The key to the success of the exercise was making it about genuinely listening to staff. As Matt Akid explained, *'when people talk about staff engagement, it's often led from the top – "engaging with our staff" – but the Francis exercise was intended primarily as an opportunity to listen to staff. That was the difference for me.'* **Read the full case study here.**

8. Trade Unions and Partnership Working

Much of the research on employee engagement has traditionally paid little attention to the role of trade unions, focusing instead on the direct employer-employee relationship. However, in the NHS with its high union density and tradition of partnership working, trade unions must be seen as part of the engagement picture.

Most of the case study trusts we looked at saw effective partnership working as an important part of staff engagement. As Stephen Firn, Chief Executive at Oxleas explained *'I don't see how I could do my job without having that link there.'* This view was also reflected by many of the national trade union officers and local representatives we spoke to. Karen Didovich of the RCN insisted that *'engagement only works if you have strong trade union-employer infrastructure and positive working relationships. It's very difficult if you don't have that in place to have effective staff engagement.'* This was echoed by June Chandler of Unison; *'staff engagement isn't just about partnership working, but we firmly believe that if you've got good relationships in terms of a proper partnership between the trade unions and the employer, then from that should flow good practice and staff engagement.'*

Advocates of partnership working identified a number of positive outcomes. It was seen as helping contribute to effective communication, adding another channel through which senior leaders could understand the views of employees, and allowing them to identify and address potentially challenging issues before they escalate. Others highlighted the role of effective partnership working in building trust. As Steven Weeks of NHS Employers explained, *'it can help build trust and reduce cynicism and scepticism amongst staff if there's an active and independent voice for the staff that's willing to engage with the agenda.'* As we shall see in the next chapter, effective partnership working, based on trust, can also help organisations manage the difficult process of change. The benefits of partnership working are recognised in the NHS Constitution which commits to *'[engaging] staff in decisions that affect them and the services they provide, individually, through representative organisations and through local partnership working arrangements.'*

Despite the challenges the NHS faces, partnership working remains relatively strong at a national level. The relationship between the healthcare unions and

Government is difficult, particularly following the recent announcements over pay, but the relationship with the employers remains constructive. As Steven Weeks commented, *'at national level we have an excellent relationship. Compared to other parts of the public sector, we've maintained partnership working to a greater extent.'* This is largely reflected at a local level where relations between trade unions and trust management remain relatively positive, though with some variation.

There were a number of common themes in terms of the culture and approach to partnership working at the case study trusts we looked at. First, there has to be recognition on behalf of management that working in partnership can **add value** to the organisation. It requires that Staff Side is given a broad role, with trust management and the unions working together on a range of issues. As Jon Skewes of the RCM explained, *'it's about broadening the agenda 'so you're not just talking about pay, terms and conditions at the local level, you're actually talking about how the main business of the organisation is conducted.'*

Senior leaders and Staff Side representatives at the case study trusts emphasised the importance of **close working relationships** between the two sides. These were built on regular meetings between the two sides and a commitment to working together openly and honestly. Early engagement on issues as they came up was seen to be important in preserving an effective relationship and building trust. Many trusts also mentioned having a solutions-focused approach under which unions were allowed and encouraged not just to identify problems, but to play an active role in solving them. It's also important to recognise that even with the best will and a desire to work together, there will inevitably be differences of opinion and challenges to overcome. The key is that when such differences do occur, both sides remain committed to maintaining the relationship and to working together to find a solution.

"Partnership working is a clear shift away from the traditional management/trade union relations and, as such requires all parties to adhere to a more collaborative set of behaviours."

Oxleas NHS Foundation Trust Partnership Agreement

Obviously partnership working cannot be one sided – it requires the **commitment from Staff Side** unions. This means recognising the shared interests of both sides and being willing to work together and compromise where necessary. As Dino Williams, Chair of Staff Side at Guy's and St Thomas' explained, *'the role of the unions is to give employees a voice, but also to shape that voice into something more constructive. We try to seek solutions for problems in the organisation.'*

In addition to the cultural factors that promote partnership working, there were also some innovative **structures to support partnership working** in the trusts we looked at. In Oxleas NHS Foundation Trust for example, the Chair of Staff Side Wendy Lyon is also employed by the Trust as a Head of Partnership. She reports directly to the Chief Executive and is responsible for leading on partnership and advocating for all staff and ensuring their voice is heard, irrespective of union membership.

Investing in Partnership: Oxleas NHS Foundation Trust

There is a strong commitment to partnership working with the trade unions at Oxleas. This is underpinned by a belief that both sides have a shared interest; as Simon Hart Director of HR & OD explained *'we're all part of the same organisation, we all want Oxleas to be a really good organisation, to offer great care, and to be a good place to work.'*

There is an innovative and effective approach to partnership working at Oxleas. Wendy Lyon, the Chair of Staff Side is also employed by the Trust as Head of Partnership. In the role she acts as an advocate for all staff, irrespective of union membership, ensuring that their views are heard and considered. Wendy reports directly to the Chief Executive and has regular access to all Directors. She runs regular focus groups in each directorate which give employees the chance to share their views and raise any concerns they might have. This gives the board *'an unvarnished, unadulterated view of what staff are saying.'* The findings are fed back to Directors who are expected to act on the issues identified. Wendy sits on the Executive Director Remuneration Committee, along with an elected Trust Governor, increasing the accountability and transparency of the system.

In addition to these structures, partnership working is also supported by the culture at the Trust. Both sides emphasise the importance of regular, open and honest communication, and of early engagement. The relationship is based on collaboration with, for example, all HR policies being written together by Staff Side, HR and management. Although the relationship is positive, as Simon Hart explained *'it's not a cosy relationship by any stretch of the imagination.'*

Senior leaders see value in investing in partnership. Stephen Firn explained that the relationship with Wendy helps the board really to understand how staff are feeling – *'I don't see how I could do my job without having that link there.'* They believe the relationship helps them make the right decisions, identify and address issues early, and support engagement. Wendy and her colleagues value the openness of the relationship and the opportunity to be involved in meaningful decision-making. **Read the full case study here.**

Partnership at every level: Countess of Chester NHS Foundation Trust

The approach to employee engagement at the Countess of Chester is underpinned by a focus on partnership working.

Staff Side and the senior management have worked together on a number of shared priorities. They led a flu-jab campaign, conducting joint walkabouts to raise awareness with staff. This led to over 80% staff coverage – putting them among the top five trusts in the country. Staff Side and management jointly promoted the staff survey, encouraging employees to fill it in by emphasising its importance and reassuring staff it was anonymous. They are also working together to communicate the results and involve staff in planning the response.

The Executive team work closely with Hayley Cooper the RCN representative and Staff Side Chair, and with the other reps. Hayley has attended Board meetings and has shadowed senior leaders including the Chief Exec Tony Chambers; *'it helped me understand and communicate that they have the patient and the staff at the heart*

of everything they do." She recently wrote a post for Tony's blog and was also on the panel that interviewed the Interim Director of HR and OD. As Tony explained, "they're right in there so it isn't just tokenistic, it's at every level!"

Although the relationship is much improved, both sides recognise that they will not always agree on everything. But there is a shared recognition of the importance of partnership working and the benefits it brings. The relationship is seen as another tool to help senior management better understand how frontline staff are feeling. It will also help them manage the changes that the Trust faces. As Tony Chambers said, "*we've got to really transform our workforce and actually we can't do that without engaging with them.*" **Read the full case study here.**

Giving employees a voice: Guy's and St Thomas' NHS Foundation Trust

Guy's and St Thomas' is an excellent example of partnership working. The union-management relationship is built on well-established ways of working, and on an understanding of the benefits of partnership.

There is a focus on early engagement to ensure that any issues are dealt with promptly. Management and unions meet regularly and always look to keep each other informed if they see an issue coming up. As Dino Williams, Chair of Staff Side described, '*We try to ensure that with every consultation and communication, we pre-consult so there [are] no surprises.*' The relationship is characterised by extensive involvement. Dino sits on the Trust Management Executive and there is a real sense that the unions are involved in decision-making. According to Dino, the good relationship is down to '*having influence - it's that when we say something we were listened to rather than palmed off*'

In addition to these ways of working, the relationship is built on a positive approach to partnership from both sides. Senior leadership at the Trust recognise the benefit of working in partnership with the trade unions and understand that they provide information that might not otherwise be picked up. They are seen as partners in decision-making; providing positive challenge and adding value. '*It's not about us and them,*' said Sir Ron Kerr, '*it's about recognising that we have different perspectives but that we're all here for the same purpose which is the success of the organisation.*' This approach is reciprocated by Staff Side. As Dino Williams explained, '*the role of the unions is to give employees a voice, but also to shape that voice into something more constructive. We try to seek solutions for problems in the organisation.*' **Read the full case study here.**

9. Preserving employee engagement in challenging times

Although employee engagement in the NHS has increased slightly over the past two years, it remains patchy with significant scope for improvement. Furthermore, the challenges facing the NHS today and over the next few years represent significant potential threats to employee engagement.

First, there is the ongoing **pay restraint** in the NHS. The service experienced a two-year pay freeze from 2010 to 2012, followed by below-inflation pay settlements in the last two years. The announcement on the withholding of increments has added to this challenge. There were mixed views as to the extent to which this has affected employee engagement. However, the consensus was that the impact would grow as pay restraint continues.

Second, increasing **job intensity** represents a threat to engagement. An RCN survey in 2012 painted a picture of a nursing workforce *'struggling with both high workloads and the fast pace of work... Respondents report working long hours, combined with unrealistic time pressures and unachievable deadlines.'* A CIPD survey found that one in four (26%) NHS staff felt under excessive pressure every day, rising to almost one in two nurses (46%).³⁵ Frontline staff that we spoke to reflected this view:

- *'We're all so busy that we feel like we're just on a hamster wheel, just turning faster and faster'*
- *'People's working lives are getting harder and harder and that's not going to change any time soon... it feels like a never-ending conveyer belt of work'*

A large majority (71%) of staff regularly work extra hours, most of which is unpaid. The trend is on the increase as well with 6% more people working extra hours than two years ago. Working extra hours is higher still in some areas with nine out of ten general managers, consultants, paramedics, and ambulance technicians working extra hours. As one employee put it, *'if it wasn't for good will, I think the whole NHS would fall apart'*

Some might see this as a sign of committed and engaged staff putting in discretionary effort, but sustained excessive workloads can risk leading to burn-out and disengagement. As one employee explained *'there is a limit to which you can push people. If you push them too far, they'll do one of two things; they'll leave or they'll disengage. Individuals will have a point at which*

they find workload intensity is too much.' Michael West also highlighted this pressure as a risk to quality of care: *'If you have an environment where people feel constantly under pressure and stressed and burned out, then they won't have the emotional capacity to feel compassion or the cognitive capacity to help patients and so both patient satisfaction and clinical quality indicators will suffer.'*

Thirdly, **organisational change** represents a significant challenge to engagement. Change has been driven at the national level through numerous reorganisations, most recently following the Health and Social Care Act 2012. Change has also been driven at a local level. With trusts being asked to make significant efficiency savings year on year, organisational change at a trust level has been a regular occurrence and this looks set to continue. Steve Trenchard, Chief Executive of Derbyshire Healthcare explained, *'to meet the savings, we're having to continually make changes and to ask staff to do more for less.'* Many of the trusts we spoke to had been through reorganisations recently, with some having experienced redundancies and re-grading of posts. This has increased feelings of job insecurity. The RCN warn that the inevitable outcome of the *'seemingly endless restructuring is "change fatigue" among many members of the NHS workforce.'*

In these difficult times for the NHS, engaging with employees has become an even more pressing priority than ever before. If trusts are to meet the challenges they face, they must focus on effectively engaging their workforce.

Effective employee engagement is absolutely vital to **managing change**. As we've set out above, the process of change can be a challenge for employees and it has the potential to impact on levels of engagement and satisfaction. But at the same time, as our case studies have shown, change can only be effectively managed if employees are engaged in the process.

First, engaging employees is vital in order to deliver greater **innovation**. We've already seen above how involving and engaging staff is key to unlocking innovation. This will be vital in order to protect service quality and safety in more challenging times.

The NHS had benefitted from a long period of substantial real terms funding increases. But it now faces an 'unprecedented squeeze,' with budgets effectively frozen in real terms, and no immediate

prospect of this changing. At the same time, our aging population, rising morbidity and increasingly expensive treatments are putting more pressure on the system. The Institute for Fiscal Studies have shown that taking demographic changes into account, a real terms freeze in NHS spending between 2010-11 and 2018-19 would mean age-adjusted per capita spending falling by 9.1%.³⁷ These pressures are feeding through to Trusts who are constantly being expected to do more with less.

'If the sector is going to respond to all of the challenges that face it, then all of the staff need to be involved in developing new and improved ways of doing things and in implementing change.'

Michael West

Employee innovation will be vital in order to deliver this. Employees across the NHS have an immense amount of accumulated knowledge and expertise about their services and the needs of patients. They are well placed to identify changes in their services which will be able to deliver improvements and reduce costs. As Jon Skewes of the RCM argued *'if you're going to get real productivity, you have to get staff involved in fundamentally changing things.'* The case study trusts we looked at had a strong emphasis on involving employees and encouraging innovation. Sir David Dalton, Chief Executive of Salford Royal explained that they had *'decided that the people who know the solutions to the problems we've got and how we might be able to improve are the staff themselves.'* This is the principle that drives their approach to continuous improvement, under which employees are involved in identifying improvements in their services.

Second, employee engagement is crucial for effective **decision-making**. Incremental innovation alone will not be enough to deliver the savings NHS trusts face and there will continue to be organisational changes within trusts. As shown above, the process of organisational change can be a challenge for employees and, when mishandled, it can lead to disengagement. But again, engaging employees – both individually and collectively – in the process of change will ensure better quality decision-making. As Kevin Croft of HPMA explained, *'the more insight you've got from people on the frontline, the better the decision you're going to get.'*

Third, as well as driving innovation and helping improve the quality of decision-making, engaging employees in decision making will ensure **greater buy-in** to change. Employees who both understand the rationale for change and are fully involved in the process of decision-making are more likely to accept the outcome, even if it is not the result they might have hoped for. However, if employees feel they have not been given a say and that changes are presented to them as a fait accompli, they will be less likely to engage and accept them. Again, Kevin Croft put this well, explaining *'you need to give people the opportunity to make a contribution. If people feel they've had an opportunity to influence what things look like, they'll have more ownership and willingness to deliver it.'*

There seems to be a number of lessons coming out of the case studies, the academic evidence and the expert interviews in terms of how to manage change in tough times. First, there must be **openness and honesty** about the nature and scale of the challenge trusts are facing. Staff need to fully to understand pressures Trusts and the context in which they operate. As Sir Ron Kerr, Chief Executive at Guy's and St Thomas' explained, *'the environment we're going to be operating in will be tougher going forward. But the more staff know about the situation, the more they will understand. Treating people as adults is really really important.'* Trusts should open the books to staff, and clearly set out the challenges they face.

Secondly, in addition to being open and honest about the challenges, the case study trusts we looked at were consistent in terms of their approach to **involving staff in decision-making** as to how these challenges should be solved. As Jhangir Iqba Joint Chair of Staff Side at the Royal Marsden explained, organisations need to *'engage with employees saying "look, this is the amount of money we have to spend, how best do we make use of that?" What you find is if you're open and honest with staff, then you can come up with ideas that senior managers may not even have thought of.'* This approach to employee involvement was done collectively through engagement with the trade unions, but also directly with staff through supportive line management, continuous improvement programmes, effective communication and direct contact with senior leadership.

Finally, despite the financial challenges, there must be a clear and consistent **focus on quality and safety of care**. Jeremy Dawson highlighted this risk, saying that

'where there is too much of a focus at the board level on meeting targets and driving up productivity – in a sense of doing more for less rather than trying to improve the quality of what's done – this can demotivate staff.' This was reflected by the case study trusts we looked at, many of whom emphasised the risk of focusing excessively on efficiencies. Cally Palmer, Chief Executive at the Royal Marsden explained the importance of speaking in a way which *'resonates with the front line.'*

It's all about using resources wisely, it's not about penny-pinching as that doesn't engage anybody.' For example, a previous efficiency programme at Guy's and St Thomas' had failed to engage staff who largely saw it as a cost-cutting exercise. Learning from this, their new programme *'Fit for the Future'* which brings together efficiency with service improvement and patient safety has been far more effective at getting staff buy-in.

Involving staff in organisational change: The Royal Marsden

With NHS trusts coming under growing pressure, senior leaders at the Royal Marsden see involving employees as key to managing change. As Cally Palmer, Chief Executive at the Trust acknowledged, 'it's terribly important to listen because the clinicians and the people on the ground know their services better than I do'. Staff involvement in change is seen as important both in terms of enhancing patient care and protecting employee engagement through the difficult process.

The Trust is doing more to involve employees in business planning through both whole-system events and focusing on key themes. Employees are encouraged to come up with suggestions for improvements. As one explained, 'staff are contributing to change and to ideas about how we can work differently, they're on board with it and not fighting it, we're harnessing their energies in a really positive way'. This is supported by effective partnership working with Staff Side. As Jhangir Iqbal, joint chair of Staff Side described, 'both sides respect each other's standpoint and we work in collaboration to achieve the best we can in the circumstances both for the staff and for the organisation as a whole.'

*Throughout the change process, there remains a strong focus on patient care. Cally emphasised how leaders need to engage with staff in a way that resonates; 'it's all about using resources wisely, it's not about penny-pinching as that doesn't engage anybody'. One employee explained that while she'd felt her previous trust was focused solely on saving money, 'here it's like, yes we need to balance the books, but ultimately the message is patient quality comes first'. The staff survey reflects this. The Royal Marsden outperforms the average for specialist trusts in terms of perceptions that patient care is the organisation's top priority, a figure which has increased since last year despite these challenging times. **Read the full case study here.***

Change Management and Empowerment: Derbyshire Healthcare NHS Foundation Trust

Leaders at Derbyshire Healthcare recognise the importance of involving employees in change. As Carolyn Gilby Divisional Director for Specialist Services said, 'if you do to people, they're not going to engage. If people understand what you're doing, why you're doing it, you're much more likely for them to come with you on the process.'

The Trust has set up a Transformational Change Board to guide change. Led by clinical staff, the board includes patients and staff; over 430 of whom have taken part so far. Underneath these they've set up Patient Pathway Teams (PPTs), groups of around 50 nurses, doctors, patients and carers, coming together to look at particular services. They meet for three separate days; first to identify the challenge, then to set out where they want the service to go, and finally to plan how this can be delivered before feeding back recommendations to the Board. As Ifti Majid explained, having a process that is co-produced by staff and patients ensures 'the outcomes are owned by people.'

*As well as involving employees in decision-making, there is a strong focus on empowerment. Steve Trenchard is an advocate of professional autonomy; 'you need to get accountability as close to care as possible.' This comes from a belief that employees are best placed to make decisions on the care they give, and that it is staff themselves rather than senior leaders that can really drive change in the organisation. Staff are encouraged to 'own' their roles, to make suggestions and to take them forward with support from managers. As Ifti Majid explained they are 'very much driving the decision-making to the front-line.' This approach has led to employees and teams becoming more empowered, with senior leaders taking on a more strategic and external role. **Read the full case study here.***

Enabling staff: Kingston Hospital NHS Foundation Trust

Key to employee engagement at Kingston is a strong focus on enabling and involving staff. This is central to the culture at the Trust. David Grantham, Director of Workforce and OD explained the theory behind this; 'we know that staff are the people in our organisation who on a day to day level see what's going right and what's going wrong. They often have the bright ideas that will save us money and improve the patient experience.'

In addition to the culture of enablement, there has been an effort to ensure the organisational structure at the Trust supports this. Kate Grimes, Chief Executive at Kingston, described how she had been trying to reconfigure the organisation so that, instead of the centre leading on things, their role is to 'support and facilitate the clinical teams to manage their own service.' Last year, the organisation was split into 18 service lines which are given their own budget, and control over management, performance and reporting. Each service line is led by a clinical director, supported by a manager and a nurse. Kate Grimes explained that the Trust is 'leading the way in terms of service line management for a district general hospital. I think it's going to have a massive impact.' She believes staff are feeling more engaged and motivated – with a greater sense of ownership over their service – and that this is driving more entrepreneurial and innovative behaviour.

*In addition to devolving power to service lines, the Trust has also made efforts to involve employees in decision-making more widely. David Grantham explained how, in terms of managing the financial pressures on the organisation, they have 'changed our approach to that from being very top-down and salami-slicing to actually sharing the nature of the problem very explicitly with staff and actually involving staff and saying we need your help to do this.' **Read the full case study here.***

10. Conclusion and Recommendations

There is a strong body of evidence that demonstrates the importance of employee engagement in healthcare. It is linked not just to employee wellbeing, but also to patient satisfaction and clinical outcomes. Employee engagement is therefore vital to high quality care in the NHS.

Despite the challenges facing the NHS, engagement has remained relatively stable, and has even increased in the past two years. However, there remains room for improvement. This research has examined some of the things that could be done to help drive up engagement in the NHS.

First, having strong **organisational values** is vital. These should be explicitly set out and consistently communicated. In order to ensure they have real impact, they should be mainstreamed throughout the organisation, informing HR processes from recruitment and induction to appraisal and awards.

There is an important role for **senior leadership** in setting the tone in the organisation. There needs to be regular and effective communication between senior leaders and employees, using a variety of channels. Visibility and approachability are important; leaders need to be seen around the trust, with opportunities for direct communication with frontline employees. Senior leaders need to build trust, ensuring their actions and behaviours reflect both their words and the organisational values.

Although senior leaders set the tone, **line managers** are the people who really make the difference. They need to communicate regularly with their teams and adopt a coaching and supportive approach. Line managers must ensure employees have effective appraisals, as part of a year-round process of performance management and support. They also play the key role in encouraging team working which is strongly correlated with employee engagement. Trusts need to ensure they have effective Human Resource Management processes in place to support this. Line managers, especially newer managers, will often need training in order to develop the skills and confidence to engage their teams. They also need to be supported and engaged by their own managers and by senior leaders.

There must be a strong sense of **employee voice** throughout the trust. Employees need to be able to raise any concerns they might have, supported both by robust reporting procedures and a culture of openness and safety. With an immense amount of experience and expertise in the workforce, trusts must encourage and enable employees to innovate and improve the services they deliver. Decision-making and responsibility should be devolved as close as possible to the frontline, with employees given task discretion over their jobs and ownership of their services. Employees must also be involved in decision-making across the trust as a whole.

Finally, **Partnership working** is also important for employee engagement in the NHS. Given the high level of union membership, the tradition of social partnership in the sector and the challenges facing trusts now and in the future, effective working relationships with the unions can help provide the foundations for engagement. Partnership requires a mutual recognition of shared interests and of the benefits of working together. As well as supporting *structures* for partnership working, both sides need to support a *culture* of partnership based on openness and honesty, early engagement, and real and meaningful involvement in decision-making.

The NHS is facing an unprecedented squeeze on resources, and this is feeding through to trusts. There is a real risk that with ongoing pay restraint, increasing job intensity and seemingly constant organisational change, employee engagement will suffer. Yet although the situation represents a challenge to engagement, it also makes engaging with employees more important than ever before. Engaging with staff can help unlock their potential for innovation, allowing them to make services safer, more effective and more efficient. Engagement during times of change is vital in order to both inform decision-making and to ensure the buy-in of employees to the process.

Through engaging effectively with their employees, NHS trusts will be able to manage the challenges of the next few years, and continue to improve services to patients.

Recommendations:

- Trusts should ensure they have a strong set of **organisational values** developed in conjunction with staff, which emphasise the importance of patient care. These values should be clearly communicated, mainstreamed throughout the organisation, and embedded in HR practices. Values must be reflected in the behaviour and actions of both senior leaders and managers.
- **Senior leaders** must see increasing employee engagement as one of their top strategic priorities. They need to set the tone at the top of the organisation by being visible, approachable and accountable. They need to ensure there is regular effective two-way communication with frontline staff.
- **Line managers** need to be empowered, supported and trained to better engage their teams. They should adopt coaching and supportive approaches. Managers should focus on team working, performance management, and training and development.’
- Both senior leaders and managers need to **devolve power and responsibility** wherever possible, within safe limits, giving frontline employees and teams more of a say over how they deliver their service.
- A strong and robust **employee voice** should be encouraged and supported throughout the organisation so that all staff are able to raise concerns, suggest improvements and contribute to organisational decision-making. This needs to be supported both by effective *channels* for communication, and a *culture* that welcomes and values employee voice.
- Trusts should invest in **partnership working** with the trade unions. This should be based on a culture of openness, honesty, early engagement, and real involvement in decision-making.

Bibliography

- Admasachew L and Dawson J, *Staff Engagement in the NHS: A Multilevel Analysis* Aston Business School, Aston University (2010)
- Boorman S, *NHS Health and Wellbeing, Final Report*, Department for Health (2009)
- CIPD, *Employee Outlook: Focus on culture change and patient care in the NHS* (2013)
- Crawford R. Emmerson C Keynes S *Public finances: risks on tax, bigger risks on spending?* Institute for Fiscal Studies (2014)
- Department for Health, *NHS Constitution* (2013)
- Dixon-Woods, M. et al., *Culture and behaviour in the English National Health Service: overview of lessons from a large multimethod study*, BMJ Quality and Safety 2013
- Foundation Trust Network and Unipart, *Realising the benefits of employee engagement* (2013)
- Francis R, *Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry*, Department for Health (2013)
- Maben, J et al. *Exploring the relationship between patients' experiences of care and the influence of staff motivation, affect and wellbeing*, (2012)
- MacLeod D, Clarke N, *Engaging for Success*, BIS, (2009)
- NHS Employers *Staff Engagement in the NHS*, (2008).
- NHS Employers, *The Staff Engagement Toolkit*, (2013)
- Rayton B, Dodge T, D'Analeza G, *The Evidence*, Engage for Success (2012)
- Robinson D, Perryman S, Hayday S, *The Drivers of Employee Engagement*, Institute for Employment, (2004)
- Storey J and Holti R, *Towards a New Model of Leadership for the NHS* The Open University Business School (2013)
- Point of Care Foundation, *Staff Care* (2014)
- RCN, *Beyond breaking point? A survey report of RCN members on health, wellbeing and stress* (2013)
- West M, and Dawson J, *Employee Engagement and NHS Performance*, The Kings Fund (2012)
- West M, Borrill C, Carter M, Scully J, Dawson J, Richter A, *Working together: Staff Involvement and Organisational Performance in the NHS* Aston Business School (2005)
- West M, *Developing cultures of high quality care*, Kings Fund Lecture, 2014

References

- 1 Rayton B, Dodge T, D'Analeza G, (2012). The Evidence, Engage for Success
- 2 Robinson D, Perryman S, Hayday S (2004). The Drivers of Employee Engagement, Institute for Employment Studies, Report 408
- 3 Staff Care (2014). Point of Care Foundation
- 4 Employee Outlook: Focus on culture change and patient care in the NHS, (2013). CIPD
- 5 Rayton, Dodge T, D'Analeza G, (2012). The Evidence, Engage for Success
- 6 West M, and Dawson J (2012). Employee Engagement and NHS Performance, The Kings Fund
- 7 Staff Care (2014). Point of Care Foundation
- 8 Boorman S (2009). NHS Health and Wellbeing, Final Report, Department for Health
- 9 West M, and Dawson J (2012). Employee Engagement and NHS Performance, The Kings Fund
- 10 Maben, J et al (2012). Exploring the relationship between patients' experiences of care and the influence of staff motivation, affect and wellbeing
- 11 West M, and Dawson J (2012). Employee Engagement and NHS Performance, The Kings Fund
- 12 Staff Care (2014). Point of Care Foundation
- 13 Realising the benefits of employee engagement (2013). Foundation Trust Network and Unipart
- 14 MacLeod D, Clarke N (2009). Engaging for Success, BIS
- 15 Francis R (2013) Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Department for Health
- 16 Employee Outlook: Focus on culture change and patient care in the NHS, (2013). CIPD
- 17 Employee Outlook: Focus on culture change and patient care in the NHS, (2013). CIPD
- 18 Francis R (2013) Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Department for Health
- 19 Francis R (2013) Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Department for Health
- 20 Staff Care (2014). Point of Care Foundation
- 21 Dixon-Woods, M. et al., (2013). Culture and behaviour in the English National Health Service: overview of lessons from a large multimethod study, , *BMJ Quality and Safety* 2013 doi:10.1136/bmjqs-2013-001947
- 22 Staff Care (2014). Point of Care Foundation
- 23 West M, and Dawson J (2012). Employee Engagement and NHS Performance, The Kings Fund
- 24 West M, and Dawson J (2012). Employee Engagement and NHS Performance, The Kings Fund
- 25 Michael West, quoted in Staff Care (2014). Point of Care Foundation
- 26 West M, Borrill C, Carter M, Scully J, Dawson J, Richter A, Working together: Staff Involvement and Organisational Performance in the NHS Aston Business School
- 27 Realising the benefits of employee engagement, Foundation Trust Network and Unipart, 2013
- 28 Employee Outlook: Focus on culture change and patient care in the NHS, (2013). CIPD
- 29 Francis R (2013) Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Department for Health
- 30 Employee Outlook: Focus on culture change and patient care in the NHS, (2013). CIPD
- 31 West M, Borrill C, Carter M, Scully J, Dawson J, Richter A, Working together: Staff Involvement and Organisational Performance in the NHS Aston Business School
- 32 Realising the benefits of employee engagement (2013). Foundation Trust Network and Unipart
- 33 West M, Borrill C, Carter M, Scully J, Dawson J, Richter A, Working together: Staff Involvement and Organisational Performance in the NHS Aston Business School
- 34 West M, Borrill C, Carter M, Scully J, Dawson J, Richter A, Working together: Staff Involvement and Organisational Performance in the NHS Aston Business School
- 35 Employee Outlook: Focus on culture change and patient care in the NHS, (2013). CIPD
- 36 'Beyond breaking point? A survey report of RCN members on health, wellbeing and stress' RCN, 2013
- 37 Crawford R, Emmerson C, Keynes S. (2014) Public finances: risks on tax, bigger risks on spending? Institute for Fiscal Studies

Nita Clarke OBE, Director IPA 'employee engagement is absolutely vital in the NHS. This ground-breaking report highlights some excellent best practice in the sector and could provide the blueprint for driving up engagement across the NHS.'

Sir David Dalton, Chief Executive, Salford Royal NHS Foundation Trust, 'this report gets to the heart of the issues of why effective employee engagement is crucial for Boards to assure high quality, safe and reliable care. The case studies demonstrate that decisions and behaviours rooted in agreed values, authentic leadership, and devolved decision making are key ingredients to sustain the culture for successful delivery of high standards to patients.'

Kevin Croft, President, Healthcare People Managers Association 'the case for staff engagement is compelling and in the NHS this means improved patient outcomes. The challenge is not knowing what needs to be done, but how you make it happen. We are thrilled to now have this case study research highlighting how some of the best performing NHS organisations have achieved success through staff engagement.'

Dean Royles, Chief Executive, NHS Employers 'This report provides invaluable insight into how successful NHS organisations have sustained staff engagement in tough times. It highlights how these organisations have changed the way they listen to, learn from and work with their staff. There are no easy answers but shows there are some straightforward steps can be taken to help staff improve services.'

Stephen Firn, Chief Executive, Oxleas NHS Foundation Trust 'In the NHS it's the people that make the difference. Engaged employees are the key to delivering high quality care. This excellent report sets out the things you need to get right in order to increase engagement. It's a real asset for leaders in the NHS looking to build on the great work out there.'

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