BOLTON NHS FOUNDATION TRUST

ENHANCING STAFF AND PATIENT EXPERIENCE USING METRICS

The organisation

Bolton NHS Foundation Trust provides patient care in the community at health centres and clinics alongside services including district nursing and intermediate care. The Royal Bolton Hospital is also part of the Trust, has a busy A&E department and specialises in women’s and children’s services including maternity and paediatrics.

With more than 5,000 employees, the organisation serves over 320,000 patients in Bolton and surrounding areas including Greater Manchester and the North West. The trust has a strong working relationship with Bolton Council and they work together to provide a high standard of health provision to local communities.

The challenge

Between 2012 and 2015 the trust was put into special measures due to financial and governance issues. In 2013 a new chairman, David Wakefield and new chief executive, Jackie Bene were appointed to turn the organisation around. By autumn 2015 it was the first trust to come out of special measures with Monitor.

This was a particular success because it was achieved under its own management and direction and without intervention from external parties. The trust also realised a small financial surplus in 2014-15 through careful management of budgets.

While the turnaround project was deemed a success, there were a number of department restructures and job losses, which had an impact on staff morale and engagement. The trust now needed a plan to strengthen staff engagement so it could continue to move forward.
Steps to success

An integral part of its new People Strategy, was the appointed of a staff engagement lead. Part of the remit of the new role was to analyse data from the Staff Friends and Family test (SFFT) and use this intelligence to help shape future staff engagement activity. It also involved looking at the correlation between patient and staff satisfaction with the aim of bringing about positive change to engagement and productivity. Although the quarterly SFFT survey had been done, it was felt that the results hadn’t yet been used in a proactive way to bring about change.

How we did it

Stage 1 – strengthening team engagement

The data obtained from the SFFT is very valuable so a test of change was set up with the Child & Adolescent Mental Health Service (CAMHS) team.

This involved taking results from the recent SFFT survey and bringing the CAMHS team together to discuss the outcomes. The trust already used nine additional questions as part of the SFFT to analyse different elements of staff experience.

The session was used as a temperature check to measure progress and feelings after the recent team restructure. An action plan was then formed to help the team act on the results and move forward.

The staff engagement lead facilitated lunchtime session with around 30 members of the CAMHS team. They were taken through the results of the test and questions and feedback was recorded into actions.

The session worked well to identify the team’s strengths and weaknesses and empowered them to make the improvements needed to move forward. Having recently been through a restructure, the data helped staff focus on positive actions rather than on the difficulties associated with the period of change.

Five clear themes emerged for the team to work on, linked to the items that had ranked lowest in the SFFT test results. An example of one of these items was staff not feeling empowered to make improvements to the service they provide.

Following the session, the CAMHS team took the actions away for further discussion in their team away day. Progress will be monitored by the staff engagement lead through the next set of SFFT results in Q4.

Stage 2 – monitoring staff engagement at trust and division level

A staff engagement steering group was established. This is chaired by the chief executive and includes three executive directors, divisional directors (DDOs), HR, governors and staff. The group meets every two months to examine both strategic and operational aspects of staff engagement. This allows a focus on trust-wide projects (for example, a refresh of trust values) as well as some attention on local divisional engagement patterns and issues.

Analysis of the SFFT results for the whole trust are channeled through the steering group to alert them to trends and highlight where results are low. With the support of the steering group and the divisional nurse directors, the staff engagement lead designs and facilitates local engagement interventions.
The SFFT results tend to show variances between wards, with some performing much stronger than others. This is useful intelligence, providing the trust with clarity on which departments are engaged and which require more engagement support.

Divisional level support has been in place for around four months. In order to establish the real impact of the staff engagement programme and to ascertain what further support is required, the SFFT will be monitored over successive quarters to see what improvements have been made and what new patterns and trends have emerged.

**Stage 3 – Exploring the correlation between the staff and patient experience**

The second stage of the work has involved exploring the relationship between staff experience and patient experience. External research shows that improving the staff experience will enhance the patient experience.

As an early piece of work, Q2 SFFT results were compared with Q2 patient SFFT (June-September 2015) and the number of patient complaints, focusing on each individual ward.

The initial analysis found that while the relationship between patient results and staff results weren’t perfectly linear, the response to a particular question stood out over others. This question was whether or not staff received feedback and recognition from their line manager for the work they did.

The trust identified that when the responses from staff on that question were more positive, the patient SFFT scores were also more positive or complaints were lower.

Conversely, when the response to that question was less positive so was patient satisfaction. This was the first time the trust had been able to see a direct correlation between how the staff experience was impacting the patient experience. It also demonstrated the real value of using additional questions to supplement the SFFT core questions. The nature of the staff experience is complex, and some factors will have more of an impact on performance, motivation and attitude than others; this will affect patient experience in different ways.

**Next steps**

The trust has invested in a new system called Meridian which means iPads can be taken onto the wards to capture real-time patient experience feedback. With the addition of the SFFT questions, it is hoped this will help record information from both patients and staff gathering further intelligence.

Currently, staff and patient feedback is held across three different systems. Meridian offers a single point of capture which will make analysis and correlation of results much easier. It will provide more real-time information, giving teams a snapshot of their progress at any one time and helping them establish the necessary improvements needed to move forward.

The trust is keen to maintain the momentum with the staff engagement work and it has recognised the need to maintain a cycle of regular feedback for purposes of monitoring, review and action setting. With the national SFFT possibly moving to once every six months, the trust is now using its SFFT questions as the basis for its own Pulse Survey so that it can be used with teams on an on-demand basis.

They will continue to review and enhance the Pulse Survey through use and feedback. For example, a new question has recently been added - 'I know what is expected of me in my
role’ as this will trigger some useful insights around leadership and objective setting for staff.

**Top tips from the trust**

- It’s no good just collecting data. The value comes when you analyse it and use those results proactively to form meaningful actions.
- Think about the right questions to ask, to provide you with meaningful insight and a richer set of data. Don’t limit yourself to one or two. If you want to ask 10, ask them.
- Don’t get too bogged down in the detail of the data. Rise above that to look at the bigger picture, to see the wider more obvious trends and connections.
- Once you see the correlation between staff satisfaction and patient satisfaction results that is where the real intelligence and value lies.
- Improvement never stops – it is important to continually evolve the process, using new technology and improving questioning in order to obtain the right information to help provide better support to the staff engagement agenda.

**Further information**

For more information please contact Sandy Wilkie, Staff Engagement Lead at Bolton NHS Foundation Trust email: sandy.wilkie@boltonft.nhs.uk
Tel: 01204 390390 x 3803

---

**Contact us**

NHS Employers  
2 Brewery Wharf  
Kendell Street  
Leeds LS10 1JR  
© NHS Employers 2016