

NHS England and Health Education England

Integrated Urgent Care / NHS 111 Workforce Blueprint

Workforce Survey: Recommendations for Managers





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Introduction

The roles in Integrated Urgent Care (IUC) / NHS 111 are amongst the most challenging and most important in the Urgent and Emergency Care arena. During 2017, the NHS 111 service handled over 14 million calls, which presents a huge opportunity for the workforce to make a positive impact and a difference in people's lives. "Staff agree that they feel they make a difference to patients and service users."

A Staff Survey was undertaken during March and April 2016 in NHS 111 services, which demonstrated some common themes and challenges within the management of the NHS 111 workforce and services. It is noted that this survey did not include equality data. It is recommended that any future surveys will take that into account and in addition will support the Workforce Race Equality Standard.

Ninety-two (92) percent of respondents in the survey agreed that they 'feel they make a difference to patients and service users', with the most positive comments in the survey centred around the NHS and the NHS 111 service itself, colleagues and the job in general, which indicates that NHS 111 has an invested workforce who care. Concerns expressed included those around staffing numbers and work environment, desire for greater patient feedback, wish for greater career development and progression opportunities, increased support and better reward and recognition opportunities.

Commissioned from NHS South, Central and West Commissioning Support Unit, the survey was undertaken by the Picker Institute on behalf of NHS England, and individual organisations' results were shared confidentially on a provider by provider basis. Informed by these results, a number of workshops were undertaken and, in partnership with provider organisations, a set of recommendations identified. The recommendations were established to help to support and supplement the investments providers were making in their workforce. At the point of publishing the Blueprint, implementation of these recommendations was ongoing.

The survey findings and recommendations have been used to inform the development of the Workforce Blueprint.



Summary of findings and recommendations for employers



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Staff sickness

The survey highlighted staff commitment to support service users and the organisation. However, staff reported coming to work despite not feeling well enough to perform their duties, which can present itself negatively as presenteeism, creating a threat to workplace productivity, potentially spreading infection or causing staff to under-perform while at work.

Recommendations for employers:

- Consider line manager training to support staff on positive absence management.
- Consider a review and relaunch of the current sickness policy and share with staff via posters.
- Help teams put in place a system for sick leave and bank staff who can cover for shifts where possible.
- In general raise awareness of the negative impact on individuals and the Integrated Urgent Care / NHS 111 services of coming into work when sick.
- Consider a mentoring service for individuals to use when stressed.
- Consider reviewing and relaunching an Employee Assistance Programme and Occupational Health support.
- Consider how to reinforce the positive view of commitment from staff and being aware that this should not come at a cost to their own health and wellbeing.

Help is available from a number of organisations, including:

- PTSD UK: http://www.ptsduk.org/
- Mind: http://www.mind.org.uk/workplace/mental-health-at-work/
- The Samaritans http://www.samaritans.org/for-business/workplace-training
- Safeguarding Boards



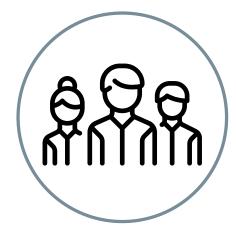


Recruitment and retention

Survey results cited career development, flexibility of shifts and a good work/life balance as key drivers for joining Integrated Urgent Care / NHS 111 services.

However, staff shortages are not uncommon for NHS 111 providers, for a variety of reasons, including difficulties with recruitment and retention. The following recommendations should be considered to reduce those risks.

- Look at areas of the services where certain job types suffer staff shortages (clinically trained staff for example) and why.
- Consider how the roles are advertised; are people clear about what the working patterns are and how much flexibility is available?
- Identify any staff retention issues. Consider looking at shift patterns and the process used for an equitable allocation of shifts.
- Consider piloting more flexible shifts, which could produce better outcomes in the longer term.
- Have an awareness of the whole system costs of increased turnover and take any opportunity to reduce this.
- Use the Workforce Race Equality Standard to develop a baseline understanding of the experiences for BME staff and actions to address inequalities identified.
- Review the most recent staff survey including the NHS staff survey to develop a baseline understanding of staff concerns reported by equality characteristics.





Staff morale

The survey findings revealed that media coverage affects morale in the workplace, as it affects the expectations and attitudes of service users when they call. Staff also stated that it causes many other issues such as negative views from friends and family and feeling added pressure about mistakes.

Staff also reported having personally experienced harassment, bullying or abuse at work from patients, service users, their relatives or other members of the public.

Among reported reasons for leaving are how staff are treated and discrimination, lack of enjoyment / low morale and low recognition.

- Review what training staff receive to deal with the pressures of abusive service users and ensure that all appropriate staff receive this training.
- Consider mentoring or support groups for staff or debriefing sessions preferably with individuals other than line managers.
- Ensure appropriate communication of positive coverage in the media to boost staff morale and counterbalance the impact of any negative press.
- When negative press is released have a plan in place to deal with it proactively with staff to mitigate the impact.
- Discuss joined up, proactive communications using positive case stories with provider communications leads and Clinical Commissioning Group communications leads.





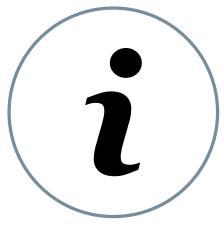
Job security

Staff commented most positively about the NHS, the NHS 111 service itself, colleagues and the job in general, which indicates that NHS 111 has an invested workforce who cares.

A department going through change can cause individuals to feel concerned about job security. Involving staff in changes that affect their work area/team or department and being able to make improvements in their own areas of work helps staff feel better supported and valued.

Recommendations for employers:

- Review how regularly useful information from senior management is communicated. This should include, but not be limited to, activity data, positive comments from users, leadership team updates on business performance, etc. Consider all channels for communication. Make sure any changes are dealt with as openly as possible with all staff and not 'trickled' down through management layers. Encourage staff involvement in the development of plans for change as early as possible.
- Consider running regular staff opinion surveys which enable staff to feedback issues and ideas for senior management to act on, i.e. a system for frontline feedback.
- Consider the implementation of a 'work on the frontline' scheme for senior managers to work on the frontline occasionally. This can boost their profile among staff and also improve their understanding of the job role. (Note: Appropriate governance and consideration must be given to practice and licence requirements.)
- Build in leadership training and opportunities for staff wanting to progress.



"NHS 111 has an invested workforce who care."



Supporting patients

The second most cited reason for applying for a job in NHS 111 is 'to support and help patients' with the third being 'to work for the NHS / ambulance services'.

Many clinically trained staff will be used to receiving updates on patient outcomes and feedback when working in other clinical settings. By its nature the Integrated Urgent Care / NHS 111 service will not often allow for such regular feedback from service users.

Without feedback on how the service has helped individuals it is difficult for staff to fully understand the benefits the service has for patients.

- Share any surveys that are done with service users throughout the organisation.
- Share good news and positive results as well as the negative.
- Look at the process for service user follow-up; e.g. is there regular data collation for feedback that is not just focused on complaints.
- Use positive audit examples used in good practice communications.
- Consider building on existing systems where clinical outputs, feedback and appraisals can be used with individuals and also in group learning.





Career advancement

Lack of career development, progression and training, learning or development was often cited as a reason for leaving.

- Ensure that education, training and development opportunities that are available to staff are openly circulated and all diverse groups of staff are encouraged and given the time to participate.
- Consider more line management support for individuals. Where training opportunities cannot be provided to staff, ensure that objectives and achievements are listed and appropriate rewards given, which can boost morale and help staff to feel a sense of purpose.
- Ensure there is a robust system in place for mentoring and coaching.
- Identify and develop an academic pathway for staff and career pathways including internal opportunities, but also across the wider health system, i.e. General Practice, 999, A&E, etc.





Working environment

In an organisation where staff may face higher than average levels of stress it is important that individuals feel comfortable in their workplace. Staff often cited a lack of enjoyment / low morale as a reason for 'leaving the job'. Ensuring people have breaks and a social space may help staff to feel more supported and improve morale.

- Consider the barriers that may be preventing regular breaks for staff.
- Publicise the importance of breaks, consider posters and make sure staff have social areas to go to in lunch and tea breaks.
- Managers should encourage staff to take breaks and also set a good example by occasionally joining staff on breaks.
- Review staff rest areas are they welcoming and comfortable?
- Involve staff in any review and suggested improvements.
- Review rotas to see how making breaks available to the workforce can be positively managed.
- Be considerate about how to give feedback and allow appropriate break for reflection following the delivery of feedback.
- Share how staff may be able to request extra breaks at times of need.





Peer support

In organisations where many individuals are working in isolation, working unsociable hours and on calls with few breaks in between, staff can miss out on social support from peers.

Recommendations for employers:

It is important that opportunities for reflection and peer support are available:

- Consider a mentoring service.
- Consider what training line managers have. Consider helping managers with how to deal with supporting staff. Make staff aware of the support that is available to them.
- Consider the implementation of a staff newsletter. This could be a good way to communicate provider achievements as well as personal achievements that people may want to publicise.
- Review Employee Assistance Services and communicate them widely.
- Review the opportunity for a staff working group that could look at health and wellbeing for the staff.
- Consider organising opportunities for Mental Health First Aid Training for staff.
- Allow managers time to take an interest in the wellbeing of staff as well as monitoring performance.

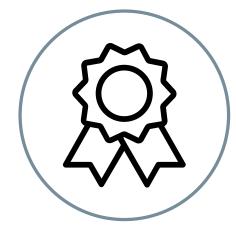




Reward and recognition

Reward and recognition are just as important for an individual's career development as feedback when they do not perform well. It is also important that lessons are learned from any mistakes and dealt with constructively and sensitively.

- Review the line management arrangements and management support for staff.
- Consider a more structured approach for Personal Development Reviews (PDRs).
- Reward and recognition does not need to be financial. Consider other ways in which staff could be recognised and motivated in the workplace.
- Encourage managers and staff to share positive stories and feedback.
- Make a point of raising awareness of successes and congratulating team members.
- Perhaps invest in and develop with staff a reward system that works for and makes sense to them.
- Review how organisations use the Serious Incident (SI) logs and how lessons are learnt.





The media

The biggest impact of the media coverage is on morale. Individuals also believe that it negatively affects the expectations of service users and can make people cautious about using the service. Many staff stated that the service is not properly explained. Individuals also commented that they believe that the media reports are unfair and inaccurate and that it causes them added stress as they worry about making mistakes.

- Ensure that media reports are discussed openly and encourage a culture of improvement, not fear.
- Consider the local marketing for the service is it clear when the service should be used?
- Consider a mentoring service.
- Consider opportunities to improve lines of communication and internal support in general.
- Encourage staff to support the organisation's communications team / work by putting forward positive stories which can be shared both internally and externally and through different media channels: messages, video, social media, press releases, etc.





Conclusion

Staff recruitment and retention are recognised as particular challenges within NHS 111 services. For the staff these range from acceptability of the role, their terms and conditions of the service, including pay and working arrangements, and career development opportunities.

These recommendations for employers should assist commissioners and providers to achieve excellence in the Integrated Urgent Care / NHS 111 service by improving the recruitment, retention, reward and sickness levels within the service.



Based on survey materials commissioned by NHS England in 2016 and prepared by the Picker Institute and South Central and West CSU.

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. Please contact 0300 311 22 33 or email england.contactus@nhs.net.

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For more information about the Integrated Urgent Care / NHS 111 Workforce Blueprint, click here.