

# The Robert Jones & Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

## Equality Delivery System (EDS) Domain 2: Workforce Health and Wellbeing 2023-24

### Overall, Domain 2 Rating and Feedback Report



## Domain 2: Workforce health and wellbeing

### Organisation Details

#### Name of Organisation

The Robert Jones & Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

#### Type of Organisation

Specialist Orthopaedic Hospital NHS Foundation Trust

#### Senior Responsible Officer (SRO)

Denise Harnin, Chief People & Culture Officer

### Introduction

The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

The health of our NHS workforce is critical, and NHS organisations are best placed to support healthy living and lifestyles. The EDS recognises that our NHS staff are also our patients, who belong to various community groups; the very same community groups that we serve as the NHS. NHS organisations are now encouraged to monitor the health of their workforce, support self-care and build health literacy among their staff. Domain 2 should be actively tested through structured engagement with staff, staff networks, Chaplaincy staff and trade unions with reference to evidence and insight. These groups should work together to lead and conduct engagement sessions with staff wherever possible.

The EDI team have engaged with staff members and their representatives by using Communications through posters, updates at staff meetings:

- Managers Cascade
- Question Time
- Staff Networks
- JCG Meeting
- EDI Meeting



Question  
Time  
RJAH



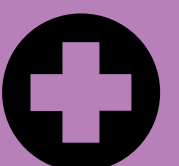
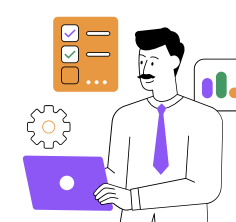
The EDI team shared the request for staff to join the scoring panel for Domain 2, to allow a diverse staff perspective, allowing clinical staff and admin staff to be part of the session.

Digital communications were also shared to reach as many areas as possible, utilising Communications, Facebook and the EDI Newsletter.

Engagement started with staff members and their representatives in April 2024, to allow time for staff to request to be released for the scoring event. Evidence was shared with confirmed attendees 6 weeks prior to the event to allow time for review and any questions to be raised with the EDI team.

To allow scoring from a diverse staff group, all staff were approached to engage with. It was aimed to gain representation from the following areas:

- Clinical Staff
- Administration Staff
- Staff Side Representatives
- Volunteers
- Estates and Facilities

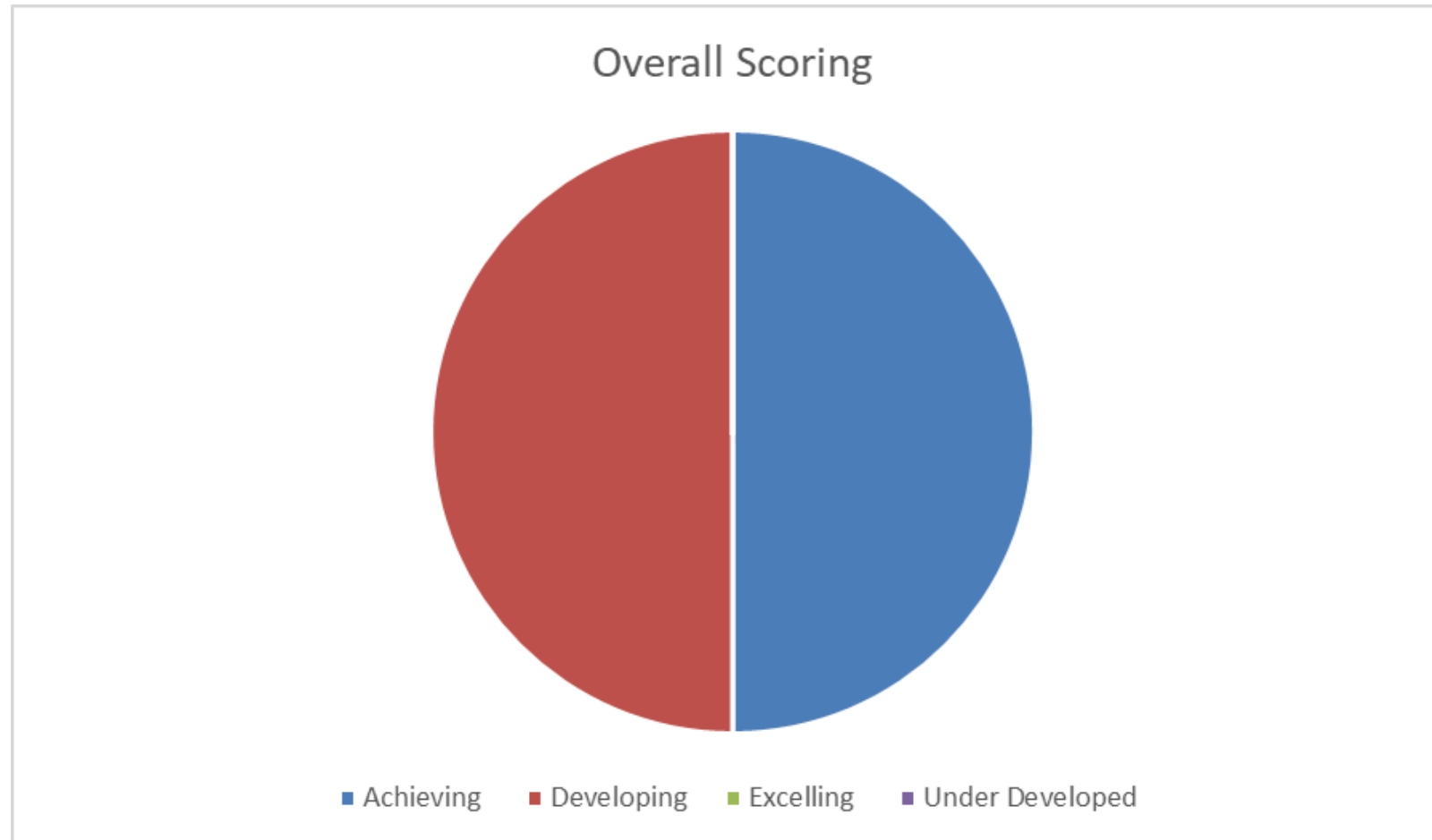


The panel were successful in engaging with the majority of staff groups with Medical staff and Volunteers unable to attend last minute.

Evidence was collated from a wide variety of sources, to ensure full transparency of the work completed over the last 12 months. Sources included posters, digital communications, action logs, minutes of meetings, links to web pages, legal reports submitted such as the PSED report and Gender Pay Gap report.



# Overall Rating



The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust achieved a split Domain 2 rating of Achieving Activity and Developing Activity for the reporting time frame, March 2023 – March 2024.

Outcome 2A When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD, and mental health conditions.

Outcome 2B When at work, staff are free from abuse, harassment, bullying and physical violence from any source.

Outcome 2C Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source.

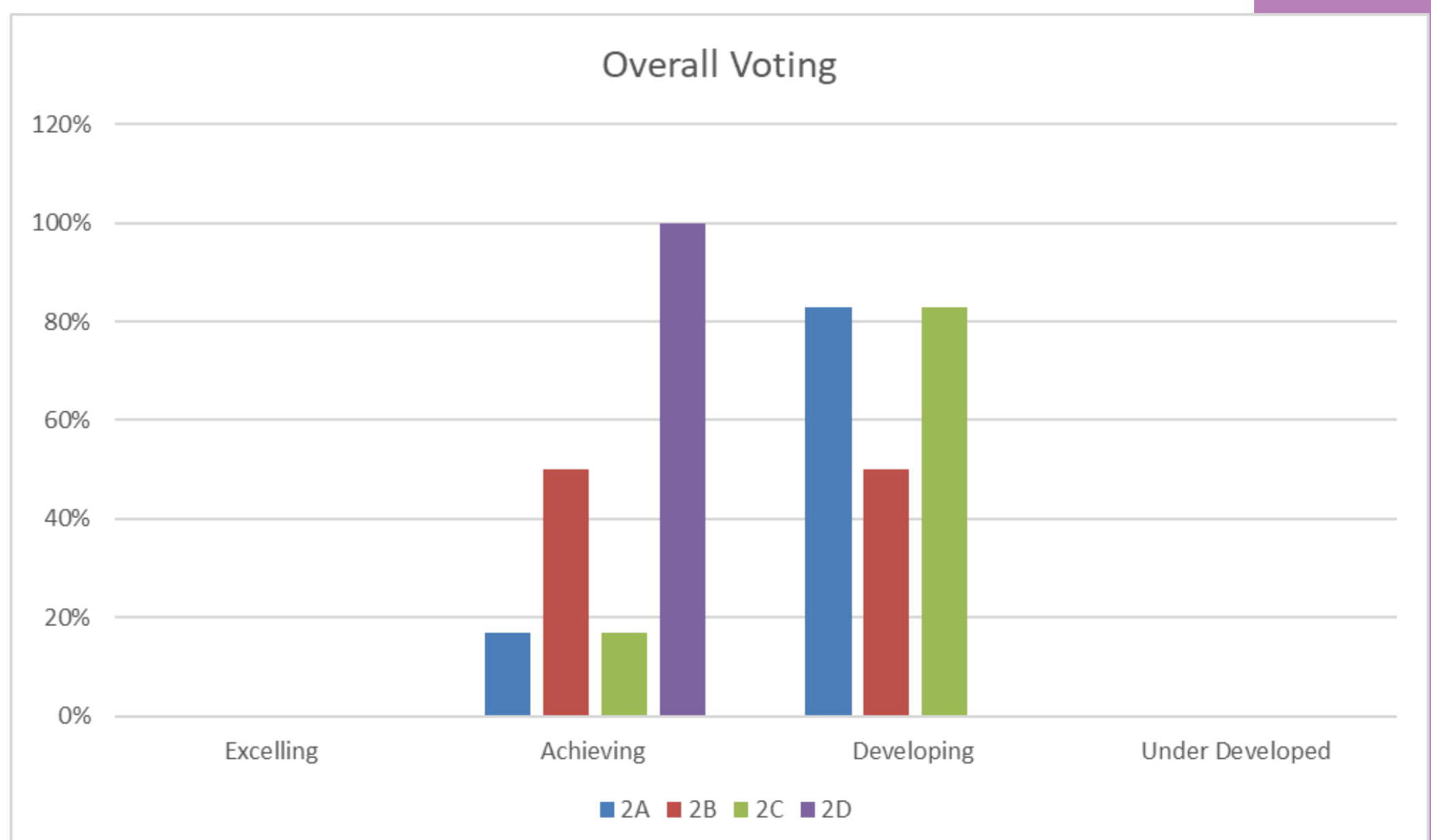
Outcome 2D Staff recommend the organisation as a place to work.

When all the votes are totalled up against all Outcomes there was:

- 0% vote for Underdeveloped.
- 50% vote for Developing.
- 50% vote for Achieving.
- 0% vote for Excelling.

## Summary of Voting for each Domain and Outcome

### Overall voting



## All feedback received for Outcome 2A:

When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD, and mental health conditions.

I am aware of places and people to go for mental health help, but unaware of where to go on site for other issues such as diabetes

I don't believe we do enough to support staff with severe mental health problems

I have never received support for COPD

Support is available but often hidden, managers are not aware of offerings. Networks are doing a lot of promote

The expectation to still attend work when ill has reduced since Covid, thankfully, but it is still creeping back in.

Not always evident where to go for advice especially for those with long term health issues

Lots of systems have been set up - especially focused on mental health issues. Staff can self refer to physio for musculoskeletal issues, but not women's health issues. Little for respiratory issues.

Sickness policy doesn't take into account long term issues and repeated absences

## All feedback received for Outcome 2B:

### Outcome 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source

Policies exist, however not seen anything to support the fact that penalty has been taken. Signposting for support is available and communicated.

The Trust does work towards a zero tolerance of abuse but it is extremely difficult

When a bully is experiencing work pressures then in my experience they revert to type and demonstrate bullying behaviour.

I feel well supported by my manager, I feel confident that I would be backed by them. And I was provided with the information to report concerns.

There are processes but how effective - the 25% reported bullying in the staff survey was disappointing. Would be interesting to know if it was a few staff bullying many or many staff bullying!

Big improvement but zero tolerance not always achievable, still hear of incidents in the Trust



## All feedback received for Outcome 2C:

### Outcome 2C: Staff have access to independent support and advice when suffering from abuse, bullying harassment and physical violence from any source

The Trust tends to move the victim and not sort out the problem with the bullies

Support outside line manager is poor and in some cases non-existent with people in supportive positions under educated. Line managers under supported. NHS First Aiders available but not promoted.

Union reps are very supportive, and can call in support from outside the organisation if needed. But also have to fit it in around their jobs, and it can take up a lot of time!

Some supervisors / managers have not had the relevant policy training

I feel that I could go to others apart from my line manager if I felt I needed extra support. But I can see that it is the same people consistently attending networks

Incidents involving people in a more senior position seem to take a lot longer to be actioned / investigated, - this doesn't encourage staff reporting of incidents, as it seems nothing is done

## All feedback received for Outcome 2D:

### Outcome 2D: Staff recommend the organisation as a place to work

Many staff have worked here for a long time, reflecting how nice a hospital it is to work in.

This is a great place to work, there are just a few who spoil it.

To a point. The friendliness and social aspect at RJAH is second to none. We don't always appreciate how good it is until we leave.

Not sure what a retention conversation is!

Exit interviews aren't fed back to all staff - hard to know if lessons are learnt from them, to influence retention

Percentage is above 70% however not seen anything to support retention through data, occupational health often used after sickness and not before. Would recommend as a place to work.

From having many conversations with volunteers and patients, the feedback is always positive from being here.

## Actions from feedback

The following actions will be included within the main EDI action plan, taken from the feedback received following the EDS2 Domain 2 scoring event.



<b>2A</b>	
	More promotion of <u>OurSpace</u> and MHFA through regular comms or drop-in sessions.
	Add <u>OurSpace</u> to job adverts to promote to potential applicants.
	Ask Optima to do drop-in sessions, for advice and support on all long-term conditions.
	Consider extending menopause group for all women's health (in consultation with staff network group).
	Review of sickness absence policy linked to long term conditions.
<b>2B</b>	
	Consider more HF training.
	Commence Just Culture training and roll out.
	Zero tolerance – more regular communications to staff and patients.
	Clear statement of intent/action on zero tolerance.
<b>2C</b>	
	HRBP drop-in sessions for staff and managers.
	Promotion and comms on policies available.
	Drop-in session/walk rounds of FTSUG and champions.
	Briefing sessions on policies (line managers).
	Promotion of staff networks for peer support.
<b>2D</b>	
	Add to job adverts that 75% of staff in National Staff Survey 2023 would recommend the Trust as a place to work.
	Use <u>ImproveWell</u> to ask/survey what could be better/improved.
	Promotion of the value of exit interviews.
	Review exit interview data/feedback.

\*If any further evidence is required, please request via the following email, [rjah.edi.od@nhs.net](mailto:rjah.edi.od@nhs.net).