

NHS Staff Survey – Basic guide for 2022 results

NHS STAFF SURVEY COORDINATION CENTRE

Version 1

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1 Introduction

The NHS Staff Survey provides an opportunity for organisations to survey their staff in a consistent and systematic manner. This makes it possible to build up a picture of staff experience, compare and monitor change over time, and to identify variations between different staff groups. Obtaining feedback from staff, and taking account of their views and priorities, is vital for driving improvements in the NHS.

In Spring 2023, the Survey Coordination Centre publish the results for the 2022 Staff Survey. The results are primarily intended to be used by organisations to help review and improve staff experience. The Care Quality Commission will use the results from the survey to monitor ongoing compliance with essential standards of quality and safety. The survey will also support accountability of the Secretary of State for Health and Social Care to Parliament for delivery of the NHS Constitution.

This guide, *NHS Staff Survey – Basic guide for 2022 results*, outlines some fundamental information about the survey results: whose responses are included in the data, what types of results are presented and how, an explanation of benchmarking groups and weighting, and an overview of the different outputs. The basic guide this year also includes a brief overview of reporting changes as well as a section on how to navigate the interactive dashboards.

If you require further information you may wish to review the [Technical Guide](#) (available to download from www.nhsstaffsurveys.com). This document contains more detailed technical information about the survey results such as how scores are calculated, how weighting is applied and a summary of the historical comparability of questions.

2 Overview of changes to reporting for 2022

The 2022 NHS Staff Survey has undergone a small number of changes since the 2021 iteration including having extended the inclusion criteria to bank only workers¹ as well as making some minor changes to the content of the questionnaire. A summary of these changes is available to download from the [Guidance section](#) of the NHS Staff Survey website.

In addition, some changes have been made to the reporting this year:

- This is the first year for which trend data is presented for the People Promise elements that were introduced in 2021.
- The benchmark reports have been redeveloped and now include trend data for sub-scores, in addition to scores and questions.
- Reports reflect that Integrated Care Boards (ICBs) have now replaced CCGs
- The directorate reports have been renamed breakdown reports.

Data from previous years published as part of the 2022 survey have been re-calculated where necessary to enable fair historical comparisons.

For more information on changes to the 2022 NHS Staff Survey, a summary is available to download from the [Guidance section](#) of the NHS Staff Survey [website](#).

3 Who is included?

The 2022 NHS Staff Survey was conducted between September and November 2022. Each organisation had a mandatory fieldwork period of at least two months.

The survey is compulsory for all NHS trusts and voluntary for other NHS organisations such as Integrated Care Boards and Social Enterprises.

Each participating organisation drew a list of eligible staff based on their records on 1st September 2022. The full eligibility criteria, including staff who are not eligible for the survey, is outlined in Appendix A of the [Technical Document](#), however the key criterion was that staff had to be substantively employed and paid by the organisation at the time (on a full- or part-time contract) to count as eligible.

¹Please note that information relating to the results for bank only workers is reported separately, and this basic guide relates only to the survey results for staff with substantive contracts.

4 What type of results are presented?

The 2022 Staff Survey outputs report two types of measures: summary indicators (People Promise element/theme scores and sub-scores), and question level data.

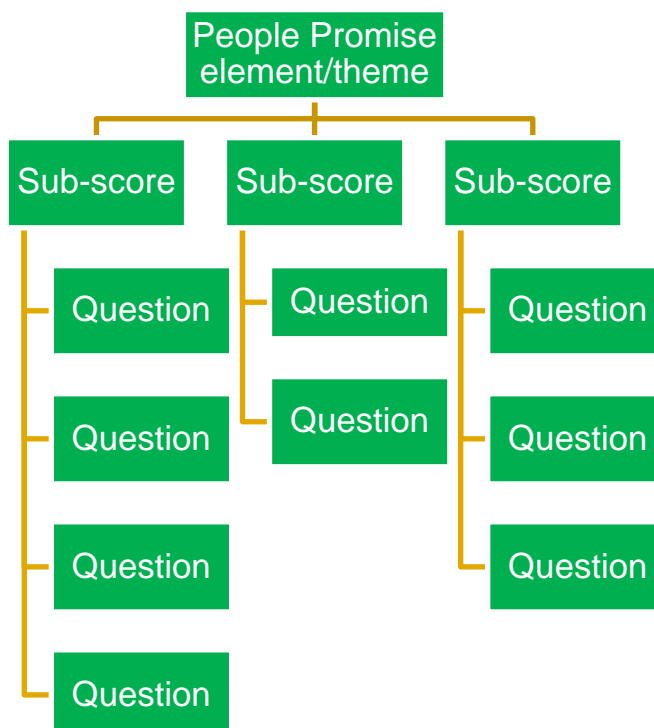
4.1 Summary indicators: People Promise elements/theme scores and sub-scores

At the uppermost level of the scoring hierarchy are the seven People Promise elements and two retained themes, which are overall scores derived from the sub-scores that feed into them, with each sub-score pertaining to responses from several questions. The People Promise elements and two themes, therefore, function as singular summary measures for groups of questions that taken together give more information about each area of interest. They are formed by assigning values to responses (on a scale from 0 to 10) and calculating their average. All values reported relate to an average (mean) score, where a higher score indicates a more favourable outcome to the given indicator. A higher score indicates a more favourable outcome, even in cases where questions are included for which a higher proportion is a worse outcome.

At the second level of the hierarchy, the sub-scores provide a more granular level to the results, within a particular area of interest. Again, these are taken as an average score of the questions that feed into them. And finally, at the lowest level of the hierarchy are the responses to each individual question. More detail about these calculations can be found in the [Technical Document](#).

The diagram below is for illustrative purposes to demonstrate the hierarchy and the relationship between scores, sub-scores and questions.

This year the People Promise elements, Themes, and sub-scores will be reported with two years of trend data.



4.2. Question-level results

Beside the summary indicators, question level results are also included in a number of reporting outputs. Question results are always presented as percentages. In each instance where question level results are presented, the exact meaning of a given percentage is indicated. For example, a graph's axis may specify that the values presented relate to the "% of staff selecting 'Satisfied'/'Very Satisfied'". It is worth noting that for certain questions a higher percentage is a worse result than a lower percentage: for example, when looking at the "% of staff experiencing violence", the lower the percentage, the better the result.

Note: *to protect staff confidentiality the Coordination Centre does not report results for groups of less than 11. When less than 11 responses feed into a result, that particular value will be suppressed, regardless of what type of measure it is. However, the base size will still be shown where appropriate.*

5 Benchmarking groups

NHS organisations vary in the services they provide and relatedly, the challenges they face. Organisations are assigned to a benchmarking group based on the services they offer. This means that comparisons are only made between organisations of a similar type and ensures comparisons are fair. In the benchmark reports organisations' results are presented in the context of their benchmarking group's best, average and worst results.

Trusts participating in the survey are assigned to one of the below benchmarking groups depending on the services they provide:

- Acute and Acute & Community Trusts
- Acute Specialist Trusts
- Mental Health & Learning Disability and Mental Health, Learning Disability & Community Trusts
- Community Trusts
- Ambulance Trusts

Benchmarking groups for organisations that participate voluntarily are detailed in the [Technical Document](#).

5.1 Data weighting

Despite grouping organisations together based on service provision and occupational group profile, NHS organisations of the same type are still likely to have some differences in the numbers of respondents in each occupational group.

These differences can occur for a number of reasons. One example is that some organisations may sub-contract services such as catering and cleaning, while other organisations supply them in-house. These differences between trusts can have a significant effect on organisation results, as it is known that different occupational groups tend to answer some questions in different ways. For instance, managers are known to respond more positively than other groups to some questions

and an organisation that has a particularly large number of responses from managers may have more positive results simply because of this imbalance. For this reason, the data are weighted to account for occupational group differences at organisations within benchmarking groups. The weighting procedure limits the impact of occupational group differences on results and works to create a 'level playing field'.

In order to make one NHS trust's scores comparable with other trusts of the same type, individuals' scores within each trust were weighted so that the occupational group profile of the organisation reflects that of a typical trust of its type. For organisations taking part voluntarily (i.e. non-trust organisations) results are not typically weighted (for details on this please refer to the [Technical Document](#)).

When organisation results are presented with benchmarking information for trusts, the organisation data is always weighted, except for questions where a higher or lower value does not relate to better or worse result (i.e. q1, q10a, q24d, q25a-c, q26a-q30a and q31a-q33 are not weighted).

The data weighting process is detailed in the [Technical Document](#).

6 Summary of key survey outputs

The outputs of the NHS Staff Survey reported by the Coordination Centre fall into three categories: national, local (i.e. organisational level), and regional/system level results. Documents are published on our [website](#)

A brief summary of each output type is included below, while full details can be found in the [Technical Document](#).

6.1 National results

National outputs are based only on data from participating *trusts*. They exclude organisations that participate voluntarily.

National dashboards: Published online, these dashboards provide the national results for all participating trusts on all People Promise elements, themes, sub-scores, and questions, including trend data for 2018-2022 where available. Results are presented for all trusts combined (national average) as well as for each individual trust benchmarking group. Question results are presented both as single percentages (e.g. % of staff agreeing/strongly agreeing) as well as the proportions choosing each response option. Results are also presented broken down by various background variables (such as gender and ethnicity).

National briefing: Published in PDF format, this output provides a summary of the key national results (based on results from NHS trusts only) from the survey with narrative.

Detailed spreadsheets: Published in Excel format, these are a series of spreadsheets that contain question results broken down by individual response options (split by questionnaire section), People Promise element, theme and sub-score results. Results included in these spreadsheets are weighted to match those reported in the outputs detailed above. The weighting used for a given result is also shown within the output itself.

6.2 Local results

Benchmark reports: A PDF report produced for every organisation, containing organisation results for People Promise elements/themes, sub-scores, and questions over the last 5 years (where possible). All results included are weighted & benchmarked where appropriate. An additional breakdown report, with up to two unique, organisation specific sets of breakdowns for theme scores, is optional for every organisation. The benchmark reports also contain data required for the NHS Staff Survey indicators used in the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES). Data from the benchmark reports is also available in Excel format.

Local dashboards: Published online, these dashboards provide the results for each participating organisation and benchmark data on all People Promise elements, themes, sub-scores, and questions, including trend data for 2018-2022 where available. Question results are presented both as single percentages (e.g. % of staff agreeing or strongly agreeing) as well as the proportions choosing each response option. Results are also presented broken down by various background variables (such as gender and ethnicity).

Detailed spreadsheets: Published in Excel format, these are a series of spreadsheets that contain question results broken down by individual response options (split by questionnaire section), People Promise element, theme and sub-score results. The sheets contain the results for each organisation, the results for each benchmarking group (the mean of all the constituent organisation results), and the results for all trusts (the mean of all trust responses). In addition, they also contain breakdowns by all of the demographic variables across organisations and within the benchmarking groups. Results included in these spreadsheets are weighted to match those reported in the outputs detailed above. The weighting used for a given result is also shown within the output itself.

WRES and WDES dashboards: Published online, these dashboards provide data for each organisation based on indicators used in the Workforce Race Equality Standard (WRES) and the Workforce Disability Equality Standard (WDES).

Detailed spreadsheets: A series of spreadsheets that contain question results broken down by individual response options (split by questionnaire section), People Promise element/theme, sub-score and response rates. Each sheet contains the result for staff in each organisation, each ICS/STP, each region, and for staff in all trusts, along with the median result for organisations in each benchmarking group. In addition, each sheet also contains breakdowns by all of the demographic variables across all organisations and within the five trust benchmarking groups and the ICS group.

6.3 Regional results

Region/system benchmarking dashboards: Published online, one set of dashboards provides results for each individual organisation grouped within each NHS England region on all People Promise elements, themes and sub-scores, for 2022. The other dashboards provide results for each individual organisation (except ambulance trusts) grouped within each ICS.

Region/system aggregated dashboards: Published online, these dashboards provide results aggregated by region (all participating trusts) and ICS (all participating trusts, except ambulance trusts). Trend data for 2020-2022 are presented where appropriate. Results for trusts within both regions and ICSs are also presented broken down by various background variables (such as gender and ethnicity). Please note, data for Ambulance trusts are not included in ICS results as these trusts can cover more than one ICS.

7 How to use the interactive dashboards

This section covers some basic instructions on how to use the interactive dashboards.

Each dashboard contains a number of different tabs. The first tab is the 'about this survey' tab which will tell you which results that dashboard contains. It will also tell you what the other tabs are in the dashboard along with a short explanation as to which results can be displayed on each visualisation (and whether data is presented at score, sub-score or question level).

On each subsequent tab of the dashboard, there is a 'filter' section to the right-hand side of the chart. On most dashboards there is a 'show me the data for' dropdown menu, from which you can select the score or question you wish to visualise.

Whilst the list of filters on each tab varies according to what is shown (the breakdowns tabs will only have filters pertaining to demographic breakdowns, for example) the filters and their functionality are kept as consistent as possible across each tab.


A general overview of their purpose and functionality is as follows:

Filters		
1	<p>Select trust type:</p> <p>(All) ▼</p>	Allows users to select a trust type of interest (e.g. Ambulance trusts). On region and local dashboards, users can select an organisation or region/ICS.
2	<p>Select People Promise element / theme:</p> <p>(All) ▼</p>	Allows users to select an individual promise element or theme of interest, or to view results for all measures.
3	<p>Select sub-score</p> <p>(All) ▼</p>	Allows users to select a sub-score of interest, based on the selection in the above filter. The sub-scores shown will change depending on the selection made in dropdown 2.
4	<p>Show me the data for:</p> <p>q2a - I look forward to going to wo... ▼</p>	Allows users to select a measure of interest. This may be questions (as shown here) or a promise element/theme or sub-score. The options shown will change depending on the selection made in dropdown 3.
5	<p>Select breakdown:</p> <p>Age ▼</p>	This dropdown is only available on tabs showing results broken down by a demographic group. It allows users to select a group to split results by.
6	<p>Select breakdown category:</p> <p>(All) ▼</p>	This dropdown is only available on tabs showing results broken down by a demographic group. It allows users to show specific categories of interest.

When using the filter options, you may see the screen below. This means you will need to revisit your filter selections as it may be that the item you are trying to show the data for does not exist within the filters you have selected. If this is the case, the item will appear in brackets in the dropdown list. You are advised to apply the filters from top to bottom to avoid this.

Please select relevant filter options
for data to be visualised

Filters


Select trust type:  ▼
(None) ▼

Select People Promise
element / theme:
We are compassionate and inclusive ▼

Show me the data for ...
We are compassionate and inclusive ▼

Select breakdown:
Patient facing role ▼

Breakdown category:
(All) ▼

If you wish to download the dashboards, there is a download symbol  in the top right-hand corner of the dashboard and on the ribbon along the bottom. This allows you to download the dashboard data and visualisations in various formats.

You can also download the full data that sits behind the dashboards, contained in a ZIP file found on the [Interactive Results](#) page of the website.