PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE

DYDDIAD Y CYFARFOD: **DATE OF MEETING:**	19 June 2023
TEITL YR ADRODDIAD: **TITLE OF REPORT:**	Staff Experience: Transforming Staff Feedback into Positive Change Progress Report and Integrated Action Plan / Staff Wellbeing Update
CYFARWYDDWR ARWEINIOL: **LEAD DIRECTOR:**	Lisa Gostling, Director of Workforce and Organisation Development
SWYDDOG ADRODD: **REPORTING OFFICER:**	Christine Davies, Assistant Director of Organisation Development; Rob Blake, Head of Culture and Workforce Experience; Suzanne Tarrant, Head of Staff Psychological Wellbeing

Pwrpas yr Adroddiad (dewiswch fel yn addas) **Purpose of the Report** (select as appropriate)
Er Sicrwydd/For Assurance

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

This report is presented to the People, Organisational Development and Culture Committee (PODCC) to provide an update on the Integrated Action Plan approved by PODCC in December 2021 and to set out the highlights of progression during 2022/23. It includes details of two wellbeing surveys conducted in that period as well as highlighting other cultural building blocks that have been put in place. It also sets out the direction of travel for 2023/24 to ensure that the momentum of cultural progression is maintained.

Cefndir / Background

Following the pandemic, the Health Board made the commitment to put the wellbeing of our staff at the heart of everything we do and so a series of cultural building blocks were put in place to listen and learn from our staff experiences with the aim of improving staff wellbeing. The progression of these were well documented and presented to the Committee in December 2022. Some examples of specific cultural building blocks are featured in other papers presented to the Committee. For example, the paper relating to the Working in Confidence platform and the one relating to Staff Value and Appreciation.

Prior to that the Committee had received an integrated action plan, firstly in December 2021 and subsequently updated in August 2022. This plan brought together the results and intentions from the first Staff Discovery report; the Midwifery and Nursing and Healthcare Support Worker (HCSW) Wellbeing Survey (Phase 1) and the bi-annual National Staff Survey, as well as the Medical Engagement Scale. This integrated action plan has been updated and is included as Appendix 1. It has been RAG rated to show progress as at May 2023. It is evident that the vast majority of actions from this first phase of staff listening have now been completed

Asesiad / Assessment

Frameworks for Change

During the course of 2022, the Organisation Development Relationship Managers (ODRM) team in conjunction with staff side colleagues has developed a cultural jigsaw which underpins our approach to people culture planning locally and which has wellbeing as one of its key components.
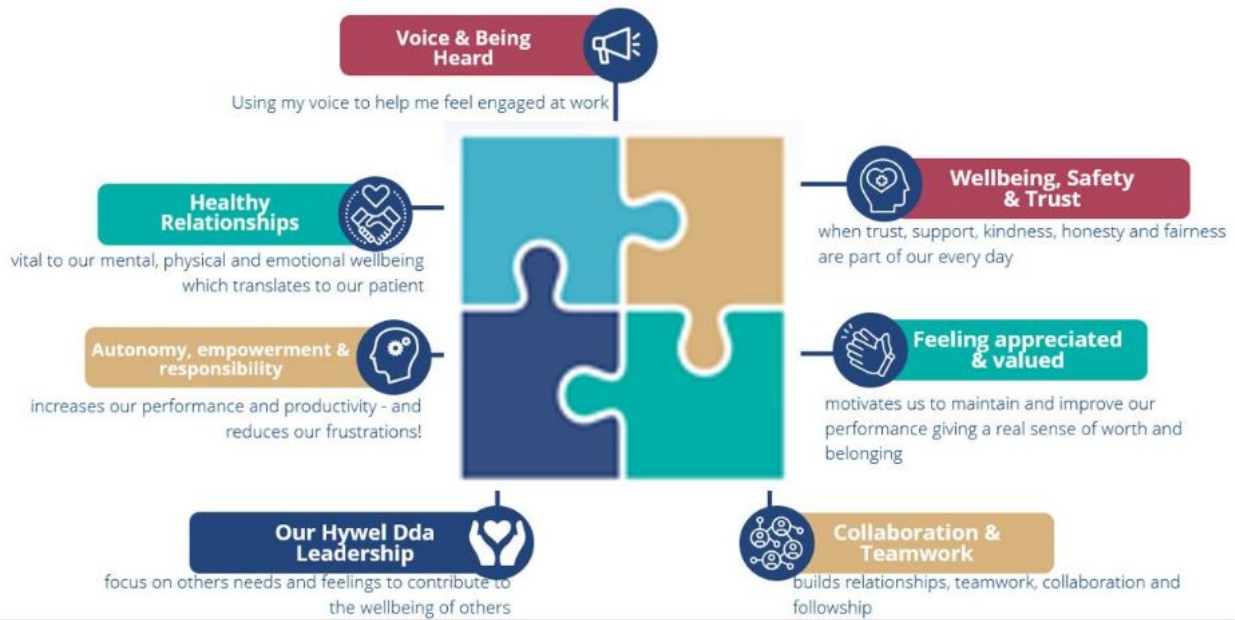

Fig 1.1 Cultural Jigsaw

The ODRM Team has also developed a toolkit for each of the jigsaw pieces to bring the concept to life and offer more insights; learning and practical ideas. These are intended as resources for managers and staff alike, thus supporting our approach to enabling employee lead culture change.

The placement of staff wellbeing within a wider cultural framework has also recently been endorsed by the NHS Health & Wellbeing Framework published in England as shown overleaf. https://www.england.nhs.uk/wp-content/uploads/2021/11/NHS-health-and-wellbeing-framework-strategic-overview.pdf

What is new in the evolved Health and Wellbeing Framework?

Our understanding of health and wellbeing changes and improves with each piece of academic research or market insight. This is reflected in a broader view of health and wellbeing. Significant parts of our day to day working lives play a huge role in our individual wellbeing from the teams we work with through to the physical environment. This evolved Health and Wellbeing Framework builds on the successes of previous work and demonstrates the case for a wider, more inclusive health and wellbeing culture. Within this strategic overview we have used examples of both internal and external data points. These data points are replicated within the "Elements of Health and Wellbeing" document which also contains structured reference acknowledgements.
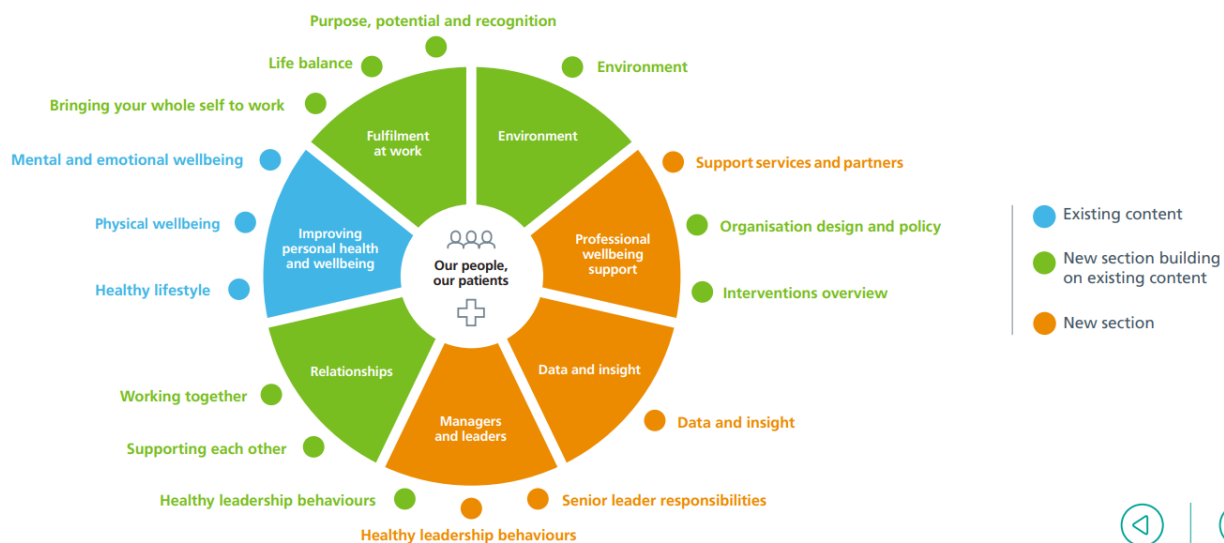

Fig 1.2. Health and Wellbeing Framework, NHS England

Work has just begun at an All-Wales level to consider a way forward for these issues within NHS Wales, led by HEIW. Hywel Dda University Health Board (HDdUHB) Organisation Development (OD) members are involved in these discussions.

Data and Intelligence

Data triangulation from Workforce and OD (WOD) dashboards relating to sickness absence; turnover; Employee Relations (ER) cases; the Work in Confidence platform and Exit and Stay interviews is also taking place to enable a richer understanding and dialogue with leaders about cultural patterns emerging in their areas so that there is a nuanced and localised approach to cultural progression sitting along side the Health Board wide intentions. This is in its early stages but progressing well. Developing our data and intelligence will continue to be a feature as we move through the next 12 to 18 months.

Surveillance

Cultural improvement and progression are always work in progress and the last 12 months has seen 2 major surveys completed with regard to staff health and wellbeing. This is reinforcing the message for our staff that we are continuously striving to place their wellbeing at the heart of everything we do and to learn from their experiences.

Part 1

May 2022 saw the second phase of the longitudinal survey into the Workplace Climate and Wellbeing of Nurses, Midwives and HCSWs. This first phase of this survey was conducted pre-pandemic and the second one post-pandemic. It has been useful to enable a comparison between the two sets of results.

The response rates to both surveys have been pretty similar as have a lot of the specific question results. Considering that there has been a global pandemic within the timeframe in

between, the comparative similarity in results shows that the work we have put in place to support wellbeing during the pandemic has at least mitigated its impact on staff. That is not to say that we are in anyway complacent and clearly there is still more to do.

The survey was administered through Swansea University by Professor John Gammon, Professor Sharon Williams and Dr Julian Hunt.

The Executive Summary of the report's findings is shared below.

"This report presents findings of an independent online survey of 518 nursing staff conducted during May 2022 through to July 2022. The survey examined staff wellbeing (e.g., workload, psychological safety, engagement, bullying, resilience, job satisfaction and job turnover) of nursing staff and workplace environment (e.g., employee voice, employee silence, perceptions of bureaucracy, organisational practices, support at work, trust in direct supervisor and senior management, and trade union partnerships).

The findings of the report would suggest that there are implications for HDdUHB at a corporate level as well as more specific implications at an operational level. For the former, the work environment and its impact on wellbeing must be positioned so that the enhancement of wellbeing continues to be seen as a fundamental corporate objective.

The approach to staff wellbeing should be tailored so that it is inclusive, employee-led, proactive and adopted across the organisation.

Key initiatives should be adapted for specific workforce challenges and demographics to create a stable and sustainable workforce that is responsive to service change and health needs.

The report suggests that going forward the organisation needs to consider ways in which it embeds a holistic and sustainable approach to staff wellbeing that is fully integrated into the vision, values and daily activities of HDdUHB.

To ensure consistency and application of good practice, staff across all sites and at all levels should be trained and equipped to make employee wellbeing 'routine business' for all. The report makes recommendations for existing planning objectives and wellbeing action plans to be revised.

At a corporate level, the results of this survey suggests:

➢That the next planning cycle explicitly reviews the strategic planning objective that relates to staff wellbeing and informs the revised action plan.

➢The need for a clearer awareness of the governance structure for the monitoring and implementation of the strategic wellbeing objectives and their delivery across the organisation.

➢Ensuring recognition of employee wellbeing as a critical component to being a learning and responsible organisation, and further promote values and behaviours that enable an inclusive culture.

➢*The need for further reflection to enhance the existing co-produced approach to identifying specific workplace issues that impact on staff wellbeing within the workplace environment.*

➢*The health board acknowledges existing geographical inconsistencies in terms of staff wellbeing support and share existing best practice across the organisation.*

➢*Going forward the organisation considers ways in which it embeds a holistic and sustainable approach to staff wellbeing that is fully integrated into the vision, values and daily activities.*

At an operational level, the results of this survey suggest:

➢*The nursing workforce within HDdUHB continues to be committed, resilient, engaged and embedded in the work they perform.*

➢*There is further evidence that engagement of nursing staff is increasingly undermined by high levels of workload, bureaucracy and burnout in workplace environments that are perceived as being under resourced.*

➢*Ongoing high workload is combined with perceptions of lower levels of organisational support.*

➢*Work intensification, staff shortages and resourcing pressures continue to be viewed as eroding positive voice climate and impacting on quality of care, leaving nursing staff approaching a tipping point where a number are being driven to consider leaving the profession.*

➢*Management within HDdUHB continue to be in a position to address these issues before any number of highly skilled employees exit the nursing profession.*

This Phase 2 report suggests that the present understanding of the multifaceted nature of working conditions and staff wellbeing within HDdUHB, necessitates a more cooperative consideration to identify specific workplace issues that impact on staff wellbeing within the workplace environment".

The recommendations from the second phase of the longitudinal Nurse Wellbeing study have been reviewed by the working group from HDdUHB and Swansea University and are being embraced as part of the existing and next stages of the cultural progression journey.

Wellbeing concepts are being threaded through a range of the People Planning Objectives for 2023/24 and as during the previous 12 months, progress against milestones is monitored by PODCC and then through to the Board.

Wellbeing is being further promoted as part of the cultural progression dialogue being facilitated by our ODRM's locally and in particular the nurse wellbeing survey results have been championed by the Executive Director of Nursing, Quality and Patient Experience through the Senior Nurse Management Team in May 2023.

Part 2

The landscape of wellbeing at work has continued to evolve since the pandemic, with greater emphasis on understanding the factors that enable staff to remain well and engaged in the face of challenges and on how effective recovery can be supported if they have experienced difficulties.

The psychological wellbeing and mental health of our staff remains at the core of HDdUHB's ability to provide safe, effective patient care, to innovate and facilitate change and to address the challenges of retention and recruitment.

The Staff Psychological Wellbeing Service (SPWBS) has retained its focus on prevention, contributing to a culture of wellbeing and providing a stepped care approach. This includes access and signposting to evidence based mental health resources; information and resources to boost individual, team and leadership wellbeing; and rapid access to appropriate psychological support where this is needed.

The planning objectives for Our People include a focus on engaging with and listening to our people to ensure we support them to thrive through healthy lifestyles and relationships (PO 2A).

The SPWBS makes use of regular feedback from all its activities to enable continuous reflection and improvement of service provision. However, views of those not accessing the service were needed to provide a bigger picture and enable more finely tuned adaptation. We wanted to find out more directly from staff what they were aware of, what issues were affecting them and what they think is needed to improve how HDdUHBsupports the mental health and wellbeing of all its employees. Staff voice is essential as a foundation for designing and delivering appropriate and effective wellbeing support.

Picking up the thread of staff voice and the opportunity for co-creation, the SPWBS has conducted a wider, in-house wellbeing survey inviting all staff from all groups to participate.

This survey was not aimed at comprehensively measuring the wellbeing of staff, rather it focused on the views of staff around what is needed to support their wellbeing. It was launched on World Mental Health Day, on 10 October 2022 and remained open for nine weeks.

The survey explored areas such as:

- Mental health wellbeing ratings
- Mental health check in frequency
- Rest & recovery
- Activities to support wellbeing
- Awareness of resources
- Workplace conditions
- Barriers to knowing about accessing resources
- Impact of experiences at work
- Suggestions to support health and wellbeing

In total, 1775 of our employees took the time to fill out the survey, 12.3% of all staff in post at that time. This was higher than anticipated and significant given the challenges of workload and time, as well as the number of surveys that staff are invited to complete. It suggests a

sound level of engagement and interest in wellbeing at work issues: staff are keen to let us know their views.

More detailed results of the full survey are contained in **Appendix 2** for consideration. In essence, five key themes emerge from the data and these present the basis for actions going forwards:

1. **Raising awareness**
   The survey gives us an outline of levels of awareness about the range of wellbeing services and resources available to staff. This is good in relation to some services but there are obvious gaps and one of the key barriers identified by staff was not hearing about what is available. More therefore needs to be done to promote services and to target key areas, using a range of media to increase accessibility.

2. **Rest and recovery**
   Having regular good rest and recharge periods within the working shift is essential for sustained performance, wellbeing and compassionate care. The survey highlights the need to address our culture of taking breaks and the access staff have to appropriate facilities to support this.

3. **Early mental health check-ins**
   Having insight into our own levels of wellbeing and how this can fluctuate is a key aspect of being able to take early action. While many respondents are regularly checking in with their emotional wellbeing, many are not, and this potentially identifies a risk to deteriorating mental health with adverse consequences at both an individual and system level.

4. **Tackling stigma**
   There were an array of factors reducing the likelihood that staff would reach out for support, and this does reflect the ongoing stigma prevalent in our society. This has shifted in recent years with national campaigns, however the survey data suggests that it continues to deter staff from using the range of services on offer.

5. **System solutions**
   The need for solutions that address the root issues impacting mental wellbeing at work and for improved communication about what is already being done and what is planned. Staff need to know more about the range of different pieces of work underway across WOD – upstream work that is specifically designed to support experience and foster greater wellbeing.

The wider OD team members are working with the SPWBS to support bringing these themes to life more widely across the organisation and to support the more detailed actions outlined in the survey results paper.

Next Steps
As well as following up on the intelligence from these two wellbeing surveys with key actions, this year, 2023/24 sees a further round of staff surveillance in the form of:

1. A second Staff Discovery phase into staff retention over the Summer 2023
2. A refresh and relaunch of the Board outcomes survey as well as trends tracking by September 2023.
3. A National Staff Survey in Autumn 2023.

All of this data will be analysed to produce intelligence to provide a Health Board wide overview; to inform the specific workstreams in the planning objectives for 2023/24 and to influence the cultural progression work through the people culture plans.

The Culture & Workforce Experience team are also developing a Cultural Impact Assessment tool to enable measurement of cultural progression over time. This will directly relate to the HDdUHB cultural jigsaw and track engagement scores as well as a newly developed retention score. In addition, it will enable local intelligence to support OD interventional work.

For 2024/25, all of the surveillance intelligence gleaned, and lessons learned will be used to drive continuous improvements through the next round of planning objectives. Learning from the early adoption sites of the cultural progression tool will also feed into that process.

With regards to the Nursing and Midwifery and HCSW Wellbeing longitudinal study, we will progress to the final Phase 3 in two ways. The first will be a repeat of the survey across the Health Board so that a further snapshot in time picture can shed any insight on any gaps in our progression.

Secondly, through a deeper, differentiated enquiry process which will focus on the acute sites that have deemed to be stabilised through increased recruitment to existing vacancies and through targeted retention work. Focus groups will be used to determine how 'communities of wellbeing practice' in these areas can be nurtured to flourish and grow overtime.

Argymhelliad / Recommendation

The Committee is requested to take assurance from the actions taken to date to support staff wellbeing and to note progression steps planned for 2023-25.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	N/A
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply Choose an item. Choose an item. Choose an item.
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	1. Leadership 2. Culture and valuing people 4. Learning, improvement and research Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Putting people at the heart of everything we do 2. Working together to be the best we can be 3. Striving to deliver and develop excellent services 4. The best health and wellbeing for our individuals, families and communities

Amcanion Cynllunio Planning Objectives	2a Staff health and wellbeing 2b Employer of choice 2c Workforce and OD strategy Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: [Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022](#)	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives 5. Offer a diverse range of employment opportunities which support people to fulfill their potential Choose an item. Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	NHS England Health & Wellbeing Framework Staff Discovery report Midwifery and Nursing and Healthcare Support Worker (HCSW) Wellbeing Survey (phase 1) National Staff Survey Medical Engagement Scale
Rhestr Termau: Glossary of Terms:	N/A
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	N/A
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	N/A
Risg: Risk:	N/A
Cyfreithiol: Legal:	N/A
Enw Da: Reputational:	N/A
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	N/A

Intergrated Action Plan
June 2023

1. Growing inspirational leaders

The Vision: We need to re-purpose our leadership offer and support our staff to be confident, compassionate and capable leaders who inspire excellence and improvement and deliver results.

"Our Hywel Dda University Health Board Leadership" is an important jigsaw piece in our People Culture Plans and will be a key focus for us. The Cultural Intentions we have committed to here are:

Intention 12 – Visibly leading our people with purpose and compassion

Intention 13 – Moving from being leaders of service to leaders of people

Intention 14 – Reaffirming our vision and providing hope for the future

HOW WILL WE ACHIEVE THIS VISION?	STRATEGIC ALIGNMENT				PLANNING OBJECTIVE	RAG RATING	BY WHEN	PROGRESS
	Discovery Report	Your Well Being Matters	Staff Survey	MES				
Review our leadership strategy as an organisation – rethinking what we think leadership is about and reflecting this in our succession planning, talent management and transformation plans	X	X	X	X	PO 1B		JUL 2022	Research completed and incorporated into programme design.
Rethink the leadership offer to staff, informed by good practice from across various sectors and disciplines	X				PO 1B		OCT 2021	New curriculum for a Leadership Development Programme is designed and being delivered.
Refocus and communicate our expectations of our leaders in terms of leadership style, attitude and behaviour	X			X	PO 1B		JUL 2022	This will be shared/delivered during the leadership development programme and Incorporated into LEAP, STAR and New Consultant Development programme.
Ensure leadership expectations are embedded into our recruitment processes via 'Values based recruitment' – reinforcing the leadership values and behaviours that are needed to nurture the type of culture we want	X			X	PO 1B		MAR 2022	Considered as part of the review of recruitment with kinder processes being introduced for accessible application pathways; centralised recruitment etc. Leadership values and behaviours being incorporated as part of the Talent Management and Succession Framework.
Develop programmes to support leaders to 'Lead Change' - Providing information and support to enable teams and services to design and implement change	X				PO 1B		MAR 2022	Curriculum developed for a Leading Change workshop.
Evolve our approach to identifying, managing and retaining talent by: - Developing a proactive succession planning strategy - Reviewing our approach to talent management - Develop a Rising Stars programme to capture potential and support our leaders to grow at Hywel Dda University Health Board		X	X		PO 1B		MAR 2023	Succession Planning Framework in place and launch in June 2023 with first talent pool established by Dec 2023.
Create a more visible and connected communication channel and leadership model via our People Culture Plans and Culture Reset Programme	X	X	X	X	PO 1B		FEB 2022	Leadership Matters Portal & OD Intranet page setup.

2. Creating spaces that enable our people and services to thrive

The vision: Adapt our spaces to support staff to do their job most effectively

HOW WILL WE ACHIEVE THIS VISION?	STRATEGIC ALIGNMENT				PLANNING OBJECTIVE	RAG RATING	BY WHEN	PROGRESS
	Discovery Report	Your Well Being Matters	Staff Survey	MES				
Understand what workplace changes we can make to support recruitment of staff	X	X	X	X	PO 1A		MAR 2022	Actions continuing to rollout from previous Recruitment Discovery and Implementation Plan to include: Centralisation of pathways (NMR, A4C and M&D), agreed All Wales template for A4C JD/PS, improved and increased training provision, review of application form underway, review of pathways to apply to ensure accessibility and inclusion.
Understand what workplace changes we can make to support retention of staff	X	X	X	X	PO 1A		MAR 2023	Nursing retention T&F group progressing well. 1. Second Staff Discovery process into retention underway. 2. AHP Retention Group to be established in Oct 2023 3. Medical Retention Group to be established from June 2023.
Undertake research to identify other models of shift patterns / ways of working that challenge the' 12 hour shift' current way of working for nurses and other frontline staff	X			X	PO 1A		JUL 2023	Interviews completed. Research completed.
Explore co-production of shift patterns and rota management;	X	X		X	PO 1A		MAR 2022	Interviews with staff conducted & used to create pilot flexible working sites to establish proof of concept. Nurse Retention Group working on implementation of the Nurse Flexible Working Guide.
Re-allocate Charitable funds money to create rest areas for staff	X	X		X	PO 1A		APR 2022	Funding has been allocated to each County Partnership Forum and also to support the Fatigue and Facilities Charter.

Identify ideas on allowing time to rest, reflect and recharge by legitimising space and time for teams to take time out and reflect on shared experiences and build new futures.	X				PO 1A		MAR 2022	Green rest areas established on some sites and also some rest rooms reserved. Still more work to be done in this area.
Evolving our working environment at such pace during the pandemic has now opened the door to redesigning our environment as we go forward. Can we transform the meaning of work in people's lives? Develop a way of working that enforces a sense of belonging and people feel cared about, coupled with providing flexibility and agility	X				PO 1A		MAR 2022	Cultural jigsaw developed for a Good day at work with cultural toolkits launch by July 2023.

3. Creating the working experience that enable our people and services to thrive

The vision: Evolve the working experience to support staff to do their job most effectively

All aspects of our People Culture Plans are important jigsaw pieces here.

HOW WILL WE ACHIEVE THIS VISION?	STRATEGIC ALIGNMENT				PLANNING OBJECTIVE	RAG RATING	BY WHEN	PROGRESS
	Discovery Report	Your Well Being Matters	Staff Survey	MES				
Develop a definitive attraction and recruitment plan	X		X		PO 1A		MAR 2022	Gap analysis of current attraction strategies underway with key stakeholder involvement.
Develop a specific retention plan to reduce turnover over the next 18 months	X	X	X	X	PO 2A		MAR 2023	Nursing retention T&F group progressing well, with more operational staff requesting to join. Further groups being established for medics and AHP's. Hywel Dda continues to be performing well amongst HB comparators in relation to turnover.
Identify ideas on allowing time to rest, reflect and recharge by legitimising space and time for teams to take time out and reflect on shared experiences and build new futures.	X	X	X		PO 2A		MAR 2022	A number of programmes have been developed, including: • System support and Team Facilitation • Rest and Recovery for staff • Wide range of psychological wellbeing resources • Staff Wellbeing Information Line • Contributing to the Wellbeing Champion Network • Wellbeing webinars • Ecotherapy Recovery in Nature programmes (x6) • Recovery in Nature Days for Medics.
People Culture Plan delivery and implementation to evolve and transform the meaning of work in people's lives. Develop a way of working that promotes a sense of belonging and people feel cared about, coupled with providing flexibility and agility	X	X	X		PO 2C		MAR 2023	Framework for the People Culture Plan is agreed along with the ways of working through Our Guiding Principles. Cultural jigsaw toolkits for managers & staff developed & to be launched July 2023.

4. Putting well-being at the heart of Hywel Dda

The vision: Ensure that everyday working at Hywel Dda is a good day.

"Wellbeing, safety & trust" is an important jigsaw piece in our People Culture Plans and will be a key focus for us. The Cultural Intentions we have committed to here are:

Intention 4 – Rebuilding trust and connections between leaders, staff, teams and trade unions at all levels

Intention 5 – Respecting our staff resilience and strnegth of spirit

Intention 6 – Making time and space for reflection and learning from our lived experiences together

HOW WILL WE ACHIEVE THIS VISION?	STRATEGIC ALIGNMENT				PLANNING OBJECTIVE	RAG RATING	BY WHEN	PROGRESS
	Discovery Report	Your Well Being Matters	Staff Survey	MES				
Create a greater awareness and focus among managers and staff of what support we have for staff wellbeing. Initiatives should be employee led and adapted to suit various workforce challenges and demographics.	X	X	X		PO 2A		JUN 2022	On-going programme of engagement in place including a revised Share point site, regular globals, booklets, posters, HAPI app messaging.
Raise awareness of well-being across generic staff & upskill managers to embed well-being principles into their day to day leadership style	X	X	X		PO 2A		JUL 2022	Regularly refer to wellbeing responsibilities as part of Team Time-Out; Leadership Programmes etc. Included as core part of the new LEAP programme.
Reviewing and evolving the 'well-being offer' and ensuring it is fit for purpose	X	X	X	X	PO 2A		DEC 2022	• System support and Team Facilitation • Rest and Recovery for staff • Wide range of psychological wellbeing resources • Staff Wellbeing Information Line • Contributing to the Wellbeing Champion Network • Psychoeducation Programme • Provision of 121 psychological interventions & support • Trauma referral pathway • Ecotherapy Programme for staff
Develop Trauma therapy offer for staff	X	X	X		PO 2A		NOV 2022	Trauma referral pathway in place
Develop process for 'Team Recovery Plans' to support team recovery	X	X	X	X	PO 2A		DEC 2021	Initial framework has been piloted and team recovery structure now in place.
Develop Awareness raising sessions for staff and teams – importance of rest, addressing barriers and legitimising recovery	X	X	X	X	PO 2A		JAN 2022	Stepped Model of Care being implemented as part of the wellbeing offer.

Undertake scoping exercise / gap analysis exercise to determine what our future well-being offer for 2022-24 will be	X	X	X	X	PO 2A		SEPT 2022	Comprehensive staff survey completed and being used to inform next steps.
The Health Board needs to identify the areas where emotional and psychological support (e.g. respiratory, covid wards, ICU) are needed most and target them specifically to allow them to pause and reflect.	X	X	X	X	PO 2A		MAR 2022	OD commissioning group in place, channelling the right people to the right support
There is also a need to review intense working arrangements, across clinical and administrative services by proactively encourage breaks, taking time away from the ward / computer and give people the ability to review and action.	X	X	X		PO 2A		DEC 2022	Agile Working Review completed and policy in final development stages.

5. Building on our Covid team spirit

The vision: Invest our time and energy to build strong teams, building on the team spirit that thrived during the pandemic.

"Feeling appreciated and valued "is an important jigsaw piece in our People Culture Plans and will be a key focus for us. The Cultural Intentions we have committed to here are:

Intention 7 – You want to stay working with us

Intention 8 – Supporting you at each stage of your working life with us.

"Collaboration and teamwork" is also an important jigsaw piece in our People Culture Plans and will be a key focus for us. The Cultural Intentions we have committed to here are:

Intention 9 – Our teams collaborating together for better patience/client/service user care

Intention 10 – Showing each other compassion

Intention 11 – Valuing everyones' role and contribution

ACTION	STRATEGIC ALIGNMENT				PLANNING OBJECTIVE	RAG RATING	BY WHEN	PROGRESS
	Discovery Report	Your Well Being Matters	Staff Survey	MES				
Embed the ability for reflective actions – enabling teams to take time out and reflect when needed;	x	x	x		PO 1A		MAR 2022	OD Intervention Support provided to encourage reflection, both personal & collective.
Develop People culture plan framework to co-produce vision with teams	x	x	x	x	PO 2C		APR 2022	Completed
Develop a coaching programme to support our leaders to enable team spirit, autonomy and responsibility	x	x	x	X	PO 1B		MAR 2022	Completed and 5 coaching cohorts underway with the first coaching graduation ceremony conducted in May 2023.
Creating a rolling 'You Said, We Did' programme to show staff how we are listening to their feedback and achieving impact	X	x	x	x	PO 1A		MAR 2022	The You said, We did programme is now in place and supports the Staff voice agenda and relevant actions.

6. Encouraging Learning and Innovation

The vision: Develop ways of working that focus on continuous learning, quality improvement and innovation

"Autonomy, empowerment and responsibility" is an important jigsaw piece in our People Culture Plans and will be a key focus for us. The relevant Cultural Intentions we have committed to here are:

Intention 15 – Empowering you to lead on your own development

Intention 16 - Trusting you to be responsible and accountable

ACTION	STRATEGIC ALIGNMENT			MES	PLANNING OBJECTIVE	RAG RATING	BY WHEN	PROGRESS
	Discovery Report	Your Well Being Matters	Staff Survey					
Embed shared learning opportunities across the health board to ensure that there is dissemination of good ideas and practice	x			X	PO 2A		MAR 2022	A range of OD channels opened including: • OD Intranet Page • Work in Confidence Platform • Staff Psychological Wellbeing Page • Innovation Ideas Hub Launched.
Facilitate learning events to identify creative ideas about how we can continue to evolve as an organisation	x				PO 2A		MAR 2022	Learning events programme fully resumed such as: Medical Leadership & Clinical Leadership Forum Conference for Nurses; Medics Attendance at Conferences Educational Programme provision internally and externally
Create a virtual Ideas Hub – a place where staff can submit ideas for improvement, supported by a clear and simple decisiob making process	x				PO 2A		MAR 2022	Hub established & launched across the region with LA partners.
We need to adopt a learning culture and embrace opportunities to learn and improve. There is so much to learn across all parts of the system in how we dealt with the pandemic and we have to be open to understanding how this informs our future.	x	x	x	X	PO 2A		MAR 2022	Improving Together Service & Engagement Dialogue now firmly established with service and corporate directorates.

Report on the Staff Wellbeing Needs Survey October - December 2022

1. Background
2. What we did
3. The Results
4. Key themes
5. Next steps

1. Background

The landscape of wellbeing at work has continued to evolve since the pandemic, with greater emphasis on understanding the factors that enable staff to remain well and engaged in the face of challenges and on how effective recovery can be supported if they have experienced difficulties. These include experiences such as burnout, empathy and compassion fatigue, and moral distress. The psychological wellbeing and mental health of our staff remains at the core of Hywel Dda University Health Board's (HDdUHB) ability to provide safe, effective patient care, to innovate and facilitate change and to address the challenges of retention and recruitment.

The Staff Psychological Wellbeing Service (SPWBS) has retained its focus on prevention, contributing to a culture of wellbeing and providing a stepped care approach. This includes access and signposting to evidence based mental health resources; information and resources to boost individual, team and leadership wellbeing; and rapid access to appropriate psychological support where this is needed.

The planning objectives for Our People include a focus on engaging with and listening to our people to ensure we support them to thrive through healthy lifestyles and relationships (PO 2A). The Discovery Report Action Plan (2022) stated a need to create greater awareness and focus among managers and staff of what support we have for staff wellbeing. Additionally, it outlined that initiatives should be employee led and adapted to suit various workforce challenges and demographics.

The SPWBS makes use of regular feedback from all its activities to enable continuous reflection and improvement of service provision. However, views of those not accessing the service were needed to provide a bigger picture and enable more finely tuned adaptation. We wanted to find out more directly from staff what they were aware of, what issues were affecting them and what they think is needed to improve how HDdUHB supports the mental health and wellbeing of all its employees. Staff voice is essential as a foundation for designing and delivering appropriate and effective wellbeing support.

2. What We Did

The SPWBS team designed the Staff Wellbeing Needs Survey with the wider strategic context of other significant pieces of work in mind:
- The Discovery Report June 2021
- Your Wellbeing Matters (nursing staff)
- The NHS Staff Survey
- The Medical Engagement Scale

Given the above, this survey was not aimed at comprehensively measuring the wellbeing of staff, rather it focused on the views of staff around what is needed to support their wellbeing. It was launched on World Mental Health Day, 10 October 2022 and remained open for nine weeks. The survey was available bilingually, both digitally in MSOffice Forms and in paper format. It included sixteen questions, three of which were free text. This provided quantitative data as well as important narrative to describe staff experience and need. The promotion plan included:
- Global emails & email networks/groups
- Intranet & our SPWBS SharePoint pages
- MSTeams channels including our Wellbeing Champions
- Staff Networks and Newsletters
- QR code posters for distribution in staff areas including our libraries.

We needed to reach staff who are not usually online or perhaps have limited access to the main network. We therefore worked with the Organisational Development (OD) Relationship Manager team to extend our reach. Paper returns were added to the online database and together these provided live feedback on lower areas of response. This enabled targeted promotion which did improve take up. Lower response areas in the first few weeks included Bronglais Hospital, Ceredigion Community, Withybush Hospital, Medical and Dental staff and Estates and Ancillary staff.

The data was analysed with the assistance of the OD Workforce Experience team, qualitative analysis supported by members of the SPWBS.

3. The Results

In total, 1775 of our employees took the time to fill out the survey, 12.3% of all staff in post at that time. This was higher than anticipated and significant given the challenges of workload and time, as well as the number of surveys that staff are invited to complete. It suggests a sound level of engagement and interest in wellbeing at work issues: staff are keen to let us know their views. This echoes the message highlighted in the Discovery Report that staff want to be listened to and share their experiences in order to help services improve.

There were 15 returns in Welsh and 1760 in English. 50 were paper returns with the remaining 1725 using the online version.

In understanding the data the following contextual issues need to be considered:
- The issues surveyed are complex & the data reflects this
- There is no clear causality but we can look at correlation
- People have a diverse range of views & experiences - everybody's opinion matters
- Individual experience changes according to many variables within a shift, a week & over the course of a few months – the data reflects a point in time
- Although the response rate was much higher than expected, the sample size was limited – it tells the story of those who chose to engage

3.1 Demographics:
The first 5 survey questions related to demographics and the following trends in relation to overall Staff in Post were noted:

Staff Group:
The following staff groups well represented:
- Nursing and Midwifery registered
- Allied Health Professionals
- Administrative and Clerical

Staff groups underrepresented:
- Medical and Dental
- Estates and Ancillary
- Additional Clinical Services

Main location/base: There was a good spread across all acute and community sites
Gender: Females were well represented and males were underrepresented
**Age:** Staff between the ages of 41-60 were more likely to respond with the lower (16-40) and upper age ranges (61+) underrepresented
Years of service: Staff with 11 or more years of service were better represented

This spread gives suggestions of staff groups which need to be better targeted in future surveys to ensure proportionate representation and hearing staff voice across all characteristics. Further work could also be done to understand if areas of underrepresentation were due to a lack of awareness of the survey; greater pressures in finding time to respond and/or lack of motivation to engage with it.

3.2 Mental Health:

3.2.1 Wellbeing
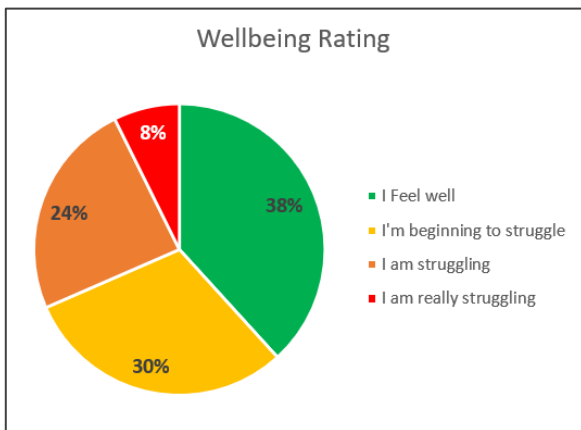
A single four-point rating scale was used as a very broad assessment of emotional wellbeing.

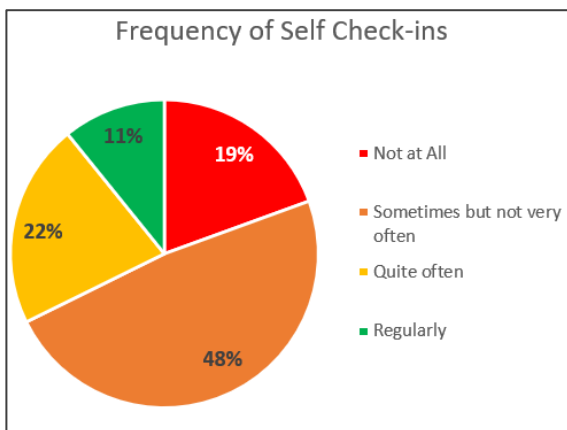A cross-tabulation of wellbeing ratings with demographics showed the following trends:

- The locations with the higher ratings of wellbeing were Bronglais Hospital and Corporate Services
- Locations with the lowest ratings were Carmarthenshire (both Glangwili and Community bases) as well as Primary Care Services
- Females were more likely to report some degree of struggle while males were more likely to report feeling well
- The overall age trend was that the older age ranges were more likely to report higher wellbeing. The age range with the lowest ratings was 16-20 years.
- The staff group with the highest wellbeing ratings was Estates and Facilities, the rest were fairly evenly spread

3.2.2 Frequency of self check-in

Paying attention to how we feel and noticing if we are starting to experience signs and symptoms of struggle gives us the opportunity to take early action to safeguard our mental health.
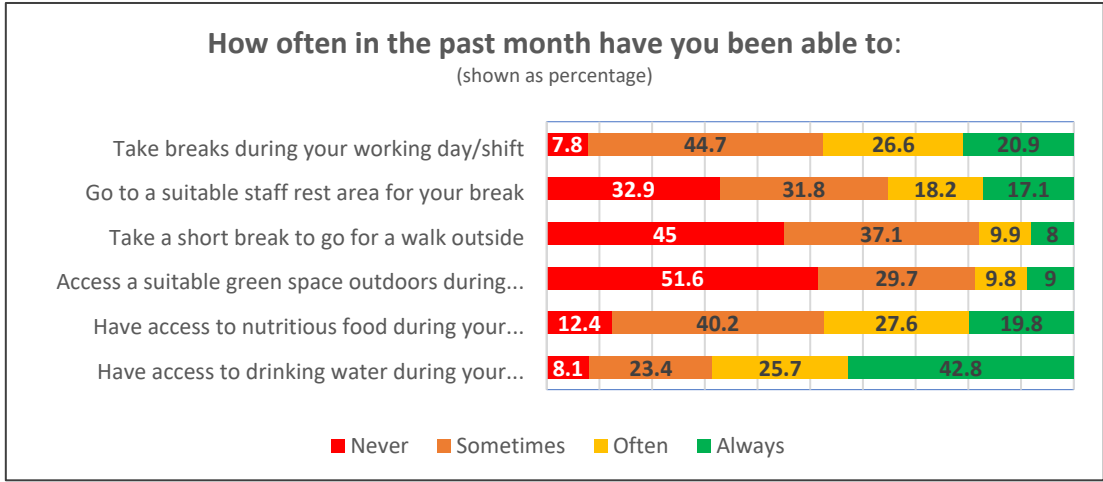

Cross-tabulation of the frequency of self check-ins with staff group showed that Allied Health Professionals do so most regularly and Estates and Ancillary staff are most likely to not check in at all.

Cross-tabulation of Wellbeing Rating with the frequency of Self Check-ins showed that:

- Those most likely to indicate that they are really struggling have the lowest frequency of self check-ins
- Those most likely to indicate they are feeling well are also more likely to have frequent Self Check-ins

3.3 Rest & Recovery:

Taking breaks during working hours to rest and recharge is essential for sustaining performance, wellbeing and quality of care. We know it can be difficult for some staff to take effective breaks and need to understand more about patterns of behaviour across teams.

How often in the past month have you been able to:
(shown as percentage)

	Never	Sometimes	Often	Always
Take breaks during your working day/shift	7.8	44.7	26.6	20.9
Go to a suitable staff rest area for your break	32.9	31.8	18.2	17.1
Take a short break to go for a walk outside	45	37.1	9.9	8
Access a suitable green space outdoors during...	51.6	29.7	9.8	9
Have access to nutritious food during your...	12.4	40.2	27.6	19.8
Have access to drinking water during your...	8.1	23.4	25.7	42.8

■ Never   ■ Sometimes   ■ Often   ■ Always

Staff groups least likely to be able to take breaks were:
- Medical and Dental
- Nursing and Midwifery
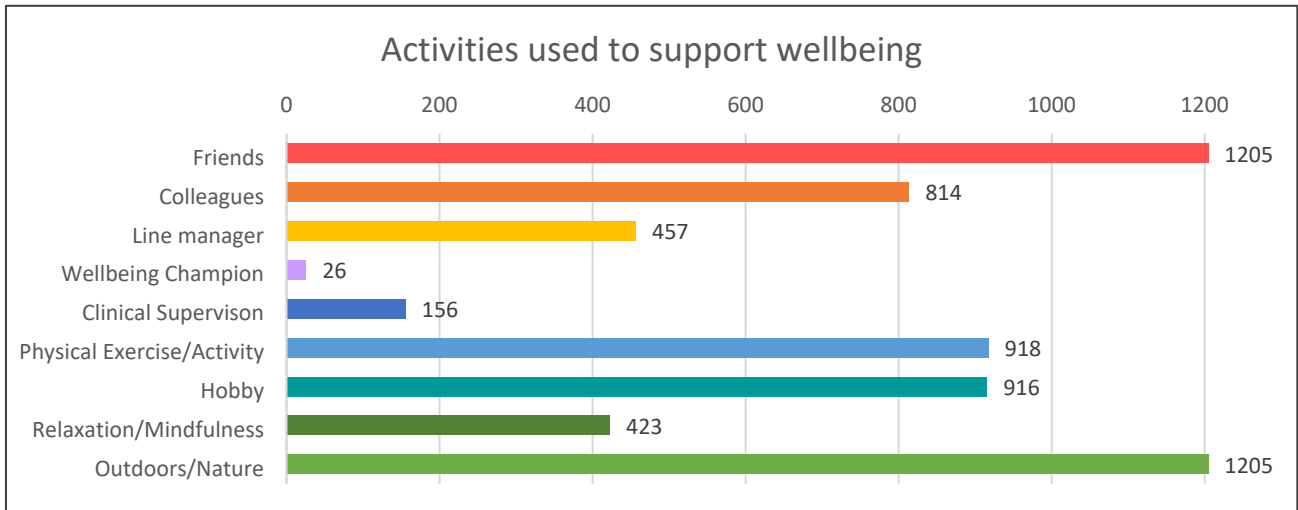- Allied Health Professionals

Staff groups most likely to be able to take breaks were:
- Estates and Ancillary
- Healthcare Scientists

Cross-tabulation showed clearly that the ability to engage in each of the above aspects of rest and recovery were positively correlated with higher ratings of wellbeing.

3.4 Activities used to support Wellbeing

Personal preference is key in terms of activities to support wellbeing. We were interested to see if there were any trends in the type of activities staff were using to protect, maintain or improve their emotional wellbeing.

Activities used to support wellbeing

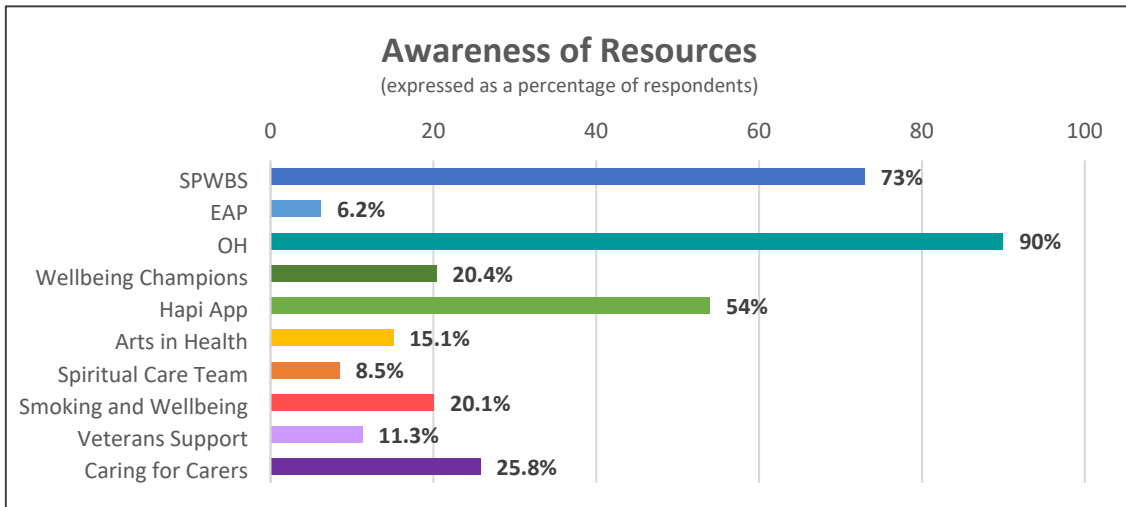| Activity	Value
Friends	1205
Colleagues	814
Line manager	457
Wellbeing Champion	26
Clinical Supervison	156
Physical Exercise/Activity	918
Hobby	916
Relaxation/Mindfulness	423
Outdoors/Nature	1205

Seeking support from friends and family is the most common, on an equal footing with spending time in nature and outdoors. This suggests that achieving a balance between working life and personal life is key. The preference of staff to spend time outdoors and in nature suggests that it might be useful to increase access to this during working hours as an effective means of rest and recovery.

The lower ratings given to how often staff seek support from Wellbeing Champions or make use of their own clinical supervision suggests that further work in this area in terms of access and promotion would be useful.
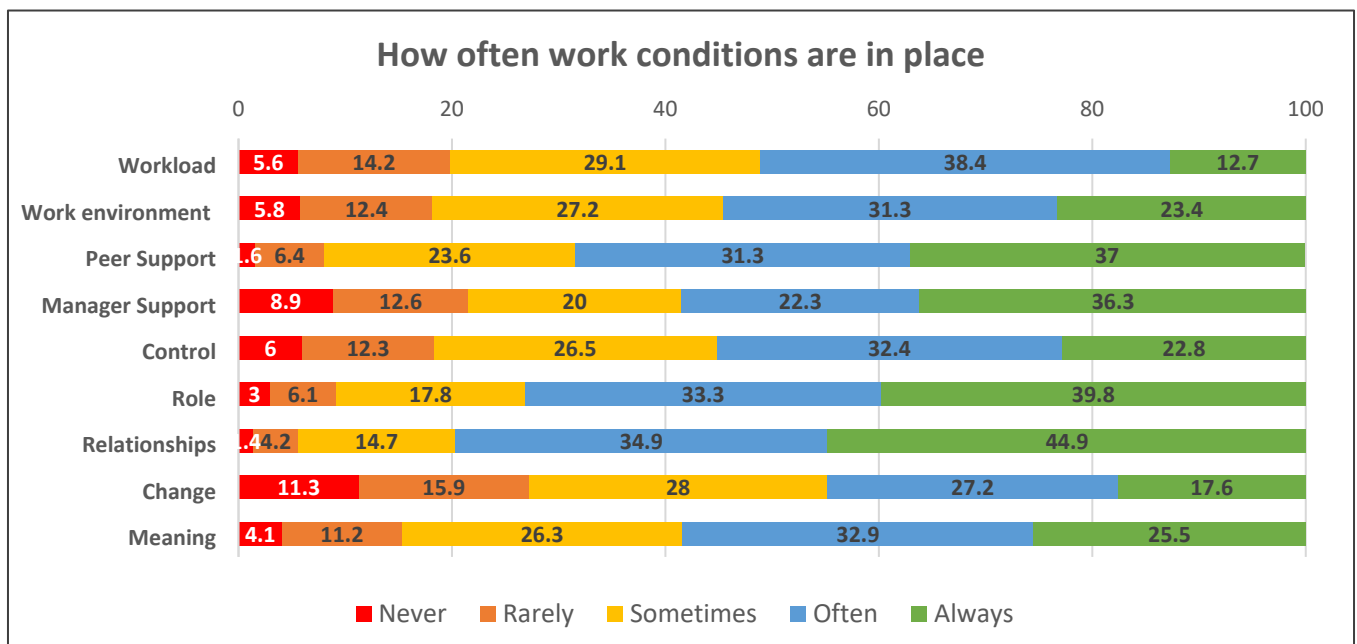
3.5 Awareness of resources:

Being aware of the wide range of resources and services on offer is a key aspect of sustaining wellbeing at work. The responses on this question demonstrate that while some services are well known, some are not, and work is needed across all to continue increasing visibility.

Awareness of Resources
(expressed as a percentage of respondents)

Resource	Percentage
SPWBS	73%
EAP	6.2%
OH	90%
Wellbeing Champions	20.4%
Hapi App	54%
Arts in Health	15.1%
Spiritual Care Team	8.5%
Smoking and Wellbeing	20.1%
Veterans Support	11.3%
Caring for Carers	25.8%

The Staff Psychological Wellbeing Service offers a range of resources to support individual, manager and team wellbeing. The one-to-one psychological support and SharePoint site are best known and used but all the other aspects of service provision remain relatively unknown. There is a clear need for further promotion and increasing accessibility.

3.6 Workplace conditions

Maintaining wellbeing at work is a shared responsibility. There are things we can do as individuals to care for ourselves and maintain our resilience. There are also conditions at work that will either promote or undermine the mental health and wellbeing of staff, regardless of how resilient they are. Respondents were asked to indicate how often a range of work conditions (based on the Health and Safety Executive's Stress Management Standards) had been in place for them in the past month.

How often work conditions are in place

Condition	Never	Rarely	Sometimes	Often	Always
Workload	5.6	14.2	29.1	38.4	12.7
Work environment	5.8	12.4	27.2	31.3	23.4
Peer Support	1.6	6.4	23.6	31.3	37
Manager Support	8.9	12.6	20	22.3	36.3
Control	6	12.3	26.5	32.4	22.8
Role	3	6.1	17.8	33.3	39.8
Relationships	.4	4.2	14.7	34.9	44.9
Change	11.3	15.9	28	27.2	17.6
Meaning	4.1	11.2	26.3	32.9	25.5

Work conditions that are more likely to be present:
- Good relationships
- Clarity of role
- Peer support

- Manager support

Work conditions that are less likely to be present:
- Manageable workload
- Good change management

Cross-tabulation of work conditions and staff groups showed that:

	Higher for these staff groups:	Lower for these staff groups:
Manageable workload	Admin & Clerical Estates & Ancillary	Allied Health Professions Additional Prof Sci & Tech Medical & Dental
Work environment safe/fit for purpose	Admin & Clerical Estates & Ancillary	Medical & Dental Allied Health Professions
Peer support	Additional Prof Sci & Tech Nursing & Midwifery	Medical & Dental Estates & Ancillary
Manager support	Admin & Clerical Nursing & Midwifery	Healthcare Scientists Medical & Dental Additional Prof Sci & Tech
Control over how you work	Estates & Ancillary Admin & Clerical Additional Prof Sci & Tech	Medical & Dental Additional Clinical Services Healthcare Scientists
Clarity of role	Estates & Ancillary Additional Clinical Services Healthcare Scientists	Allied Health Professions Additional Prof Sci & Tech Admin & Clerical
Good relationships	Additional Prof Sci & Tech Nursing & Midwifery Healthcare Scientists	Estates & Ancillary Medical & Dental
Change is managed well	Allied Health Professions Admin & Clerical Nursing & Midwifery	Medical & Dental Healthcare Scientists Additional Clinical Services
Meaning and purpose	Healthcare Scientists	Medical & Dental

Of concern here is that those Medical and Dental staff who took part rated 8 out of 9 working conditions (all except clarity of role) in the lower ranges. As these are all considered hazards with the potential to lead to work related stress, this staff group are especially at risk.

3.7 Barriers to knowing about or accessing resources
There were 3 main clusters of barriers that might prevent staff from knowing about or accessing resources designed to support their mental health and emotional wellbeing:
1. Awareness: Not hearing about what is available
2. Time: Not having the time to look into what is there or to make use of anything during working hours
3. Stigma: Concerns about confidentiality or what others might think, worry it would be a sign of weakness, not wanting their manager to know, worry it would affect their career prospects

The three free text questions gave details of what else impacts on experience at work (both positively and negatively) as well as suggestions for what else could be done to improve workplace wellbeing. This data was coded into themes and those themes most commonly described are given below.

3.8 Impacts on Experience at Work
The most commonly reported elements with a negative impact on wellbeing at work were as follows with the staff groups most frequently reporting this in brackets:
- Work pressure
  "Too much to do, not enough time, team stretched"
- Management

"Things like being told by my manager that I shouldn't be filling this survey in because I have too many other things to do"
"I have found it difficult to be open with my manager, and haven't felt able to challenge the sometimes confrontational and negative approach used by them"

- Work conditions
  "The volume of complex issues that are being raised"

  "Getting constantly asked to move to other ward areas to work or having to travel an hour and half in a taxi to another hospital to work"
- Staffing
  "Lack of staff to be able to manage the growing waiting list of patients"

The most commonly reported elements with a positive impact on wellbeing at work were:
- Work colleagues
  "Being in a very nice, friendly and accommodating team who get along and work well together, this makes it easy to get up and go to work"
- Culture
  "Team atmosphere, common team goal, supportive work environment, supportive line management"
- Management (Estates and Ancillary)
  "The continued support from my Line Manager has been invaluable, if it weren't for their understanding of my struggles, I fear I would have had to give up my job. My line manager really understands about mental health and wellbeing and provides me with excellent advice and makes the necessary adjustments where and when I need them."
- Work conditions
  "The ability to flexibly work, ie take a walk when the weather is good and catch up with emails later (out of traditional office hours)"
  "We [are] fortunate to be able to see a green space out of the office window. Having a place away from the office to eat lunch"

It is interesting to note that both management and working conditions appear in both lists. These are elements of workplace culture that are central to wellbeing at work. Work pressure and staffing are very commonly shared issues contributing to negative impacts on wellbeing. Where peer relationships are sound and the team culture is supportive, these have a positive impact on individual wellbeing.

3.9 Suggestions to support mental health & wellbeing
A wide range of suggestions were made by respondents as to what else could be done to support wellbeing. These can be themed into five main areas:
- **Systemic solutions:** the need to address the root causes in the system and not place increasing emphasis on individual responsibility to maintain wellness
  "Improving work environment , better staff break rooms and working areas. A place on ward areas to hold confidential discussions"

  "Protected (guaranteed) time to have a break to eat, rest or walk outside, social and team building activities to support bonding of the whole team for positive outcomes A management team that is approachable and proactive in supporting staff during this difficult time"

- **Better awareness** of what is available with easier access and guidance on what to use when
  "I was unaware of the things offered to staff. I work in the finance department, and I don't think many people here are aware of the support available. "

  "I feel things are too confusing/hard to find on share point, when high levels of stress and anxiety are in play, I don't have the mental capacity to go searching through stuff and trying to figure things out."

"Make the information clearly available, not many nursing staff have the time to use the computers on shift so do not know about any of the services available."

- Improved and more supportive **leadership**
"Less micromanagement by middle management"

"A management team that is approachable and proactive in supporting staff during this difficult time and there on"

"I personally think managers need more training on how to improve staff wellbeing. It is pointless to offer mental health support to admin staff if managers from all departments make it their mission to ruin any progress made."

- **Improved culture**
"In all honesty, I think the majority of the staff here need appreciation from the health board. Since being with the health board, we are all just a number"

"The HB needs to recognize that back-to-back team's meetings are not conducive to health and wellbeing at work and there needs to be guidance on what is an acceptable amount of teams meetings to attend each day and that staff can decline to attend meetings if their teams meeting diary is unacceptable to a reasonable work/break schedule and not be held to account for this decline."

"e-mail etiquette charter for HDdUHB maybe Wednesday PM no non urgent e-mails"

- **Additional resources** of various kinds
"Need more 1 day recovery in nature wellbeing days being offered should be given not requested to be used annual leave"

"Need more Counsellors to cut waiting times"

"I would really like to access a course / training on good ways to manage emails and make best use of the online tools available such as SharePoint"

4. Key themes:

Five key themes emerge from the survey data, and these provide the basis for action going forwards:

4.1 Raising awareness
The survey gives us an outline of levels of awareness about the range of wellbeing services and resources available to staff. This is good in relation to some services but there are obvious gaps and one of the key barriers identified by staff was not hearing about what is available. More therefore needs to be done to promote services and to target key areas, using a range of media to increase accessibility.

4.2 Rest and recovery
Having regular good rest and recharge periods within the working shift is essential for sustained performance, wellbeing and compassionate care. The survey highlights the need to address our culture of taking breaks and the access staff have to appropriate facilities to support this.

4.3 Early mental health check-ins
Having insight into our own levels of wellbeing and how this can fluctuate is a key aspect of being able to take early action. While many respondents are regularly checking in with their emotional

wellbeing, many are not and this potentially identifies a risk to deteriorating mental health with adverse consequences at both an individual and system level.

4.4 Tackling stigma

There were an array of factors reducing the likelihood that staff would reach out for support and this does reflect the ongoing stigma prevalent in our society. This has shifted in recent years with national campaigns but the survey data suggests that it continues to deter staff from using the range of services on offer.

4.5 System solutions

The need for solutions that address the root issues impacting mental wellbeing at work and for improved communication about what is already being done and what is planned. Staff need to know more about the range of different pieces of work underway across WF&OD – upstream work that is specifically designed to support experience and foster greater wellbeing.

5. Next steps

Key theme	Objective	Work to date	Next steps
1. Raising Awareness	To continue to raise awareness across all areas and staff groups of the range of services and resources that are available to support mental health and wellbeing at work	• SPWBS monthly short webinars outlining support available • Designing the new Staff Health & Wellbeing Gateway • SPWBS contribution to Wellbeing Days held at various venues – to have a physical presence and promote the service • Redesign of the SPWBS SharePoint page to make information and resources easier to find	• Ongoing promotional campaign for the SPWBS with key resources highlighted on a monthly basis (ongoing) • Design and distribution of key resources in paper format (posters and cards) – September 2023 • Launch of the online Gateway between May – July with promotional materials planned for distribution in autumn
2. Rest & Recovery	To create a culture across Hywel Dda in which taking good breaks is prioritised, supported and enabled	• Online workshops on Rest & Recovery facilitated for various teams/services • Rest & Recovery forms a key part of SPWBS input into ongoing programmes such as Nurse Preceptorship, Junior Docs, LEAP • Fostering good habits of wellbeing & recovery through the Ecotherapy Retreat and Recovery in Nature Day programme for staff	• Development of a comprehensive strand of work/campaign to share knowledge, identify and address barriers and to shift culture – Oct-Dec 2023
3. MH Check-ins	To promote wellbeing check-ins (awareness raising, building skill) as a means of picking up early warning signs	• Mental Health Awareness training provided to Wellbeing Champions • Signposting to Wellbeing Plans on SPWBS SharePoint page • Inclusion in the LEAP session on Personal Resilience and in sessions shared with other staff groups e.g. Junior Doctors	• Development of new "Check in with yourself" toolkits, support sessions (online and in person) and promotion, launch in October 2023
4. Tackling Stigma	To create a culture in Hywel Dda in which saying you are struggling and asking for emotional support is normalised and a safe thing to do	• We promoted Time to Talk Day on 2nd February 2023 • Promotion of Time to Change Wales in our service SharePoint pages • Hywel Dda continues to be a signatory of the Mindful Employer Charter	• To work with the Strategic Partnerships team on reinvigorating the Time to Change programme – time frame tbc
5. System solutions	To support the underlying workplace conditions in teams that enable good mental health and the experience of good work	• Work of the OD Commissioning Group • Ongoing work of the OD Relationship Managers with the People Culture Pans and of the Culture and Workforce Experience Team • Ongoing work of the OD Leadership Development team	• Next phase of the Discovery Process

Feeding back to staff using a "You Said …We Did" approach is essential and the foundation for this has already been created in digital format in SharePoint. Outcomes and actions arising from and linked in with the survey require a coherent and broad OD communications strategy to keep informing staff about how their views are having impact.

Ideally, the survey will be repeated again within an 18-month period to track change and emerging themes over time. Enabling staff to have a voice in this way, allows for ongoing service improvement firmly anchored in what staff say they need. This will need to be coordinated appropriately with the other surveys, nationally and locally.