Sandwell and West Birmingham Hospitals **NHS**

NHS Trust

| Report Title | Internal Communications Plan: Face to face in quarter 4 | | |
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| Sponsoring Executive | Ruth Wilkin, Director of Communications | | |
| Report Author | Ruth Wilkin, Director of Communications | | |
| Meeting | Trust Board | Date | 1st November 2018 |

## 1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on]*

The Trust has reviewed its face to face communication activity as part of our **we**connect programme to improve colleague engagement. The audit of activity suggested that there are gaps in face to face communications in some teams and there is a particular need for teams to focus on how face to face communication is carried out to include people who work at night.

The Board is invited to review the actions recommended to take place between January and March 2019 to improve internal communications.

## 2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

| Safety Plan | | Public Health Plan | | People Plan & Education Plan | x |
|---|---|---|---|---|---|
| Quality Plan | | Research and Development | | Estates Plan | |
| Financial Plan | | Digital Plan | | Other *[specify in the paper]* | |

## 3. Previous consideration *[where has this paper been previously discussed?]*

n/a

## 4. Recommendation(s)

The Trust Board is asked to:

| a. | **CONSIDER** the results of the face to face communications audit. |
|---|---|
| b. | **DISCUSS** the proposed activity to improve internal communications in quarter 4. |
| c. | **AGREE** the recommended actions. |

## 5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

| Trust Risk Register | | Risk Number(s): n/a | | | | | |
|---|---|---|---|---|---|---|---|
| Board Assurance Framework | | Risk Number(s): n/a | | | | | |
| Equality Impact Assessment | | Is this required? | Y | | N | x | If 'Y' date completed | |
| Quality Impact Assessment | | Is this required? | Y | | N | x | If 'Y' date completed | |

**SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST**

**Report to the Trust Board: 1 November 2018**

**Internal Communications Plan: Face to face communication in quarter 4**

**1.      Background**

**Audience segmentation**

1.1    The Board is familiar with the activities that were carried out to better understand our workforce in terms of their access to our corporate communications systems and the time that their role offers them to be connected to those systems. This audience segmentation work generated nine role profiles with four of these being management roles. Importantly, this work clearly outlined our challenges in reaching all employees with almost 50% of our workforce spending 95% of their time delivering the core function of their role without time or access to our digitally based communications systems, primarily email and our intranet – Connect.

**Non-desk based worker actions**

1.2    During 2017/18 the internal communications team developed a plan to improve communication with non-desk based workers. This included:

- Launch of a new app, MyConnect, that colleagues can download onto personal smartphones
- Revamped monthly team brief – now called Team Talk – with expected attendance from senior managers within the organisation
- Continuation of payslip attachments including staff magazine, Heartbeat
- Introduction of digital Heartbeat which means news is shared as it happens with a round up at the end of the month.
- Rapid improvement approach – a framework for communication in shift-based services

**Impact of actions**

1.3    To date 1300 colleagues have downloaded MyConnect and our trajectory is to increase by 50% by October 2019 (650 more users). MyConnect has proved particularly popular with teams that we intended it to be most beneficial for including ward services officers, porters and transport colleagues. A ward services officer commented, "The app is fantastic. Because of my job, I always felt so removed from what was going on in the Trust. Now I can read all the communications and news on my phone." The weekday email bulletin now has around 5000 opens within the first 24 hours (not necessarily unique). Much of the improvement of this can be related to the additional reach via MyConnect.

1.4 Attendance at Team Talk is improving and yet still lacks attendance from some senior managers who should be present. We will ensure attendance is mandated and monitored, recognising the minority of exceptions for extant clinical commitments.

1.5 Heartbeat has now developed in an online digital format that has more video content for colleagues. This is proving popular and will further develop. The idea is to generate and push out content as the news happens and then have Heartbeat as the monthly round up. Payslip attachments remain a core way to ensure reach to every employee.

1.6 The rapid improvement approach framework has previously been discussed in Board meetings and sets out a system of shift-based huddles and handovers to ensure reach with all colleagues, including night staff, who are often overlooked. This approach was successful in one or two wards per group but has not been sustained or expanded to cover other areas.

**2. Audit of face to face activity**

2.1 We know from data in Your Voice and feedback from Team Talk sessions that there are some consistent gaps in data points indicating that in some areas regular face to face meetings are not routine. Our Speak Up Day on 19th September highlighted that improved communication was a priority for many who voted in our poll. On speaking to people about this, the concern was more about information being shared by people's local manager, rather than corporate or global communication.

2.2 In order to understand the spread of face to face activity across the Trust we carried out an audit of face to face meetings. This audit included a survey to all managers. 334 managers responded to the survey. We also tested the results by interviewing 100 colleagues from 28 departments across a range of shifts included night shifts.

2.3 Results from this audit showed that:

- Face to face communication is taking place within the majority of teams at least on a monthly basis, however, it should be noted that 6 responders stated that they never held meetings with their whole teams. 36 (10%) stated that team meetings rarely took place. When team meetings occur, information shared includes:
  o Team priorities and objectives
  o PDRs
  o messages from directorate/group leads
  o Information gained from Team Talk.

2.4 Managers who responded to the survey also revealed they would like extra support to help communication with their teams. Support required includes:

- Toolkit on how to run meetings including draft agendas – 61%
- Communications for managers directly from executives - 53%

- A closed Facebook group for managers – 49%
- Podcast of key information to download – 34%

2.5 Managers also value face to face briefings that are provided through sessions such as Team Talk. Just over 49% would like to see more of this.

2.6 The communications team has carried out 100 face to face interviews with colleagues in 28 departments. Interviews have been conducted across a range of shifts including nights.

2.7 Departments approached include:

- Transport
- Ward services
- Wards and departments at City, Sandwell, Rowley and Leasowes.

2.8 A key theme from the interviews is that meetings often tend to happen when many colleagues are not able to attend – this could be due to work commitments, shift patterns or meetings occurring at a different site. Colleagues also feel there isn't sufficient time allocated to meetings making it difficult for teams to meet frequently as patient care has to always come first. The general feeling is that more if more resourcing was allocated to teams then every team member would have the opportunity to attend a team meeting.

2.9 It is worth noting that although the face to face audit with managers revealed meetings are happening at least once a month, for the reasons highlighted in the paragraph above, the responses from the teams is that many colleagues are not involved in these meetings.

- 34 respondents say they rarely attend whole team meetings with 11 reporting that they have never attended a team meeting
- 22 people reported that 121s with line managers are happening on an annual basis usually at the time of their PDR. 16 reported that they had never had a 121 meeting with their line manager.

2.10 For colleagues who work night shifts the most common form of communication is:

- Email – 35%
- Handover - 30%
- Attending meetings – 14%

2.11 Half of all responders say topics discussed at meetings are mainly team priorities and developments.

2.12 As part of the work going forward the communications team will work with managers to help develop the support identified (above) as necessary to aide with communication. This will include a toolkit on how to run a meeting and briefings for managers from the executive team.

2.13 It is anticipated that as part of the **we**connect programme we will be able to support managers in identifying suitable times for meetings to ensure as many members of the team as possible are available. As well as working with teams and managers to develop other mechanisms to communicate with colleagues that are not able to be part of meetings.

**3.    Recommendations: Improving face to face communication in quarter 4**

3.1    Improving face to face communication will support our engagement efforts with teams as part of our **we**connect programme. In quarter 4 (January to March 2019) we will:

- Build more support for managers to help in their face to face communication with manager briefings on key topics. This will include – FAQs and top tips for meetings.
- Re-engage with nurse leaders over the rapid improvement approach to support ward teams and shift-based services and develop a support plan for communication with people who work at night.
- Target groups and directorates where there are gaps to face to face communication via the group leadership to ensure they are aware of the face to face activity within their groups, that they understand their gaps and can act to ensure face to face communication takes place.
- Engage 12 teams for intervention via our **we**connect programme and learn from their experiences, engaging a further 13 teams during 2019/20.
- Ensure that our monthly team briefing, Team Talk, has the right attendance and that onward briefing happens as a result.
- As part of the new accredited managed modules, reinforce the importance of face to face communication.

3.2    Actions identified will be monitored by the People & OD Committee.


**Ruth Wilkin**
**Director of Communications**
**October 2018**