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Eight drivers of workforce retention in health and care | Webinar | Transcript



Ben Russell (00:02)

Hello, everyone, and thank you for tuning into this webinar on the eight drivers of workforce retention in health and care. We'll kick off. I will introduce our small panel for today. So, my name is Ben Russell. I'm the Director of Customer Experience at ImproveWell. I'm joined by my colleague, Hannah Campbell, who is the Director of Partnerships and we're thrilled to also be joined by Dr. Na'eem Ahmed, who is the Chief Medical Officer and Co-founder of ImproveWell. Na'eem's also a full time clinician within the NHS and Founder of the NGO Selfless and an experienced Health Policy Advisor.

I'd like to just, kind of, set the theme and give a bit of an overview of what we're gonna cover today and why. So currently, the NHS faces a major workforce challenge with a predicted shortfall of up to 360,000 staff by 2036/37, and in 2022 alone, 9.1% of NHS employees left due to factors like pay, work-life, balance, career progression and wellbeing. And between March and June 2023, nearly half of frontline staff look for roles outside of the NHS.

So in response to this we, ImproveWell, commissioned a white paper called '*Delivering our promise to staff - engage, empower and retain*'. Essentially, the white paper took a deep dive into the workforce challenge and presented a framework for driving retention.

So today, we're going to revisit that framework, consider how NHS priorities have shifted over the past year and a half, and also explore what teams and organisations can do now in light of those changes.

(02:01)

So firstly, yeah, let's take a step back and look at how the framework was developed. So essentially, kind of, in 3 stages. Firstly, we conducted a deep dive into the scale, and the impact of the retention challenges facing the NHS.

We then conducted a desk based review of published evidence to identify key drivers. So you know, reasons for leaving or staying and then, there was kind of a stage of refinement of the framework with partners and fellow organisations to kind of validate, whether based on their experiences, if it all made sense and was helpful and practical.

And here we have the framework as outlined in the white paper. The structure of today's webinar is very simple. We're gonna talk through each of these levers in turn, and then ask Na'eem to kind of share his thoughts on how each one fits into today's healthcare agenda.

So to kick off with lever one I will pass over to Hannah to talk through the 1st lever.

Hannah Campbell (03:11)

Thanks, Ben, so I'm gonna talk through lever one which is Delivering high quality care.

So NHS teams that deliver high quality care are known to have better retention rates and more engaged staff. Safe staffing levels and adequate resources and a culture of quality improvement are all crucial to delivering high quality care.

As we know, high vacancy rates within health and care settings create significant operational challenges, and place increased pressure on already stretched staff. The result is a spiraling effect which we can see here in this slide and leads more people to opt to leave. As workload pressures intensify, staff experience greater levels of stress and burnout which adversely impacts their physical and mental health and ultimately prompts them to leave. This ultimately impacts quality of care and cost.

So Na'eem, thinking about this in the context of the Government's 10 Year Health Plan, and specifically the shift from hospital to community care. How might this affect the ability to deliver high quality care?

Dr Na'eem Ahmed (04:13)

Thanks, Hannah. So I think there's 2 aspects to this, the first from the view of a patient, and that's why we're here and we're doing this, is that, having their care closer to their home will ultimately be better for the patient, and I think we have historically thought that all care should be delivered in hospitals. And now we are increasingly aware that actually, if we can keep people at home in the community for longer, ultimately that would be a better outcome for the patient. For us, in terms of working with staff, what does that mean? That means that, actually, healthcare organisations become increasingly complex. So they're working across settings, they're working both in secondary, primary care, they may be working across digital. We've seen an increase of remote working and that's not just in the private sector, that's across the National Health Service in various parts of it, and therefore with an increasingly complex organisation, how do you ensure that staff remained focused, motivated, engaged,

becomes a key concern, and therefore, I think, to deliver the high quality care to those patients will mean that we need to also be thinking of, okay, as our organisations become increasingly complex to deliver on that 10 Year Plan, What are we going to do to get our workforce ready for that?

Ben Russell (05:50)

Thank you both. So lever two focus is on Staff well-being and resilience.

So we know that happier staff deliver better patient care, reducing burnout, improving both physical and psychological safety are all crucial in creating a healthy work environment for staff.

An example that comes to mind would be from Dartford and Gravesham NHS Trust. After they saw the impact of the pandemic on staff, physical and psychological health. They launched a three phase Joy at Work programme and the results of this initiative were clear pretty quickly, there was increased job satisfaction, improved retention and reduced vacancies. They also saw a steady decline in agency spending and their staff wellbeing and stress related sickness levels were among some of the best in the NHS at the time.

So yeah, I guess our next question for Na'eem is, the 10 Year Plan talks about moving from sickness to prevention. So can we relate this to workforce well-being and resilience?

Dr Na'eem Ahmed (07:04)

I think so. We saw, you know, during the pandemic how my NHS colleagues rose to the challenge in terms of supporting the whole country really, in terms of mitigating the impact of COVID, and that took a huge toll on staff. What we did see was the NHS actually, and the wider community, recognising that and, you know, there was a lot of support out there for staff and helping them get through that. Now, once, you know, having overcome the pandemic. Now we've got the backlog and all these other things to catch up on.

We need to ensure that we continue to maintain the level of support for staff. The key word on everyone's lips is productivity. And actually to have productive staff, you need to have healthy and happy staff and keep them engaged, motivated will be a key component of that. And, as you've outlined, the best organisations are ones that have said, okay, we can see the impact that COVID and the current workload has had, but we're going to make sure that there are mechanisms in place to ensure that you feel engaged and happy within your workplace. Now traditional, the traditional healthcare model has been reactive. So we waited until we'd seen droves of staff leaving. We've seen high agency rates. We've seen high vacancy rates, etc. And then, suddenly the red light goes off and someone says, okay, we need to do something about it. But the proactive organisations will be looking at solutions to say, okay, how do we find out the problems before they surface? How do we ensure that we can keep our best staffing jobs and make sure they're motivated to continue? And ultimately, how does that all add up to better patient outcomes, and therefore those two, in terms of ensuring our staff are healthy, happy, and motivated, is intrinsically linked to wider well-being as outlined in the 10 Year Plan.

Ben Russell (09:17)

Thanks. We'll now jump back over to Hannah to talk through lever three.

Hannah Campbell (09:25)

Great. Thank you. So lever three touches and talks about work, life balance, so recent workforce data highlights that there are three main reasons why people tend to leave this is work-life balance, promotion, and relocation. Together these account for about half of all attrition. What's quite interesting is while work-life balance has become a bigger issue since the pandemic, the number of people saying that they leave for a better reward package has actually remained quite steady at around 5%, despite all of the sort of high profile pay discussions that we've all seen and we'll be aware of. A great example of tackling this challenge around work-life balance comes from the Royal Free in 2017, where they were facing a turnover of over 40% in nursing staff and decided to focus on improving joy at work. So staff highlighted that the flexibility and greater choice around shifts would help with this work-life balance, and in response the Trust introduced an electronic self-rostering, which led to a significant drop in turnover. I think this really proves that greater flexibility does play a role in how staff are retained within trusts.

So Na'eem, my question is, we're seeing a clear government priority coming around a shift from analog to digital. How might this address work life balance?

Dr Na'eem Ahmed (10:48)

Thanks, Hannah, I think you've outlined one of the key solutions which you know, for workforce might be things like self-rostering and giving people more control over their work patterns. I think that's really important. But the other part is that we know, in terms of people's attitudes towards work which has shifted since, I think, further shifted since COVID with people have looked at you know, their work-life balance, how they work, remote versus on site, all of those different things. So we need to have every single tool available to us, and something, for example, like ImproveWell, allows you to ensure that your staff are engaged in the process, and they might be working across the footprint. They might be at home, they might be in the community, they might be in the hospital. So that's one thing, and the other is that alongside, you know, pay which we know is obviously incredibly important, people are looking for meaning in their work. And actually, when we look at healthcare staff, that's even more important. We've got people who are inherent problem solvers coming into work and if we're not giving them every single avenue to be able to try and suggest solutions to problems, they will become unhappy and demotivated, and therefore actually having a digital tool to support them in doing that becomes of paramount importance.

Ben Russell (12:24)

Yeah, thanks, thanks both. And I think, yeah, Na'eem what you're addressing there actually leads pretty perfectly into lever four, which is all about Engagement and empowerment.

So research shows that the high engagement organisations perform better than low engagement organisations. And according to Gallup, these high engagement organisations demonstrate 70% better staff wellbeing, 32% better performance and quality, and 63% fewer patient incidents, as well as a myriad of other things, like better scores across absenteeism,

productivity, and less patient incidents. So giving staff a voice, listening and taking action is obviously a crucial part of creating an engaged, motivated and empowered workforce.

So a review of 3,500 ideas submitted by healthcare organisation staff through the ImproveWell platform found that 94% of ideas linked to at least one of eight key drivers of retention which are, you know, what we're talking about today, mostly ideas focused on two drivers which were, yeah, Delivering high quality care and improving staff well-being and resilience. This really highlights the power of staff engagement in shaping a positive and sustainable workplace.

So I guess the question at this point is, the 10 Year Plan is kicked off with a very in-depth consultation process. So how can we make sure that you know the engagement doesn't stop there and it continues throughout?

Dr Na'eem Ahmed (14:04)

So, well, every organisation has a responsibility really to ensure that their workforce is involved in both decision making, but also driving up quality of care, so that will ultimately be borne out in terms of the quality of care that they provide. And there are things that are linked to it, for example, CQC assessments and inspections which will determine, you know, what level of care they're providing and the standard of care they're providing, and therefore it becomes imperative on organisations to make sure their staff are engaged, because they will know that the evidence and research shows that if you do engage your staff, ultimately you get better patient outcomes. So with that in mind, away from a government consultation, every organisation should have this as something that's mission critical to them, and making sure that staff have their ways to improve the places that they work in and, the thing that I found, is those that are the sharp end of delivering are best place to find solutions, and if everyone buys into that, this becomes a non-negotiable.

Hannah Campbell (15:23)

Thank you. So, this is lever five, Reward and recognition. This lever not only refers to pay, but overall employee value proposition, including things like non-pay benefits and crucially recognition in the Royal College of Nursing Employment survey in 2021, 70% of respondents cited feeling undervalued as their main reason for leaving. This was followed by too much pressure, feeling exhausted and low staffing levels.

Recent pay disputes have also highlighted how inadequate reward and recognition can also impact, not just staff morale, but also patient care. Ensuring employees feel valued is key to improving retention and maintaining high quality care.

So Na'eem, obviously the ability to impact pay at a local level is pretty restricted. But what else can organisations do to impact this lever?

Dr Na'eem Ahmed (16:14)

Thanks, Hannah. So when you're in an organisation of several thousand people, I think it's really difficult for the leaders within that organisation to somehow demonstrate, and not just demonstrate, but act on, what their organisation is telling them, in a truly authentic way. But

what we found, actually, is that it's incredibly powerful when you know day one of the person starting the job, you put something in the palm of their hand, they've probably got a phone, but within that and say, here, look, we want to hear what you have to say. And actually, we will not just hear it, but we will let you know what we've done with that. And I think that when you've just joined an organisation or within your organisation, you can actually see not just the feedback, because that's important in itself, but the actual complete loop to say, okay, you said this, we did this, and this is what it's meant. And ultimately, for people in healthcare, they'll say, actually, this is what it's meant for patients and improved the services. So I think it's a really powerful way of overcoming this, this feeling of feeling unheard and undervalued and not, you know, feeling completely slightly lost or lonely in a really complex organisation. And it's a way of solving that.

Ben Russell (17:39)

Yes, thank you both. So lever six is focusing on Sense of belonging. So the Institute for Healthcare Improvement (or the IHI) their framework for improving Joy in Work highlights certain actions that can be undertaken across organisations to enhance well-being and retention and these are kind of split into three different levels. So the first one being individual level actions. So things like supporting personal wellbeing and resilience. Then there's team level actions so fostering camaraderie, teamwork and inclusive management. And then there's senior leadership actions as well. So ensuring staff safety, recognising and rewarding staff, offering choice and autonomy. So obviously things we've touched on already. And then finally, reinforcing a sense of purpose or belonging, and this is echoed in the King's Fund's *Courage of Compassion* report also, which highlights autonomy, belonging, and contribution. As yeah. I think she'd mentioned, a core need for staff at work.

So Na'eem. What role do you see, kind of, the pillar or sense of belonging having in the 10 Year Plan?

Dr Na'eem Ahmed (19:01)

I mean both within the 10 Year Plan. But in our experience, people will talk about improvement processes as being something slightly niche, or something that is reserved to enthusiasts, and what we'd like to get across in terms of our philosophy is, we're democratising it. So there is, you know, this is a powerful way of us enabling everyone literally from the ward to the board. That means the person that is the admin on the ward, or you know the person that's helping with facilities, estates, etc, who all play an important part in the patient journey, actually being able to be part of something bigger in terms of the organisational direction, and how the organisation provides care. And I think that it's really important for us to try and address that sense of belonging and our experience has been actually, if you're not just going to reserve quality improvement to, you know, a group of people that meet on a quarterly basis, but actually every day say to everyone within the organisation, regardless of grade, strip out the hierarchy and say, look, we value what you say to help us improve what we deliver within this organisation, I think is incredibly powerful.

Ben Russell (20:29)

Yeah, definitely. Thanks Na'eem.

Hannah Campbell (20:31)

Thanks Ben, so this is lever number seven: Bespoke career pathways.

So career progression and continuous development are key to keeping staff engaged. According to Gallup employees who feel encouraged to learn new skills are 47% less likely to look for another job. So creating roles for staff, that work is actually really important here. At Chelsea and Westminster, ImproveWell helped managers to listen to staff effectively, leading to meaningful changes that improved retention. One example was creating roles in ICU to better fit around childcare needs, showing how small but thoughtful changes can have a big impact on recruitment and retention.

Na'eem, looking more broadly over shifts in NHS dynamics. Do you think that the move from hospital to community care may have impacted how career pathways are perceived?

Dr Na'eem Ahmed (21:25)

I think that with every change, there are obviously some negatives, but also, you know, we like to view what are the opportunities in it, and certainly roles across the NHS will change as a result of how we might modify the way that we deliver care. For example, our experience in terms of working with ImproveWell and working with healthcare organisations is that actually, when you open up improvement processes and engaging in improvement across different job descriptions and job roles. People are often surprised about where the ideas from improvement come from and they've never done that before. So they've never, you know, they may have found it from the person that is receiving or booking in the patients at the front door. For us, having looked across the sector, that might be an obvious place to start. But for organisations they've never thought to ask these people. And actually, as a result of coming up with a great idea to improve the quality of service. These people may go on to, you know, different ways of not only modifying their own job role, but coming up with gaps that need to be addressed in care, and they may be able to fill that. So I think that really using ImproveWell as a kind of democratising tool in terms of how people get involved in improvement is really important, and also looking towards the future and organisations, actually knowing that the people working in their organisations may be now working across community and in hospitals, etc., will need something that's digital to be able to address that gap.

Hannah Campbell (23:21)

Great. Thank you. Really interesting.

Ben Russell (23:24)

Yes, thank you, Hannah. So yeah, lever eight. So our eighth and final lever which focuses on Compassionate leadership. The King's Fund defines compassionate leadership as listening, understanding, empathising and supporting staff, so they feel both valued and respected.

Research shows that this approach leads to more engaged and motivated teams with a better standard of wellbeing. And again, ultimately improving patient care. Which we keep going back to. So another example which comes to mind is from a collaboration between ImproveWell and Rosebrook Psychiatric Intensive Care Unit at Southern Health and Social

Care Trust, based in Belfast. So this was a piece that I was very privileged to be involved in, and essentially the Rosebrook unit were facing very low staff morale and very high turnover. So at this point they introduced ImproveWell to help shift the unit's culture gathering idea feedback, tracking sentiment, you know, etc. And the impact was significant. Staff retention dramatically improved after introducing the platform, with departures dropping from 18 staff, leaving in the 2021/2022 year to just two staff, leaving the following year, and one of those was due to retirement, and the other one was due to returning to agency work. So you know, this shows the power of leadership for taking action in creating a positive and sustainable workplace for its staff.

So yes, the final question for Na'eem would be, how can we prioritise building compassionate leadership in the current environment?

Dr Na'eem Ahmed (25:13)

I think some of the topics that we've touched on, in terms of that, this is an incredibly tired and burnt out workforce that have been through a huge amount, both physically and mentally, during the pandemic. We now have, you know, little respite, and then doing the job of recovery and ensuring that we catch up with the work and the backlog. And then on top of that, the shifting needs of both patients, but also how we're delivering care. So you've put that if you put that all together, that's a pretty challenging scenario that we're putting our staff into. Now, what we must do is make sure that they feel supported. And you've outlined some. You know a great case study of people being able to do that. I think it's important that we try and keep as many of our staff working and within jobs versus having to churn and then going out to recruit and all the challenges that that poses. So, having some way of being able to ensure that they feel as part of all the levers, sense of belonging, engagement, improvement, etc.

Our experience has been that having a tool like ImproveWell touches on all of those aspects and helps them really be part of that organisation, contribute, be engaged, and all of that adds up to better patient outcomes, which is, you know, as we started the the thing that we're we're all here for. So that compassion is needed now more than ever. But people need more than words right? They need a tangible way every day of being able to see that. And I think that's where we found that we can help.

Ben Russell (27:26)

Yeah, thanks Na'eem. Thank you everyone for joining and thank you to Hannah, and Na'eem again. If you'd like to learn more about ImproveWell, the retention levers, or to read the white paper in full, just scan the QR code on the screen. For anything else, you can reach myself and Hannah on hello@improvement.com. Thanks everyone.

Dr Naeem Ahmed (27:54)

Thank you.