

Staff Opinion Survey Results April 2010

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Executive Report

Introduction

The ninth round of the "Better Workplaces" Staff Opinion Survey was conducted from the 19th April until the 14th May, 2010. The participating Queensland Health health service districts were Cairns and Hinterland, Mt Isa, South West, and Metro North (including the Royal Brisbane and Women's Hospital, Redcliffe-Caboolture & Sub-Acute Residential Services, and the Prince Charles Hospital & Primary and Community Services). Also participating was the Information Division.

The response rate of 36% is similar to the 37% from the previous round and the 36% recorded in April 2008.

The survey consisted of a number of questions requesting biographical data, two new measures of Individual Outcome and eight new measures of Organisational Climate. The measures were developed by research members of the Community and Organisational Research Unit (Core) at the University of Southern Queensland (USQ).¹ Measures were piloted and validated through inclusion in the 2009 April and October rounds of the "Better Workplaces" Survey. In addition to statistical analyses researchers at Core collaborated with the Queensland Health Healthcare Culture and Leadership Service – Culture Team to retain items in the survey that were relevant to the Queensland Health work environment. The survey also included measures of Employee Engagement, Trust in Leadership, Organisational Management Practices, Clinical Practice Measures and Harmful Behaviours. All measures were found to have acceptable internal consistencies, as presented in Appendix C.

Each district and division within Queensland Health is surveyed every two years, with approximately one quarter of the organisation being surveyed every six months. This report presents the key findings from the participating districts and division as a whole, together with their comparative data. The comparative data, labelled April 2008 in the graphs, has been combined and includes April 2008 survey data for the Information Division and all but one participating district. Comparative data for Metro North includes April 2008 data for the Royal Brisbane and Women's Hospital and September 2008 data for Redcliffe-Caboolture & Sub-Acute Residential Services and The Prince Charles Hospital & Primary and Community Services.

¹ Source of measures: Robinson, D., Hooker, H., & Hayday, S. (2007). *Engagement: the continuing story*. (Report No. 447). Brighton, UK: Institute for Employment Studies, Core/QH HCLS - Culture Team, and comments from previous "Better Workplaces" Surveys.

Change scores for the new Individual Outcome and Organisational Climate measures are provided by comparison with similar, but not identical QPASS measures from the 2008 survey, where the pilot study results indicated that measures were similar (a statistical correlation of .80 or above was obtained between the new and comparative QPASS measures). Comparison data are available at the measure level only, with 2010 scores available at the item level.

Each district and division is presented with its own Executive Report of detailed findings to evaluate for the action planning process. An interactive database, i-MO, developed by the Core team at USQ, enables each district and division to further examine their detailed results.

Respondents were also provided the opportunity to write comments. Comments about workplace functioning were the most predominant, followed by infrastructure issues and leadership skills.

Methodology

The survey results are reported using the Measurement of Outcomes Index (MO-Index), which is an odds ratio based measure of how staff responded to survey items. The results are presented in Outcome Units (OU), which have been divided into bands. For positive measures (i.e. those where high scores are desirable) the following bands and range of scores apply:

• Outstanding band: 30.2 OU and

- Commendable band: 8.8 OU to 30.1 OU
- Middling band: 8.7 OU to -8.7 OU
- Challenging band: -8.8 OU to -30.1 OU
- Adverse band: -30.2 OU and below

Within the survey there is one negative indicator (for which negative scores are desirable), this being *Stress and Work Pressure*. For this measure the range of scores within each band include:

- Outstanding band: -30.2 OU and below
- Commendable band: -8.8 OU to -30.1 OU
- Middling band: -8.7 OU to 8.7 OU
- Challenging band: 8.8 OU to 30.1 OU
- Adverse band: 30.2 OU and above

Figures 1 and 2 below represent the bands for positive and negative indicators, respectively.

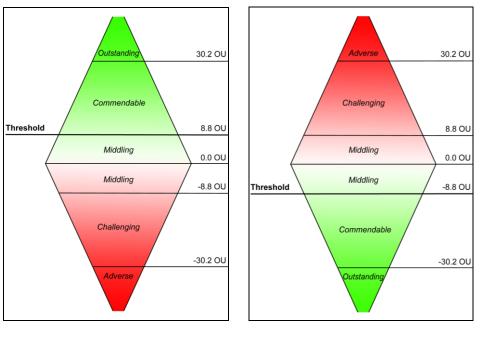


Figure 1. Positive Indicators



Using MO-Index scores, measures can be broken down into the items (questions) that make up each measure. This provides meaningful data, from which more targeted actions can be developed for inclusion in action plans and implementation across work areas. For the full interpretive guidelines, see Appendix A.

Key findings

Both successes and challenges are apparent in the current survey results. Overall, Queensland Health has recorded improvement on many indices in the last two years, but there is clearly room for further improvement.

The 2010 Individual Outcome and Organisational Climate measure results below are compared with QPASS measure results from the 2008 survey where, while not identical, pilot study results indicated that the measures were somewhat similar (statistical correlation greater than .80). Comparisons are made at the measure level only, with 2010 scores available at the item level.

Individual Outcome Measures

Overall measure results are shown in Individual Outcome Measures, Figure 3 (page 18).

- Morale and Job Satisfaction scored within the middling band and improved slightly when compared to 2008 QPASS results. The highest scoring items were most days I am enthusiastic about my job and overall, I am satisfied with my job, while the lowest scoring items were generally, my life at work matches my ideal and my working conditions are excellent.
- Stress and Work Pressure, a negative indicator where scores below -8.8 OU are desirable, scored within the middling band at -3.5 OU. This measure does not have 2008 comparison data. The most desirable and only commendable item with a score of -9.8 OU was the demands of the job seriously interfere with my private life. The least desirable item score was recorded for unrealistic time frames at work create high levels of stress for me.

Organisational Climate Measures

Overall measure results are shown in Organisational Climate Measures, Figure 4 (page 18).

- Overall, of the eight Organisational Climate Measures, three scored in the commendable band and five scored in the middling band with *Peer Support* recording the highest score at 13.7 OU and *Communication* recording the lowest score at 1.9 OU. Most measures with comparison data recorded positive shifts when compared to 2008 QPASS results, while *Role Clarity* recorded the largest negative shift.
- *Feeling Valued* scored within the middling band and of the Organisational Climate measures recorded the greatest positive change when compared to 2008 QPASS results. The highest scoring items were *my role is valued within my work area* and *I am respected for my skills and experience* recording commendable scores at 11.5 OU and

6

11.2 OU respectively. The lowest score was recorded for *management thank staff for the work they do* at a middling 0.7 OU.

- *Performance Feedback* improved within the middling band when compared to 2008 QPASS results. *I am able to discuss my work performance with my supervisor* recorded the only commendable score at 12.6 OU, while *I am given regular feedback on my performance by my supervisor* recorded the lowest score at a middling 0.1 OU.
- Training and Career Development also improved within the middling band when compared to 2008 QPASS results. The item the training I receive is relevant to my job obtained the highest score at a commendable 16.3 OU, while It is easy to gain access to training and development opportunities obtained the lowest score at 2.8 OU.
- Feeling Involved remains within the middling band, recording improvement when compared to 2008 QPASS results. All items recorded middling scores, with *I get the opportunity to develop new and better ways of doing my job* attaining the highest score at 5.3 OU. *I am happy with the way decisions are made in my work area* attained the lowest score at -1.1 OU.
- Supervisor Support obtained a commendable score, improving from a middling score when compared to 2008 QPASS results. The highest scoring item, with a commendable 17.7 OU was *I am able to approach my immediate supervisor to discuss work issues*, while staff and supervisors communicate effectively in this work area was the lowest scoring item, at a middling 5.1 OU.
- Peer Support experienced a slight negative shift within the commendable band when compared with 2008 QPASS results, and at 13.7 OU recorded the highest score of the Organisational Climate measures. The item *I am accepted by the staff I work with* recorded the most desirable score at a commendable 22.7 OU, while *staff often discuss how their work can best be performed* recorded the least desirable score at a middling 3.5 OU.
- Role Clarity remains within the commendable band, recording a decline when compared with 2008 QPASS results. The item *I am clear about my work-related responsibilities* recorded the most desirable score at a commendable 18.8 OU, while *my work area has clearly defined goals that assist staff to focus on appropriate work tasks* recorded the least desirable score at a middling 4.6 OU.
- At a middling 1.9 OU *Communication* recorded the least desirable Organisational Climate score. This measure does not have 2008 comparison data. The most desirable and only commendable item, *the information I need to do my job is readily available*

attained a score of 9.9 OU, while *staff regularly hear about changes via appropriate channels* recorded the least desirable score, at a middling -7.0 OU.

Employee Engagement

Employee Engagement, improved within the commendable band, obtaining a score of 13.3 OU. With five items added for the 2010 survey, *I try to help others in this organisation whenever I can* remained the highest scoring item at a commendable 28.3 OU, while the lowest scoring item, *this organisation really inspires me to perform at my very best in my job* remained the lowest scoring item at a middling 1.2 OU.

Trust in Leadership

Overall measure results are shown in Trust in Leadership Measures, Figure 5 (page 19).

- Trust in Executive, while recording the lowest score of the three trust measures and remaining a negative score, experienced positive change within the middling band. All items also recorded negative scores and positive change within the middling band. The item, Executive regularly communicates with staff recorded the greatest improvement, while Executive sets a clear vision and direction for the future recorded the most desirable score and Executive builds a culture of openness and trust recorded the least desirable score.
- Trust in Immediate Supervisor, while experiencing a slight negative shift, remains within the commendable band at 10.0 OU and also remains the highest level of trust. My supervisor treats people with care and respect was the highest scoring item at a commendable 14.5 OU, while my supervisor asks for my opinion before making decisions that affect my work attained the least desirable score. My supervisor provides clear and constructive feedback recorded the greatest improvement.
- Trust in Senior Manager experienced a negative shift within the middling band, with all items recording middling scores. Senior Manager sets a clear vision and direction for the future was the only item to record positive change, while Senior Manager genuinely listens and is responsive to issues raised by staff recorded the greatest decline. Senior Manager does what they say they are going to do was the highest scoring item, while senior manager builds a culture of openness and trust recorded the least desirable score.

Organisational Management Practices

• Support for Managing Others improved from a middling to a commendable score, with all items recording positive change. *I am confident that I have appropriate skills for managing staff performance* recorded the highest score at a commendable 18.4 OU,

while the lowest scoring item, I have adequate time and resources to manage my staff recorded the greatest improvement, shifting from a negative to a positive score within the middling band.

- Work Area Management Practices improved slightly within the middling band, with the highest scoring item, there are clear guidelines and policies for how we work, attaining a commendable 11.5 OU. Staff receive the training that they need to do their work recorded the greatest improvement, shifting from the middling to the commendable band, while poor performance is appropriately managed remains the lowest and the only negative score at -3.8 OU.
- Workplace Health and Safety remains in the commendable band at 18.5 OU.

Clinical Work

- *Clinical Communication* improved within the commendable band, with all items recording positive change. *I receive the information I need to carry out my work to the best of my ability* recorded the highest score at a commendable 12.7 OU, while *my opinions about improving clinical services are valued* recorded the lowest and only middling score.
- Clinical Management Practices experienced a positive shift within the middling band. The highest scoring and only commendable item was *I am expected to perform within my skills and abilities,* while the greatest improvement was shown for *sufficient time and resources are devoted to clinical skills development,* which shifted from a negative to a positive score within the middling band. There is a system to monitor the work performance of each clinician recorded the least desirable score at 1.1 OU.
- Multidisciplinary Team Support for Patient Care improved within the commendable band, with all items recording commendable scores and positive change. Patient care is provided by multidisciplinary teams was the highest scoring item at 24.4 OU, while Multidisciplinary teams meet regularly to plan and review patient care recorded the greatest improvement and was the lowest scoring item at 11.4 OU.

Predictors of Morale & Job Satisfaction, Stress & Work Pressure, and Employee Engagement

The strong predictors of Morale and Job Satisfaction:

- Feeling Valued
- Feeling Involved
- Role Clarity

The strong predictors of Stress and Work Pressure (when predictors are higher Stress and Work Pressure is lower):

- Communication
- Supervisor Support
- Feeling Valued

The strong predictors of Employee Engagement:

- Morale and Job Satisfaction
- Trust in Executive

Employee Engagement is higher when Stress and Work Pressure is lower

Career Intentions

- 33% of respondents are considering leaving their current job, with 25% currently actively looking for another job.
- 72% of respondents said they would want to stay in Queensland Health if they left their current job.
- The main reasons for respondents considering leaving their current position were *career* development and advancement opportunities and unhappy with management.

Harmful Behaviours

- 29% of respondents reported that they had experienced harmful behaviours in their work area in the past six months; this is comparable to the 29% who reported in 2008.
- The most common source of harmful behaviours was reported as co-workers (37%), followed by supervisors/managers (29%).
- Where the source of the harmful behaviour was internal:

- Supervisors/Managers The resulting effects were; upset at the time (47.9%), ongoing distress and anxiety (37.0%), physical or psychological harm for which medical treatment was sought (11.6%) and fear for their safety (3.5%).
- Co-workers The resulting effects were; upset at the time (53.2%), ongoing distress and anxiety (34.4%), physical or psychological harm for which medical treatment was sought (7.3%) and fear for their safety (5.1%).
- Where the source of the harmful behaviour was external:
 - Visitors/Relatives The resulting effects were; upset at the time (66.8%), fear for their safety (21.1%), ongoing distress and anxiety (10.4%), and physical or psychological harm for which medical treatment was sought (1.6%).
 - Patients/Clients The resulting effects were; upset at the time (55.5%), fear for their safety (30.0%), ongoing distress and anxiety (10.0%) and physical or psychological harm for which medical treatment was sought (4.5%).
- Actual physical or psychological harm for which medical treatment was sought was more likely where the source was internal (i.e. supervisors/managers or co-workers). Fear for their safety was more likely where the source was external (i.e. visitors/relatives or patients/clients.
- While 86% of respondents say they know how to report harmful behaviours, only 54% say they trust the process for managing harmful behaviours.
- 22% of managers/supervisors reported experiencing harmful behaviours from people they manage; this is comparable to the 22% reported in 2008.
- Respondents indicated they were aware that some action was taken in about 63% of the instances of harmful behaviour they reported formally, this is a decrease from the 71% of reported awareness of action taken in 2008.

Performance Plans

- 61% of respondents indicated they have had a written performance and development plan (i.e. PAD, PPR, MFP etc) in the last 12 months.
- 59% of supervisors reported having conducted performance and development plans with all their direct report staff in the last 12 months.

Indicators of Quality and Improvement

• *Relationships among co-workers* was identified at the best indicator of quality in the workplace, with *recognition for good work* being identified as the most important indicator requiring improvement.

Results by occupational stream groups

Change scores are provided for eight of the ten Individual Outcome and Organisational Climate measures. The *Stress and Work Pressure* and *Communication* measures do not have comparison data.

Professional

- The Professional stream does not have comparison data.
- This group achieved nine commendable scores for the Individual Outcome and Organisational Climate measures and one middling score, with *Stress and Work Pressure* (a negative indicator where negative scores are desirable) obtaining -6.4 OU.
- Professional respondents recorded the most desirable scores of all occupational streams for *Job Satisfaction*, *Feeling Involved*, *Supervisor Support*, and *Communication*.
- *Trust in Immediate Supervisor* was commendable, while *Trust in Senior Manager* and *Trust in Executive* recorded middling scores.

Contractor (Information Division employees)

- The Contractor stream does not have comparison data.
- This group scored in the commendable range for four Individual Outcome and Organisational Climate measures and scores were middling for the remaining six.
- Contractor staff recorded the most desirable score of all occupational streams for *Stress* and *Work Pressure*, and the least desirable score for *Training and Career Development*.
- *Trust in Immediate Supervisor* recorded a commendable score, while *Trust in Senior Manager* recorded a middling score.
- *Trust in Executive recor*ded a negative score within the middling band.

Administration

 Administration respondents reported commendable scores for two of the Individual Outcome and Organisational Climate measures and middling scores for the remaining eight.

- Six of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change, with *Morale and Job Satisfaction* showing the greatest improvement for this occupational stream than any other. Peer *Support* recorded a decline within the commendable band, while *Role Clarity* declined from a commendable to a middling score.
- Trust in Immediate Supervisor remains commendable at 11.6 OU.
- Trust in Senior Manager declined within the middling score.
- Trust in Executive improved within the middling band and remains a negative score.

Nursing Staff

- This group achieved four commendable and six middling scores for the Individual Outcome and Organisational Climate measures.
- Nursing staff recorded the least desirable score of all occupational stream groups for Stress and Work Pressure.
- Seven of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change with *Training and Career Development* and *Supervisor Support* improving from middling to commendable scores, while *Role Clarity* declined within the commendable band.
- *Trust in Immediate Supervisor* remains commendable and *Trust in Senior Manager* remains within the middling band.
- *Trust in Executive* improved within the middling band and remains a negative score.

Medical Staff

- Medical Staff respondents scored in the commendable range for five Individual Outcome and Organisational Climate measures and in the middling range for the remaining five.
- Seven of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change with *Feeling Valued* improving from a middling to a commendable score, while *Role Clarity* recorded a slight decline within the commendable band.
- Despite recording negative change, *Trust in Immediate Supervisor* remains commendable, while *Trust in Senior Manager* recorded negative change within the middling band.
- *Trust in Executive* experienced positive change within the middling band; however remains a negative score.

Health Practitioner

- This group reported commendable scores for four Individual Outcome and Organisational Climate measures and middling scores for the remaining six.
- Four of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change, with *Performance Feedback* improving from a negative to a positive score within the middling band. *Feeling Involved* and *Peer Support* declined more for this occupational stream than any other. The former recorded a negative shift within the middling band, while the latter remains commendable.
- All three measures of trust in leadership recorded negative change, with *Trust in Senior Manager* declining more for this occupational stream than any other, although remaining in the middling band.
- *Trust in Immediate Supervisor* remains a commendable score, while *Trust in Senior Manager* remains middling and *Trust in Executive* remains a negative score within the middling band.

Operational

- Operational respondents scored in the commendable range for *Role Clarity* and in the middling range for the remaining nine Individual Outcome and Organisational Climate measures.
- Five of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change, with *Feeling Valued* and *Training and Career Development* improving from negative to positive scores within the middling band. *Job Satisfaction* and *Peer Support* declined within the middling band, while *Role Clarity* declined within the commendable band.
- Operational staff recorded the least desirable scores of all occupational streams for Morale and Job Satisfaction, Feeling Involved, and Peer Support.
- All three measures of trust in leadership experienced negative change.
- Trust in Immediate Supervisor remains a middling score.
- *Trust in Senior Manager* and *Trust in Executive* remain negative scores within the middling band.

Indigenous Health

• This group reported commendable scores for seven Individual Outcome and Organisational Climate measures and middling scores for the remaining three.

- Indigenous Health respondents recorded the most desirable score of all occupational streams for *Feeling Valued*, *Performance Feedback*, *Training and Career Development*, and *Peer Support*.
- Six of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change. *Feeling Valued* improved more for this occupational stream than any other and together with *Feeling Involved* improved from a middling to a commendable score. *Morale and Job Satisfaction* declined from a commendable to a middling score, while *Role Clarity* declined within the middling band.
- *Trust in Immediate Supervisor* and *Trust in Senior Manager* remained commendable scores, with *Trust in Senior Manager* recording the most desirable score of all the occupational streams at 11.3 OU.
- *Trust in Executive* remained a middling score and also recorded the most desirable score of all the occupational streams at 5.7 OU.

Dental Staff

- Dental staff reported commendable scores for three Individual Outcome and Organisational Climate measures and middling scores for the remaining seven.
- This group recorded the most desirable score of all the occupational streams for *Role Clarity*, at a commendable 15.5 OU.
- All eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change. *Peer Support and Supervisor Support* improved more for this occupational stream than any other, with the latter shifting from the middling to the commendable band. *Feeling Valued* and *Feeling Involved* improved from negative scores to positive scores within the middling band.
- *Trust in Immediate Supervisor* improved within the commendable band, while *Trust in Senior Manager* declined within the middling band.
- *Trust in Executive* experienced the biggest negative shift of all the occupational streams, remaining a negative score within the middling band.

Trades

- This group reported middling scores for all Individual Outcome and Organisational Climate measures.
- Seven of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change, with *Performance Feedback* and *Role Clarity*

improving more for Trades respondents than any other occupational stream. *Performance Feedback* improved from a challenging to a middling score, while *Peer Support* declined from a commendable to a middling score.

• All three measures of Trust in Leadership experienced positive change within the middling band, with *Trust in Immediate Supervisor* and *Trust in Executive* recording more improvement for this occupational stream than any other.

Technical

- Technical respondents scored in the commendable band for *Peer Support* and in the middling band for the remaining nine Individual Outcome and Organisational Climate measures.
- This group recorded the least desirable scores of all the occupational stream groups for *Feeling Valued, Performance Feedback, Supervisor Support, Role Clarity* and *Communication.*
- Five of the eight Individual Outcome and Organisational Climate measures with comparison data recorded positive change, with *Training and Career Development* and *Feeling Involved* improving more for this occupational stream than any other, shifting from the challenging to the middling band.
- Job Satisfaction, Role Clarity and Supervisor Support declined more for Technical respondents than for any other occupational stream, with the latter two measures shifting from the commendable to the middling band.
- Technical respondents recorded the least desirable scores of all the occupational steams for all three Trust in Leadership measures.
- *Trust in Immediate Supervisor* declined most for this group than any other occupational stream, shifting from a commendable to a negative score within the middling band.
- Despite *Trust in Senior Manager* remaining a negative score, this measure shifted from the challenging to the middling band and improved most for Technical staff than for any other occupational stream.
- *Trust in Executive* also experienced improvement, shifting from a challenging to a negative score within the middling band.

Conclusions

All levels of management and staff who participated in the survey should be acknowledged for their effort in producing a number of positive results. The April 2010 results showed *Training and Career Development* and *Feeling Valued* to have recorded more improvement than other measures of organisational climate. *Peer Support, Role Clarity, Employee Engagement, Trust in Immediate Supervisor, Workplace Health and Safety, Clinical Communication* and *Multidisciplinary Team Support for Patient Care* remain commendably high. However, there are aspects within each measure that should be noted (refer to key findings; e.g., the item *My work area has clearly defined goals that assist staff to focus on appropriate work tasks* in the measure of *Role Clarity*).

While the results of these overall measures are deserving of praise, the importance of the strong predictors of *Morale and Job Satisfaction*, *Stress and Work Pressure*, and *Employee Engagement* is emphasised. In particular, the relatively low results recorded for *Communication*, *Feeling Involved* and *Trust in Executive* should be considered as key focal points for intervention.

Across occupational streams, the considerable improvements across most measures reported by *Trades* respondents are to be commended, as are those recorded by *Dental, Indigenous Health, Nursing,* and *Medical* stream respondents. The desirable scores recorded for *Professional* stream staff are similarly deserving of praise. However, while showing improvement on several measures, the less desirable scores recorded by *Technical* stream respondents warrant further investigation, as do those recorded by *Operational* respondents.

Recommendations and focal points for interventions

- Results suggest that communication between management and staff and within work areas are key issues for staff. An initial step that management could take is to consider the timeliness and extent of communication provided staff through appropriate channels, in particular about changes that affect their work and future. The scope of staff involvement in decision-making about work-related issues should also be critically considered and conveyed. This will help alleviate negative reactions when the process is not according to expectations.
- The need for more to be done in the way of valuing staff and providing meaningful feedback about performance is apparent and crucial. An important initial step would be to focus attention on the regularity and quality of feedback.
- Career development and advancement opportunities was highlighted as one of the most common reasons for respondents who were considering leaving their job, which signals

an area of attention for managers. In light of this response, training plans could incorporate:

- (1) development improving skills for the present job, and in particular, gaining access to development opportunities.
- (2) growth preparation for advancement in career, and in particular focusing attention on the high proportion of respondents who have not had a written performance and development plan conducted in the last 12 months.
- The prevalence of harmful behaviour remains an issue, which is detrimental to ongoing improvements in organisational culture. Without compromising ethical and legal obligations of confidentiality, management should ensure that they communicate whether or not action was taken in response to staff reporting incidents of harmful behaviour. Such action may increase the level of faith staff have in the management of reported incidents of harmful behaviour and reduce the number of incidents.
- Management and staff at all levels need to remain vigilant and intolerant of harmful behaviour, even when it is circumstantial or unintended. Failure to do so will mean that the impact of harmful behaviours from internal sources continues to undermine staff abilities to perform at their best.
- Results suggest that aspects of trust in senior and executive management, such as building a culture of openness and trust and regular communication with staff, are key issues for consideration. Addressing these issues may improve staff perceptions of management, and in turn help reduce the reported number of respondents considering leaving their job due to feeling *unhappy with management*.
- The results of this survey should be communicated to staff, portraying a balanced picture of both the key successes and challenges. This would help increase trust in leadership.
- Executives should continue driving the action planning process at the division/district level, encouraging staff involvement in the action planning process to improve workplace culture and ensuring that initiatives and improvements achieved as a result of the action planning process are also communicated to staff.

Individual Outcome Measures



Figure 3. Individual Outcomes measures

Organisational Climate Measures

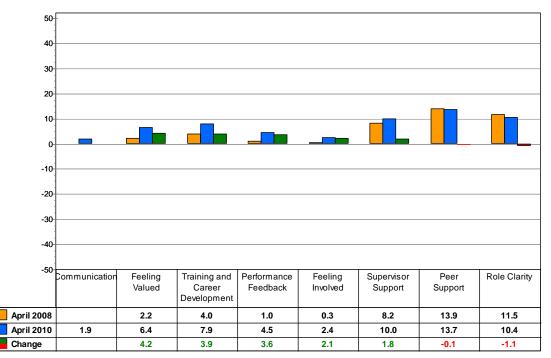


Figure 4. Organisational Climate measures

Trust in Leadership

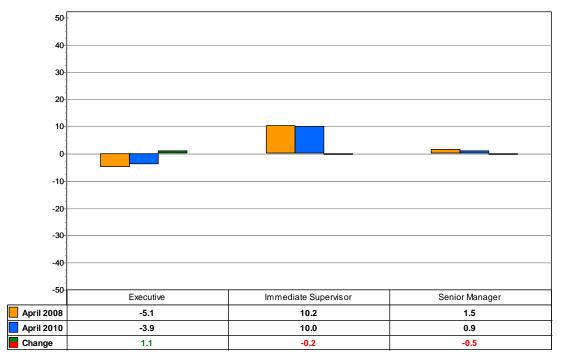


Figure 5. Trust in Leadership measures

Response Rate and Comparative Data

Of the 8 392 surveys returned, 8 364 were valid and useable. Table 1 provides the web and valid paper survey counts and response rates for each District and Division.

Table 1. Response Rates

QH Overall	Total possible respondents	Actual paper based respondents	Actual web based respondents	Response Rate (%)
April 2010	23 404	4 294	4 070	35.7
Districts and Divisions				
Information Division	1 335	-	594	44.5
South West	919	168	168	36.6
Metro North	16 182	3 144	2 626	35.7
Cairns & Hinterland	4 308	872	601	34.2
Mt Isa	660	110	81	28.9

Table 2. Survey Dates of Comparative Data

April 2010 HSD/Division	Comparative	Data
Cairns and Hinterland	April 2008	
Information Division	April 2008	
<u>Mt Isa</u>	April 2008	
South West	April 2008	
Metro North:	April 2008	Royal Brisbane and Women's Hospital
	October 2008	Northside

Demographic Details of Respondents

Table 3. Gender of respondents

Gender	Count	Percent
Female	6 387	76.4
Male	1 881	22.5
Didn't indicate	96	1.1

Age	Count	Percent
Under 21	105	1.3
21 – 30	1 526	18.2
31 – 40	1 894	22.6
41 – 50	2 453	29.3
51 – 60	1 858	22.2
Over 60	490	5.9
No response	38	0.5

Table 4. Age of respondents

Table 5. Employment Status

	Count	Percent
Permanent full-time	4 756	56.9
Temporary full-time	873	10.4
Permanent part-time	2 060	24.6
Temporary part-time	209	2.5
Casual/flexible	353	4.2
Contractor (Info Div)	72	0.9

Table 6. Aboriginal or Torres Strait Islander

	Count	Percent
Yes	177	2.1
No	8 119	97.1
No response	68	0.8

Table 7. Non-English speaking background

	Count	Percent
Yes	833	10.0
No	7 471	89.3
No response	60	0.7

Table 8. Occupational stream groups

	Count	Percent
Administration	2 248	26.9
Nursing	3 255	38.9
Health Practitioner	1 151	13.8
Indigenous Health	56	0.7
Medical	407	4.9
Operational	668	8.0
Professional	70	0.8
Dental	213	2.5
Technical	19	0.2
Trades	47	0.6
Contractor	69	0.8
Other	78	0.9

Glossary of Key Terms

Adverse Outcome	Outcome situated below -30.2 OU for positive indicators and above 30.2 for negative indicators.
Benchmark	Comparison data used as a standard against which survey results can be measured. The most informative benchmark to indicate change is a comparison against self (e.g. same District/Division over time) using results from prior survey periods.
Challenging Outcome	Outcome situated at between -8.8 OU and -30.2 OU for positive indicators and between 8.8 OU and 30.2 OU for negative indicators.
Commendable Outcome	Outcome situated between 8.8 OU and 30.2 OU for positive indicators and between -8.8 OU and -30.2 OU for negative indicators.
Desirable positive score	Scores above 0.0 OU for positive indicators.
Desirable negative score	Scores below 0.0 OU for negative indicators.
Middling Outcome	Outcome situated around 0.0 OU (the basal outcome), between 8.8 OU and -8.8 OU.
Negative change	Change that occurs in the direction of decline (i.e., lower scores for positively scored questions and measures and higher scores for negatively scored questions and measures).
Negative Indicator	Individual Distress, Workplace Distress, and Excessive Workplace Demands.
Odds ratio	The ratio of the percentage of possible responses endorsed and the percentage of possible responses not endorsed for a particular item or measure.
Outcome Units (OU)	Scores produced from the calculation of the logarithm of item endorsement odds ratios.
Outstanding Outcome	Outcome situated above 30.2 OU for positive indicators and below -30.2 for negative indicators.
Positive change	Change that occurs in the direction of improvement (i.e., higher scores for positively scored questions and measures and lower scores for negatively scored questions and measures).
Positive Indicator	Quality of Work Life, Individual Morale, Workplace Morale, Supervisor Support, Participative Decision-Making, Role Clarity, Peer Support, Appraisal and Recognition, Professional Growth, Goal Congruence.

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Undesirable negative score	Scores below 0.0 OU for positive indicators.
Undesirable positive score	Scores above 0.0 OU for negative indicators.
Threshold	The point at which something begins or changes. For the MO-Index an outcome of 8.8 OU is the threshold at which scores are described as "Commendable". An outcome of - 8.8 OU is the threshold at which scores are described as "Challenges".

Appendix A

Interpretive Guidelines

These guidelines are intended to inform interpretation and use of the survey findings. While no set of guidelines is definitive, these guidelines do offer a consistent and reasoned approach to understanding survey results. There are a number of principles to understand that affect interpretation.

Principle 1: Response rates

Queensland Health has for years aimed and usually exceeded a target of 30% or more participation in staff surveys at the organisation, district or divisional level. This of course works equally as well when figures aggregate to the district, divisional or even whole-of Queensland Health level. The purpose of maintaining the minimum target of 30% is to:

- Foster the highest possible level of staff engagement and participation in surveys and survey results. This gives staff a channel for voicing their opinions and an opportunity to be listened to; and
- Enable meaningful comparisons and reporting of individual work units, which is not possible if there are too few respondents in individual work units.

If the response rate is lower than 30%, these two key advantages may be lost, but the results are still broadly representative at the whole-of-organisation, district or divisional level. This is true even when response rates are less than 10%. While this may sound low, it is well backed by scientific literature¹, and the guidelines endorsed by the National Statistical Service².

Principle 2: Use both Criterion-based and a Relative point of comparison

While Queensland Health has in the past used a criterion-based interpretation of survey results (results that fall into pre-determined target ranges), the preference has always been to focus on a relative interpretation of results against Queensland Health benchmarks. This has always been available to some extent with comparisons to results of other districts, divisions and/or whole-of-Queensland Health figures. All districts and divisions were surveyed between April 2006 and September 2007 (with the exception of QCMHL) and were surveyed again between April 2008 and October 2009, thus allowing most districts and divisions to be benchmarked against themselves from one survey

e.g. Bartlett, Kotrlik, & Higgins, 2001 http://www.osra.org/itlpj/bartlettkotrlikhiggins.pdf; Jaccard, 1983

² www.nss.gov.au/nss/home.nsf/pages/sample%20size%20calculator

period to the next. This is a leap forward if one considers the hierarchy of possible benchmark comparisons below.

Star ratings of benchmarks

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****	Benchmarking against self (same District/Division over time)
****	Benchmarking against other comparable services/work units
***	Benchmarking against whole-of Queensland Health
**	Benchmarking against other health departments in other states
*	Benchmarking against unrelated survey findings (e.g. different timeframe, different industry, different definitions of key variables)

Wherever possible, the greatest emphasis in interpretation should be placed on a five-star $(\star \star \star \star)$ benchmark. This is the most informative about change in the District/Division. Where this is not available, four and even three-star benchmarks can be used. Two and one-star benchmarks should be avoided as they take the least account of strategic and operational differences between the work unit, and the source of the benchmark.

This relative interpretation should be used in conjunction with the Measurement of Outcome Index (MO-Index) outlined in the section entitled "What do the numbers mean?". This will allow district and divisions to assess achievements in absolute terms as well as their relative achievements (compared to their own previous surveys).

Principle 3: Interpreting Change

Where five-star benchmarking is used, the issue arises as to how to interpret change over time. What is significant change? The term "significant" is not used here, as it has a particular statistical connotation³. The difference that Queensland Health is interested in is better termed as reliable, consistent or meaningful change. In line with this, meaningful change is defined as any change that has been collectively noticed by staff. If staff can see it, it is real, and if it is real, it is meaningful.

Further, zero change may be indicative of the success of the work unit in halting previously declining results, just as positive change is indicative of the success of another work unit which is building on previous successes. The direction and amount of change has to be understood in relation to where the District/Division started from, and what it has tried to achieve in the intervening time (see context information for the

³ The probability of falsely rejecting the null hypothesis (that no genuine change has occurred) against an arbitrary criteria normally set at 5%.

District/Division). The question of how this information might be used for strategic or operational planning is a separate question, and is generally better addressed by staff and management of each work unit involved. It is they who best understand the context in which they attained the results they did, and how this could help shape their future.

What do the numbers mean?

While reporting simple average percentages to measures in the questionnaire is the most obvious way to convey the results of the survey, they are misleading. These averages are overly distorted by responses that are skewed. Nor do averages take into account that very low or very high scores are harder to shift than more middling scores. So while average percentages have their appeal, they simply are not accurate.

The MO-Index is a measure of how staff responded to survey items and was developed to overcome these problems. As well as reporting the results of measures (e.g. *Morale and Job Satisfaction*), the MO-Index allows the reporting of results from the individual questions (e.g. "*Overall, I am satisfied with my job*") that make up each measure. These provide an indication of the contribution of items to the scores of the measures.

Put simply, the MO-Index is a standard composite measure of how staff responded to questions in the survey. This is an adapted form of Rasch modelling, using odds ratios, which is well established in scientific literature (e.g. Bond & Fox, 2001)⁴. Odds ratios capture the likelihood of a particular response to a question (as opposed to a simple but distorted average). These odds ratios are aggregated, and then mathematically transformed (the natural logarithm is calculated). This transformation neutralises any possible distortions that may be due to skewed data. Finally these figures are standardised for ease of interpretation and comparison among measures. Similar indices have been used to measure high school performance (the OP score), and the severity of an earthquake (the Richter scale) to name just a couple.

The MO-Index ranges from -100 Outcome Units (OU) to +100 Outcome Units (OU).

- To get -100 OU for a measure, absolutely all staff would have indicated "strongly disagree" to all items that make up that measure.
- To get +100 OU for a measure, absolutely all staff would have indicated "strongly agree" to all items that make up that measure.
- To get -100 OU for an item, absolutely all staff would have indicated "strongly disagree" to that item.

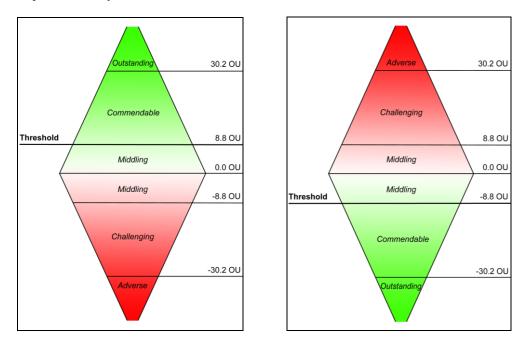
⁴ A more technical description of how and why the MO-Index was calculated is available on request from the Community and Organisational Research Unit at the University of Southern Queensland.

 To get +100 OU for an item, absolutely all staff would have indicated "strongly agree" to that item.

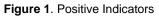
Because both these extreme scenarios are unprecedented, the graphs in the report are presented from -50 OU to $+50 \text{ OU}^5$.

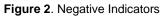
Positive scores are desirable for positive indicators (e.g. for *Morale and Job Satisfaction*). Negative scores are desirable for negative indicators (namely *Stress and Work Pressure*).

The hierarchy of descriptors for positive and negative indicators are presented in Figures 1 and 2 respectively. Descriptions of terms are provided in the Glossary on p. 22.



Hierarchy of Descriptors





Why draw the line at 8.8 and 30.2 OU?

All such interpretive thresholds are to some extent arbitrary. In one sense, any positive OU score (or negative OU score for negative indicators) could be justifiably seen as a positive result. However, in a more practical sense, middling scores between 0.0 OU and 8.7 OU (or 0.0 OU and -8.7 OU for negative indicators) may not be good enough to claim a positive organisational culture. A score of 8.8 OU or above is Commendable (unless it is a negative indicator), and a score of -8.8 OU and lower is Challenging (again, unless it is a negative indicator). This threshold represents a balance between what is achievable (and what should receive due recognition), and what is sufficiently positive so as not to be seen as an ordinary result in any sense.

⁵ Note: This range is **NOT** equivalent to half of +100 OU and -100 OU.

Similar thresholds have been drawn at 30.2 OU. A score of 30.2 OU and higher is an outstanding result (unless it is a negative indicator). A score of -30.2 OU or lower is an Adverse result (again, unless it is a negative indicator).

Note that these interpretive thresholds relate only to scores obtained in the current period (e.g., "2010" as shown in graphs in this report) and prior survey period ("2008" as shown in graphs in this report), and not to the level of change in scores indicated by comparisons between the survey periods ("Change" as shown in graphs).

When comparisons are available, positive change or improvement in outcome from one survey period to another is desirable for ALL measures and individual items alike (represented as **green** bars on graphs). A negative change or deterioration in outcome is represented by **red** bars on graphs.

Comparisons across measures are interpreted first (e.g. *Morale and Job Satisfaction*), followed by the individual items that make up each measure.

Appendix B

Description of the Survey Questionnaire

Biographical Data

The following information was collected from the first section of the survey:

- Gender
- Age
- Aboriginal or Torres Strait Islander status
- Non-English speaking background status
- Length of time in current position and at current location
- Current employment status
- Current classification
- Work location
- Highest level of education
- Supervisory responsibilities

The next section contained two groups of new measures comprising the Focus Survey¹. These measures included two Individual Outcomes and eight Organisational Climate measures.

Individual Outcomes

Workplace conditions can have a direct individual effect on staff, and will either enhance positive (e.g., satisfied with job, enthusiastic about job) or increase negative (e.g., emotionally drained, overloaded) feelings.

Measures include:

- **Morale & Job Satisfaction** (8 items) Indicates the extent to which staff are satisfied with their work life and positive about their job.
- Stress & Work Pressure (10 items) Indicates the extent to which staff feel under constant strain and are experiencing negative effects due to their work.

Organisational Climate

¹ Source of measures: Robinson, D., Hooker, H., & Hayday, S. (2007). *Engagement: the continuing story*. (Report No. 447). Brighton, UK: Institute for Employment Studies., Core/QH HCLS - Culture Team, and comments from previous "Better Workplaces" Surveys.

Some workplace situations enhance feelings of enthusiasm, team spirit, empowerment, job satisfaction, and engagement due to positive management styles, clear roles, professional development opportunities, and interaction. Some workplace situations may not enhance such feelings.

Measures include:

- **Performance Feedback** (4 items) Indicates the quality and regularity of feedback about work performance.
- Feeling Valued (6 items) Indicates the extent to which work is recognised and valued.
- Role Clarity (6 items) Indicates the extent to which work objectives, responsibilities and authority are clearly defined.
- **Training & Career Development** (7 items) Indicates the extent to which staff receive and are encouraged to seek training and development opportunities.
- Feeling Involved (6 items) Indicates the extent to which staff feel they are actively involved in decision-making about work-related issues and in achieving group goals.
- **Peer Support** (9 items) Indicates the extent to which staff feel others offer respect, support and acceptance, communicate well, and share knowledge.
- **Supervisor Support** (5 items) Indicates the extent to which supervisors are in touch with work issues, support staff, and are approachable.
- **Communication** (9 items) Indicates the extent to which the sharing of information, between management and staff and within a work area, is timely and open.

Trust in Leadership and Organisational Management Practices Measures

- Workplace Health and Safety (5 items) Indicates the extent to which staff agree that procedures are committed by management to ensure staff are free from risk of injury, illness and individual harm caused by workplace activity.
- Work Area Management Practices (9 items) Indicates the extent to which staff agree that policies and practices with regards to work, performance, recruitment and selection, and training are fair and adequate.
- Trust in Leadership Immediate Supervisor (10 items) Indicates the extent to which staff trust the leadership of immediate supervisor through behaviours that describe openness and integrity in communication and interaction, support, and fairness.

- Trust in Leadership Senior Manager (6 items) Indicates the extent to which staff trust the leadership of senior manager through behaviours that describe openness and integrity in communication and interaction, support and fairness.
- Trust in Leadership District Executive/Division Executive (6 items) Indicates the extent to which staff trust the leadership of district executive through behaviours that describe openness and integrity in communication and interaction, support, and fairness.

Employee Engagement Measure

• Employee Engagement (10 items) – Indicates the extent to which staff have a positive attitude, pride and belief in the organisation, feel enabled to do well, are willing to behave altruistically, be a good team player, and see the bigger picture.

Two measures apply to subgroups of respondents.

For a subgroup of respondents who manage others, the following measure applies:

• **Support for Managing Others** (4 items) – Indicates the extent staff agree that they have the appropriate skills and the support to manage staff performance.

For a subgroup of respondents who work in a clinical environment, the following three measures apply:

- Clinical Communication (5 items) Indicates the extent staff agree that there is bidirectional information, both verbal and documentation, for them to do their job.
- Clinical Management Practices (6 items) Indicates the extent to which staff agree that there are adequate procedures and systems to support clinical work.
- **Multidisciplinary Team Support for Patient Care** (4 items) Indicates the extent to which staff agree that multidisciplinary teams support patient care.

Reliabilities of Measures

The following tables present the internal consistencies of all the measures as computed by Cronbach Alpha (α).

Individual Outcomes	α
Stress and Work Pressure	0.94
Morale and Job Satisfaction	
Organisational Climate	
Feeling Valued	0.91
Feeling Involved	
Peer Support	0.90
Performance Feedback	
Supervisor Support	0.89
Communication	0.88
Training and Career Development	
Role Clarity	
Employee Engagement, Trust in Leadership and Organisational Management Practices Measures	
Trust in Leadership - Immediate Supervisor	0.96
Trust in Leadership - Senior Manager	
Trust in Leadership - Executive	
Work Area Management Practices	
Clinical Communication	
Employee Engagement	
Multidisciplinary Team Support for Patient Care	
Clinical Management Practices	
Workplace Health and Safety	
Support for Managing Others	

Note. An alpha (α) of .7 is usually regarded as acceptable.