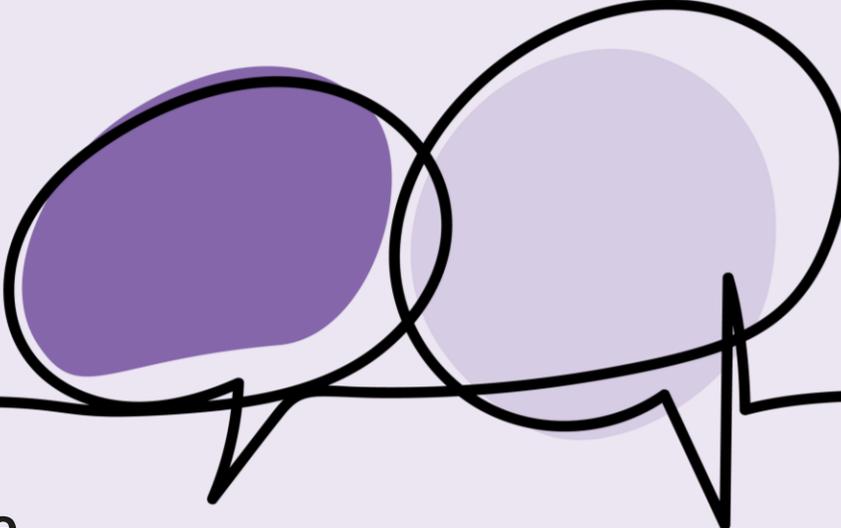


NHS Staff Survey 2022 – What happens next

Publication timescales – Explanation



We each have
**a voice that
counts**

People Promise

Purpose of surveys



The NHS Staff Survey does take **time to produce due to its purpose, granularity and intricacy of the data as well as the outputs that are required**. This is in contrast to the People Pulse for instance which provides monthly insight almost immediately – the below table explains the differences.....

	Frequency	Hierarchy	Design	Official statistic	Access	Purpose	Planning	Reporting	Who uses the data
NHS Staff Survey	Annually. (fieldwork Sep- Nov).	Hierarchy set at granular level.	Intense development of questions via academics, practitioners and cognitive testing.	Yes.	Mandatory for all trusts to roll out. Open to all colleagues via individual URL (a set of eligibility criteria to protect data).	Aligned to the People Promise, it provides a rich and valuable source of data to support and inform continuous improvement and cultural change. The survey has the highest standards of quality and accuracy allowing organisational comparisons and trend data.	Longer term plans of 3 to 5 years.	Weighted and standardised, national and local reports produced over 2 months for sound benchmark comparability.	Local, regional national colleagues, and key data users such as: CQC, Pay Review Body, WRES, WDES, FTSU.
National Quarterly Pulse Survey	Quarterly (April, July, January).	Hierarchy set at organisation level.	Use of validated and correlated Employee Engagement questions.	No.	Mandatory for all trusts to roll out. Open to all colleagues.	To provide insight into Employee Engagement across the NHS in England, more regularly and in a consistent approach, to support actions for improvement.	Short term plans, actions and decisions.	Reports are dependent on local method selected. National results available in third month of the quarter.	Local, regional and national colleagues.
People Pulse	Monthly (frequency of use can be determined locally).	Hierarchy set at organisation level with breakdown into demographics. (optional local levels).	Robust core questions on Employee Experience, and flexible questions to provide an opportunity to deep dive.	No.	Voluntary for organisations. Open to colleagues, at local choice.	To provide snapshot information of Employee Experience at a given time, concentrating on feeling informed, team support, feeling supported in health and wellbeing, and feedback to leaders.	Short term plans, actions and decisions.	Reports are available four working days after each survey wave closes via a dashboard. NHS average comparison available.	Local, regional and national colleagues.





The NHS Staff Survey results are an Official Statistic. This means the survey is run, and its results produced, in accordance with [the Code of Practice for Statistics](#) (**the Code**), as set out by the UK Statistics Authority (UKSA).

The Code is based around three principles:

1) Trustworthiness, 2) Quality, 3) Value

Public value is at the centre of the Code, and compliance with it gives users confidence that the NHS Staff Survey data and statistics are of **high quality** and are **produced by people and organisations that are trustworthy**.

To comply with the Code and ensure these principles are met, the NHS Staff Survey **results should be released in an orderly fashion** that is **open, transparent** and that **promotes confidence**. The results should also be produced in a way that is **truthful, impartial and independent**, and **published as soon as they are ready**.

Key milestones



How to use data under embargo guidance available here: [INSERT LINK](#)

25 November 2022
End of fieldwork period

2 December 2022
Contractor submission of data to Survey Coordination Centre (SCC)

19 December 2022
SCC submit cleansed data to NHSE analysts

23 February 2023
(estimate – 1 month pre national publication)
Provision of organisational data under early release to local organisations by SCC (Benchmark reports)

Early January 2023 onwards
Contractor provision of local organisational data

10 January 2023
Final data set approved by NHSE

Mid February – mid March 2023
Output creation with cleansed and quality assured data

Early Spring 2023
(estimate)
National Publication

- Including:
- National dashboards,
 - Organisation level dashboards
 - Regional and ICS dashboards,
 - WRES/WDES dashboards
 - National summary briefing report.





1. Weighting

Although all eligible staff can take part in surveys, we know that some do not. This raises a question: *How can we be confident that the survey data is as representative as possible of everybody who works in the NHS?*

What is weighting?

- While how and where it is used will differ depending on the topic and the data in question, weighting is a commonly used technique in a wide range of large scale and national surveys.
- It is used to improve the quality and accuracy of the survey results, or to make comparisons more reliable and it enables generalisations to be made about a wider population of interest (e.g., the UK, a town, or a large organisation like the NHS). Typically, surveys are weighted wherever it is possible. Barriers to weighting may include not having enough responses to create robust weights or having the underlying information to design a weighting strategy.
- Occupational group weighting is applied to allow for more reliable benchmarking



2. Data cleansing

This checks coding, that data has been input by contractors correctly, and checks Directorate level data supplied on staff group/directorate etc is complete and accurate.



3. Quality assurance

This is an essential element of the analytical process. High risk, this data is used to develop all subsequent outputs – Mistakes here could lead to errors in the final dataset which would cause reputational damage, work to correct all outputs such as: Weighting, scores and sub scores, response rates, benchmarking groups, mergers.

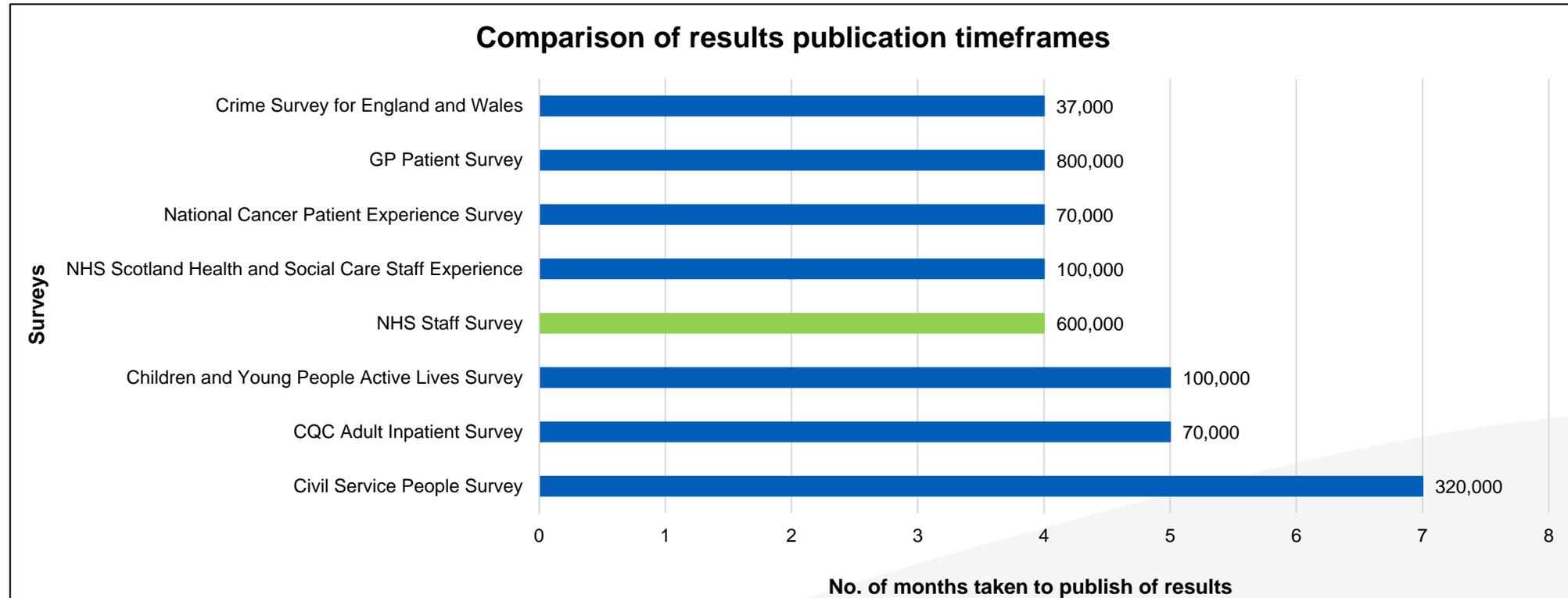


4. Functionality check

Functionality check of each output, wording, presentation, colour, accuracy, drop down menus, download functionality, data is displayed correctly.



Publication time for NHS Staff Survey is similar to comparable surveys



The number of survey respondents is recorded at the end of each bar

But, why?

- The complexity and number of outputs is often key to why surveys take the time they do,
- The data is all taken from published information on survey websites

