

Comparison of state and territory health workforce culture survey results

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Health Performance Council



Government
of South Australia

Health Performance Council

Acknowledgment of the Aboriginal peoples of South Australia

The Health Performance Council acknowledges the Aboriginal peoples of South Australia and their ongoing contributions to and participation in the life of South Australia. We acknowledge and respect their spiritual relationship with their respective countries.

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Preamble

Initially there was the 'triple aim': that health services should aim to improve health outcomes and the patient's experience of care at the same time as reducing cost.¹ Subsequently a fourth aim was added, to enhance the provider's experience.² There are good reasons for this addition — international evidence is clear that workplace wellbeing is important to health professionals' workforce resilience, and preparedness for reform, while poor healthcare workforce wellbeing is associated with poor patient experiences and outcomes.³

Accordingly, people and culture issues around workforce recruitment, experiences and retention are priorities for the Health Performance Council (HPC, 'we', 'our') in 2023 and 2024. This report analyses state and territory approaches to monitoring and reporting on health workforce culture to provide a context for South Australia's approach.

This report contains recommendations that reflect a need for SA Health to improve openness, transparency and consistency in the collection, availability and application of its workforce survey results. An open data approach leads to improved staff engagement and its flow-on effect of improved patient safety. SA Health, like all agencies, must ensure that its guidelines and practices align with the South Australian Government's open data principles.⁴

Findings

1. There are eight key performance indicators (KPIs) for people and culture in SA Health. These relate to workforce participation and turnover, health and safety, and commitment to employee performance reviews.
2. There are no SA Health KPIs for workforce culture, employee engagement or experiences, although work is underway led by the Commission on Excellence and Innovation in Health (CEIH) and a sub-committee of the SA Health Chief Executives' Council to expand workforce indicators and put more focus on workforce indicators as a measure of performance of the health system.
3. Other states and territories have KPIs about the health workforce and, interestingly, one of NSW's KPIs is the degree to which staff feel that actions will be taken in response to survey results. The result of this question is reported by four states. More than half of Victoria Health staff (55%), for example, believe action would be taken because of the survey compared to less than a third of SA Health's workforce (27%).
4. All state and territory governments and the Commonwealth government conduct public sector workforce surveys on a regular to semi-regular basis and — with the exception of ACT — publish their results online. Results for SA are available here: www.publicsector.sa.gov.au/about/Resources-and-Publications/I-Work-For-SA-Your-Voice-Survey.

¹ Berwick D.M., Nolan T.W., Whittington J. (2008) *The Triple Aim: Care, Health, And Cost*. Health Affairs 27, no. 3, <https://doi.org/10.1377/hlthaff.27.3.759>, <http://www.healthaffairs.org/doi/abs/10.1377/hlthaff.27.3.759>.

² Sikka R., Morath J.M., Leape L. (2015) *The Quadruple Aim: care, health, cost and meaning in work*. BMJ Quality & Safety 24, no. 10, <https://doi.org/10.1136/bmjqs-2015-004160>, <https://qualitysafety.bmj.com/content/qhc/24/10/608.full.pdf>.

³ Refer to Appendix 3 for examples compiled by HPC as part of a limited literature search.

⁴ www.dpc.sa.gov.au/responsibilities/ict-digital-cyber-security/policies-and-guidelines/data/open-data-principles

5. State and territory and Commonwealth public sector workforce survey results for their respective health portfolios⁵ are also available online — with the exception of ACT (as stated above), Tasmania (overall state results only, not by individual state government agency).
6. Of the states and territories that publish public sector workforce survey results for their health portfolios, we consider NSW Health to be the gold standard, making detailed results available online to the public, disaggregated by its local health districts. WA Health also does well, reporting summary survey results by its health regions.
7. Of the state, territory and Commonwealth health organisations that reported health workforce survey data, all report an overarching *Employee Engagement Score* intended as a quantitative summary proxy measure of workforce satisfaction. This index is comparable between state and territory health portfolios, but unfortunately not comparable to the Commonwealth's score.
8. The employee engagement score for most states (including South Australia) is in the 60-64% range. Victoria had a much better result than other states at 71%. South Australia was at the low end of the state range (61%).
9. There is large variation in workforce survey response rates which may reflect the degree to which senior leaders promote participation in the survey, and/or the degree to which the health workforce foresees the value of their participation in terms of the likelihood of actions in response to results.
10. SA Health has the second lowest response rate (29%). This places a high onus on SA Health to use that information to improve workplace culture, experiences and engagement.

Table 1: Health portfolio* workforce survey response rates and engagement scores

State, territory & Commonwealth health portfolio	Health portfolio* response rate	Health portfolio* Employee Engagement Score
ACT Health	Not published	
NSW Health	46%	62%
NT Health	26%	63%
Queensland Health	61%	60%
SA Health	29%	61%
Tasmanian Department of Health	Not published	
Health.vic	44%	71%
WA Health	36%	64%
Australian Department of Health and Aged Care	74%	76%**

Sources: State, territory and Australian governments. See Appendix 1 for more detail and data sources.

* We define 'health portfolio' here in a broader sense meaning the clinical and non-clinical workforces of government health services and agencies that may in some jurisdictions come under a wider 'brand'. For example, the SA *Health* portfolio consists of: a central, coordinating Department for Health and Wellbeing; SA Ambulance Service; Commission on Excellence and Innovation in Health; Wellbeing SA; and ten local health networks that govern the state's public hospitals.

** Not considered directly comparable as the Australian Public Service Employee Census has ten questions in its Employee Engagement Score vs five for the states and territories.

⁵ We define 'health portfolio' here in a broader sense meaning the clinical and non-clinical workforces of government health services and agencies that may in some jurisdictions come under a wider 'brand'. For example, the SA Health portfolio consists of: a central, coordinating Department for Health and Wellbeing; SA Ambulance Service; Commission on Excellence and Innovation in Health; Wellbeing SA; and ten local health networks that govern the state's public hospitals.

Recommendations

1. **TRANSPARENCY** SA Health publish *I WORK FOR SA – Your Voice Survey* results disaggregated by local health network publicly via its website under *SA Government Open Data Principles*⁴. That is, agencies proactively identify and classify data for public release with consideration and appropriate attention to privacy, information security, intellectual property rights and legal concerns.
2. **RESPONSIVENESS** Local health networks implement their own programs of longitudinal monitoring of effects of changes and comparison of improvements in between *I WORK FOR SA – Your Voice Surveys*. Intra-period monitoring activity could include LHNs undertaking their own internal staff engagement surveys, staff wellbeing "pulse" polls (a brief and regular set of questions sent to samples of employees or discrete sections of the organisation in support of specific organisational development initiatives), or other such strategies that promote staff engagement and high performance teams with engaged leaders.
3. **ACCOUNTABILITY** Local health networks implement their own programs of regular and transparent consultation and communication of *I WORK FOR SA – Your Voice Survey* results *and subsequent actions* to their workforces to build a positive workplace culture and facilitate continuous quality improvement. Consultation and feedback of action should be done routinely by organisation leaders and managers across all levels of the organisation and communication plans with key messages published on the LHN websites.
4. **OVERSIGHT** SA Health incorporate *I WORK FOR SA – Your Voice Survey* measures into its people and culture key performance indicators as areas for system improvement monitoring. HPC notes the work of the Commission on Excellence and Innovation in Health to develop a strategic approach to strengthen healthcare workforce wellbeing across SA Health, including a framework of metrics and associated assessment tools to measure different elements of workplace wellbeing. The measures could also potentially follow NSW Health's lead with the monitoring for improvements in culture index; action taken as a result of the survey; engagement index; and experiences of racism. In HPC's view, monitoring experiences of racism as its own unique classification under discrimination, bullying and harassment is of particular importance.
5. **COMPARABILITY** SA Health publish *I WORK FOR SA – Your Voice Survey* results disaggregated by workforce grouping—clinical and non-clinical—publicly via its website under *SA Government Open Data Principles*⁴.

Introduction

A person's experience of care is heavily influenced by the staff they interact with. People and culture issues in the South Australian health system is therefore a Health Performance Council priority.

SA Health workforce experiences data from the *I WORK FOR SA – Your Voice Survey* was reported in our 2022 4-yearly report. We used 'Intention to leave and, if so, how soon' questions as a proxy measure for workforce satisfaction.

We highlighted five areas for the attention of the Minister for Health and Wellbeing in relation to '*Staffing Services: Workforce*' in our 2022 4-yearly report⁶:

Workforce satisfaction: '*Data requested but not provided to the Health Performance Council, even though it has been collected by SA Health*'.⁶

Staff turnover: '*There has been a rise over the last three years in staff turnover across SA Health, with concerning turnover rates in 2021-22, particularly in local health networks in country SA*'.⁶

Medical interns: '*South Australia provides more than its fair share of the nationally available medical internships, and the number of internships in SA continues to grow at a faster rate than our state's population. Almost all South Australian internships are in metropolitan Adelaide, although there has been a modest development of new regional internship opportunities since 2018. Only three Aboriginal and/or Torres Strait Islander graduates were known to have accepted South Australian internships in 2021. South Australia continues to be a rarely chosen first preference for medical students' future state in which to practice*'.⁶

First-year professions employed: '*Using SA Health payroll data, an estimate for the number of new commencements has been derived based on the salary classification of an employee's first record*'.⁶ (Data appears to suggest a substantial rise of new employees over the last four years, but we acknowledge in our 2022 4-yearly report that it is difficult to know for certain.)

New entrants and retirements among clinical practitioners: '*Numbers of registered medical practitioners and nurses and midwives in South Australia have been increasing faster than the growth in the state's population. The replacement rate (new entrants compared to exist from the professions in South Australia) is positive in each year*'.⁶

In 2018 and again in 2021, South Australia's Office of the Commissioner for Public Sector Employment (OCPSE) conducted the *I WORK FOR SA – Your Voice Survey*, a voluntary and confidential survey that provided an opportunity for all South Australian public sector employees to have a say about their workplace and to garner a better understanding of employee perceptions of workplace culture and practices. From 28 February – 27 March 2024, OCPSE conducted the all-agency *People Matter Employee Survey 2024* as the successor to the previous *I WORK FOR SA – Your Voice Surveys*.⁷

It is the responsibility of individual SA Health local health networks to develop action plans in response to the SA Health *I WORK FOR SA – Your Voice Survey* results; to continue to monitor key wellbeing indicators for staff; and to deliver projects aimed at improving the workplace based on staff feedback.

Good employers care about staff culture. In addition, the National Safety and Quality Health Service Standards published by the Australian Commission on Safety and Quality in Health Care include a required action under the governance, leadership and culture standard that governing boards of health services '*ensure that systems are in place to regularly survey and report on organisational culture*'.⁸

⁶ Health Performance Council (2022). *Monitoring the performance of the South Australian health system 2018-19 to 2021-22 4-yearly indicator report to the South Australian Minister for Health and Wellbeing*. www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/about+us/about+sa+health/reporting+and+advisory+groups/health+performance+council/health+performance+council+reports

⁷ Results from the *I WORK FOR SA – Your Voice Surveys* for South Australian government agencies including SA Health are available for download from: www.publicsector.sa.gov.au/about/Resources-and-Publications/I-Work-For-SA-Your-Voice-Survey. The *People Matter Employee Survey 2024*, with new questions, replaces the previous *I WORK FOR SA – Your Voice Surveys* although note that we will continue to use the *I WORK FOR SA – Your Voice Survey* title throughout the remainder of this report for consistency. At the time of preparing this report, results from the *People Matter Employee Survey 2024* were not available.

⁸ www.safetyandquality.gov.au/standards/nsqhs-standards/clinical-governance-standard/governance-leadership-and-culture/action-101

SA Health people and culture – Background

Overarching employment, management and governance matters relating to all South Australian public sector agencies — including general principles to guide public sector operations; and a code of conduct to enforce ethical behaviour and professional integrity — are defined in the *Public Sector Act 2009*, and *Public Sector Regulations 2010*.

This Act, its regulations, a *Code of Ethics* and a *Public Sector Values and Behaviours Framework* sets the standards for all state government agencies for service-focused, responsive, collaborative and ethical workplace cultures, and outlines the rights of public sector employees to fair and just workplaces that recognise achievement and provide opportunities for growth.

Functions and responsibilities of the *Public Sector Act 2009* come under the auspices of the Office of the Commissioner for Public Sector Employment (OCPSE), an attached office within the Attorney-General's Department.

OCPSE provides advice and develops policies on people and culture issues, and collects and analyses information about the public sector workforce to guide planning, for example by administering the *I WORK FOR SA – Your Voice Survey*.

SA Health people and culture – Policies & Key Performance Indicators

Policies

Department of Health and Wellbeing Workforce Services have an overall system governance and coordination role managing people and culture policies, and do so across five main areas — Workforce Health; Human Resources; Workforce Strategy; Workforce Relations; and Workforce Systems. However, it's important to note that since the establishment of local health networks (LHNs) and governing boards in July 2019, LHNs have been responsible for their own people and culture governance, leadership and management. LHNs can set or amend policies relevant to workforce culture and engagement in this post-2019 governance context.

SA Health portfolio roles and responsibilities for managing employment, work health and safety matters are guided by and align with OCPSE's statutory responsibilities and strategic direction, as well as relevant industrial instruments, state and national policy and legislation. OCPSE provides central support to public sector agencies on workforce functions.

Strategic directions and workforce plans

Strategic direction for SA Health workforce policies is informed by the SA Health *Workforce Strategic Directions 2022*. This plan contains a 'roadmap which has been developed to provide direction for the complex work required to navigate the development and implementation of the SA Health *Strategic Workforce Plan 2022-2032* for the longer term'.

At the time of writing, the *Strategic Workforce Plan 2022-2032* has not been released publicly.

Local Health Networks (LHNs) use their clinical service plans and models of care to establish their workforce requirements and to develop workforce plans. Each LHN has strategies relating to specific segments of their workforce, such as nurses and midwives, and Aboriginal workforce. All LHNs are required to have strategic plans, and their governing boards are responsible for holding chief executives accountable for delivering on strategic plans.

Key performance indicators — current situation

SA Health's *Performance Framework 2023-24* and *Key Performance Indicators Master Definition Document 2023–24* set the framework within which the Department of Health and Wellbeing (DHW) monitors, assesses and responds to the performance of public sector health services in South Australia. The *Framework* and the *Master Definition Document* together monitor the extent to which the high-level objectives set out in service agreements between DHW and LHNs are being delivered.

DHW provides data on performance against KPIs to LHNs monthly, but not publicly. KPIs are published in a restricted access folder within SA Health primarily for LHN performance leads, executive and other health delivery service managers who have approved access.

There are eight key performance indicators in the Key Performance Indicators reference related to people and culture in SA Health. These KPIs relate to workforce participation and turnover, health and safety and commitment to employee performance reviews.

Table 2: SA Health people and culture key performance indicators, 2023-2024

SA Health people and culture KPI	Target
Employees with excess annual leave balance	≤ 5%
Completion of performance reviews in line with the Commissioner's Determination	≥ 80%
Aboriginal or Torres Strait Islander workforce participation rate	≥ 3%
Staff turnover rate	≤ 4% metro; ≤ 5% regional
Productive overtime hours rate	≤ 2.5% metro; ≤ 1% regional
Sick and carers leave rate	≤ 4.5%
New workplace injury claims	≤ previous year
Gross expenditure for workplace injury claims	≤ previous year

Source: SA Health Key Performance Indicators Master Definition Document 2023 – 2024

There are no SA Health KPIs for workforce culture, engagement or experiences. This is surprising given the importance of these issues on the performance of health organisations. Indeed, parliamentary inquiries, commissions of inquiries or investigations undertaken in other Australian states after significant threats to public confidence in health services consequential to patient safety events (e.g. NSW and Victoria) have included numerous recommendations to support improvements in staff culture, engagement and experience.

Key performance indicators — CEIH and SA Health Chief Executives' Council work

In 2022 and 2023, the Commission on Excellence and Innovation in Health (CEIH) conducted a body of work to develop a strategic approach to strengthen healthcare workforce wellbeing action across SA Health. The results of this piece of work and consultation is publicly available on the CEIH website.⁹

Alongside this, a sub-committee of the SA Health Chief Executives Council was formed in June 2022 to provide strategic direction and governance oversight to improvements in workplace wellbeing culture and worker wellbeing across the South Australian public health system. This committee is chaired by the Commissioner CEIH and has representation from metropolitan and regional local health network chief executives and executive directors, including from DHW, CEIH and Wellbeing SA.

In May 2023, the SA Health Chief Executives' Council *Healthcare Workforce Wellbeing Subcommittee* developed a plan for system level action to advance healthcare workforce wellbeing across SA Health. This

⁹ <https://ceih.sa.gov.au/our-work/strengthening-workplace-wellbeing>

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plan was informed by a workshop held in February 2023, attended by over 70 senior leaders across SA Health. The workshop enabled participants to agree on system-level priorities for collective action. Establishing accountability and wellbeing measurement was identified as a key priority area.

The objectives outlined within this priority area include:

- Mechanisms for accountability of workplace wellbeing are established across SA Health, including regular reporting.
- Consistent metrics are identified to benchmark and track change in workforce wellbeing.
- Appropriate and consistent key performance indicators are established across SA Health.

As such, a body of work has commenced, co-led by CEIH and DHW Workforce Services, to deliver on these actions including:

- Developing a comprehensive understanding of what data is currently being collected that is directly or indirectly related to workplace and worker wellbeing.
- Establishing recommendations to best utilise existing data and identify any new data requirements to establish consistent metrics and benchmarks for workforce wellbeing (including KPIs).
- Identifying pathways to collate and report on workplace wellbeing data across SA Health to enable meaningful and actionable insights.

The people and culture KPIs embedded in 2023-24 service level agreements have been recently expanded to incorporate more metrics compared to the previous year. This is a step in the right direction to put more focus on workforce indicators as a measure of performance of the health system.

Key performance indicators — NSW practice

NSW provides an example of leadership in improved practice by including four measures from its *People Matter Survey* in its own health workforce KPIs:

- Culture Index. Target: \geq -1% variation from previous survey.
- Take action as a result of the survey. Target: \geq -1% variation from previous survey.
- Engagement Index. Target: \geq -1% variation from previous survey.
- Racism experienced by staff. Target: \geq 5% points decrease on previous survey.

Including experiences of racism in particular as a key component of people and culture KPI monitoring and improvement is important. In fact, SA Health's relatively poor result (16% of the workforce reported race/cultural background as the type of discrimination they experienced, the highest of the discrimination categories vs 6% for NSW Health) bears this out. SA Health must ensure health professionals—many of whom are from culturally and linguistically diverse backgrounds—feel a sense of belonging to the workplace and that their cultural needs are understood, recognised, and met.¹⁰

State and territory employee workplace culture Indexes

All state and territory governments and the Commonwealth government conduct public sector workforce surveys on a regular to semi-regular basis and — with the exception of ACT — publish their results online.

¹⁰ We have reported previously on structural racism in SA Health see: Marrie, A., Bourke C. (2020) *Institutional racism matrix audit of South Australia's ten local health networks – Report to the Health Performance Council, South Australia.*

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State and territory and Commonwealth public sector workforce survey results for their respective health departments are also available online — with the exception of ACT (as stated above) and Tasmania (state sector results only, not individual agency). Results for all of SA are available here: www.publicsector.sa.gov.au/about/Resources-and-Publications/I-Work-For-SA-Your-Voice-Survey.

Of the states and territories that publish public sector workforce survey results for their health departments, only NSW makes detailed results available disaggregated by its local health districts. WA reports its summary survey results by health region.

State and territory survey response rates range from 26% (NT Health) to 61% (Queensland Health). SA Health's response rate was at the lower end of the state and territory range at 29%. The Australian Government Department of Health and Aged Care recorded the highest in 2022 with 74% of their workforce responding. Table A1 in Appendix 1 summarises a high-level comparative analysis of state and territory health portfolio workforce surveys.

Employee Engagement Score

Of the state, territory and Commonwealth health organisations that reported workforce survey data, all reported an overarching "Employee Engagement Score" as the principal quantitative summary. Employee engagement tries to capture a person's connection to their organisation. It is often intended as a global measure of employee experience but is a proxy measure at best.

Employee Engagement Score is a combined score calculated from favourable responses to five key questions (wording and order can differ slightly between states and territories). The SA questions are:

1. I am proud to tell others I work for my LHN
2. I would recommend my LHN as a good place to work
3. I feel a strong personal attachment to my LHN
4. My LHN really inspires me to do the best work every day
5. My LHN motivates me to help it achieve its objectives.

Employee Engagement Score key questions for state and territory and Commonwealth health workforce surveys — showing very minor differences in wording or order between the jurisdictions — are listed in Appendix 2.

The Australian Public Service Employee Census has ten questions contributing to its Employee Engagement Score but includes the five key questions of the states and territories.

State and territory Employee Engagement Scores vary by 11 percentage points between highest and lowest:

- A maximum of 71% for Health.vic in its 2021 *People Matter Survey*
- A minimum of 60% for Queensland Health in its 2022 *Working for Queensland Survey*.

SA Health at 61% is at the low end of this range (see Table A1 in Appendix 1). The Australian Government Department of Health and Aged Care score of 76% is the highest in Australia, but this is not directly comparable to the states and territories as it is calculated from twice the number of questions (see above).

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Does the health workforce believe action will be taken as a result of these survey?

Health portfolio workforce surveys in four jurisdictions also included a survey question on whether respondents believed action would be taken as a result of the survey.

In descending order, the results are:

- Victoria Health 55%
- NSW Health 39%
- NT Health 34%
- **SA Health 27%.**

Conclusion

Monitoring workforce culture is important as is public accountability for improving culture when problems are identified.

This report shows that South Australia can do better in this area and is not best practice among states and territories. Our recommendations are designed to reposition SA Health towards the front of the pack.

Appendix 1: State and territory employee workplace culture surveys summary

Table A1: High-level comparative analysis of jurisdiction health portfolio* workforce surveys

State / Territory / C/wealth	Name of workforce survey	Year latest survey results published	Results published for whole public sector	Results published for health portfolio*	Results published by the health portfolio* local health networks / districts / regions	Health portfolio* workforce response rate (%)	Key topic areas summarised in workforce survey	Health portfolio* employee engagement score (%)
ACT	ACT Public Sector Employee Survey	Not published	✗ NO	✗ NO	✗ NO	N/A	N/A	N/A
NSW	People Matter: NSW Public Sector Employee Survey	2022	✓ YES	✓ YES	✓ IN FULL	46	Purpose & direction Work environment Enabling practices Leadership	62
NT	NT People Matter Survey	2023	✓ YES	✓ YES	✗ NO	26	Employee experience Bullying / Physical abuse / Sexual harassment Workplace inclusion & wellbeing Capability Innovation Quality service delivery Managers and Senior managers Governance	63
Qld	Working for Queensland Survey	2022	✓ YES	✓ YES	✗ NO	61	Your job Social support Fair and equitable treatment Keeping you well Building my future	60

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State / Territory / C/wealth	Name of workforce survey	Year latest survey results published	Results published for whole public sector	Results published for health portfolio*	Results published by the health portfolio* local health networks / districts / regions	Health portfolio* workforce response rate (%)	Key topic areas summarised in workforce survey	Health portfolio* employee engagement score (%)
SA	I Work for SA – Your Voice Survey	2021	✓ YES	✓ YES	✗ NO	29	Enabling high performance Leadership Values Employee organisation alignment Career & working conditions Employee wellbeing	61
Tas	Tasmanian State Service Employee Survey	2023	✓ YES	✗ NO	✗ NO	N/A	N/A	N/A
Vic	People Matter Survey	2021	✓ YES	✓ YES	✗ NO	44	Senior leadership Organisational climate Workgroup climate Job and manager	71
WA	'Your Voice in Health' Employee Engagement Survey	2023	✓ YES	✓ YES	✓ IN SUMMARY	36	Your job Our values Health, Safety & Wellbeing Environment sustainability Performance & development Service delivery & patient care About your organisation	64
Cwth gov	Australian Public Service Employee Census	2022	✓ YES	✓ YES	✗ NO	74	Leadership – Immediate supervisor and SES manager Communication & change Workplace conditions Inclusion & flexible working Enabling innovation Wellbeing policies & support	76**

Links to Table A1 sources

ACT: ACT Public Service Employee Survey portal (results not published)

<https://www.cmtedd.act.gov.au/employment-framework/performance-framework/actps-survey>

NSW: People Matter Employee Survey 2022 agency reports

<https://www.psc.nsw.gov.au/reports-and-data/people-matter-employee-survey/pmes-2022>

NT: 2023 People Matter Survey agency reports

<https://ocpe.nt.gov.au/people-and-planning/employee-survey-and-workforce-statistics/people-matter-survey>

Qld: Working for Queensland survey results portal

<https://www.forgov.qld.gov.au/employment-policy-career-and-wellbeing/culture-and-inclusion/working-for-queensland-survey>

SA: I Work for SA – Your Voice Survey 2021 agency reports portal

<https://www.publicsector.sa.gov.au/about/Resources-and-Publications/I-Work-For-SA-Your-Voice-Survey/2021-results>

Tas: 2023 Tasmanian State Service (TSS) Employee 2023 survey whole-of-service results (agency results not reported)

https://www.dpac.tas.gov.au/divisions/ssmo/employee_survey

Vic: People Matter Survey 2021 report for Victorian Department of Health (Health.vic)

<https://www.health.vic.gov.au/careers/our-culture-people-matter-survey>

WA: Your Voice in Health survey portal

<https://www.health.wa.gov.au/Reports-and-publications/Your-Voice-in-Health-survey>

Australian Public Service employee census 2022 – Highlights report for the Department of Health and Aged Care

<https://www.health.gov.au/resources/publications/australian-public-service-employee-census-2022-highlights-report>

Notes to Table A1

* We define 'health portfolio' here in a broader sense meaning the clinical and non-clinical workforces of government health services and agencies that may in some jurisdictions come under a wider 'brand'. For example, the SA *Health* portfolio consists of a central, coordinating Department for Health and Wellbeing; SA Ambulance Service; Commission on Excellence and Innovation in Health; Wellbeing SA; and ten local health networks that govern the state's public hospitals.

** Not considered directly comparable as the Australian Public Service Employee Census has ten questions in its Employee Engagement Score vs 5 for the states and territories.

Appendix 2: State and territory health workforce survey Employee Engagement key questions

Note slight differences in wording and question order between some states and territories.

Table A2: Workforce survey employee engagement questions by jurisdiction

State / Territory	Employee Engagement Questions
ACT (-)	Health portfolio* workforce survey not published
NSW (2022)	<ol style="list-style-type: none"> 1. I would recommend my organisation as a great place to work 2. I am proud to tell others I work for my organisation 3. I feel a strong personal attachment to my organisation 4. My organisation motivates me to help it achieve its goals 5. My organisation inspires me to do the best in my job
NT (2023)	<ol style="list-style-type: none"> 1. I would recommend my organisation as a great place to work 2. I am proud to tell others I work for my organisation 3. I feel a strong personal attachment to my organisation 4. My organisation motivates me to help it achieve its objectives 5. My organisation inspires me to do the best in my job
Qld (2022)	<ol style="list-style-type: none"> 1. I would recommend my organisation as a great place to work 2. I am proud to tell others I work for my organisation 3. I feel a strong personal attachment to my organisation 4. My organisation motivates me to help it achieve its objectives 5. My organisation inspires me to do the best in my job
SA (2021)	<ol style="list-style-type: none"> 1. I am proud to tell others I work for my LHN 2. I would recommend my LHN as a good place to work 3. I feel a strong personal attachment to my LHN 4. My LHN really inspires me to do the best work every day 5. My LHN motivates me to help it achieve its objectives
Tas (-)	Health portfolio* workforce survey not published
Vic (2021)	<ol style="list-style-type: none"> 1. I am proud to tell others I work for my organisation 2. I would recommend my organisation as a good place to work 3. My organisation motivates me to help it achieve its objectives 4. My organisation inspires me to do the best in my job 5. I feel a strong personal attachment to my organisation
WA (2023)	<ol style="list-style-type: none"> 1. I would recommend my organisation as a great place to work 2. I am proud to tell others I work for my organisation 3. I feel a strong personal attachment to my organisation 4. My organisation inspires me to do the best in my job 5. My organisation motivates me to help it achieve its objectives
Commonwealth (2022)	<ol style="list-style-type: none"> 1. Overall, I am satisfied with my job 2. I am proud to work in my agency 3. I would recommend my agency as a good place to work 4. I believe strongly in the purpose and objectives of my agency 5. I feel a strong personal attachment to my agency 6. I feel committed to my agency's goals 7. I suggest ideas to improve our way of doing things 8. I am happy to go the 'extra mile' at work when required 9. I work beyond what is required in my job to help my agency achieve its objectives 10. My agency really inspires me to do my best work every day

Sources: State, territory and Australian governments. See Appendix 1.

* We define 'health portfolio' here in a broader sense meaning the clinical and non-clinical workforces of government health services and agencies that may in some jurisdictions come under a wider 'brand'. For example, the SA *Health* portfolio consists of: a central, coordinating Department for Health and Wellbeing; SA Ambulance Service; Commission on Excellence and Innovation in Health; Wellbeing SA; and ten local health networks that govern the public hospitals.

Appendix 3: Literature review

We conducted a limited literature search of published research on links between health workforce (clinical and non-clinical) wellbeing and patient safety.

1. A 2013 literature review of nursing turnover costs suggests that *'nurse turnover is costly for health-care organizations, as these costs must be paid using organizational resources and accounted for in organizational budgets. We still have much to learn about the actual costs and benefits of nurse turnover and retention globally, and the relationship between nurse turnover costs and quality of care'*.¹¹
2. A 2016 (first published in 2015) retrospective analysis concludes that *'overall, our results suggest an association between unit-level perceptions of safety culture and employee engagement over time in a large urban academic medical centre'*.¹²
3. Another 2016 systematic research review finds a correlation between poor wellbeing and worse patient safety, and an association between burnout and patient safety.¹³ The review concludes that *'poor wellbeing and moderate to high levels of burnout are associated, in the majority of studies reviewed, with poor patient safety outcomes such as medical errors, however the lack of prospective studies reduces the ability to determine causality'*.¹³
4. A 2017 systematic review of systematic reviews finds *'a body of moderate quality review evidence does exist giving a picture of multiple determinants of turnover in adult nursing, with - at the individual level - nurse stress and dissatisfaction being important factors and - at the organisational level - managerial style and supervisory support factors holding most weight'*.¹⁴
5. Another 2017 systematic review finds *'a consistently positive association held between culture and outcomes across multiple studies, settings and countries. This supports the argument in favour of activities that promote positive cultures in order to enhance outcomes in healthcare organisations'*.¹⁵
6. A 2019 analysis of the National Health Service (NHS) staff survey and concurrent Care Quality Commission (CQC) outcomes finds that *'CQC ratings are predicted by overall employee engagement score'* and concludes that *'NHS acute Trusts with high employee engagement scores tend to have better CQC ratings'*.¹⁶
7. A 2021 systematic review and meta-analysis indicates *'a small but consistent, statistically significant relationship between staff engagement and patient safety'* and *'cautiously'* concludes that *'increasing staff engagement could be an effective means of enhancing patient safety'*.¹⁷
8. Evidence from a 2022 study based on a limited sample of healthcare workers (clinical and non-clinical, n=663) at a tertiary care hospital is that *'the dimensions of safety culture, including staffing, hospital management support, hospital handover, and transition, may have a significant impact on job satisfaction and intention to leave among healthcare workers'*.¹⁸
9. Other recent meta analyses reviewed by HPC also find evidence of positive association between health workforce engagement and health consumer quality of care.^{19 20}

¹¹ Li Y., Jones C.B. (2013) *A literature review of nursing turnover costs*. Journal of Nursing Management, 2013, 21, 405–418

¹² Daugherty Biddison E.L., Paine L., Murakami P., Herzke C., Weaver S.J. (2015) *Associations between safety culture and employee engagement over time: a retrospective analysis*. BMJ Quality & Safety 2016;25:31-37. dx.doi.org/10.1136/bmjqs-2014-003910

¹³ Hall L.H., Johnson J., Watt I., Tsipa A., O'Connor D.B. (2016) *Healthcare Staff Wellbeing, Burnout, and Patient Safety: A Systematic Review*. PLoS ONE 11(7): e0159015. doi:10.1371/journal.pone.0159015

¹⁴ Halter M., Boiko O., Pelone F., Beighton C., Harris R., Gale J., Gourlay S., Drennan V. (2017) *The determinants and consequences of adult nursing staff turnover: a systematic review of systematic reviews*. BMC Health Serv Res 17, 824. https://doi.org/10.1186/s12913-017-2707-0

¹⁵ Braithwaite J., Herkes J., Ludlow K., Testa L., Lamprell G. (2017) *Association between organisational and workplace cultures, and patient outcomes: systematic review*. BMJ Open 2017;7:e017708. doi:10.1136/bmjopen-2017-017708

¹⁶ Wake M., Green W. (2019) *Relationship between employee engagement scores and service quality ratings: analysis of the National Health Service staff survey across 97 acute NHS Trusts in England and concurrent Care Quality Commission outcomes (2012–2016)*. BMJ Open 2019;9:e026472. doi:10.1136/bmjopen-2018-026472

¹⁷ Janes G., Mills T., Budworth L., Johnson J., Lawton R. (2021) *The Association Between Health Care Staff Engagement and Patient Safety Outcomes: A Systematic Review and Meta-Analysis*. J Patient Saf. 2021 Apr 1;17(3):207-216. doi: 10.1097/PTS.0000000000000807. PMID: 33427792; PMCID: PMC7984750

¹⁸ Al-Surimi K., Almuhayshir A., Ghailan K.Y., Shaheen N.A. (2022) *Impact of Patient Safety Culture on Job Satisfaction and Intention to Leave Among Healthcare Workers: Evidence from Middle East Context*. Risk Manag Healthc Policy. 2022 Dec 31;15:2435-2451. doi: 10.2147/RMHP.S390021. PMID: 36620517; PMCID: PMC9811957

¹⁹ Scott G., Hogden A., Taylor R., Mauldon E. (2022) *Exploring the impact of employee engagement and patient safety*. International Journal for Quality in Health Care, Volume 34, Issue 3, 2022, mzac059, doi.org/10.1093/intqhc/mzac059

²⁰ Wee K.Z., Lai A.Y. (2022) *Work Engagement and Patient Quality of Care: A Meta-Analysis and Systematic Review*. Medical Care Research and Review. 2022;79(3):345-358. doi:10.1177/10775587211030388

