SOP 25: Staff Surveys

SOP reference:	SOP 25
Version:	4.0
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Approved by Commercial Director:	Claire Richardson 19/10/2023
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Date of Review:	23/11/2025

IT IS THE RESPONSIBILITY OF <u>ALL</u> USERS OF THIS SOP TO ENSURE THAT THE CORRECT VERSION IS BEING USED

All staff should regularly check the Research & Development Webpage for information relating to the implementation of new or revised versions. Staff must ensure that they are adequately trained in the new procedure and must make sure that all copies of superseded version are promptly withdrawn from use unless notified otherwise by the SOP Controller.

The definitive version of all Gloucestershire Hospitals NHS Foundation Trust SOPs appear online. If you are reading this in printed form, check that the version number and date below is the most recent one as shown on the R&D website:

http://www.gloshospitals.nhs.uk/en/About-Us/Research--Development/

Version History Log

This area will be updated with details of all changes made to the SOP whether due for full review or not.

Version	Details of Change	Date Implemented
1.0	Original SOP	
2.0	Review and update along with reorganisation into the Gloucestershire R&D Consortium suite of SOPS	20/01/2017
3.0	Rebranding to GHNHSFT, updating of contact details and reference documents	31/03/2018
3.1	Typographical corrections	01/02/2022 Not implemented
4.0	Removal of SOP categories and change of reference codes Addition of Peer to scientific review	23/11/2023

This SOP will be reviewed every two years unless changes to any relevant legislation require otherwise

SOPs
SOP 13 - Monitoring
SOP 24 – Scientific Peer Review

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1. Introduction, Background and Purpose

Surveys are an effective tool for gathering information from large numbers of individuals or groups in a reasonably short space of time when undertaken correctly and efficiently. However, to conduct a good survey is not a simple process and a seemingly cheap and easy exercise can lead to the collection of data that are not useful in providing the information required. This wastes time and money and affects the goodwill of those who are asked to participate.

All non-research related surveys such as satisfaction surveys, intended for patients, are reviewed by the patient involvement team to ensure quality and robustness to deliver the information required. There is a separate process for this activity. Surveys involving staff regardless of the purpose (research, service evaluation and satisfaction) no longer require review and approval by an NHS Research Ethics Committee (GAfREC 2010). This does not mean that the ethical and governance issues can be ignored.

This document provides guidance and a process for the conduct of surveys involving staff to ensure that the ethical and governance aspects can be assessed independently of the teams conducting the surveys across the Trust and that a quality assurance process can be implemented to improve the quality of surveys presented to staff.

2. Who should use this SOP?

The Survey Project Lead (SPL) for a staff survey and the R&D Department will use this SOP to ensure the process for approving surveys involving NHS staff, whether related to research, service evaluation or service satisfaction.

3. When this SOP should be used?

The SOP should be read at the earliest opportunity to ensure the Survey Project Lead is familiar with the process for approving such surveys.

4. Roles and Responsibilities

4.1.   Project Sponsor

All surveys will require a Project Sponsor. This is not the same as a Research Sponsor, and should be a suitable Senior Manager, Divisional Lead or Board Member who is supportive of the survey project and recognises the importance of its undertaking. The Project Sponsor is also not the same as the Project Lead.

4.2.   Survey Project Lead

All surveys will require a Survey Project Lead (SPL) who will take overall responsibility for the design, management and conduct of the study. The equivalent of a "Chief Investigator" for a research project.

5. Protocol

All survey projects require a clear, written protocol, which details how the survey will be conducted. This will include a full description of the following:

- Background to the need for the survey, including a review of the literature if appropriate.
- Aims and Objectives
- Sampling frame and sample size
- Data protection safeguards
- Consideration of Ethical implications
- Distribution method(s) including return process and reminders
- Final version of questionnaire to use

- Analysis Plan
- Dissemination plan including responsibilities for the development of action plans
- Full costings

6. Governance

6.1.   Scientific Peer Review

The study documents, including the protocol and agreement from the Survey Project Sponsor, should be sent to the Trust R&D Governance team for Scientific Peer Review using the generic e-mail address listed on the Research pages of the Trust website (See SOP 24)

- The survey will be reviewed by the Scientific Review Committee (SRC) and comments will be sent to the SPL.
- The SPL will be expected to make appropriate changes or provide clarification where changes are not to be made.
- When a satisfactory response has been received from the SPL, the survey can proceed to Trust Approval.

6.2.   Trust Approval

The survey project documents will be collated in the Trust R&D Governance team and will be reviewed by an R&D Manager for Trust approval.

- The review will look at the documents provided by the SPL as well as any paperwork related to the Scientific Review.
- As Scientific Peer Review is conducted largely by the Trust R&D Governance team which includes R&D Portfolio Managers, the R&D Governance Approval Process should be completed rapidly following satisfactory Scientific Peer Review.

The allocated Research Support Officer will endeavour to provide approval from the Trust for the survey within 5 working days of receiving a satisfactory submission following Scientific Peer Review.

7. Post Approval

A copy of the final report/findings from the survey will be submitted to the Trust R&D Office upon completion of the survey.

Address   R&D Office
                 Leadon House
                 Gloucestershire Royal Hospital
                 Great Western Road
                 Gloucester
                 GL1 3NN

Alternatively, submissions can be emailed to the Trust R&D Office at ghn-tr.rdsu@nhs.net .