

Mechanisms to collect real-time employee feedback

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QUESTION

What is best practice in regards to employee engagement mechanisms that provide real-time, actionable feedback from employees?

RESULTS

GENERAL RESOURCES (INCLUDING GREY LITERATURE)

BUSINESS COMMENTARY, REPORTS, & WHITE PAPERS

- McKinsey & Company. (2023). [The next competitive advantage in talent: Continuous employee listening.](#)
 - Discusses weekly pulse surveys to gather real-time insights and drive decisions.
- Perceptyx. (2020). [Continuous listening: Developing the right strategy for your organization.](#)
 - Defines continuous listening and provides example schedules incorporating various mechanisms (e.g. p. 7).
- Emperor. (2019). [Evolving your culture: How to measure, develop and report on culture.](#)
 - See p. 10 for 'How companies are harnessing employee voice'
- The Conference Board & Deloitte. (n.d.). [Continuous listening part 1: Moving beyond point-in-time measurement.](#)
 - See p. 7 onwards for the 4 C's of continuous listening.
 - *Related:* [Part 2](#) and [Part 3](#) of the report series.
- Mann, et al. (2016). [Amid Rapid-Fire Workplace Change, Pulse Surveys Emerge.](#) *Gallup Business Journal*, 1-1.
 - Discusses the use of pulse surveys to track real-time employee experiences.

HARVARD BUSINESS REVIEW

- B. Power. (2016). [Why John Deere Measures Employee Morale Every Two Weeks.](#)
 - Several groups within the company have adopted short fortnightly surveys, which they use to track motivation and determine what did and didn't go well.

- B. Benjamin. (2016). [Listen to Your Employees, Not Just Your Customers.](#)
 - Outlines 6 steps for organisations to develop effective feedback systems.

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BOOK CHAPTERS

In W. H. Macey & A. A. Fink (Eds.), *Employee Surveys and Sensing: Challenges and Opportunities* (2020). Oxford University Press. [Click to view abstract and chapter list.](#)

- Chapter 4: **Exploring the universe of pulse surveys and continuous listening.**
This chapter is designed to help organizations better understand and implement pulsing and continuous listening approaches. The authors outline considerations for successful programs and propose a taxonomy to define the surveys that may be used.
- Chapter 14: **Is the engagement survey the only way? Alternative sources for employee sensing.**
This chapter covers a range of internal, external, active, and passive data sources that organizations can use to expand their listening systems beyond surveys.

Email library@monashhealth.org to request PDFs of the required chapter(s).

INFORMATION FROM THE NHS

- NHS England. (2023). [Listening well guidance.](#)
 - Section 2 outlines the NHS approach, including the monthly People Pulse survey.
- University of Aberdeen. (2020). [An 'app' a day to keep the doctor OK.](#)
 - App for frontline workers in NHS Scotland, providing Boards with real-time data on staff wellbeing. Developed by university researchers together with [Trickle](#).
 - *Related:* [Anonymous online forum](#) for doctors in training to provide feedback and suggestions.
- NHS – The Shrewsbury and Telford Hospital. (2019). [Staff survey 6-month response plan.](#)
 - See last page (p. 5) for staff engagement plan including launch of staff feedback app.

PEER-REVIEWED LITERATURE – MOST RECENT FIRST

Articles are grouped as follows:

- Mobile apps & digital tools
- Feedback terminals in physical spaces
- Pulse surveys
- Monthly surveys
- COVID-19

Each article summary contains excerpts from the abstract and an online link.

MOBILE APPS & DIGITAL TOOLS

K. Stanbery, et al. (2023). **The Feasibility of Using Net Promoter Score to Measure Real-Time Employee Engagement.** *Journal of Nursing Administration*, 53(1), 34-39. [Click to view full-text.](#)

This study aims to determine the feasibility of using a digital tool and net promoter scores to measure real-time employee engagement. Participation rates with the digital tool had a statistically significant improvement when teams were able to see their engagement score in real time. The team's interaction with the digital tool may have served as a positive distraction during the pandemic.

C. P. Burney, et al. (2021). **Hopes, fears, and rumors: Medical students and the general surgery clerkship.** *American Journal of Surgery*, 222(4), 687-691. [Click to view full-text.](#)

Surgical educators have worked to manage the hopes and fears as well as the recurring rumors that plague the surgical clerkship. It is not known if this has effected change over time. Method(s): We gathered information on hopes, fears, and rumors during our clerkship orientations from 2017 to 2019 using anonymous polling software with real-time feedback [polleverywhere.com].

J. Burnett et al. (2019). **The Future of Employee Engagement: Real-Time Monitoring and Digital Tools for Engaging a Workforce.** *International Studies of Management and Organization*, 49(1), 108-119. [Click to request full article.](#)

When it comes to measuring and tracking employee engagement, most companies still evaluate engagement on an annual, or longer, basis using traditional survey techniques. While these practices have provided a wealth of insight into the dimensions and impact of engagement, it is time to rethink how we are measuring engagement and, more importantly, how the same digital tools can be applied towards improving the productivity, retention, and satisfaction of the workforce. We propose a series of research topics to address this modern trend of the impact of technological advances on both the measurement of engagement and the application of human resource management (HRM) practices to improve engagement.

S. Schoster Meade, et al. (2018). **CNO Rounding Using an Electronic Tracking Tool: Closing the Loop.** *The Journal of nursing administration*, 48(7-8), E1-E4. [Click to view full-text.](#)

Nurse executives must develop creative solutions to improve staff perceptions of the work environment and decrease turnover, as well as stay connected with their staff. This article summarizes an innovative closed feedback loop using an electronic record incorporated into chief nursing officer rounding and the impact on NDNQI survey results.

A. Frampton, et al. (2017). **Using real-time, anonymous staff feedback to improve staff experience and engagement.** *BMJ quality improvement reports*, 6(1). [Click to view full-text.](#)

University Hospital Bristol NHS Foundation Trust (UH Bristol) is a tertiary teaching hospital where concerns about staff satisfaction and communication were reflected in the 2014 staff survey. To improve staff engagement, a real-time feedback mechanism to capture staff experience and to facilitate feedback from local leaders, was developed and piloted using the Model for Improvement. Initially piloted in two areas in January 2015, the Staff Participation Engagement and Communication application (SPEaC-app) was gradually rolled out to 23 areas within the trust by November 2016. The SPEaC-app is valued and used most by staff in areas where feedback from local leaders is regular, rapid and comprehensive, and where staff comments are acted upon, leading to tangible change.

Related online information from the NHS:

- [Webpage on the research project](#)
- [Summary PDF with photo](#)
- NHS news items:
 - [Happy staff=happy patients: How the SPEaC app came to be](#)
 - [Staff engagement app leads to service delivery improvements in central Bristol hospitals](#)
- [Care Quality Commission case studies report](#) (2017) – see pp. 30-33.
- [NHS Providers blog](#) (2020) – discusses the improvements to staff wellbeing and patient care.
- [NHS Employers case study](#) (2020) – discusses outcomes, improvements in staff engagement.

FEEDBACK TERMINALS IN PHYSICAL SPACES

H. D. D. Witmer, et al. (2023). **Novel application of a dynamic, in-room survey platform to measure surgical team satisfaction.** *Annals of Surgery*. [Click to view full-text.](#)

Continuous, actionable assessment of teamwork quality in the operating room (OR) is challenging. This work introduces a novel, data-driven approach to prospectively and dynamically assess healthcare provider (HCP) satisfaction with teamwork in the OR. METHOD(S): Satisfaction with teamwork quality for each case was assessed utilizing a validated prompt displayed on HappyOrNot Terminals™ placed in all ORs, with separate panels for circulators, scrub nurses, surgeons, and anesthesia providers. Responses were cross-referenced with OR log data, team familiarity indicators, efficiency parameters and patient safety indicator events through continuous, semi-automated data marts. CONCLUSION(S): This study demonstrates for the feasibility of a dynamic survey platform to report actionable HCP satisfaction metrics in real-time. Team satisfaction is associated with modifiable team variables and some key operational outcomes. Leveraging qualitative measurements of teamwork as operational indicators may augment staff engagement and measures of performance.

A. K. Agarwal, et al. (2021). **Exploring digital methods to capture self-reported on-shift sentiment amongst academic emergency department physicians.** *American Journal of Emergency Medicine*, 75(6), 727-732. [Click to view full-text.](#)

Effective well-being strategies stress early identification as a cornerstone to providing meaningful support and decreasing the long-term consequences associated with burnout. Traditional approaches of measuring well-being do not reflect proactive, learning health systems designed to engage providers early and often. Digital technology may provide a method which quickly measures well-being and support providers. The objective of this study was to investigate a digital method to collect self-reported, on-shift ED physician mood and to identify drivers of sentiment.

M. James-Scotter, et al. (2021). **Using action research to develop a real-time measure of job satisfaction in the operating room setting.** *International Journal of Action Research*, 17(2), 138-153. [Click to request full article.](#)

This paper outlines how action research was used to develop a real-time job satisfaction measurement tool for the operating room (OR) setting. It offers insight into how collaborative action research can be used in a complex interprofessional setting to create a practical, valid and relevant tool. The study was conducted within one New Zealand hospital OR department during the period of March 2018 – June 2019. Using action research cycles, researchers and hospital personnel collaboratively created an innovative one-minute daily job satisfaction measure called the Morale-o-Meter. Complexities relating to its development and acceptability are explored and reflected upon, in order to draw insight for other researchers who are looking to use this methodology in a similar setting.

M. James-Scotter, et al. (2020). **A daily measure of job satisfaction in the operating room: Investigating its value and viability.** *Journal of Perioperative Nursing*, 33(3), e7-e15. [Click to view full-text.](#)

This study aims to explore the value, validity and viability of implementing a daily job satisfaction tool in the operating room (OR) setting. Sample and setting: A daily one-minute survey was developed and trialled with 269 OR staff members (123 nurses) over a three-week period in one New Zealand hospital. Method: A feedback and validation survey was then administered to staff one week following the trial. Results: The trial resulted in 569 tool submissions. A daily average of 71 per cent of participants (69% nurses) reported feeling 'pretty good' or 'great' about their jobs, with 'relationships and communication with colleagues' most influential for both a positive and negative day at work. Findings also supported the validity of the tool and highlighted strengths and areas for improvement. Conclusion: The results of the study provide initial support for the value and feasibility of implementing a daily job satisfaction measurement tool in the OR setting. A daily satisfaction measure has the potential to be a powerful tool for perioperative nursing managers at all levels enabling active measurement and management of nurse job satisfaction from an interprofessional perspective.

A. Saqib, et al. (2020). **Quality improvement report: setting up a staff well-being hub through continuous engagement.** *BMJ Open Quality*, 9(3). [Click to view full-text.](#)

Our vision was to set up a safe space for staff away from clinical noise to enable and encourage mindfulness and psychological resilience through a calm and serene environment. Since opening the hub, we have had excellent feedback from various staff groups. Immediate feedback was obtained using emoji stickers asking for feelings before and after visit. A mood board was put up allowing anonymous expression of feelings. Delayed feedback was requested using a repeat survey. We believe that while there is a lot of talk about well-being and an increasing number of resources being offered electronically, the need for a neat and quiet space cannot be overlooked. We collect feedback on a weekly basis and adapt the space to meet the needs of staff.

A. K. Agarwal, et al. (2020). **Capturing Real-Time Emergency Department Sentiment: A Feasibility Study Using Touch-Button Terminals.** *Annals of Emergency Medicine*, 75(6), 727-732. [Click to view full-text.](#)

Providing care in emergency departments (EDs) affects patients and providers. Providers experience high rates of work-related stress. Little is known about the feasibility of measuring real-time sentiment within busy clinical environments. We test the feasibility of measuring sentiment with touch-button terminals in an academic, urban ED. Methods: Terminals offered a choice of 4

sentiment buttons (very positive, positive, negative, and very negative). They were placed central to physician workstations, nursing workstations, and the patient exit. Results: A total of 13,849 sentiments were recorded (June 2018 to October 2018); 9,472 came from providers (52.6% nursing) and 4,377 from patients. The majority of provider sentiments were negative (58.7%). Negative provider sentiment was associated with increasing number of patients waiting to be seen ($r=0.45$) and boarding ($r=0.68$). Positive provider sentiment was associated with increasing numbers of patients who left without being seen ($r=0.48$). Increased boarding was associated with more recorded sentiments ($r=0.73$). Conclusion: This study demonstrates the feasibility of a novel approach to measuring “on-shift” sentiment in real time and provides a sample comparison to traditional volume metrics.

K. E. Hinsley, et al. (2016). **Monitoring the health of the work environment with a daily assessment tool: the REAL - Relative Environment Assessment Lens - indicator.** *Cardiology in the Young*, 26(6), 1082–1089. [Click to request the full article.](#)

Utilising the American Association of Critical-Care Nurses' Healthy Work Environment standards, we developed a daily assessment tool. Methods: The Relative Environment Assessment Lens (REAL) Indicator was developed using a consensus-based method to evaluate the health of the work environment and to identify opportunities for improvement from the front-line staff. A visual scale using images that resemble emoticons was linked with a written description of feelings about their work environment that day, with the highest number corresponding to the most positive experience. Conclusion: The REAL Indicator has become a valuable tool in assessing the specific issues of the clinical area and identifying opportunities for improvement. Given the feasibility of and positive response to this tool in the cardiac catheterisation laboratory, it has been adopted in other patient-care areas where staff and leaders believe that they need to understand the health of the environment in a more specific and frequent time frame.

PULSE SURVEYS

M. I. Brown. (2022). **Investigating the promise and pitfalls of pulse surveys.** *Industrial and Organizational Psychology: Perspectives on Science and Practice*, 15(1), 137-149. [Click to request full article.](#)

Despite the growing popularity and marketing of pulse surveys, there is little research concerning this practice. To this end, this practice forum reports the results of a four-wave pulse survey that was conducted in a health care organization. Pulse surveys provided reliable estimates of overall engagement, but scores remained stable across 8 months. Practically no differences in group scores or trends could be found despite high participation (50%). Item responses displayed little differences between groups, ICC(1) ranging from .03 to .18, and poor discriminant validity. Based on these results, pulse surveys may be adequate for estimating overall employee sentiment but not useful for detecting change over time or differences between groups. These limitations should be considered when designing or implementing pulse surveys.

M. Diaz, et al. (2018). **The ‘clinician voice’: Utilizing a novel digital platform for hospitalist engagement around the experience of clinical work.** *Journal of Hospital Medicine*, 13(4 Supplement 1). [Conference abstract only – click to view full abstract.](#)

We utilized a novel (Waggl) software platform to develop a ‘Clinician Voice’ pulse survey in order to garner hospitalist engagement around their clinical work experience and prioritize improvement opportunities. Description: The Waggl platform offers unique features compared to traditional engagement surveying methodologies. For one, survey length on the platform is limited to 5

quantitative questions and 1 qualitative question. In addition, Waggl includes an interactive component whereby participants prioritize their own qualitative answer as compared to answers entered by their colleagues in an A-B voting format (Figure 1.). Over time, this creates a 'crowdsourced' priority list related to qualitative responses. Outputs from the survey and dialog were shared with hospital executives to inform decision making and used by hospitalist leadership for strategic planning. As a result of the pilot, the process was adopted across several other clinical specialties.

T. M. Welbourne. (2016). **The potential of pulse surveys: Transforming surveys into leadership tools.** *Employment Relations Today*, 43(1), p. 33-39. [Click to request full article.](#)

Pulse surveys are becoming popular as a supplement to traditional, annual surveys that are done to focus on topics like employee engagement or employee satisfaction. The reason for the growing interest in this type of survey comes from two sources. The first is the growing availability of survey technology, and the second is the disillusionment in annual or every-other-year survey work. This article describes how to transform surveys into leadership tools. It starts with the pulse idea, but the changes that can happen are about much more than surveys. In fact, when done correctly, employees say that the pulse surveys are not surveys after all; they are new forms of communications.

S. Joy, et al. (2015). **The use of snap surveys to evaluate, improve and engage residents in clinical operations, teaching and quality improvement.** *Journal of General Internal Medicine*, 30(SUPPL. 2), S518-S519. [Conference abstract only – click to view full abstract.](#)

In the era of online, web-based status updates and instant feedback, "pulse surveys" or "snap polls" are gaining more widespread use in places of employment. It has not been reported how these types of surveys could be applied within the outpatient clinical practice environment in a general internal medicine training program. On the Friday of each clinic week, a faculty member leads a group discussion, asking each residents to provide a specific number regarding how they feel about each of the areas of evaluation described earlier on a 1-10 Likert scale (0-poor, 10 excellent). If the value is not a 10, residents are asked to provide a specific suggestion for improvement that would have made the area of evaluation become a 10. These values and comments are documented by the faculty member leading the survey session and entered into an excel spreadsheet for analysis. These feedback sessions on average take less than 15 min to complete as a group. Findings and observations gleaned from the resident feedback are discussed at regularly weekly faculty/staff meetings, and solutions to areas of concern are addressed and appropriate changes are made in clinical operations or teaching efforts.

MONTHLY SURVEYS

Z. Y. Liew, et al. (2017). **Respect and dignity-implementing a continuous monitoring system can improve undermining and bullying behaviour in the workplace.** *Archives of Disease in Childhood*, 102(Supplement 1), A139. [Abstract only - click to view full abstract.](#)

Traditionally, undermining and bullying in the workplace have been tackled on an ad hoc basis. We tested a structured continuous surveillance system to improve and sustain workplace culture in our children's hospital. Method: Over 12 months (October 2015 to September 2016) our intervention was a monthly online questionnaire survey to all trainees (n=40-50) in a large tertiary paediatric hospital. A senior trainee was appointed guardian to maintain confidentiality and to collate results. We also collected qualitative data with free text and at feedback focus groups. Conclusion: We have demonstrated that implementing a continuous quality improvement infrastructure can improve workplace culture in a busy children's hospital. Positive strategies should be targeted at high

intensity areas as they are also the areas with high feedback satisfaction.

C. Phillips, et al. (2017). **Supporting graduate nurse transition to practice through a quality assurance feedback loop.** *Nurse Education in Practice*, 27(121-127). [Click to view full-text.](#)

The study explored how satisfaction levels with transition may improve during their first year, using a unique approach of a continuous quality assurance feedback loop. Graduate nurses from two health services completed a short survey questionnaire every four weeks for 12 months. De-identified aggregated data was sent to health service management, giving them an opportunity to integrate the findings with the objective of potentially increasing graduate satisfaction ratings. Quantitative findings showed no statistical significance of graduate nurse satisfaction scores between health services, however, one health service consistently outperformed the other. Qualitative findings drawn from a seminar and interviews confirmed that one health service took a more proactive stance with the monthly reports, communicating the results to ward managers.

COVID-19

K. E. O'Brien, et al. (2023). **Listening to Employees to Confront Postpandemic Turnover.** *The Industrial-Organizational Psychologist*, 60(4). [Click to view full-text.](#)

As the pandemic becomes more manageable, organizations are now grappling with how to move forward in a postpandemic world. Organizational development using survey feedback can improve these transitions via employee listening (e.g., Allen et al., 2020). There are a variety of employee data solicitation techniques that organizations can use including annual surveys, pulse surveys, reviewing social media, and fireside chats with leaders and managers. In a 2022 *SIOF Annual Conference* virtual session, *Should I Stay or Should I Go? Employee Listening to Address Postpandemic Turnover*, panelists representing various national and international private companies discussed employee listening strategies as well as methods of addressing postpandemic turnover. The purpose of the current paper is to share information gleaned from this session.

O. S. Schmidt. (2023). **What COVID-19 has taught us about effective employee communication.** *Journal of business continuity & emergency planning*, 16(3), 210-217. [Click to request full article.](#)

Effective communication with internal and external stakeholders is an indispensable component of a successful response to crises both brief and long-lasting. Employee communication must increase in volume and frequency, and effectively inform, educate and empower employees. The development, testing and delivery of clear and easy-to-understand messages must be prioritised along with the enablement of continuous employee feedback. Drawing on industry best practice, personal experience and an extensive review of the literature, this paper concludes that the systematic planning, implementation and evaluation of a company's employee communication must be conducted on an ongoing, company-wide basis so that management can rely on it to minimise crisis-related damage, seize the opportunities a crisis may present, and convert the resulting organisational change into competitive advantages.

M. S. Neill, et al. (2021). **Ethical listening to employees during a pandemic: New approaches, barriers and lessons.** *Journal of Communication Management*, 25(3), 276-297. [Click to request full article.](#)

The purpose of this study was to identify new challenges to organizational listening posed by a global pandemic and how organizations are overcoming those barriers. The researchers conducted 30 in-depth interviews with US communication management professionals. Findings: Communication management professionals value listening, but do not always make it the priority that it merits. They listed lack of desire of senior management, time, and trust of employees as barriers to effective organizational listening. Research limitations/implications: The researchers examined organizational listening applying employee-organization relationships (EOR) theory and found that trust is essential. Trust can be enhanced through building relationships with employees, ethical listening and closing the feedback loop by communicating how employers are using the feedback received by employees to make a positive change.

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APPENDIX

SEARCH METHODOLOGY

A systematic search was conducted for literature. The results were screened by librarians using [Covidence](#).

SEARCH LIMITS

- English-language
- Published between 2013 – present

DATABASES SEARCHED

- Medline – index of peer reviewed articles across health sciences and medicine.
- Embase – index of biomed and pharmacological peer reviewed journal articles.
- Business Source Complete – index of the most important scholarly business journals.
- CINAHL – index of nursing, allied health, biomedicine, and healthcare publications.
- Scopus – index of peer-reviewed literature from health sciences and other disciplines.
- Cochrane Library – collection of databases containing high-quality independent evidence.
- ProQuest Nursing & Allied Health – scholarly journals, theses, and books for nursing & AH.
- Grey literature – Google, Google Scholar, Trip database, Biomed Central Proceedings.

ADDITIONAL SEARCHING

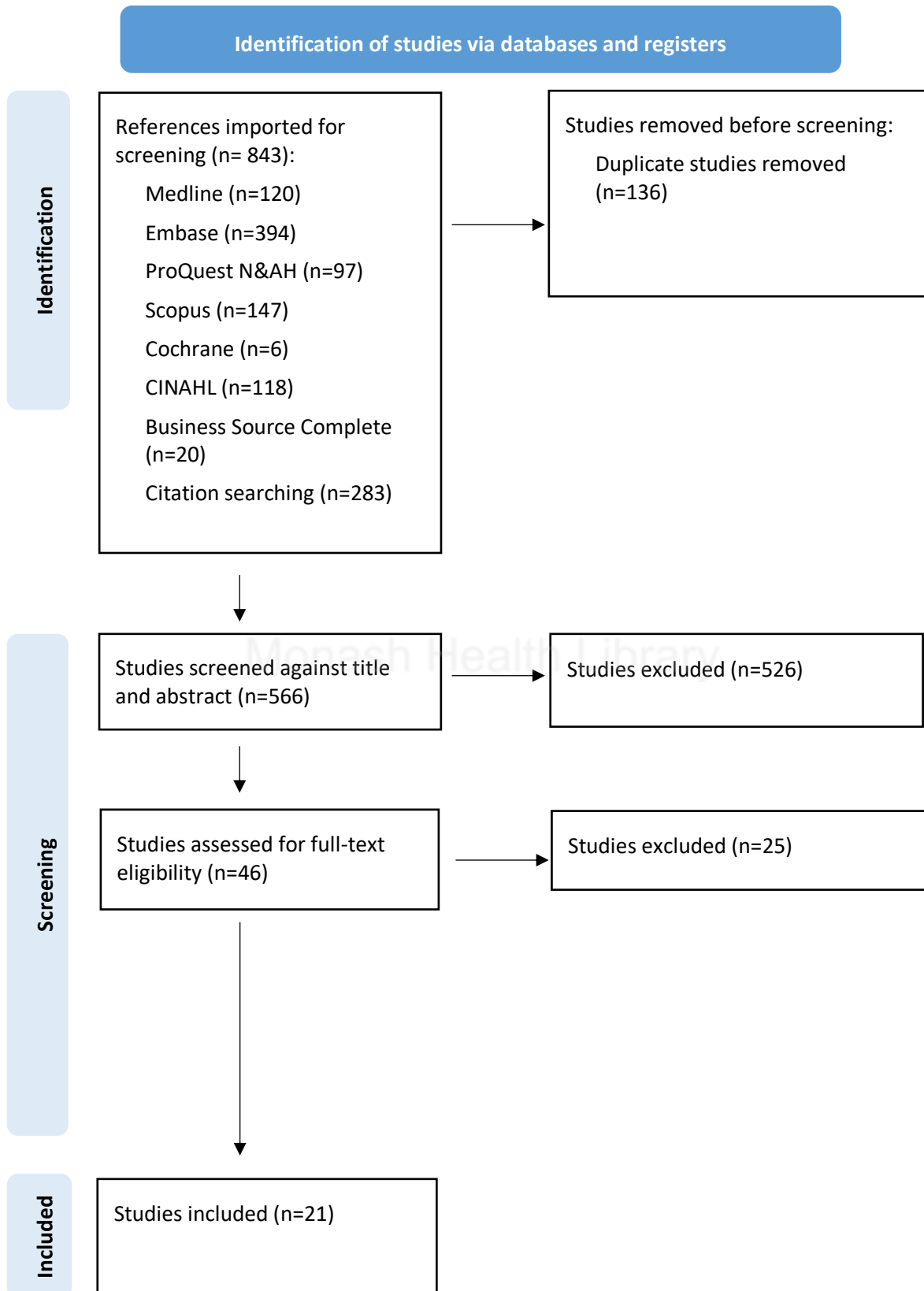
- Reference checking was undertaken for the most relevant articles.

MEDLINE SEARCH STRATEGY

Ovid MEDLINE(R) ALL <1946 to September 25, 2023>

- 1 Work Engagement/ or Personnel Management/mt, og, px or Workplace/og, px or Working Conditions/ 14192
- 2 ((employee* or staff* or worker* or workplace* or workforce* or personnel) adj5 (engag* or feedback* or insight*)).mp. 10412
- 3 ((employee* or staff* or worker* or workplace* or workforce* or personnel) adj3 (survey* or interview*)).ti,ab,kf. 13996
- 4 Job Satisfaction/ or ((employee* or staff* or worker* or workplace* or workforce* or personnel) adj3 (satisf* or motivat* or experience*)).mp. 45221
- 5 1 or 2 or 3 or 4 76666
- 6 continuous engagement.ti,ab. 131
- 7 Feedback/ and (real-time or realtime or continuous* or continual*).ti,ab,kf. 2358
- 8 ((feedback adj3 process*) and (real-time or realtime or continuous* or continual*)).mp. 292
- 9 (feedback mechanism* and (real-time or realtime or continuous* or continual*)).mp. 523
- 10 ((real-time or realtime or continuous* or continual*) adj3 feedback).mp. 4252
- 11 feedback loop.mp. 14693
- 12 6 or 7 or 8 or 9 or 10 or 11 21278
- 13 5 and 12 162
- 14 limit 13 to english language 159
- 15 limit 14 to yr="2013 -Current" 120

PRISMA CHART



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