Rostering Policy

Policy information

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Summary of document:
Policy to provide managers and staff with the guidance necessary to produce and maintain a fair and equitable duty roster with an appropriate skill mix

Scope:
The Policy applies to all staff using either electronic or manual rostering systems as the principles and the guidance will assist in ensuring common processes and maximum benefit from workforce efficiency. This policy will assist with the production of rosters based on establishments defined through activity and acuity.

To be read in conjunction with:

- 1197 – All Wales Flexible working policy – opens in a new tab
- 113 - Learning and Development Policy– opens in a new tab
- NHS Conditions of Service Handbook – opens in a new tab
- 1085 - Leave and Pay for New and Existing Parents Policy – opens in a new tab
- 122 - All Wales Special Leave Policy– opens in a new tab
- 109 - Time in Lieu Procedure– opens in a new tab
- 768 - Managing Attendance at Work All Wales Policy– opens in a new tab
- 133 - Equality, Diversity, and Inclusion Policy– opens in a new tab
- 815 - Counter Fraud, Bribery and Corruption Policy– opens in a new tab
- 001 - Adverse Conditions Policy– opens in a new tab
- Agenda For Change– opens in a new tab
- 193 – Retention and Destruction of Records Policy– opens in a new tab
- On Call Agreement– opens in a new tab
- 1310 Calculating, maintaining and reporting nurse staffing levels policy (opens in a new tab) incorporates the Nurse staffing levels and escalation plan (opens in a new tab)

Owning group: Workforce & OD team

Executive Director: Director of Workforce & OD

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1 – New policy 14.5.2015
2 – Minor amendment deletion of 6.9 and inclusion of ward managers in 11 2.7.2015
3 – appendix 1 added 19.11.2019
4 – full review 15.2.2023
5 – addition of appendix

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Glossary of terms
EWTD - European Working Time Directives
OD – Organisation Development

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Introduction

This policy sets out how Hywel Dda University Health Board will manage staff rostering to ensure services have safe staffing levels and appropriate skill mix of staff as required to maximise the quality of patient care and reduce clinical and non-clinical risk. The Health Board by appropriate rostering, must support staff to comply with European Working Time Directive. While achieving all this, the Health Board will reasonably consider requests to promote work life balance for staff in line with policy.

Policy Statement

The Health Board supports the principles of work life balance, flexible working and family friendly working and is committed to delivering the equality and diversity needs of staff. Hywel Dda University Health Board also recognises the value of its workforce and will support staff in providing high quality patient care through an appropriate skill mix at all times. Whilst acknowledging both these aspects, it is recognised that the Health Board needs to be able to respond to changing service requirements and therefore may on occasion not be able to agree to requests of individual staff if their proposal cannot be accommodated within service needs. Achieving safe staffing numbers and an appropriate skill mix is priority. Mandatory training will be scheduled with emphasis on attendance.

Scope

The Policy applies to all staff using either electronic or manual rostering systems as the principles and the guidance will assist in ensuring common processes and maximum benefit from workforce efficiency. This policy will assist with the production of rosters based on establishments defined through activity and acuity.

This policy also ensures compliance with relevant workforce related legislation, for example, the Nurse Staffing Levels (Wales) Act 2016.

Aim

The aim of this document is to outline how rostering practices should take place within the Health Board

Objective

The creation of staff rosters within the Health Board must be efficient, fair and transparent in order to:

- Ensure safe and appropriate staffing levels for all services using fair and consistent rostering and promote effective planning and management of annual leave, sickness and study leave etc.
- Assist ward/department/service managers by minimising service risk associated with inappropriate staffing levels and skill mix.
- Ensure delivery of a quality service and to maximise efficient use of resources.
- Operate within budget and effectively reduce overtime, bank and agency spend by giving ward/department/service managers clear visibility of all staff contracted hours.
- Improve the utilisation of existing staff resources and meet European Working Time Directives (EWTD).
- Ensure compliance with the Agenda for Change Terms and Conditions of Employment.

- Improve management reporting of attendance and absence data e.g. sickness, annual leave and study leave
- Facilitate the payment of staff through shifts being added to the roster system
- Ensure timely shift information is added and finalised in conjunction with payroll and e-roster timescales, data input of staff absence via E-roster interfacing with ESR, this will result in improved monitoring and reporting of sickness and absence across Health Board.
- Ensure related Health Board policies and directives as identified in section 1 are adhered to.

This policy sets out the operational delivery framework to ensure high quality, efficient rosters are generated consistently throughout rostered areas of the Health Board using electronic rostering systems

Principles

Staff are the Health Boards most valuable resource but are also its most expensive. This policy outlines the systems the Health Board has in place which will ensure that staff are rostered in an efficient manner in order to ensure high quality care is provided to patients whilst minimising operational and clinical risk factors. This will be achieved in a number of ways including:

- Improved utilisation of existing staff through clear visibility of staff contracted hours and staffing levels / skill mix
- Improved sickness / absence monitoring, generating comparisons, identifying trends and prioritising need for action
- Ensuring all staff are allocated a fair Roster
- Improved planning/management of annual leave and study leave
- Driving effective management of staffing establishments thereby increasing efficiencies in the workforce Health Board-wide
- Use of above principles to ensure bank (or agency) staff are deployed only when needed

All claims for additional payments (overtime, extra hours) must be submitted within the required 3 month period/12 rostered weeks. This is a joint responsibility for staff and their respective line managers.

Roles & Responsibilities

Chief Executive
The Chief Executive and the Health Board have overall responsibility for ensuring adequate, effective and efficient rostering and are responsible for ensuring that this policy and related policies are adhered to.

Director of Workforce & OD
The Director of Workforce & OD is accountable for ensuring the policy is current and reviewed on a regular basis through a process coordinated by the Workforce and OD Teams, using the workforce and OD processes for a collaborative approach to policy review.

Director of Nursing, Quality & Patient Experience
is responsible for:

- Ensuring that the operational nursing management and Workforce and OD team are kept informed of any national or local professional quality standards related to nurse/midwifery staffing levels, required establishments and planned rosters.
- Calculating the nurse staffing level every six months at minimum, when there is a change in service/use and if deemed necessary.
- Approving any changes to the nurse staffing level/planned roster before any changes to planned roster templates are made.

Changes to the e-roster template

The roster for the ward/department/service must be approved as per the agreed process for the service.

NB: The e-roster team cannot make changes to the e-roster template without this governance process being followed and should not make changes if contacted directly by ward/department/service managers

Leave and Absence Periods

All Leave will be managed in accordance with the relevant All Wales/Hywel Dda Policies. Service managers should plan cover arrangements by adjusting rosters where possible or consult their manager for advice and guidance.

Time Owing / Time in Lieu

Time in lieu must be managed in line with the Health Board's 109 Time Off in Lieu Policy – opens in a new tab - and all time owing monitored and recorded.

Training and/or Awareness Raising

All staff will be made aware of this policy upon commencement with the Health Board at either the Health Board or the departmental induction. Copies can also be viewed on the Health Board's Intranet. Training will be provided for staff to use Health Roster during the rollout period with on-going full support provided as and when required.

Welsh Language Provision

All staff on E-rosters who can speak Welsh have the welsh icon next to their name. This clear visibility of welsh speakers on wards across the Health Board allows ward managers and senior managers to easily identify welsh speaking staff. This is particularly useful if a patient requires communication through the medium of welsh. This supports the Health Board principle that Welsh and English languages are on equal basis and that patients should be provided with a service in their first language.

Freedom of Information Act 2000

All Health Board records and documents, apart from certain limited exemptions, can be subject to disclosure under the Freedom of Information Act 2000. Records and documents exempt from disclosure would, under most circumstances, include those relating to identifiable individuals arising in a personnel or staff development context. Details of the application of the Freedom of Information Act within the Health Board may be found in the 173 - Freedom of Information Act 2000 Policy – opens in a new tab. It is recommended that all parties familiarise themselves with the relevant parts of this Policy.

Records Management

All documents generated under this policy, including applications, and formal notes and documents generated by managers and any review panel, are official records of the Health Board and will be managed and stored and utilised in accordance with the Health Board's 193 - Retention and Destruction of Record Policy – opens in a new tab.

Review

This policy will be reviewed in three years time. However a review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation or guidance.

Monitoring

Details of rostering reports will be recorded in a roster system and reported on periodically to the Partnership Forum and the Executive Board. The database will include equality monitoring data, which will be reviewed and presented to the Health Board's Equality and Human Rights Steering Group.

Appendix 1 - Guidelines to Support Effective Rostering for Nurses and Midwives

Guideline to support effective rostering for nurses and midwives – opens in new tab

Appendix 2 – Roles and Responsibilities

The Head of Service will:

- Ensure that the staffing level provides sufficient resources to deploy a planned roster that will meet the expected workload of that service
- Ensure that the finalisation process is completed in a timely manner, to ensure prompt payment, and that the roster adequately identifies the staffing requirements.

Senior Managers

- Contribute to ensuring that the staffing level for the service provides sufficient resources to meet the expected workload of that service
- Ensure that annual leave is evenly allocated throughout the year in line with the agreed headroom targets (percentage of WTE applied to each ward/department/team/service to account for leave allowance at any time) to minimise impact on variable pay spend through appropriate planning.
- Ensure that rosters that are produced by ward/department/service managers fully utilise staff's contracted hours prior to escalation to bank/agency.
- Ensure that bank and agency requests are raised in a timely manner as per the dates in the rostering timetable.
- When required, and utilising appropriately skilled staff, re-deploy the workforce according to need following risk assessment
- Use the roster via the rostering system to:
  - Produce management reports as required.
  - Consider approval/rejection of temporary staffing in line with the approved process for the service
  - Deploy staff effectively in accordance with the needs of the service and the knowledge, skills and ability of staff.
- Ensure all finalisation of shifts of worked shifts is undertaken on a **weekly** basis.
- Ensure that ward/department/service managers comply with the finalisation /approval process.
- Take an active role in review/agreement of Flexible Working Applications in line with service need and fairness to other team members

Ward / Department/Service Manager

The Ward / Department/Service Manager is responsible for implementing the policy at local level and must:

- Use the electronic rostering system (or manual system if electronic is not available, but only if not available) to monitor and manage the staffing level and to ensure safe patient services, minimising the use of bank, pool or agency staff.
- Produce rosters in line with the HEALTH BOARD's rostering timetable, **6** weeks in advance of the roster start date at all times (NHS Improvement, 2018).
- Roster staff in line with the planned roster i.e. within budget at all times.
- Escalating any concerns about the adequacy of the planned roster immediately.
- Ensure that annual leave is evenly allocated throughout the year in line with the agreed headroom targets.
- Ensure that staff's contracted hours are fully utilised to cover staffing requirements and over/under staffing before temporary staff or additional hours or overtime are requested
- Ensure staff do not accrue a time balance in excess of one shift of hours owed or owing (7.5 hours or 11.5 hours depending on shift pattern).
- Take responsibility for ensuring that cross-cover options are explored **prior** to requesting temporary staff.
- Ensure that shifts given a higher priority must be filled first, i.e. nights and weekends. It should not be routine to use overtime, bank or agency staff permanently on any shifts.
- Ensure that all staff maintain their skills, knowledge and competence by facilitating a rotation between day and night shift patterns, including weekend working.
- Ensure that Ward / Department/Service Manager are not routinely rostered to work nights/weekends/public holidays unless it is an essential requirement of the specialist area/service need.
- Accurately record all shift times worked and any unavailability
- Responsible for authorising any changes post sign off of the roster and consult with staff. Any changes to the planned roster should be agreed by the roster manager
- Rosters should be updated daily with any vacant shifts sent to bank 4 weeks in advance to improve cover
- Finalise shifts weekly and abide by the deadlines for payroll cut-off dates to ensure correct payment to staff.
- Regularly review roster establishment on a frequency agreed by the service.
- Should continuously assess the situation and inform their Senior Managers of any exceptional circumstances which will impact upon staff requirements and discuss and agree any action to address these.

Employees

All staff must be expected to work a share of variety of social and unsocial hours unless exceptions have been agreed. Staff should:

- Ensure personal details are kept up to date.
- Attend work as rostered.
- Be responsible and flexible with their roster requests and be considerate to their colleagues.

- Request shifts and annual leave in line with policy requirements - Shifts requested should be in line with the ward/department/unit budget.
- Input their duty / days off requests via the rostering system to the deadline for each roster. Staff must not assume shifts showing on the roster reflect their off- duty until the Roster is officially signed off and published on the ward.
- Monitor their own hours ensuring that they are being recorded correctly in the e-roster system and meeting their contracted hours.
- Review personal e-roster system fully, viewing timesheets, hours worked and informing the Ward / Department/Service Manager of any discrepancies.
- Be responsible for taking the agreed breaks to ensure they have taken a rest period, food and fluid. Breaks are not paid.
- Seek authorisation from the Ward / Department/Service Manager of changes to a planned or worked shift, taking into consideration skill mix and not leaving staffing levels depleted.
- Staff who work the majority of nights should rotate to days at least twice yearly (minimum of 8 weeks per 12 months).

Appendix 3 - Key Performance Indicators

By monitoring the rosters, bank/agency usage and working time compliance will demonstrate whether the planned rosters are being produced efficiently and effectively with minimal bank/agency usage in addition to highlighting any areas that need to be addressed.

An audit tool is included as Appendix 2 (adapted from e-rostering audit tool (NHS Improvement (2018) https://improvement.nhs.uk/documents/178/Nursing_and_Midwifery_e-roster_guidance.pdf (opens in a new tab).

Some of the key performance indicators that can be used to monitor this compliance with this policy include:

- Skill mix – registered staff to healthcare support workers (NHS Improvement, 2018).
- Ensuring that high priority shifts are filled first i.e., nights/weekends.
- Numbers of overtime hours per month / numbers of the requested shifts, allocated and unallocated bank shifts / agency shifts per month and reasons for booking.
- Numbers of the requested, allocated and unfilled agency shifts per month and reasons for booking.
- Working restrictions in place as agreed with Occupational Health and HR.
- Has the roster been produced in line with the Health Board's roster timetable, (6 weeks in advance)
- Has the roster been 'signed off' within the allocated timeframe?
- Annual Leave balances well managed within target of 14.6%
- Time balances well managed no instance of staff in owing or being owed more than 1 shift (7.5hrs/11.hrs etc.)
- Roster templated reflect funded establishment, no evidence of over establishment

- Recording of actual shifts worked and verification for payment on a daily / weekly basis.
- Correct payment of staff no evidence of over or underpayments to staff.

The KPIs identified will be audited at regular intervals by the E-Rostering, Roster Manager and senior managers. The KPIs will form part of regular reporting to Senior Managers and workforce groups to ensure efficient rostering.

Appendix 4 - Roster Approval Process – Change into Workflow

Approval is a two-level process with initial approval by the Senior Sister/Charge Nurse/Midwife and final approval by a Senior Nurse/Midwife (NHS Improvement, 2018). The Senior Sister/Charge Nurses/Midwife and Senior Nurse/Midwife need to:

- Check all shifts have been filled and the contracted hours are fully assigned.
- Check annual leave hours are accurate and no anomalies.
- Check sickness hours are accurate, and episodes of sickness have been recorded accurately.
- Check staff leavers have been removed and the net hours adjusted accordingly.
- Check staff starters have been added to the e-roster, supernumerary shifts have been entered and net hours adjusted accordingly.
- Check the net hours column for all staff – it is good practice that the net hours should not exceed a long day shift (e.g. 10.5, 11, 11.5 or 12 hours shift times).
- Cross check the roster against the staffing requirements of the ward/ department checking that each shift has the agreed total number of staff and skill mix.
- If there are any additional duties rostered, check that information has been provided as to why and that the reasons are acceptable and agreed Check whether the unfilled duties for which the ward/ department are seeking to request bank need to be backfilled or can be filled in an alternative way.
- Annual and study/ training leave is evenly distributed and is consistent with the % calculated for the ward. • The unsocial hours have been rostered fairly between all staff.
- Within this roster period there should be no staff working: ¬
    - More or less than their contracted hours (+/- 11.5hrs). ¬
    - Overtime.
- Unless agreed by exception and the reason for exception has been provided to the roster approver and is deemed to be acceptable.
- The roster is within the ward/ department budget

NOTE: On occasion to further promote efficient and effective rostering the approval process may be temporarily changed to provide additional support to the Senior Sister.

Appendix 5 - Booking Registered Nurse or Health Care Support Workers Additional Hours, Bank, Overtime and Agency

Booking Registered Nurse or Health Care Support Workers Additional Hours, Bank, Overtime and Agency – opens in new tab