Nursing
and
Temporary Staffing
Best Value Group

Annual Report 2013

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MISSION STATEMENT - NURSING & TEMPORARY STAFFING BVG

To encapsulate the principles of benchmarking and inter trust networking, with the intention of sharing experiences, knowledge and ongoing best practice initiatives and innovations, so that the continuous process will greatly facilitate the Temporary Staffing service delivery – keeping patient care as the focus.

INTRODUCTION

This has been my third year as facilitator of the Nursing and Temporary Staffing BVG and once again I have found the whole experience to be very rewarding and extremely interesting.

As ever, the wide range of knowledge possessed by group members and their constant willingness to share this with colleagues has been most impressive. This is not only demonstrated through the ‘KPI/Benchmarking’ exercises but also through the now regular agenda items of ‘Hot Topics Discussion’ and ‘Market Place– Sharing Good Practice’.

This year the Nursing and Temporary Staffing BVG has, by agreement, held its meetings at a variety of venues including Hockley Heath, Shirley and Hinckley. We have been particularly fortunate this round to have had a very good range of speakers and I must extend my particular thanks to NHS Employers and to NHS Protect in this regard.

Aside from the first meeting of the next round which will be held on Thursday 27th March 2014 at the Premier Inn, Hockley Heath the venues and dates for subsequent meetings will be determined by agreement, depending on the geographical spread of the new annual membership.

I very much look forward to another successful round of meetings.

Dale Atkins
NPAG Best Value Group Facilitator

CHAIRMANS REMARKS

I have just completed my first year as Co-Chair of the NPAG Best Value Group for Nursing and Temporary Staffing, which I have found to be an extremely enjoyable and rewarding experience to date.

Having attended the group for two years, I have found there to be many benefits to being part of such a network of like-minded individuals. The opportunity to benchmark across Health Boards and Trusts across the UK, as well as sharing best practice and looking at innovative ways of working, especially within the recent challenging times, has proved invaluable. In addition, there have been talks, presentations and guest speakers, all of whom have made significant contributions to the group, membership of the group invaluable and attendance at meetings a pleasure. Such involvement and engagement has assisted in helping me to continue to foster a pro-active approach to my day to day role within the NHS and has enabled an additional resource to tap into for advice and comments as the need arises.
The group members have evolved into a friendly, supportive and engaging group of professionals, who possess an array of knowledge and expertise and are always willing to pass on knowledge, information and advice, for the benefit of other organisations.

There is no doubt that the NHS and staff working within it, will continue to face some extremely challenging times ahead, and with the NHS being such a large employer of people, temporary staffing will continue to play a major part of such challenges.

It is clear therefore, that there is a requirement for a group with recognised benefit, such as the NPAG Best Value Group for Nursing and Temporary Staffing and one I am keen to promote, to continue to provide the valuable resource of networking and sharing experiences and best practices. This will assist in enabling its members to rise to ongoing challenges and continue to evolve both their teams and roles within those teams, in order to ensure that provision of the highest standards in the most efficient and effective way, are the driving force for all health care professionals.

I would like to thank Dale Atkins, facilitator for the group, for his ongoing commitment, hard work, and enthusiasm, without which the group would cease to function in its current role. I am delighted to be a part of the Group and look forward to another year of healthy debate, networking and sharing.

Many thanks to all attendees and speakers for their input and involvement.

Sandra Coles
NPAG Nursing and Temporary Staffing Best Value Group Chair

**MEMBER’S COMMENTS**

**Members Comments from 2013**

“I have thoroughly enjoyed being part of this group over the past 5 years as it has afforded me the opportunity to benchmark my thoughts and ideas with like-minded people. The depth of knowledge and diverse skills of the members is a fantastic resource to be able to access and has undoubtedly saved me a great amount of time and trouble over the years.

The various speakers that have attended over the years have enhanced my understanding of the complex issues that Temporary Staffing can present.

Unfortunately this is my last year of attending the group owing to a career move but I would wholeheartedly recommend that any Temporary Staffing Manager join next year.”

    Nurse Manager - Temporary Staffing. Shrewsbury & Telford Hospital NHS Trust

“I am a new Head of temporary staffing and have found the group extremely beneficial especially in relation to benchmarking and sharing best practices and experiences. The guest speakers present topical and relevant subjects and look forward to being a member in 2014 and have already forwarded information and recommended the group to another colleague.”

    Acting Head of Temporary Staffing. Birmingham Community Healthcare NHS Trust

“This was my 1st year as a member of the group, I found it informative and reassuring to know that as a Temporary Staffing Manager I was not alone in dealing with some of the complex issues that surround temporary staffing. What I found useful was the resource of other managers that I could call on with questions if required and to understand how they “did it” in their Trusts. In addition I found the...
guest speakers were informative with key issues in relation to temporary staffing, I would have no hesitation in recommending this group to others”

Temporary Staffing Manager. Birmingham & Solihull Mental Health NHS FT

I would highly recommend this group to all Temporary Staffing Managers, the meetings are well structured by the group facilitator and attended by trusts throughout the country, we all have the same challenges to meet and share experiences, best practice and ideas through our quarterly meetings and email throughout the year. We also have guest speakers covering a range of subjects to assist us in our day to day duties.

It is great to have the interaction and support from colleagues who understand the Temporary Staffing Manager issues & demands on a daily basis. I look forward to attending in 2014.

Temporary Staffing Manager. Royal National Orthopaedic Hospital

DOCUMENTS/PRESENTATIONS/ ANALYSES DISTRIBUTED DURING 2013

The following documents, presentations, etc are amongst those that have been distributed to group members during 2013. These also represent the range of topics covered during this period.

Please note: copies of these are available upon request from the BVG facilitator on e-mail: dale.atkins@da-consultancy.org.uk or by contacting the NPAG office on tel. no: 01245 544600

- Presentation: Disclosure and Barring Service Update  
  (Dale Atkins. Facilitator)

- Document: NHS Protect – Current Contact Details  
  (Dale Atkins. Facilitator)

- Document: Members Contact Details  
  (Dale Atkins. Facilitator)

- Presentation: HEFT Regional Locum Scheme  
  (Sally Lawson. HR Budget Manager. HEFT)

- Documents: Competencies and Assessments  
  (Various Contributors)

- Documents: Numeracy and Literacy Tests  
  Including:  
  ▪ Multiple Choice Questions for HCAs  (Birmingham & Solihull )  
  ▪ Medication Tests – Staff Nurses – Band 5 (Birmingham & Solihull)  
  ▪ Drugs Calculations Test Paper 1 – (Walsall Healthcare)  
  ▪ Drugs Calculations Test Paper 2 (Walsall Healthcare)  
  ▪ Skills for Life – Literacy Level 2 (Walsall Healthcare)

- Documents: KPI / Benchmarking Analyses (various)  
  (Dale Atkins. Facilitator)

- Document: Terms of Reference - Nursing & Temporary Staffing BVG  
  (Dale Atkins. Facilitator)
• **Document/Narrative:** Working Time Directive  
(Max Liversuch  Pay and Negotiations - NHS Employers)

• **Presentation:** HSE Passport  
(Guy Schrecker. General Manager, HSE Passport)

• **Presentation:** NHS Protect – Countering Fraud in the NHS  
(Reg Madden-Waite  Area Anti-Fraud Specialist-West Midlands. NHS Protect)

• **Presentation:** Process and Eligibility for DBS Checks  
(Nyla Cooper. Programme Lead – Professional Standards – NHS Employers)

• **Web links:** Recommended DBS Sites:

  - Direct link to the DBS Update Service: https://www.gov.uk/dbs-update-service
  - DH explanatory note on regulated activity (adults)  
    [http://www.nhsemployers.org/SiteCollectionDocuments/Department%20of%20Health%20-%20Definition%20of%20Regulated%20Activity%20-%20Adults.pdf](http://www.nhsemployers.org/SiteCollectionDocuments/Department%20of%20Health%20-%20Definition%20of%20Regulated%20Activity%20-%20Adults.pdf)
  - DfE explanatory note on regulated activity (children)  
    [http://www.nhsemployers.org/SiteCollectionDocuments/Department%20of%20Health%20-%20Definition%20of%20Regulated%20Activity%20-%20Adults.pdf](http://www.nhsemployers.org/SiteCollectionDocuments/Department%20of%20Health%20-%20Definition%20of%20Regulated%20Activity%20-%20Adults.pdf)
  - Filtering rules - DBS guidance and list of protected convictions and cautions  
  - Model declaration forms with amendments reflected in light of filtering rules  
    [http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards/CriminalRecordChecksStandard/Pages/CriminalRecordChecks.aspx](http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards/CriminalRecordChecksStandard/Pages/CriminalRecordChecks.aspx)
  - Tax relief available to organisations who pay for/ or reimburse staff for the cost of DBS certificates and the Update Service  

• **Documents:** Competencies and Assessments
  i) App 5 TSS Feedback Evaluation Form (Birmingham & Solihull)  
  ii) Clinical Support Worker Induction 2013  
  iv) Competency document for core skills. Version 3 for band 2 (Royal Ortho)  
  v) Competency document for core skills. Version 3 for band 3 (Royal Ortho)  
  vi) Oral Drug competency assessment tool final (Royal Ortho)  
  vii) HCA patient Observations competency document 2010 (Royal Ortho)

• **Presentation:** Overseas Recruitment  
(Barbara Walsh. Manager Nurse Bank/Agency & Nursing Recruitment. University Hospital of North Staffordshire NHS Trust)

• **Presentation:** ‘Hard truths - the journey to putting patients first’  
(Helen Dixon. Senior Policy Manager. Francis Implementation Team)

• **Presentation:** Bank Staff – Recruitment / Induction / Appraisal  
(Barbara Walsh. Manager Nurse Bank/Agency & Nursing Recruitment. University Hospital of North Staffordshire NHS T)
SUMMARY OF MEETINGS, KEY THEMES AND HOT TOPICS FOR 2013

This section provides a brief summary of a selection of discussions that have taken place at the 4 meetings held this year. As can be seen from the range of topics covered, members have been provided with a significant level of information, guidance, ideas for improvement and suggested areas for cost savings. Please refer to the actual minutes of each meeting for a greater level of detail.

Four meetings were held in this round:

1st Thursday 18 April 2013 in Shirley
2nd Thursday 11 July 2013 in Hockley Heath
3rd Thursday 3 October 2013 in Hinckley
4th Thursday 19 December 2013 in Hinckley

NPAG Overview – Network, Website, etc

Members have been provided with an overview of the full role of NPAG, including reference to the various NPAG facilities which members were able to access – including the NPAG Library and NPAG Network. Regarding the latter, members were reminded that should they have any questions/issues which they wished to raise these should be emailed directly to Bill Plumb NPAG Network facilitator at: bill.plumb@npag.org.uk.

‘HEFT Regional Locum Scheme’
(Sally Lawson. HR Budget Manager. HEFT)

What do we mean by a Regional Locum Bank?
- There are minimum staffing levels for all staff groups working on the wards throughout the Trust.
- When staffing levels fall below the minimum standard, creating unsafe working environments, a temporary staffing request is sent to the ‘Bank’ department.
- Currently the Bank team will source a worker to fill the requirement from their own internal Bank and if this is not possible they will outsource the request to an external agency.
- The Regional Locum Bank will insert a middle tier into this process meaning if you cannot fill from your own Bank, you can then tap into a pool of regional resource by outsourcing the request to the participating Regional Staffing Bank’s, and then finally out to agency if still unfilled.

Findings So Far
- HEFT has seen an increase of approximately 5% more locum requests filled by internal doctors from 7th Jan 2013 to date (3 months into the project)
- 5% increase equals a significant cost saving for the Trust so far – in the order of £250,000!
- The doctors themselves have more visibility of the shifts, their own personal shift schedule, and the status of their submitted and paid timesheets - all reducing the number of telephone calls coming into the bank. It is also possible to communicate more quickly and to a greater number of doctors by using the text and email facility from the database.
Working Time Directive
(Max Liversuch  Pay and Negotiations - NHS Employers)

Zero hours
Some of the advice on making practicable bank contracts was:
- written evidence of the parties’ intentions when entering into a "bank" contract arrangement was critical (provided they were not so obviously a sham and the reality of the working relationship was something entirely different);
- reviewing the length of time a worker had been continuously engaged on the bank to ensure this did not fall into a regular arrangement for the same hours, in the same role, etc;
- making provision in any agreement (and in practice) for shifts to be ended part way through, if necessary, with no obligation to pay the worker for the remainder of the shift;
- ensuring you have written confirmation that the worker understands there was not intended to be any mutuality of obligation.

Working Time Directive
Most recently the European Commission decided to carry out a comprehensive review and invited the European Social Partners to discuss the working time rules. Those discussions had not produced a result and it was now expected that the European Commission would issue a new proposal on working time after the European elections next year (May 2014).

The Working Time Regulations entitled workers to time off for various purposes to safeguard their health and safety and set out obligations for employers and staff in respect of working time. The Regulations had nothing to say about remuneration for working time, rest breaks or rest periods.

The national agreement on the application of the Working Time Regulations to staff employed on Agenda for Change (AforC) contracts was in Section 27 in the NHS Terms and Conditions of Service Handbook. The NHS Staff Council would be checking if Section 27, as it was currently written, continued to do its job of guiding employers in the application of the Working Time Regulations to NHS employment.

Two Contracts
When an employee has two contracts with the same employer - for example one substantive Agenda for Change contract and another contract for bank work - the provisions of the WTR (Working Time Regulations) are to be applied separately to the substantive post contract and the bank post contract.

If the WTR are applied separately to the permanent post and bank work, the right to paid leave would accrue under both. On this basis, the failure to provide paid holiday in relation to bank work would be unlawful, contrary to the WTD and WTR. Colleagues are strongly

HSE Passport
(Guy Schrecker.  General Manager, HSE Passport)

Health and safety issues that pertain to temporary staff and their employment including:
- last year one survey indicated that 80% of accidents were caused by the 25% of the workforce that were temporary workers
- significant growth in the use of temporary workers with a rise in Europe from 2000 to 2011 of 84%.
- now increasingly strong evidence that visiting workers cause a disproportionate number of accidents!
- further evidence can be found at :http://www.iirsm.org/informationhub/Technical+Papers
Legal responsibilities:

- Site - Under legislation the site operator must ensure that the worker has had any training “which is required by law” - this includes Health & Safety!
- Under Conduct of employment agencies act the labour supplier/agency must supply workers who have had any training “which is required by law” – this includes Health & Safety!
- If the worker is employed by an umbrella organisation then under HaSAWA they have a legal responsibility as the ‘employer’

The solution:
- for agency staff, push the responsibility for basic Health & Safety training back where it belongs – with the agency/umbrella. Workers will then arrive at your site – ready to work (with just a short site familiarisation)

HSE Passport:
- Simple as 1 – 2 – 3!
  1. create an agency mandate
  2. inform the agency/umbrella in writing
  3. enforce the mandate

In summary:
- free of cost to site operators (for temp workers)
- scheme fully managed by HSE Passport
- removes the need for site owner to give basic health & safety training
- captures your legal obligation to ensure ALL workers understand health & safety matters

NHS Protect – Countering Fraud in the NHS

(Reg Madden-Waite Area Anti-Fraud Specialist-West Midlands. NHS Protect)

NHS Protect Structure:
- National Investigation Service
- Information & Intelligence (intelligence & analytics, computer forensics, risk assessment)
- Local Support & Development Services (field support for fraud & security)
- Policy & Standards (policy, fraud prevention/systems weaknesses, training, quality assessments)
- Deterrence & Engagement (publicity & stakeholder engagement)

Role of the Local Counter Fraud Specialist (LCFS) – this would be the person who most members would have direct contact with:
- The front line of the fight against fraud
- Each health body has a nominated LCFS
- Your first point of contact if you discover a fraud
- Undertake work in the areas of: Creating an Anti-Fraud Culture, Deterrence, Prevention, Investigation, Sanctions & Redress
- Supported and assisted by Area Anti Fraud Lead and other NHS Protect Directorates

Types of Fraud:
- Working whilst off sick
- Timesheet fraud
- False information on CV
- Mandate fraud
- Bribery & Corruption
- Private work conducted in NHS time
- False or inflated expenses claims
- Duplicate or inflated invoices
Competencies and Assessments

There has been considerable discussion on this subject over the course of this round of meetings with some very useful sharing of local documentation, approaches, innovative working, etc. Each of the shared documents is described above in the above section ‘Documents/Presentations’. This also includes a range of numeracy and literacy tests.

KPI / Benchmarking Analysis

The following analysis is based upon a benchmarking exercise of data received for the 3 periods of April 2012, September 2012 and April 2013. The information provided has been shared with all group members with a view to enabling local, private discussion. The following extracts were presented to the group to encourage discussion and networking in order for lessons learnt to be shared.

University Hospital North Staffs
Observation: significant reduction in Agency use from 41% in Sept 2012 to 11% in April 13.

HEFT
Observation: Agency usage consistently low April 2012 @ 8%, Sept 2012 @ 6% and April 2013 @ 7%

Shrewsbury & Telford
Observation: Agency usage has gradually crept up April 2012 @ 11%, Sept 2012 @ 19 % and April 2013 @ 33 %

Royal Orthopaedic
Observation: Agency usage has gradually crept up April 2012 @ 1%, Sept 2012 @ 6% and April 2013 @ 12%

ALL AGENCY USAGE - Ranges

Highest in April 2013 for: UHB @ 37% Shrew & Tel @ 33%

Lowest in April 2013 for: Hampshire @ 0 % Birmingham & Solihull @ 1 %

STAFF COSTS PER HOUR
Observation: still significant ranges between trusts (eg compare Band 2a)

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<thead>
<tr>
<th>Trust</th>
<th>Cost (£)</th>
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<tbody>
<tr>
<td>Birm &amp; Soli</td>
<td>8.08</td>
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<tr>
<td>Cardiff &amp; Vale</td>
<td>8.02</td>
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**versus**

<table>
<thead>
<tr>
<th>Trust</th>
<th>Cost (£)</th>
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<tbody>
<tr>
<td>RNOH</td>
<td>6.92 (London weighting adjusted)</td>
</tr>
<tr>
<td>Mersea</td>
<td>7.31</td>
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UNFILLED SHIFTS
Observation: still significant ranges between trusts - examples:

<table>
<thead>
<tr>
<th>Trust</th>
<th>%</th>
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<tbody>
<tr>
<td>HEFT</td>
<td>@ 38</td>
</tr>
<tr>
<td>UHB</td>
<td>@ 28</td>
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<tr>
<td>Hampshire</td>
<td>@ 22</td>
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**versus**

<table>
<thead>
<tr>
<th>Trust</th>
<th>%</th>
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<tbody>
<tr>
<td>Royal Ortho</td>
<td>@ 2</td>
</tr>
<tr>
<td>Mersea</td>
<td>@ 3</td>
</tr>
<tr>
<td>Shrew &amp; Telford</td>
<td>@ 7</td>
</tr>
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</table>
Process and Eligibility for DBS Checks
(Nyla Cooper. Programme Lead – Professional Standards– NHS Employers)

Changes from 10 September 2012
- New definition of regulated activity
- Repeal of registration & monitoring; controlled activity; and additional information
- Introduction of a minimum age (16) at which someone can apply for a criminal records check
- Most people will be barred only if they have engaged, are engaging or might in the future engage in regulated activity
- Legal duties to refer remain unchanged

Changes December 2012 – June 2013
- 1 December 2012:
  - Launch of the Disclosure and Barring Service (DBS)
  - Greater powers given to the DBS to review a person’s inclusion on the barred lists - in appropriate circumstances
- 29 May 2013
  - Filtering - changes under the ROA 1974 (Exceptions) Order 1975 (29 May 2013)
  - More rigorous relevancy test for local police forces
- 17 June 2013:
  - Launch of the new DBS Update Service
  - Introduction of applicant only disclosure certificates

Eligibility
Organisations which are registered with the CQC must operate safe and effective recruitment procedures, including taking up DBS checks where staff and volunteers are eligible

- an organisation engaging staff and volunteers in regulated activity can require those people to have enhanced with barred list check
- an organisation engaging staff and volunteers not in regulated activity may be considered for an enhanced without barred list checks - if those people are eligible because of their activities
- eligibility for standard checks has not changed.

Enhanced Without Barred List Checks
Eligibility for enhanced checks without barred list checks includes anyone who frequently (frequently means at least once a week on an on-going basis) provides (or does so on more than 3 days in any 30, or at any time between 2am and 6am)

- care, supervision, treatment or therapy to an adult who receives any kind of health care or
- anyone who provides: training, teaching, instruction, assistance, advice or guidance wholly or mainly for adults who receive any kind of health care or
- anyone who regularly manages on a day to day basis people engaging in the above activities.

Standard DBS Checks
- Organisations can require a standard DBS check for any activity within the NHS which allows the person engaged in that activity to have access to NHS patients in the course of their normal duties.

Overseas Recruitment
(Barbara Walsh. Manager Nurse Bank/Agency & Nursing Recruitment. University Hospital of North Staffordshire NHS Trust).
Note – this was presented in Barbara’s absence.

Enquiries made with ‘Search Recruitment’
- Cost to skype for Filipino nurses = £1,850 per nurse
- Cost to skype for Spanish nurse = £1,600 per nurse
- Spanish nurses are normally 6 months qualified and can be put in post within a very short time between 3-6 weeks
- Filipino nurses would be 3 months and experienced skilled nurses.

Cost of Recruiting Filipino Nurses IN PERSON
- Based on 2 Scenarios:
  1. Trip to Philippines for 2 x Trust Representatives (Programme A)
  2. Trip to Philippines for 4 x Trust Representatives (Programme B)
- Based on recruiting 40 x Nurses
  1. Programme A = £ 115,965
  2. Programme B = £ 116,175
  Ie c £116,000 for 40 nurses = £2,900 per nurse

(Notes: Programme A Trip to Philippines for 2 x Trust Representatives = Longer Stay Programme B Trip to Philippines for 4 x Trust Representatives = Shorter Stay)

‘Hard truths - the journey to putting patients first’
(Helen Dixon. Senior Policy Manager. Francis Implementation Team)

Note – this was presented in Helen’s absence.

Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (February 2013) concluded that:
- “The system failed in its most essential duty, to protect patients.”
- And called for ‘a fundamental culture change’ across health and social care

Government Response – Hard Truths
- Initial response Patients First and Foremost (March 2013)
- Hard truths builds on this to provide a detailed response to 290 recommendations
- Also responds to six independent reviews commissioned to consider key issues raised by the Inquiry

The 6 Independent Reviews
- Keogh review – into 14 hospital trusts who are outliers on mortality data
- Cavendish review – into healthcare assistants and support workers
- Berwick review – into patient safety
- Clwyd/Hart review – into complaints system
- NHS Confederation review – into bureaucracy
- Children and Young People’s health outcomes forum report

The 5 Chapters of Hard Truths – The Journey to Putting Patients First
- Chapter 1 – Preventing problems
- Chapter 2 – Detecting problems quickly
- Chapter 3 – Taking action promptly
- Chapter 4 – Ensuring robust accountability
- Chapter 5 – Ensuring staff are trained and motivated
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**Actions Already Taken**
- Appointment by CQC of three **Chief Inspectors** of hospitals, adult social care and primary care
- CQC consultation on new system of **ratings**
- CQC consultation on new set of **fundamental standards**
- NHS England **guidance to commissioners** on involving patients and the public
- Publication of **clinical outcomes** by consultant for 10 medical specialties
- New **nurse and midwifery leadership** programmes
- New **fast-track leadership** programmes
- ‘Front-line’ experience for Ministers and senior leaders

**New Actions**
- Monthly reporting of ward-by-ward **staffing levels**
- Clear information for patients and families on **complaints**
- Statutory **duty of candour** on providers and **stronger professional duty of candour** on individuals
- **Legislate on wilful neglect**
- New ‘**fit and proper persons**’ test
- New **Care Certificate** for healthcare assistants and support workers
- New criminal offence on **false or misleading information**

**Bank Staff – Recruitment / Induction / Appraisal**
(Barbara Walsh. Manager Nurse Bank/Agency & Nursing Recruitment. University Hospital of North Staffordshire NHS Trust).

Note – this was presented in Barbara’s absence.

As part of the recruitment process potential recruits are informed about, amongst other items, the **Core Themes** – as follows:
- **Individuality** – recognise that every person is unique and has individual needs and preferences
- **Dignity** – respect and maintain dignity at all times
- **Privacy** – provide privacy/sensitivity/sympathy for the patient remembering that within the clinical environment, privacy may be threatened
- **Confidentiality** – aware of the need for confidentiality regarding information about the client. Anything divulged must be reported to the nurse in charge for professional assessment.
- **Quality** – carry out skills to the highest standard to deliver quality care
- **Safety** – will not undertake any tasks unless competent to do so. Maintaining a safe environment
- **Infection and Control** – understand the principles and practice of prevention of cross infection, including correct hand washing / aprons / gloves etc.,
- **Care** – Demonstrate an understanding of showing a caring attitude in every interaction with patients and relatives
- **Communication** – As part of the multi-disciplinary team you will demonstrate good communication skills, being courteous and helpful at all times. Acknowledge that complaints arise through poor channels of communication. If the NA is aware of a complaint it is reported to the NIC showing that patients and relatives are listened to and their comments are taken seriously.

Potential recruits are also informed about the **Dress Code - Standards of Dress at Work Policy** (HR31) – as follows:
- Uniform to be worn at all times, providing a Professional image
- well groomed, smart, free from body odour,
- no jewellery, wrist watches, excessive body piercings
- nails to be kept short and clean, free from nail varnish. False nails must **not** be worn at work.
- Staff must not chew gum on duty,
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- socks when visible should be appropriate colour, shoes smart, clean and comfortable **not** sandals, clogs etc.,
- comply with hygiene code – requires arms of anyone having patient contact to be ‘bare below the elbow’ Tattoos considered unacceptable should be covered
- no smoking policy,
- alcohol is strictly forbidden during working hours
- All staff should carry trust ID at all times

**Introduction to the Ward / Department**
- Introduction to ward team
- Familiarise to ward environment / toilet / kitchen
- Canteen facilities
- Fire procedure
- Telephone system / bleep service
- Security – ward procedures / secure personal belongings
- Confidentiality
- Sickness / reporting process
- Nursing Assistant – CODE OF CONDUCT

**On the First Day**
- Introduction and welcome to ward / ward team and whereabouts of fire points, resuscitation trolley, toilets, restaurant, locker for personal belongings
- Procedure in the event of an emergency
- An understanding of the NA role and other staff
- Procedure for complaints / PALS
- Discuss and demonstrate – bed making, washing/dressing, care plans, fluid balance charts, nutritional charts, observation charts
- Discuss the importance of teamwork and needs of other team members
- Hand overs – regarding diets, mobility, special needs, discharges, admissions, restrictions
- Correct use of equipment
- Understanding of pressure care and pressure relieving mattresses
- Infection control – prevention of cross infection, gloves, aprons, hand washing, needle-stick injuries, MRSA, food hygiene

**Performance Dashboard**
*(Penny Needham. Head of Temporary Staffing. Birmingham Community Healthcare NHS Trust)*

The following is a selection of areas covered by the Performance Dashboard used at the above trust:
- What is the mandatory training compliance rate for bank only workers?
- What are the reasons for temporary staffing requests?
- How many WTEs are requested, and are filled by bank?
- How many shifts are requested, and how many are filled by Agency?
- What are the fill rates for requests by Bank and Agency? (% of hours requested)
- Which requests by staff group have not been filled by the Bank? (in WTEs)
- How much does temporary staffing cost?
- What is the Bank’s current recruitment activity?
- What complaints are received regarding workers supplied by the bank?
- What do Customer Satisfaction surveys say about the Bank?
- What systems is the Bank implementing to improve service?
<table>
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<tr>
<th>Name</th>
<th>Job Title</th>
<th>Trust</th>
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<tbody>
<tr>
<td>Lucy Richards</td>
<td>TSS Manager</td>
<td>Birmingham &amp; Solihull Mental Health NHS Foundation Trust</td>
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<tr>
<td>Theresa Kiely</td>
<td>Manager of Temporary Staffing</td>
<td>Birmingham Children's Hospital NHS Foundation Trust</td>
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<tr>
<td>Penny Needham</td>
<td>Head of Temporary Staffing</td>
<td>Birmingham Community Healthcare NHS Trust</td>
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<tr>
<td>Sandra Coles</td>
<td>Senior Nurse</td>
<td>Cardiff and Vale University Health Board</td>
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<tr>
<td>Eileen Rudge</td>
<td>E Rostering Lead</td>
<td>Hampshire Hospitals NHS Foundation Trust</td>
</tr>
<tr>
<td>Julie Nicholas</td>
<td>Temporary Staffing Manager</td>
<td>Heart of England NHS Foundation Trust</td>
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<tr>
<td>Sally Lawson</td>
<td>Regional Locum Bank Project Lead</td>
<td>Heart of England NHS Foundation Trust</td>
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<tr>
<td>Derry Moffatt</td>
<td>Additional Staffing Manager</td>
<td>Mersey Care NHS Trust</td>
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<tr>
<td>Gill Fountain</td>
<td>Temporary Staffing Manager</td>
<td>Royal National Orthopaedic Hospital</td>
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<tr>
<td>Alex Rodger</td>
<td>Nurse Manager TSD</td>
<td>Shrewsbury &amp; Telford Hospital NHS Trust</td>
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<tr>
<td>Marie Carr</td>
<td>Head of Temporary Staffing</td>
<td>The Dudley Group NHS Foundation Trust</td>
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<tr>
<td>Eileen Hendrick</td>
<td>Nurse Bank</td>
<td>The Royal Orthopaedic Hospital NHS Foundation Trust</td>
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<tr>
<td>Kim Turner</td>
<td>Operational Manager Locate Staff Bank</td>
<td>University Hospital Birmingham</td>
</tr>
<tr>
<td>Barbara Walsh</td>
<td>Manager Nurse Bank/Agency &amp; Nursing Recruitment</td>
<td>University Hospital of North Staffordshire NHS Trust</td>
</tr>
<tr>
<td>Dianne Worthington</td>
<td>Resourcing Manager</td>
<td>Walsall Healthcare NHS Trust</td>
</tr>
<tr>
<td><strong>Honorary Members:</strong></td>
<td></td>
<td><strong>NHS Employers</strong></td>
</tr>
<tr>
<td>Max Liversuch</td>
<td>Pay and Negotiations</td>
<td><strong>NHS Employers</strong></td>
</tr>
<tr>
<td>Nyla Cooper</td>
<td>Programme Lead – Professional Standards Employment Services</td>
<td><strong>NHS Employers</strong></td>
</tr>
</tbody>
</table>
A SELECTION OF THE TOPICS IDENTIFIED FOR THE 2014 BVG ROUND

- Benchmarking/Performance Dashboards
- Counter Fraud/NHS Protect
- Working Time Directive
- DBS Checks
- ‘Hot Topics’ Discussion
- Employment Law
- Francis Report Issues
- Agency Spending
- Competencies and Assessments
- Market Place – Sharing Good Practice
- Topical Presentations

NPAG DEVELOPMENTS

CPD Certification

The NPAG is a member of the CPD Certification Service. The Nursing and Temporary Staffing BVG received CPD approval for 2013.

CPD Certification is a formal recognition of the contribution that membership of the Nursing and Temporary Staffing BVG makes to members’ continued professional/personal development.

At the end of the annual round of meetings, members will receive certificates of attendance for all meetings attended during the year to evidence the contribution made as part of lifelong learning.

FURTHER INFO

For further information about the Nursing and Temporary Staffing BVG please contact Dale Atkins, Group Facilitator on 07801 374217 or e-mail: dale.atkins@da-consultancy.org.uk

For further information about the National Performance Advisory Group and its Benchmarking and Best Value activities, please contact the NPAG on:

Telephone: 01245 544600  Fax: 01245 544610  Email: www.npag.org.uk
NPAG Benchmarking & Best Value Groups

The NPAG organises and facilitates a national network of Best Value Groups that enables members to share experience, identify good practice; innovation and information to assist individual managers develop their own service improvement action plans.

For further information on NPAG Best Value Groups, please contact the following Best Value Group Facilitators:

<table>
<thead>
<tr>
<th>Best Value Group</th>
<th>NPAG Facilitator</th>
<th>Contact Tel. No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Services</td>
<td>Terry Williams</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Clinical Engineering North</td>
<td>Richard Steventon</td>
<td>01282 694657</td>
</tr>
<tr>
<td>Clinical Engineering South</td>
<td>Richard Steventon</td>
<td>01282 694657</td>
</tr>
<tr>
<td>Estates Services</td>
<td>Tony Gent</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Facilities (North)</td>
<td>Tony Gent</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Facilities (South)</td>
<td>Roger D'Elia</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Health Visiting &amp; School Health Services Development Network</td>
<td>John King</td>
<td>01245 544600</td>
</tr>
<tr>
<td>National District Nurses Network</td>
<td>Sue Hill</td>
<td>01245 544600</td>
</tr>
<tr>
<td>NHS Sustainability Lead Network</td>
<td>John King</td>
<td>01245 544600</td>
</tr>
<tr>
<td>NHS Transport &amp; Logistics</td>
<td>Peter Richardson</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Nursing &amp; Temporary Staffing</td>
<td>Dale Atkins</td>
<td>07801 374217</td>
</tr>
<tr>
<td>Occupational Health &amp; Safety</td>
<td>John King</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Operating Theatres Services</td>
<td>Paul Wilson</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Patient Transport Services Network</td>
<td>Roger D'Elia</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Portering Services</td>
<td>John Wigmore</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Project Management</td>
<td>Dale Atkins</td>
<td>07801 374217</td>
</tr>
<tr>
<td>Resilience Development Network</td>
<td>Dale Atkins</td>
<td>07801 374217</td>
</tr>
<tr>
<td>Sterile Services Benchmarking Club</td>
<td>Jo Kerrigan</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Telecomms</td>
<td>John Wigmore</td>
<td>01245 544600</td>
</tr>
<tr>
<td>Waste Management Services</td>
<td>Sue Berry</td>
<td>01245 544600</td>
</tr>
</tbody>
</table>

CPD Certification is a formal recognition of the contribution that BVG membership makes to members’ continued professional/personal development. Members receive CPD certificates of attendance for all meetings attended during the year to evidence the contribution made as part of lifelong learning.

For further information on the NPAG and our future activities, please contact, Gemma Aitchison, Marie Cherry or Victoria Combes by telephone on 01245 544 600, or by e-mail on gemma@npag.org.uk, marie@npag.org.uk or victoria@npag.org.uk.
Available to all members of NPAG Benchmarking and Best Value Groups, and individual subscribers, the NPAG NetWork provides the facility for members to ask questions of any individuals, group or groups within the overall NPAG membership.

The response to questions raised has been excellent. The NPAG NetWork provides a managed forum for colleagues to share information - saving time and money in not re-inventing the wheel!

Questions raised in the past month have included the following topics:
- Pathology waste policy
- Facilities audit tool tools
- Decontamination of portable medical equipment
- Ward hairdressers
- Laundering Heat Labile items
- Fleet vehicle insurance
- Use of latex gloves
- Use of chute system for waste disposal

*Thank you all who have responded!*

For full details of how to use the NPAG NetWork, please contact Bill Plumb on 01245 544600, or e-mail: bill.plumb@npag.org.uk.

**Forthcoming NPAG Events**

Please visit [www.npag.org.uk](http://www.npag.org.uk) for all our current course, workshops, training & BVG meetings. Telephone: 01245 544600 or email gemma@npag.org.uk, victoria@npag.org.uk or marie@npag.org.uk

**Spring 2014 - Clinical Professional Development for Occupational Health Nurses (National & onsite)**

- Pre Employment Clearance
- Spirometry
- Management of Physical Hazards
- Audiometry
- Sickness Absence Management Referrals
- Health & Safety

Please contact Victoria Combes for details.

**Putting the Patient First – Customer Care and Communication Skills in the NHS Training Workshop**

A one day workshop for NHS professionals, reinforcing customer care best practice so that patients receive the best possible experience through our people, always Putting the Patient First:

- Understanding the impact of your own behaviour on others
- How to handle challenging situations and people
- Effective communication techniques
- Understanding and managing patient expectations
- Identifying how and why perceptions are formed
- Proactive versus reactive behaviour
- Demonstrating a positive attitude
- Taking ownership

Please contact Marie Cherry to organise your on-site workshop.

**Tuesday 16th September 2014 - Clinical Engineering Annual Conference**
# REGISTRATION FORM

## NURSING & TEMPORARY STAFFING BVG 2014

### ORGANISATION

### ADDRESS

### Type of organisation: NHS □ Social Enterprise □ Other □

### PHONE NO.       FAX NO.

<table>
<thead>
<tr>
<th>Member 1 for a £550 fee (4 meetings)</th>
<th>Member 2 for an additional £195</th>
</tr>
</thead>
</table>

### NAME

### POSITION

### EMAIL

### SPECIAL REQUIREMENTS (Dietary/Access)

### Reservations

Please send completed booking form to:
(Photocopies acceptable)

**National Performance Advisory Group**
87 Coval Lane
Chelmsford
Essex, CM1 1TQ
Tel: 01245 544600
Fax: 01245 544610
Email: gemma@npag.org.uk
www.npag.org.uk

### Invoicing

If the invoice address is different from that above please enter address below

### BOOKING CONDITIONS:

A VAT invoice will be issued. VAT Registration No. 654 9195 01. VAT applies to any NHS organisation outside England and to any non-NHS organisation.

Payment is due on receipt of invoice. DO NOT send payment in advance of receipt of invoice. When invoice is received, payment should be made to ‘East of England Ambulance Service NHS Trust.’

ALL cancellations must be in writing. Cancellations received up to 2 weeks before the date of the first meeting will receive a full refund less an administration charge of £100. After this date refunds cannot be made. A substitute is acceptable. NPAG cannot be held responsible for any travel expenses or accommodation costs in the event of a cancellation or postponement of a meeting, workshop or an event.

A 10% discount will be applied when an existing NPAG member joins an additional Group. This does not apply to the £195 second member rate.

I confirm that I have read and accept the above BOOKING CONDITIONS and would like to register as a member of the ‘Nursing & Temporary Staffing BVG 2014’. Please invoice me for payment.

Authorisation Signature .............................. Your Order Number ..............................