Retention Support Programme | March 2019

Professor Mark Radford
Deputy Chief Nursing Officer - England
NHS England/NHS Improvement
A continuing national priority

“There is no magic bullet or formula for getting this absolutely right...we have a major part to play in supporting all of our staff and making sure we can keep them.” Ruth May, Chief Nursing Officer, NHS England/NHS Improvement

“We will also improve retention rates amongst our current workforce with new flexible working arrangements to be made available to all NHS staff...” Jeremy Hunt, Secretary of State for Foreign and Commonwealth Affairs

“Retention of talented individuals, and especially our clinical staff, is just as important as recruitment to keep vacancy levels low...” Danny Mortimer, Chief Executive, NHS Employers

“I am determined to ensure duty is rewarded by the sort of system people deserve. That means taking on issues like bullying and harassment, recruiting and retaining staff and improving options for flexible working.” Matt Hancock, Secretary of State for Health and Social Care
The long-term trend shows a persistent increase in NHS leavers, whilst NHS turnover (including churn) has also been rising steadily from 2012, after a peak associated with structural reform (abolition of Primary Care Trusts). The trend is driven by a sustained increase in the nursing leaver rate (increase from 6.2% to 8.5% in the past 7 years - this equates to c.7k more nurses leaving each year).

The aim of the NHSI/Employers plan is to stabilise the nursing leaver rates and clinical MH workforce (see next slide for sector breakdown) in the first year of the programme (July 2017-June 2018) and then drive improvements in the next few years.

The data below does not take into account any impact of NHSI/NHS Employers interventions. We expect the first set of indicative data to be available from Q1 2018/19.
Current activity from NHSI and NHS Employers is targeted on the nursing workforce in acute and community trusts and the clinical workforce in mental health trusts. This is due to their proportional contribution to overall turnover (below), the immediate need to address nurse shortages – particularly with regard to Brexit – and the retention requirements associated with delivering the Mental Health Five Year Forward View.

**Clinical staff turnover by staff group**

**Clinical staff turnover by organisation type**
Direct support programme designed to help reduce variation in leaver rates

And to reduce the number of staff leaving the NHS...
There are many factors in trusts’ control – the Retention Programme will focus in these areas

Factors in trusts’ control

- Staff empowerment and engagement
- Flexibility offer
- Open and supportive environment (team huddles, listening to staff etc.)
- Adapting roles as staff get older
- CPD & clear development path (including preceptorships)
- Improve data collection and utilisation to inform decision making

A large proportion of leavers are for unknown reasons - this needs to improve to focus retention improvement activity effectively
## National leaver reasons against age profile

<table>
<thead>
<tr>
<th>National Reason</th>
<th>Under 25</th>
<th>25 - 29</th>
<th>30 - 34</th>
<th>35 - 39</th>
<th>40 - 44</th>
<th>45 - 49</th>
<th>50 - 54</th>
<th>55 - 60</th>
<th>Over 60</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pay/Reward</td>
<td>18.3%</td>
<td>22.6%</td>
<td>21.3%</td>
<td>20.8%</td>
<td>20.3%</td>
<td>18.5%</td>
<td>15.6%</td>
<td>6.3%</td>
<td>1.7%</td>
<td>16.5%</td>
</tr>
<tr>
<td>Relocation</td>
<td>19.9%</td>
<td>20.9%</td>
<td>20.7%</td>
<td>18.3%</td>
<td>17.2%</td>
<td>16.5%</td>
<td>14.0%</td>
<td>7.0%</td>
<td>3.0%</td>
<td>15.6%</td>
</tr>
<tr>
<td>Unknown</td>
<td>23.5%</td>
<td>21.2%</td>
<td>21.3%</td>
<td>22.5%</td>
<td>25.0%</td>
<td>24.7%</td>
<td>23.2%</td>
<td>14.2%</td>
<td>11.7%</td>
<td>20.7%</td>
</tr>
<tr>
<td>Retirement</td>
<td>0.1%</td>
<td>0.1%</td>
<td>0.2%</td>
<td>0.3%</td>
<td>0.4%</td>
<td>1.3%</td>
<td>9.5%</td>
<td>48.1%</td>
<td>65.2%</td>
<td>13.3%</td>
</tr>
<tr>
<td>Workforce Life Balance</td>
<td>11.9%</td>
<td>12.2%</td>
<td>13.7%</td>
<td>15.1%</td>
<td>15.7%</td>
<td>15.3%</td>
<td>14.8%</td>
<td>9.7%</td>
<td>6.2%</td>
<td>12.8%</td>
</tr>
<tr>
<td>Progression/CPD</td>
<td>12.7%</td>
<td>10.4%</td>
<td>8.5%</td>
<td>7.4%</td>
<td>6.1%</td>
<td>6.0%</td>
<td>4.3%</td>
<td>1.8%</td>
<td>0.6%</td>
<td>6.5%</td>
</tr>
<tr>
<td>Flexibility</td>
<td>7.1%</td>
<td>7.4%</td>
<td>8.7%</td>
<td>9.2%</td>
<td>8.2%</td>
<td>7.9%</td>
<td>6.8%</td>
<td>4.8%</td>
<td>4.8%</td>
<td>7.2%</td>
</tr>
<tr>
<td>Dismissal</td>
<td>4.9%</td>
<td>4.0%</td>
<td>4.2%</td>
<td>4.7%</td>
<td>5.2%</td>
<td>7.5%</td>
<td>9.4%</td>
<td>6.4%</td>
<td>6.1%</td>
<td>5.7%</td>
</tr>
<tr>
<td>Incompatible working relationships</td>
<td>1.7%</td>
<td>1.3%</td>
<td>1.4%</td>
<td>1.6%</td>
<td>1.8%</td>
<td>2.2%</td>
<td>2.4%</td>
<td>1.7%</td>
<td>0.7%</td>
<td>1.6%</td>
</tr>
</tbody>
</table>

**Key:**
- **Quartile 1 (lowest)**
- **Quartile 2**
- **Quartile 3**
- **Quartile 4 (highest)**

The heat map details 2017 (calendar year) reasons for leaving within each age bracket in nationally. Heat ratings are defined as quartiles per age group as determined as follows: Green: Quartile 1; Yellow: Quartile 2; Orange: Quartile 3; Red: Quartile 4.
# Our aims

To improve the retention of clinical staff within the NHS

<table>
<thead>
<tr>
<th>Our aims</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>For trusts to improve retention across <strong>all clinical staff groups</strong></td>
<td></td>
</tr>
<tr>
<td>To support trusts with the <strong>knowledge and tools</strong> to improve retention locally</td>
<td></td>
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<tr>
<td>To encourage and promote trusts to share <strong>good practice</strong></td>
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</table>
Our offer

Support available to all trusts

- Masterclasses to spread best practice across trusts
- Retention improvement resources - these have been designed with input from trust HRDs, DoNs and MDs
- Extensive comms plan, including case studies to engage NHS staff and to praise the incredible work they do

Targeted direct support

- Nursing Retention Support Programme to help acute and community trusts develop retention plans
- Mental Health Retention Support Programme to help MH trusts develop detailed plans on retention

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#nhsretention
Direct Support Programme

- Bespoke data packs
- Launch event
- Buddying trusts with NHSI clinical and workforce leads
- Introductory calls
- Trust visits
- Trusts develop Retention Improvement Plans and submit after 90 days

The aim is to see improvements in the next 12 months
The story so far

- **Jun 2017** - Retention Programme launch
  - **Jul 2017** - Launch of Cohort 1
  - **Sep 2017** - Publication of NHS Employers Retention Improvement Resource
  - **Oct 2017** - Launch of Cohort 2
- **Dec 2017** - Publication of NHSI Retention Improvement Resource
  - **Nov 2017** - 2nd series Retention Masterclasses
  - **Oct 2017** - Publication of videos and Retention Collection page
- **Mar 2018** - Publication of videos and Retention Collection page
  - **Apr 2018** - Launch of Cohort 3
  - **Jun / Jul 2018** - end of Year 1 & start of Year 2
  - **Nov 2017** - Launch of Cohort 4
  - **Oct 2018** - 3rd series Retention Masterclasses
Trust retention plan key themes from Cohorts 2 & 3

Key

Overarching themes

Themes

- Leadership visibility and support
- Culture and values
- Community engagement
- Attractive employer
- Recognition
- Reward
- Improved workspace
- Work-life balance
- Flexible working
- Career mapping
- Role variation/rotation
- Career development
- Pre-retirement
- Retire and return
- Induction and preceptorship
- Recruitment
- Itchy feet conversations
- Exit interviews
- Staff survey
- Hotspots
- Data quality
- Understand data
- Supporting new starters
- Supporting experienced staff
- Trust brand
- Health and wellbeing
- Flexibility

NED Induction – Retention Support Programme
Critical factors in driving improvement

- Detailed data diagnostic
- Engagement with staff at all levels
- Buy-in at executive level
- Focus on high-turnover areas
- Establishing an overall aim
Overall nursing turnover rates have fallen from 12.5% to 12% since the start of the programme.
National trend MH clinical turnover

Overall MH clinical staff turnover rates have fallen from 12.5% to 12% since the start of the programme.
Nursing Cohort 1 trusts: 1% reduction in nursing turnover vs 0.5% nationally

Nursing cohort 1 performance vs all trusts

- Cohort 1 turnover
- All Trusts - Nursing Turnover rate

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NED Induction – Retention Support Programme
MH Cohort 1 trusts: 1.1% reduction in clinical turnover vs 0.7% nationally
Cohort 1’s early results are encouraging across all regions

Cohort 1 - Nursing

- London: Jun-17: -0.74%, Dec-17: -2.18%, Mar-18: -2.61%, South: -0.96%

Cohort 1 - Mental Health

- London: Jun-17: -2.04%, Dec-17: -1.17%, Mar-18: -0.21%, South: -1.81%
Good practice: case studies

- Focus on staff engagement, feedback and branding
- 3% improvement on Band 5 nursing over 12 months, as of Mar ‘18 data

Six of these elements underpin the trust’s retention plan

Reduced overall turnover to 11.2% from July ‘17 = 1% improvement

Turnover

- Qualiﬁed nurses
- Band 5
- Overall
Good practice: case studies

Rotherham Doncaster and South Humber NHS Foundation Trust

- Introduced ‘itchy feet’ conversations
- Implemented targeted mental health training for non-professionally qualified ward staff
- Values based supervision & PDR
- Diversifying recruitment campaign.
- ‘Always Events’ – values based recruitment- including patients on every panel.
- Recruitment tracker

- Reduced turnover of registered nursing from **13.1% to 11.2%** - 0.9% reduction between May 2017 and March 2018
Retention Resources

Retention Improvement Guide

Retaining your clinical staff: a practical improvement resource

December 2017

Seven steps to improving staff retention

The actions you can take can be summarised in seven steps.
We recommend each step is supported by an executive sponsor and senior leadership.

1. Develop or refine your retention strategy
2. Understand your data and insights
3. Engage and empower staff
4. Development and career planning
5. Tailor your offer to staff depending on the stage of their career
6. Reduce variation and standardise working environments
7. Collaborate with neighbouring organisations

Available at

Retention Improvement Hub

Improving staff retention

A collection of practical resources to help NHS organisations to improve staff retention.

We have developed and collated a collection of resources to help improve staff retention which will include a mixture of:

- retention improvement guides
- government policy documents
- case studies on trust initiatives to improve retention

Video case studies

The Mid Yorkshire Hospitals NHS Trust

Sandwell & Birmingham Hospitals NHS Trust

Greater Manchester Mental Health NHS Foundation Trust

Available at:
https://improvement.nhs.uk/resources/improving-staff-retention/

#nhsretention

NED Induction – Retention Support Programme
Programme plan

Targeted direct support to trusts

**Continued direct support (Nursing and MH)**
- Monitor progress of Cohorts 1/2/3
- Additional tailored support for as required
- Cohort 4 in progress – calls and visits Jan to Mar 2019
- Bespoke support to remaining trusts (Nursing)

**Programme expansion**
- Emergency Department recruitment and retention support programme

**Universal support to all trusts**
- Retention Hub 2.0 – resources, trust case studies, useful policies
- Masterclasses 2019 + alumni events for previous cohorts

**Addressing key retention drivers**
- NHS Employers’ Nurse Retention Programme
- Commissioned research
  - High Secure sites recruitment and retention review

**Data insights made available to trusts**
- Using data more effectively to drive improvements in turnover
  - Model Hospital
  - Regular data packs to cohort trusts
  - Expansion of data (STP, length of stay, retire and return)

**Communication strategy underpinning the programme (including links to wider workforce related programmes such as sickness/absence)**