



## Staff Rostering Policy

### Document Summary

*This policy provides guidance for managers on the rostering of staff.*

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<b>POLICY AUTHOR</b>	Dianne Hutchinson / Dallan McGleenan

### Important Note:

**The Intranet version of this document is the only version that is maintained.**

Any printed copies should therefore be viewed as “uncontrolled” and, as such, may not necessarily contain the latest updates and amendments.





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## **Staff Rostering Policy**

### **1. INTRODUCTION**

Staff rosters are one of the fundamental systems used to plan the delivery of care. It is essential that rosters are prepared in a way that maximises the benefits for patients by utilising the staffing resources that we have as efficiently as possible.

In order for staff to be able to achieve a work life balance, rosters must be drawn up giving sufficient notice, and taking reasonable account of the needs and wishes of individual members of staff.

Cumbria Partnership NHS Trust (the Trust) is committed to ensuring that the rostering process is as fair and transparent as possible without prejudice to our staff, or the patients whose care we strive not to compromise.

Fair, equitable and efficient rostering is necessary to contribute to the achievement of the Trust's Vision and Values. All people using our services as well as our staff have a right to expect the best possible support from the Trust. To do this we must ensure that work and resources are distributed appropriately, and fairly, with the right people, with the right skills, in the right place, at the right time.

### **2. SCOPE OF POLICY AND OBJECTIVES**

This policy will assist with the production of rosters based on funded establishments as agreed within budget setting for each service area. Budget setting should be based on local guidelines on safe staffing levels and skill mix. This policy and procedure applies to all rostered staff across the trust and not just those working a variable shift pattern.

The purpose of this policy is to provide the principles upon which all working patterns must be based.

It is expected that all rosters take into account European Working Time Regulations and other legislative requirements. The policy also covers compliance with the Agenda for Change Handbook.

The following policies should also be referred to in conjunction with this policy to support staff that may have particular requirements in their working patterns:



Special Leave Policy

Promote Flexible Working Policy

Annual Leave Policy

Time Off in Lieu Policy

Sickness Absence Policy

Temporary Staffing Policy

## 2.1 Policy Principles

To minimise clinical risk associated with sub-optimal skill mix and/or staffing levels

To ensure safe / appropriate staffing for all departments using fair and consistent rosters

To improve the utilisation of substantive Trust staff and reduce bank, agency and overtime spend

To improve planning of clinical and non-clinical non-effective working days (e.g. annual leave, sickness and training)

## 3. RESPONSIBILITIES

### 3.1 Executive Management Team / Operational Management Team

- Accountable to the Trust Board for ensuring Trust wide compliance with this policy.
- Safe staffing level/skill mix should be agreed for each unit/ward/team and signed by Directorate Management Team
- Ensure that ward/unit budgets reflect safe minimum staffing levels/skill mix and have an additional headroom % to account for acuity level fluctuation, as well as staff sickness, training and annual leave.





### 3.2 Ward/Service Manager Responsibility

Managers have a responsibility to ensure that rosters are produced and worked in accordance with this policy.

- Responsible for implementing the policy at local level
- Discuss and agree safe staffing levels and skill mix required per shift per day
- Discuss and agree a complete review of shifts and shift times for each unit/ward/team according to clinical requirements, and in compliance with WTR and HR Policies.
- Ensure review of all current personal patterns and any flexible working arrangements. All such arrangements to have a regular review within the agreement at a minimum of 12 monthly intervals
- Produce the roster and ensure that expenditure does not exceed the agreed budget for the team / ward, unit and departments.
- Responsibility for authorising any changes even if she / he do not undertake the task of producing the roster.
- Responsibility to maintain and amend rosters for pay/ human resources processes on a regular basis ie weekly to reflect any short notice changes e.g. sickness absences, bank staff utilised etc.
- Ensure compliance with Annual Leave parameters across the year, i.e. 11% - 17% staff off on annual leave per rota period. Service need, and skill mix to be taken into account to preserve optimum skill mix at all times.
- Annual leave to be calculated in hours.
- Ensure there is a minimum of 4 week roster available to staff in advance.
- Ensure compliance with agreed maximum number of requested days off within each roster period.
- Shift leader to ensure that working rosters should be amended to reflect what has been worked in 'real time' to facilitate accurate payment and quality assurance information

### 3.3 Individual Staff Members

- Responsible for adhering to the principles as outlined in this policy.



#### 4 Communicating the Policy to Staff

Consultation with trade union and staff side representatives via the Trust's Partnership Forum, and active involvement of representatives in policy developmental meetings and policy roll out.

Programme of engagement with rota creators and staff to actively embed the principles of this policy into practice.

Both the Trust wide policy and ward based local agreements on staffing must be made readily available to all staff. The Trust wide policy will be available on the Trust intranet.

### 5. KEY THEMES

#### 5.1 Flexible Working

The Trust supports the principle regarding work life balance and flexible working. However, this should be set against the need to ensure safe levels of staffing to maximise the quality of patient care and reduce clinical and non-clinical risk. Achieving adequate staffing numbers and appropriate skill mix is the main priority i.e. having the right people, in the right place, at the right time to enable the delivery of high quality care. Please refer to the Trust's Promote Flexible Working Policy.

#### 5.2 Working Time Regulations

It is the responsibility of ALL employees to ensure compliance with Working Time Regulations. Further information regarding WTR can be found in section 27 (part 4) Employee Relations of Agenda for Change (AfC) for Working time Regulation requirements.

The Working Time Regulations exist for the purpose of ensuring that employees have adequate rest both during, and between shifts. In safety critical occupations such as healthcare this is extremely important, as staff working without adequate rest, risk adversely affecting the quality and safety of the service that the Trust offers. The key requirements are highlighted below.

Every shift exceeding 6 hours must include at least 20 minutes unpaid break.  
(See section 5.4 for detail on staff breaks)





Staff should not work more than an average of 48 hours per week over a 17 week reference period. This total includes hours worked in all employment including bank, overtime and agency, whether for the Trust or any other employer.

All staff who secure additional employment internal or external to the Trust must declare this in writing to their line manager using the form contained within Appendix 2.

All members of staff who wish to exercise their right to opt out of the 48 hour working limit must do so in writing using the Trust Opt out Form (Appendix 3). Staff members who formally opt out of the 48hour working limit must not exceed 60 hours per week over a 3 month period. Members of staff who do not wish to opt-out will not suffer any discrimination.

Working Time Regulations states a minimum daily rest period of 11 hours between shifts and a rest period of 24 hours in each 7 day period. However, the Regulations do acknowledge that this is not always achievable within services such as healthcare. Rest periods less than 11 hours (eg between a traditional late shift and an early shift the following day) should be kept to a minimum, and not more than once a week.

### 5.3 Skill Mix and Staffing Levels

Each area has an agreed funded establishment, plus an agreed level of budget “headroom” stated as a percentage of overall budget. This budget headroom accounts for predictable absence eg annual leave and training as well as less predictable absence such as staff sickness.

Minimum safe staffing levels and skill mix (experience/competencies /qualifications of staff required) for each ward/team/unit, must be agreed and reviewed in light of any significant change to the ward /team/department function. Changing patient acuity levels/clinical risk must be taken into consideration when setting budgets and staffing levels/skill mix.

The off duty of senior staff must accommodate both ward / team and management requirements e.g. need to attend meetings etc.

Ward / team Managers should only work weekends or night shifts with prior approval from Line Manager or for a specific reason e.g. ad hoc supporting and supervision of staff.

In clinical areas there should be a designated nurse in charge named on the rota who has been identified as having the required skills and competencies to undertake this role.



Student nurses should be rostered with their mentor as much as possible, meeting University guidelines. If their mentor is unavailable, an associate mentor should be allocated.

Shift patterns should maximise staff rest time wherever possible e.g. staff should ideally have 2 consecutive days off each week.

Consideration should be given to flexible working; however, this needs to be fair and equitable to all staff.

All staff are expected to work a variety of shifts and shift patterns at managers discretion that have been specifically designed to meet individual service/ward need. Any exception to this is to be formally considered in accordance with the appropriate Trust Policy eg Sickness Absence Policy, Promote Flexible Working Policy.

Ideally the maximum number of consecutive standard day shifts recommended for staff to work is 7

The maximum number of consecutive long days (shifts over 10 hours) recommended for staff to work is 3

If staff work a late shift following an early shift in any one day, there must be an hour break in between, and there must be a break of 11 hours before a 3<sup>rd</sup> shift commences

Night shifts should be kept together. If possible more than 4 consecutive night shifts should be avoided.

If possible there should be 2 days off not including the “sleep day” after being rostered for night shifts.

If possible staff should have weekends off before annual leave.

If possible staff should start their shift pattern on a late shift and finish on an early shift

Individual areas to adhere to locally agreed shift patterns

In areas where long days are worked:

Failure to attend a long day shift results in the equivalent loss of cover of two shorter shifts and therefore the rostering of long days for individuals, or units will need to be regularly reviewed by the ward / team Manager.





## 5.4 Breaks

Every shift exceeding 6 hours must include at least 20 mins unpaid break. Breaks cannot be taken at the beginning or end of the shift as their purpose is to ensure that staff have adequate rest time during the shift in order to preserve quality and safety of service delivery.

Within a long day that is greater than 10 hours there must be appropriate unpaid break of not less than 30 mins. The break must not be taken at the beginning or end of the shift.

In clinical areas the nurse in charge will allocate and negotiate break times at the commencement of each duty. If staff have their break interrupted by clinical pressures, or are unable to take their break at the allotted time due to clinical pressures, then the break should be reallocated as soon as possible after the originally planned break.

In some clinical areas it is not possible for some staff to leave the ward/unit for a break during their shift. In such instances the Trust will provide rest areas within the ward/unit where breaks can be taken. Only in these circumstances where staff cannot leave the ward/unit for a break will they be paid breaks. If the break is interrupted due to clinical need, then the same procedure as described above applies.

## 5.5 Staff Requests

The Trust expects managers to be sensitive to the needs of staff, and supports the promotion of a healthy work life balance. However, staff need to be aware that requests may not always be able to be granted and service needs must take priority.

The following principles should be included in staff request systems:

- Systems for staff to request days off should be available for a minimum of 4 weeks in advance to ensure fairness for all staff.
- Requests for days off will be considered in light of service needs to a maximum of 4 requests in a 4 week period. Pro rata for part time staff and staff in ward areas / teams that work a long shift system.
- Requests for days off in popular periods (Bank Holidays and School Holidays) should be considered equitably.



- Personal patterns as formally agreed via the appropriate policy are not to be considered as requests
- Requests for flexible working patterns will be considered in accordance with the Trust's policy. (Promoting Flexible Working Policy)
- All annual leave must be submitted to the Ward Manager for approval before any holiday arrangements/bookings are made in line with the Trust's Annual Leave Policy.

## 6. PROCESS/PROCEDURE

### 6.1 Principles for Producing a Roster

The roster is a legal document so should be completed in ink, clearly legible and should clearly indicate shift start and finish times for all staff. Correction fluid should not be used, and all changes should be dated and initialled.

When producing a roster the following principles must be included:

An approved duty roster should be published at least 4 weeks in advance.

A working roster must cover a period of 4 weeks

All wards / department / teams rosters must commence on a Monday

Permanent staffs' contracted hours must be used to cover as many different shifts as possible. This will help to ensure that temporary workers, if used, are working with regular staff.

The roster must reflect the skill mix and number required and should not include staff or skills over the required level where this may cause shortfalls on other shifts or the need for temporary workers. Senior staff should not be on duty together except where necessary.

The roster must show who is in charge on each shift.

All shifts should be equitably allocated to all staff in accordance with their contract of employment, any variation to be formally agreed via the appropriate Trust Policy ( Sickness Absence & Promoting Flexible Working Policies) and reviewed regularly.

Once all shifts have been allocated utilising permanent staff, gaps in rota should be covered in accordance with the Trust's Temporary Staffing Policy. (See 6.2 for sequential steps to fill short notice staffing gaps.)





Rules relating to all types of leave, most importantly annual leave, study leave and Working Time regulations should be adhered to as set out in this policy and other Trust policies.

If any staff are working non-standard start or finish times this should be recorded on the roster to avoid misinterpretation.

## 6.2 Changes to Roster

Staff wishing to alter their roster should, in the first instance, attempt to exchange shifts with other appropriate team members directly. Changes should be made with consideration to overall skill mix. All changes must follow the principles outlined in the staffing and skill mix section and be authorised by either the Ward / Team Manager, or designated deputy before the start of the shift and should not result in overtime, bank or agency usage. Only in exceptional circumstances can changes be made and retrospectively approved by the ward / team manager or deputy.

Following publication of a roster, a manager should only change a staff members shifts if it is reasonable to do so and following consultation with the member of staff.

When there are unforeseen circumstances, i.e. a member of staff going off sick at short notice, the Ward /Team Manager/Shift Leader must follow the sequential steps in Appendix 4 to secure appropriate cover (this may not always be for the whole shift):

The Ward/Team Manager must authorise any additional hours that are granted as overtime. If the Ward/Team Manager is not available or the need arises outside of office hours then overtime needs to be authorised at service manager level or on call manager.

If staff are allocated to a student they should not change their shift without ensuring the student either changes with them or is allocated to another suitable member of staff, and that this is identified on the roster.

All staff must be made aware that in exceptional circumstances they may be requested to move at short notice temporarily within the Trust to cover unfilled shifts e.g. sickness absence. In these circumstances the Trust Travel Policy will apply.



Where the system is used prospectively, an unforeseen change payment of £15 will be available. This will be used where it is necessary for employers to ask staff to change their shift within 24 hours of the scheduled work period. The payment is not applicable to shifts that staff agree to work as overtime or bank, or they swap with other staff members.

It is not available in any circumstances in the retrospective system, which most wards and clinical teams use.

**RETROSPECTIVE SYSTEM** – the amount of work undertaken out of hours (enhanced hours) is assessed at the end of the month and paid accordingly.

**PROSPECTIVE SYSTEM** – as assessment has been made of the amount of out of hours work likely to be done over a longer future period and the appropriate rate applied.

## 6.3 Non Effective Periods

### 6.3.1 Annual Leave

All ward / team Managers must draw up or review local procedures following consultation with their staff team for the agreement to, and allocation of, annual leave in line with the Trust Annual Leave Policy.

The following minimum standards must be attained:

Annual leave should be calculated and allocated in hours for all staff in clinical areas.

Permanent staff should try to spread their annual leave evenly throughout the year except:

1. By prior arrangement with the line manager
2. Due to the needs of the service
3. As a result of ill health / maternity leave
4. Other exceptional circumstances e.g. suspension

If a member of staff needs to delay or amend an annual leave booking this will be considered, taking into account local service needs.

Roster creators are responsible for ensuring that the total amount of leave taken by staff each roster period falls within the band of a minimum of 11% to a





maximum of 17% of staffing complement of any unit and should also reflect staffing and skill mix (see annual leave algorithm at Appendix 1)

Each ward / team Manager is responsible for calculating the number of qualified / unqualified staff who must be given annual leave in any one week. An agreed number should be explicit and adhered to. Staff should be aware of the need to maintain this number throughout the year in order to effectively manage the workforce to meet service need. Should the number not be met by ways of request, the ward / team Manager will allocate leave following discussions with the staff concerned.

Those creating the roster must be sensitive to the cultural needs of staff. However, staff should be aware that requests may not always be granted. If annual leave is granted on a weekly basis over busy holiday periods then bookings must be considered taking account of local service needs, staffing and skill mix.

Quarterly reviews of outstanding leave for each member of staff should be made by the ward / team Manager to avoid accumulation of untaken leave.

Staff will be informed by the ward / team manager that unless previously agreed, if they do not book their leave in accordance with the Annual Leave Policy that it will be automatically allocated to avoid a high percentage of annual leave outstanding at the end of the leave year.

Managers to ensure that timesheets are fully approved prior to the closing date for payroll.

### 6.3.2 Unsocial hours/ Time Owing

Unsocial hours will be paid in accordance with Agenda for Change terms and conditions

Time Owing will be in accordance with the Trusts Time Off in Lieu Policy.

### 6.3.3 Overtime

All overtime approved will be paid in line with Agenda for Change Terms and Conditions.

### 6.3.4 Booking of Temporary Staff

All use of temporary workers to adhere to the Trust's Temporary Staffing Policy.

### 6.3.5 Learning and Development



Study leave depending on the course and appropriateness of the training, may be assigned as part of contracted hours and must be clearly recorded within rosters.

Managers should ensure that mandatory training is balanced throughout the year giving consideration to staffing and skill mix.

Study leave should not be covered by temporary workers unless in exceptional circumstances and with prior agreement of the ward / team Manager.

#### 6.3.6 Sickness

Sickness should be managed in accordance with the Trusts Sickness Absence Policy.

### 7. IMPLEMENTATION

7.1 Service Managers for each directorate will be responsible for addressing the implementation of the policy with the wards and services in each clinical / non-clinical area.

7.2 Staff will also be notified of this policy within the Trust's Partnership News, and will be available on the Trust intranet.

7.3 All Staff have a responsibility for ensuring that this policy is effectively implemented.

### 8. RELATED DOCUMENTS

The Employment Act 2002

Improving Working Lives Initiative (IWL) 2000

Working Time Regulations 1998

Section 27 of the Agenda for Change Handbook, Working Time Regulations.

Agenda for Change handbook

Trust Policies Special Leave Policy

Promote Flexible Working Policy

Annual Leave Policy





Time Off in Lieu Policy

Sickness Absence Policy

## 9. DEFINITIONS/GLOSSARY

Trust = Cumbria Partnership NHS Foundation Trust

Ward = Unit/Department/Team

Off Duty= Roster = Rota = a schedule of work or set periods of duty

Non-Effective Working Days = relates to days that staff are not available for the roster i.e. annual leave, study days, management days, sickness.

Permanent Staff = Staff who are employed to work a specific number of hours as specified within their contract of employment including staff on a fixed-term contract..

Temporary Workers = Nurse Bank / Agency Worker

Senior Staff = band 6 and above

Shift pattern = Standard shifts worked within a ward or team e.g. earlies, lates, nights etc.

Personal Pattern = Variation to shift pattern i.e. every week the person works the same shift on the same day e.g. admin working 9am -5pm Mon to Fri.

Skill mix = the mix of grades, skills and gender of staff

Manager = Ward, Unit, Team or Department Manager

Short Shifts = Less than 6 hours

Standard shifts = between 6 and 10 hours

Long days = more than 10

WTR = Working Time Regulations

Shift = period of work



Sleep day = after finishing a night shift, the rest of that day is considered a sleep day, not a day off, as a proportion of that day has already been worked.





## 10. APPENDICES

### Appendix 1

Annual leave calculator (a guide to getting AL / skill mix spread evenly throughout the year)

Ward X has 15 WTE qualified staff and 7 WTE unqualified

The percentage of staff on annual leave at any time is 14.0%

(this is between the tolerance of 11% - 17%)

Therefore:

$$15 \times 0.140 = 2.10 \text{ } 2.00 \text{ WTE}$$

$$7 \times 0.140 = 0.98 \text{ } 1.0 \text{ WTE}$$

You would need to try and allocate approximately 2 qualified staff and 1 HCA per week on leave to achieve balance over the year.

Please note: This number is based on WTEs in post; therefore as staff join and/or leave you will need to recalculate the above.

(If you want to view in hours please multiply by 37.5)



Appendix 2

DECLARATION OF ADDITIONAL EMPLOYMENT INTERNAL/EXTERNAL TO  
Cumbria Partnership NHS FOUNDATION TRUST.

Name: .....

Job Title: .....

Directorate: .....,.....

I wish to inform you that I hold an additional contract for ..... hours:

I hold an additional contract within the Trust

I hold an additional contract outside of the Trust

I have read and understood the Trust Working Time Policy and should my working hours exceed or come close to 48hours in total over an average 17 week reference period, I will highlight this to my manager to determine if an opt out form should be completed.

I confirm I have signed this agreement voluntarily.

Signature: ..... Date: .....

Copy: Personal File

Human Resources

Staff Rostering Policy





## Appendix 3

### AGREEMENT TO OPT OUT OF THE WORKING TIME REGULATIONS

The Working Time Regulations 1998 state that an employee cannot be required by their employer to work more than an average of 48 hours each week (including any hours worked in a second job in or outside of the Trust), over a seventeen-week reference period. However, some employees, from time to time, choose to work more than an average of 48 hours each week. In order to meet the regulations, employees are required to sign an individual 'opt-out' agreement, agreeing that this limit will not apply to him/her. In this case the employee should complete this agreement and return it to their line manager.

The sole purpose of this agreement is to ensure that the Trust's current working practices comply with the law. There will be no change to terms and conditions of employment.

Employees who have concerns about this agreement should discuss them with their line manager or seek further advice from a member of the Human Resources Department.

#### Individual Agreement

This agreement is optional, and is signed by the employee after reading Agenda for change section 27 : working time regulations.

[www.nhsemployers.org/SiteCollectionDocuments/AfC\\_tc\\_of\\_service\\_handbook\\_fb.pdf](http://www.nhsemployers.org/SiteCollectionDocuments/AfC_tc_of_service_handbook_fb.pdf)

1. I wish to inform you in writing that the average 48 hour weekly limit, as specified in the Working Time Regulations 1998, shall not apply to me.
2. This agreement shall apply from the date of signature given below.
3. I acknowledge that I must give my employer one week's notice to terminate this agreement in writing
3. In requesting to work in excess of average 48 hours, I am aware of my responsibilities not to work such hours as that may impair my safe working, or expose my colleagues or patients of the Trust to any risk.
4. This agreement will be reviewed annually.
5. I confirm that I have signed this agreement voluntarily.

Name of employee(please print) ..... Signature.....

Job Title: ..... Directorate: .....

Payroll Number ..... Date: .....

Agreement by Line Manager

..... Date: .....

Print Name of Manager .....



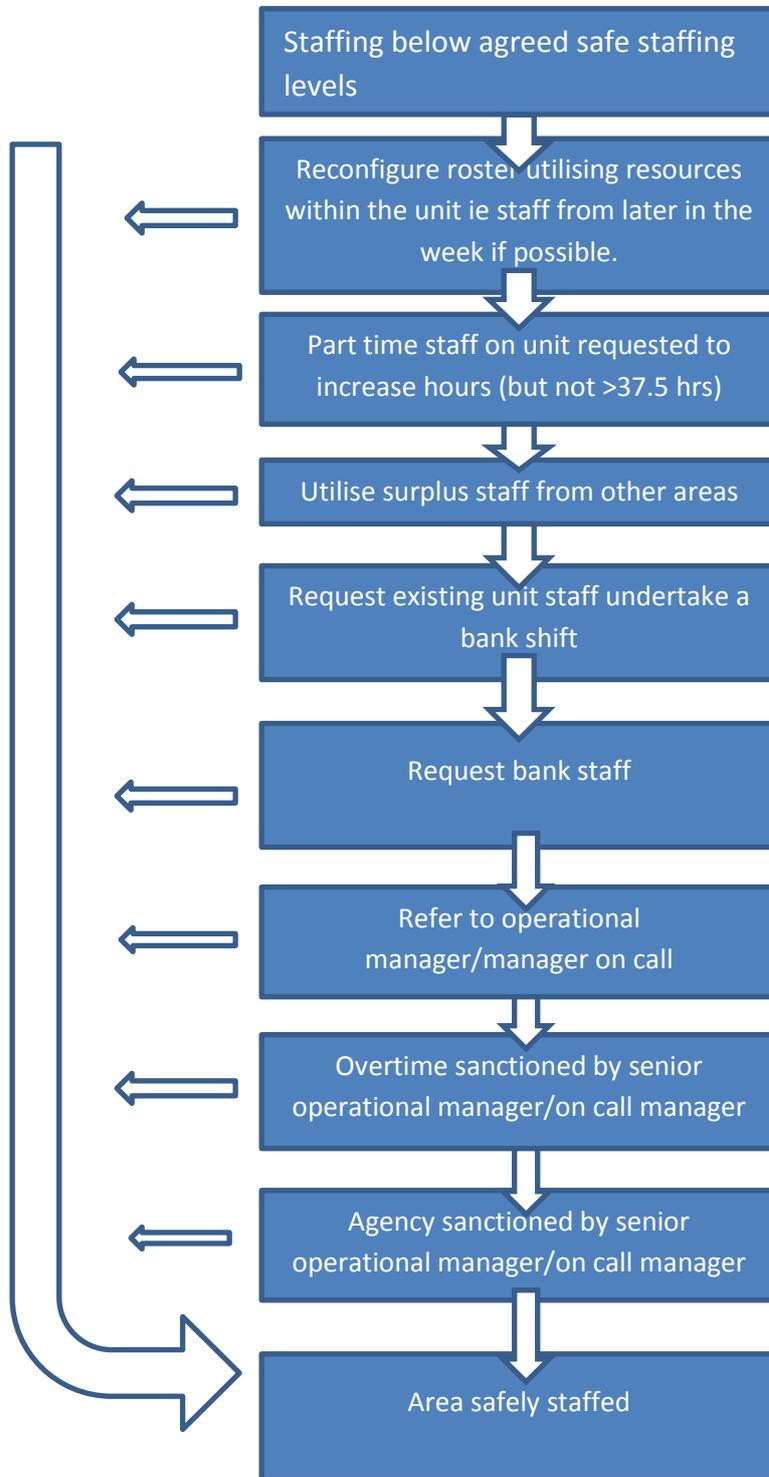
Copy to be retained on Personal File for two years from the date of the agreement and copy to be sent to HR Department.





Appendix 4

Sequential steps to fill roster staffing gaps





## Appendix 5

### PRO RATA REQUEST CALCULATOR (Per 4 week rota period)

CONTRACTED HOURS PER WEEK	NUMBER OF REQUESTS
1 – 9	1
9.5 – 18	2
19 – 28	3
28 – 37.5	4

\*Request calculator based on staff working 7.5 hour shifts, for staff working longer shifts, request calculations to be made by multiplying the number of requests by 7.5, resulting in requests calculated in hours per 4 week rota.

