

Recruitment & Retention Blood Donation

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Director**

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Caring Expert Quality

Context



Blood and Transplant

Perception of Blood Donation workforce issues

Turnover has significantly increased

A large number of colleagues are leaving within a year of joining

An aging workforce

Increasingly high levels of absence

Low levels of diversity

High levels of staff engagement

Difficulty in recruiting and retaining nurses

Context



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Response
to recent
stock
recovery
highlighted

Impact of high levels of recruitment on our ability to train and induct colleagues to be 'job ready'

Inability to flex workforce model to manage peaks in workload

Greater understanding of impact of initiatives operationally i.e. nurse breaks, establishment numbers, capillary HemoCue etc

Other Considerations

- **External**
 - Brexit implications
 - Challenges in respect of nurse recruitment – NHS wide
- **Internal**
 - Blood Supply Strategy being developed alongside any recruitment & retention actions



Increased Resource

Recognised that Blood Donation would need to budget for **167 wte** additional resource in 2019/20

Rationale for this was as follows:-

WTE	Rationale
65 wte	CCM posts which will remain in budget (colleagues already in post)
25 wte	Additional capacity in the South East and to expand opening times in other parts of the country (new recruits)
77 wte	Additional capacity for teams to reduce the number of cancellations, Nurse Breaks, reducing overruns, New Donor Attends, Team Time space (new recruits)

- 65 teams across the country = **1.18 wte** per team additional capacity

WTE Position

Reported to the Finance Committee in December 2018

- Forecast approx **18.79 wte** over establishment in April 2019 – in addition to the 167 wte over establishment
- Took into account estimated turnover, recruitment levels etc

Reporting at end of January 2019

- Approx **10 wte** over establishment in April 2019 – in addition to the 167 wte over establishment

Blood Donation Workforce Data Overview

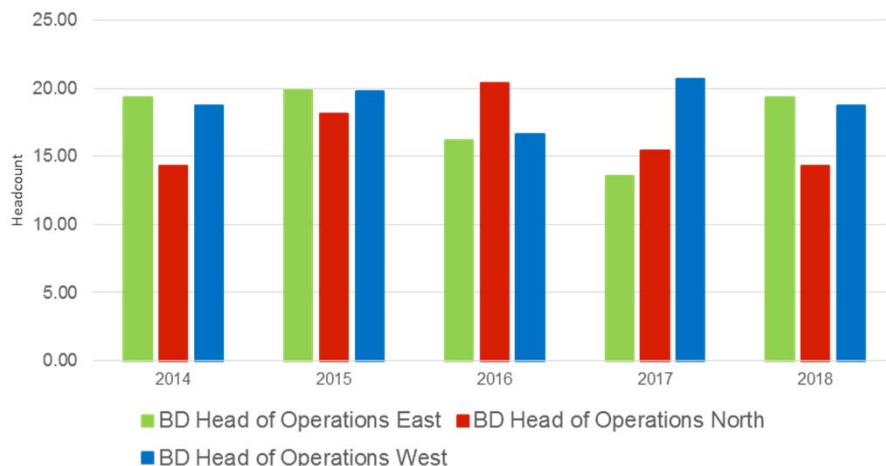


Turnover Data

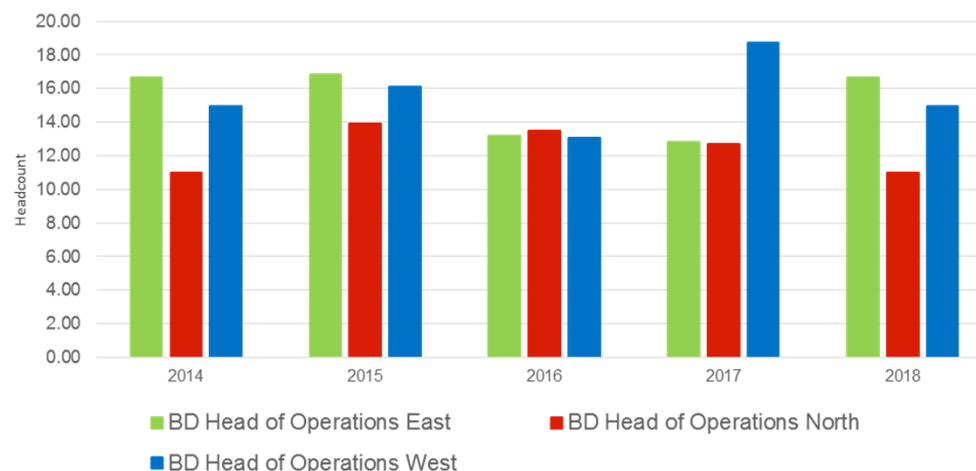


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% Annual Turnover by Region



% Voluntary Annual Turnover by Region



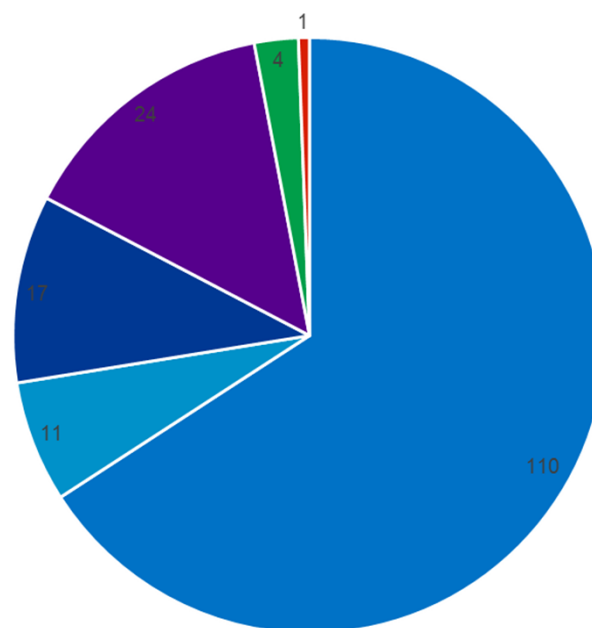
- Turnover average has remained broadly the same
- Appears to be an increase in 2017 in the West, and then increases in the East in 2018
- Decrease in 2016 – BDOD Change Programme
- Six teams with the highest turnover
- Nurse turnover also around 20% on average, lower than some other areas i.e TAS

Organisation	Headcount	Actual FTE	Annual Turnover	Voluntary Annual Turnover
West End DC	44	28.78	41.55	39.10
Birmingham DC	35	23.73	38.42	38.42
Oxford Team	18	15.14	33.33	33.33
Exeter Team	25	14.00	33.10	33.10
Hertfordshire Team	18	15.55	33.03	22.02
Slough Team	17	13.50	33.03	22.02

BD Leavers by Job Role

July to Dec 2018

Donor Carer II	110
DC Supervisor	11
BD Team Assistant	17
Sister/Charge Nurse	24
DC Administrator	4
Area Manager	1
Total	167



■ Donor Carer II
■ Sister/Charge Nurse

■ DC Supervisor
■ DC Administrator

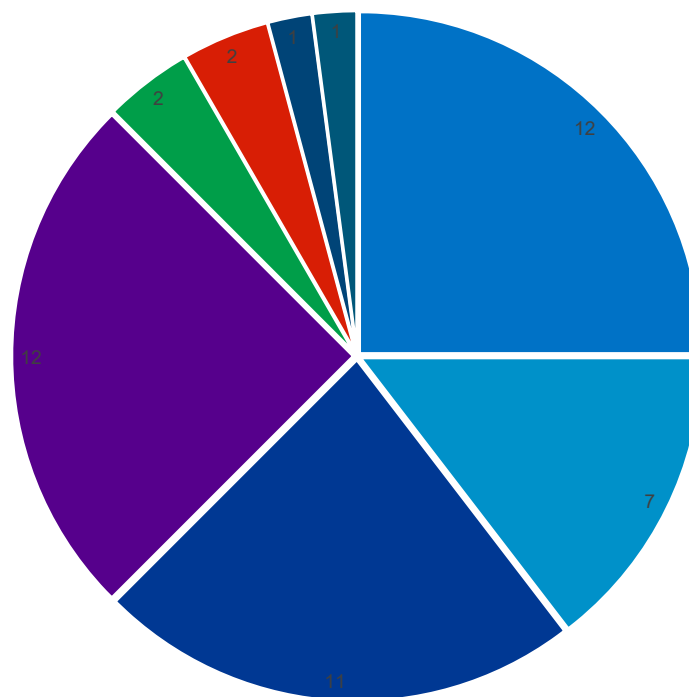
■ BD Team Assistant
■ Area Manager

- HR Direct called every leaver from July 2018
- Asked a series of set questions
- Contact made three times
- Best qualitative data we have obtained
- Disappointingly only 30% response rate but increase on exit interview process

BD Leavers – Key Reasons for Leaving

July to Oct 2018

Dissatisfaction with role	12
Retirement	7
Dissatisfaction with relationships	11
Change in circumstances	12
Work-life Balance	2
Pressures of role	2
Improved pay and reward	1
Redundancy	1



■ Dissatisfaction with role
■ Change in circumstances
■ Improved pay and reward

■ Retirement
■ Work-life Balance
■ Redundancy

■ Dissatisfaction with relationships
■ Pressures of role

Key Reasons for Leaving

- Poor work-life balance
- Not getting home on time/tired of getting home late
- Pressure of the role is increasing
- Training concerns - not always available
- Morale of the team
- Physical role very demanding

Recruitment Data

BD Recruitment and Retention January to December 2018



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	Donor Carers	Sister / Charge Nurse	Senior Sister / Charge Nurse	Total
Appointments				
Number of Appointments	307	49	17	373
Number of Offers Withdrawn by NHSBT	7	1	0	8
Number of Candidates withdrawn	23	4	0	27

	Donor Carers	Sister / Charge Nurse	Senior Sister / Charge Nurse	Total
Leavers				
Number of leavers	218	41	7	266
Number of leavers with less than 1 year service *	78	6	2	86
Percentage of leavers with less than 1 year service	35.78%	14.63%	28.57%	32.33%

* There were 3 DCs Dismissed with less than 1 year service

- Significant increase in recruitment this year – at times 3 x the normal level within Recruitment Team
- Concerning however that approximately a third of donor carers who join leave within a year – consider the length of time taken to train
- A fifth of nurses doing the same
- In comparison to Manufacturing and Logistics this is higher – Manufacturing 27% and Logistics 21%

Recruitment Activity & Time taken

April 2017 to July 2018

- Appointed 295
- Average Time taken **13.56** weeks
- 10% withdrawn

Donor Carer



- Appointed 51
- Average time taken **15.84** weeks
- 16% withdrawn

Sister/Charge Nurse



- Appointed 21
- Average time taken **16.91** weeks
- 5% withdrawn

Senior Sister/Charge Nurse

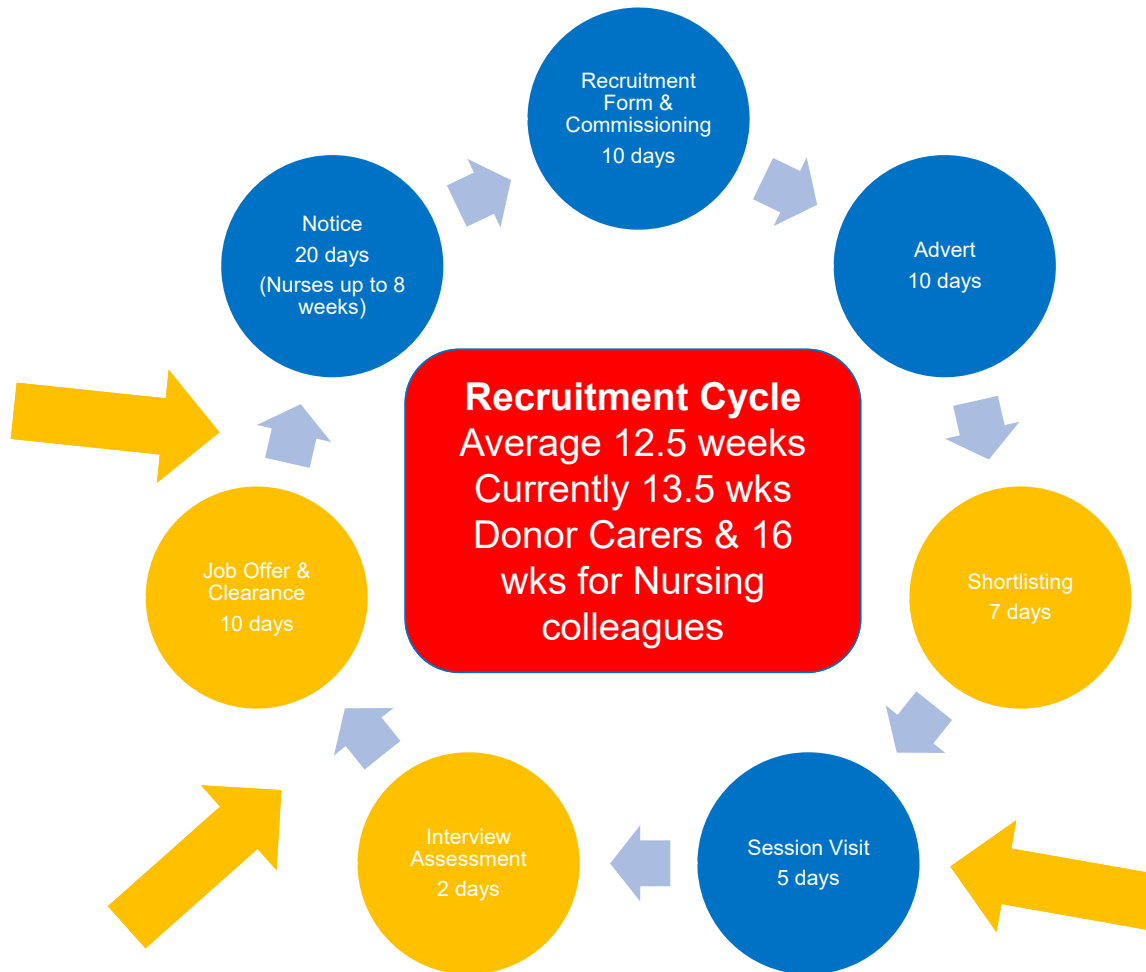


Average time taken to recruit in BD is **12.95 weeks**
NHSBT Overall **12.47 weeks**

Recruitment Timeline



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Plus.....

Donor Carer Training
Minimum 6 weeks with
one week induction

Nurse Training
Minimum 8 weeks

In total:-

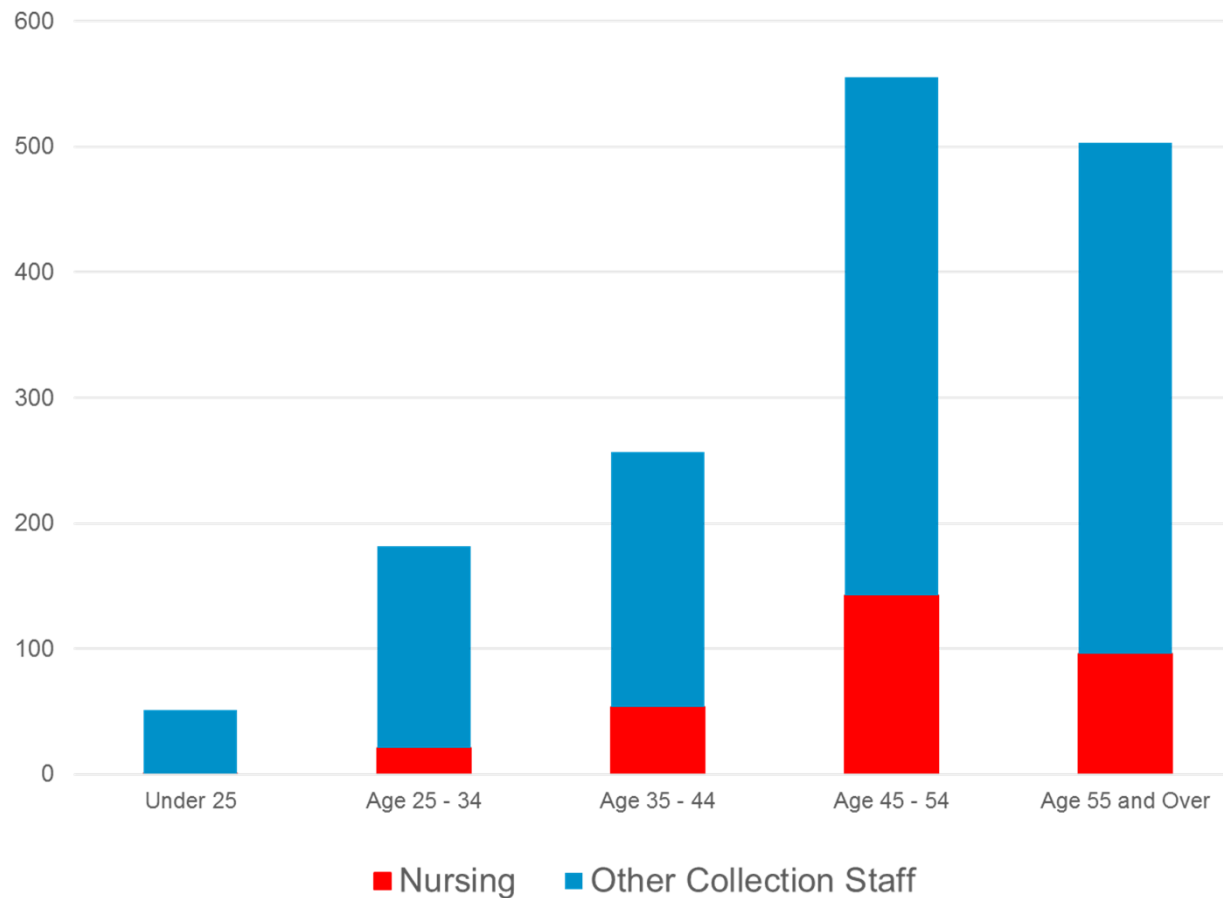
*Donor Carer 13.5 plus 7
wks training = 20.5 wks*

*Nurse 16 wks plus 8
wks = 24 wks*

Age by Staff Group



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- Over half of BD colleagues are aged 45 and over
- Most nurses are aged between 45 to 54.
- Important that to highlight that some nurses have special class status - can retire at 55

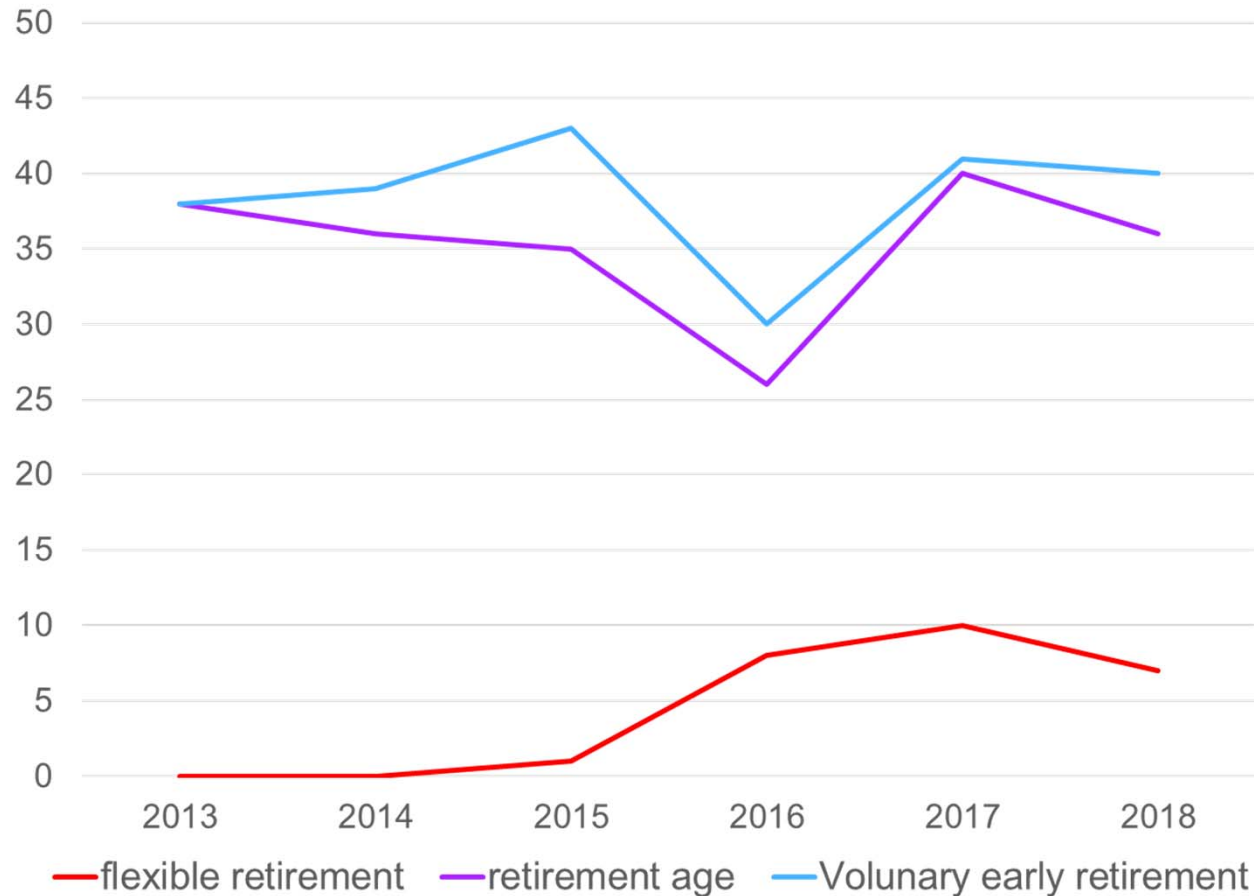
Considerations:-

1. Flexible retirement options
2. Role design – is this right and sustainable in the long term
3. How do we attract younger workers and build talent

Retirees by Year



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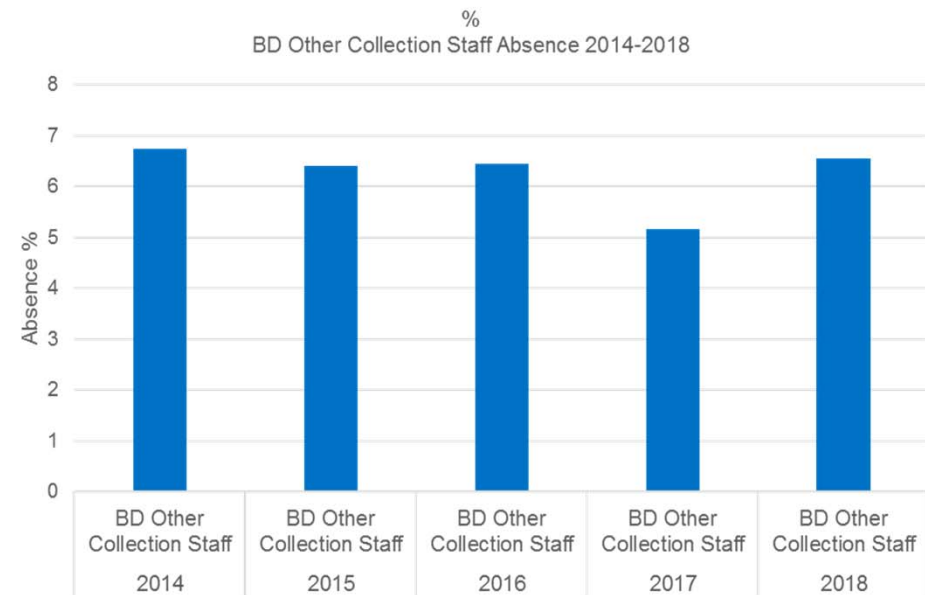
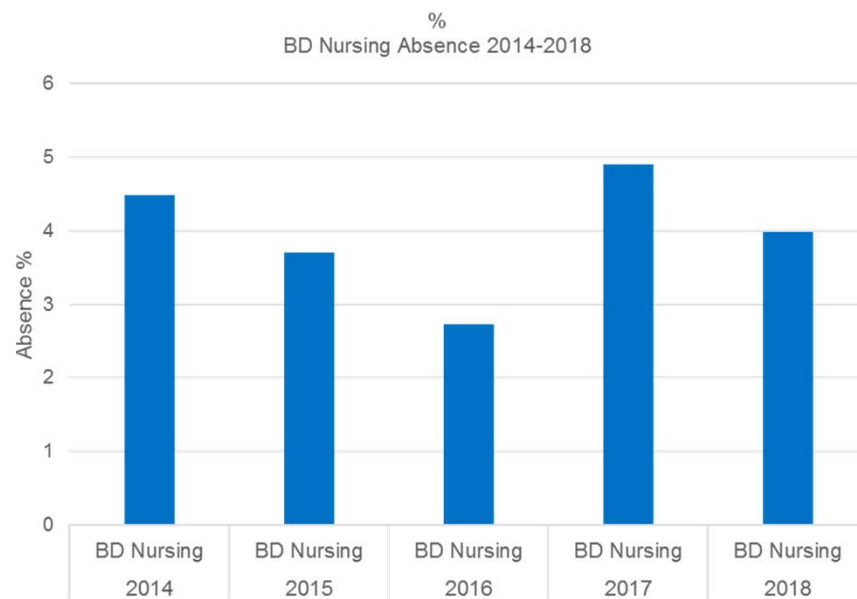


- Special Class Status – applies to nurses who joined the pension scheme before March 1995 and allows them to retire at age 55 without a reduction in benefits
- 87 nurses in BD have special class status as of today, which represents 22% of BD nurses:
 - 2 over 60
 - 19 between 55-60
 - 66 under 55
- On average 35 colleagues per year have retired and returned (over last 6 years) across all of NHSBT

Absence Data



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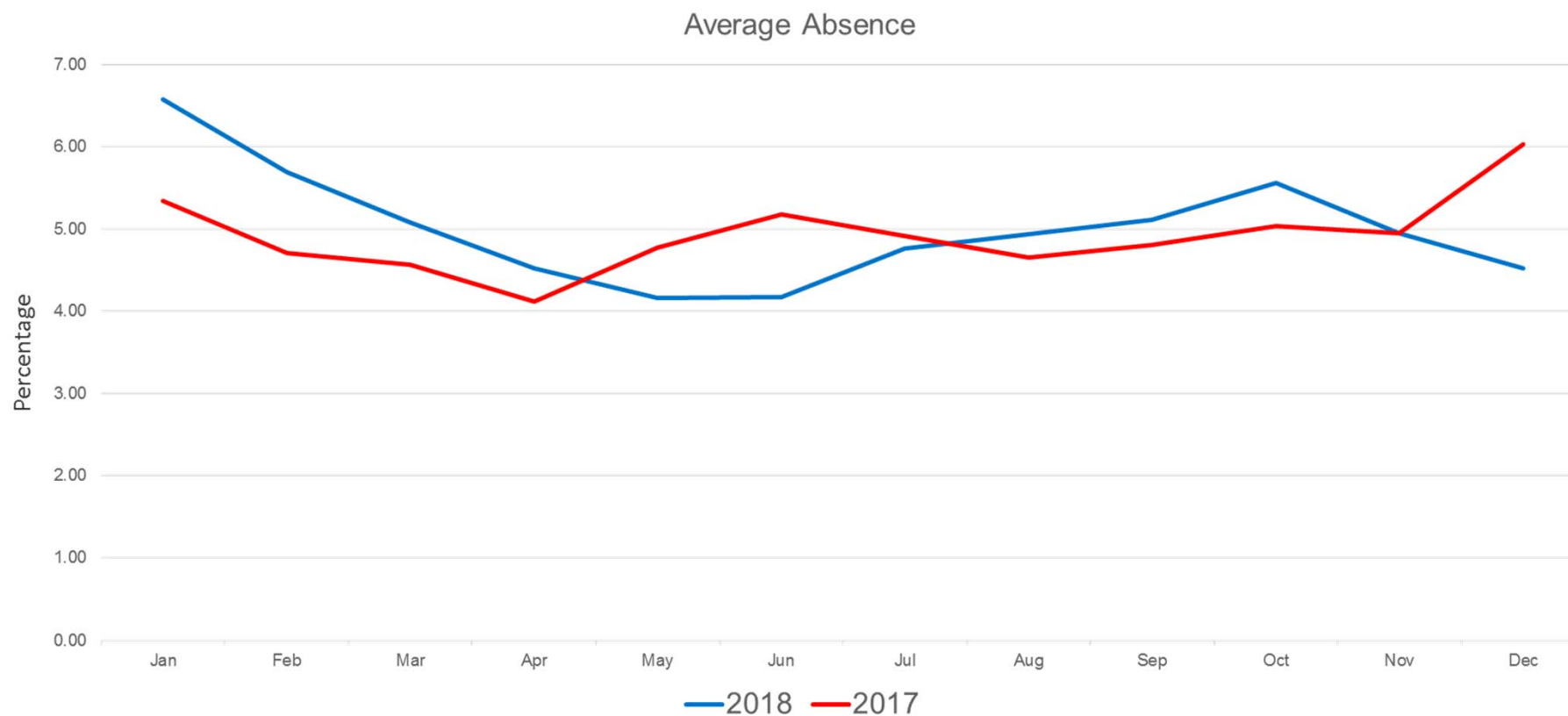


- Absence overall has been within target and reducing
- Donor Carer absence has increased in 2018 over target and over 6%
- Pockets of very high absence on some mobile teams – previously discussed and accounted for some cancellations in recent months

Absence Comparison to 2017



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Our Voice Responses



- Approach to patient experience 'caring' is lower scoring this year
- Management, leadership, career development and NHS engagement scores are higher this year
- Highest response rate for pulse survey; slight decrease in response rate since 2016

2018	3.60 Engagement Score	↑	66% response rate	↓
2016	3.54 Engagement Score	↓	76% response rate	↑
2015	3.81 Engagement Score	↑	27% response rate	↑

Higher Scoring Questions

- 73%** If a friend or relative needed NHSBT for service, I would be happy with the service provided
- 73%** I am able to make suggestions to improve my area of work
- 71%** I feel my manager keeps me informed on a regular basis

Lower Scoring Questions

- 25%** I believe that action has been taken in the last 18 months since the last Your Voice Survey
- 28%** Overall I believe the senior leaders at NHSBT will make the right decisions for the future (+4 from 2016)
- 30%** Senior Leaders at NHSBT are approachable and listen to my feedback (+8 from 2016)



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Diversity & Inclusion



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BAME All	BAME	Non-BAME	Not Stated	Total:	BAME %
NHSBT	803	4562	267	5632	14.26
BD	171	1769	91	2031	8.42

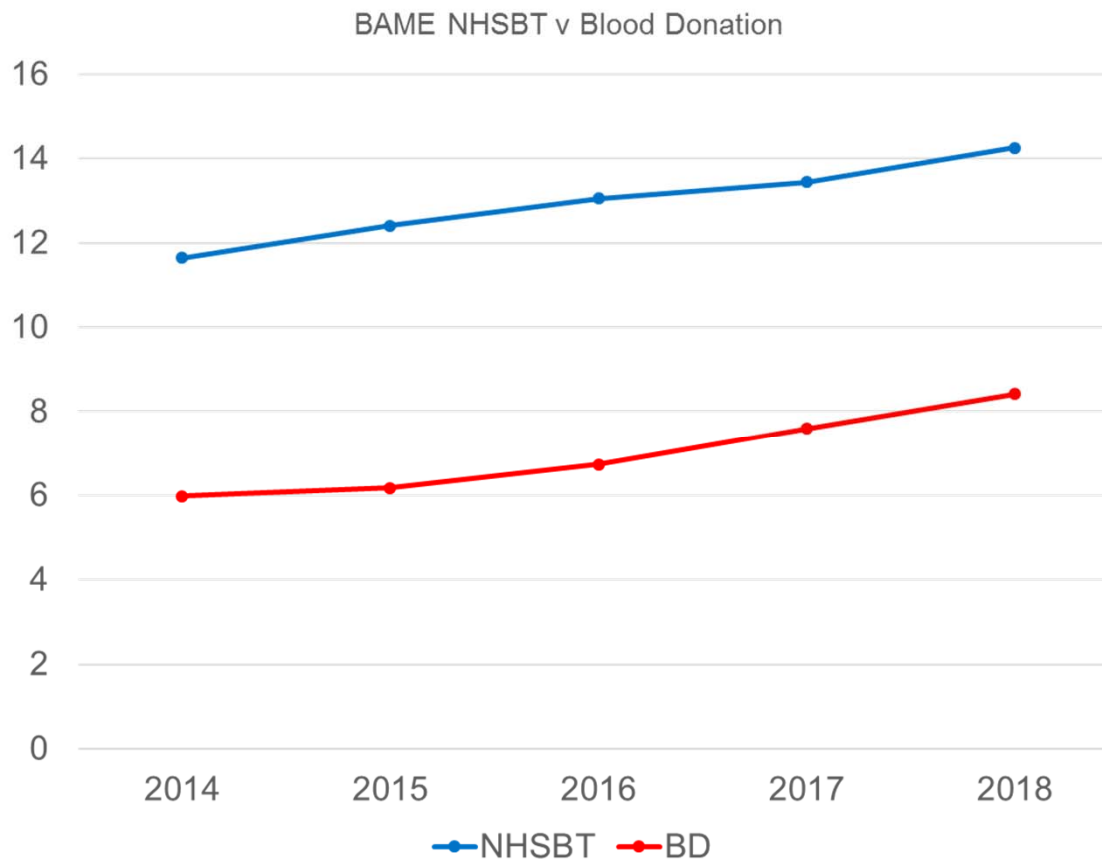
AFC Band 8a & Above	BAME	Non-BAME	Not Stated	Total:	BAME %
NHSBT	57	516	22	595	9.58
BD	3	40	1	44	6.82
AFC Band 3	BAME	Non-BAME	Not Stated	Total:	BAME %
NHSBT	200	1586	80	1866	10.72
BD	90	1072	60	1222	7.36

- Lower than organisation average BAME colleagues within BD
- Similar trend of less BAME colleagues at Band 8a and above
- BAME colleagues numbers are not always representative of the area they represent
- However, improving year on year

Diversity & Inclusion



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- The number of BAME colleagues within BD is increasing – same for NHSBT
- Learning from other organisations such as Greater Manchester Police and Scotland Yard
- Trialled a new approach to literature and method at West End Donor Centre event
- On the day 90 applicants, 55 shortlisted and 16 appointed in total
- WEDC 30% BAME colleagues now moved to 38% after one event

Recruitment and Retention Action Plan



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No	Action	Deliverables	Action Lead	Initial Target Date
Rec 1	Deliver an efficient and effective process for the recruitment of collection colleagues	<ul style="list-style-type: none"> Assess effectiveness of cohort recruitment to maximise our recruitment ability and efficiency of the process Identify routes to streamline the process 	Gill Travis Amanda Robson Deputy Chief Nurse	SMT February 2019 Initial proposals
Rec 2	Deliver increased diversity within Blood Donation through recruitment activity	<ul style="list-style-type: none"> Evaluate recent experiences of external visits and recent open day at West End Donor Centre Assess recruitment practices and materials to maximise increased diversity of applicants Seek opportunities to increase applications from younger workers using methods learnt from other organisations 	Lynda Rowan Smith Gill Travis AD of BD Operations North & South	Outline proposals to be present to SMT in March 2019
Rec 3	Deliver increased awareness of Blood Donation roles and refine 'our brand'	<ul style="list-style-type: none"> Build on recent work completed on Careers and NHST Website to highlight the role of Donor Carer – use of video and social media Seek opportunities to highlight careers at NHSBT – already within the People Strategy Develop 'our offer' for nursing within BD – identify USP e.g. leadership development 	Lynda Rowan Smith Gill Travis Nursing Council	Careers website improvements to continue 'Our Offer' for nurses first draft April 2019

Recruitment and Retention Action Plan



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No	Action	Deliverables	Action Lead	Initial Target Date
Rec 4	Ensuring new recruits are 'job ready' at the earliest opportunity	<ul style="list-style-type: none"> Assess length of time it takes for colleagues to be 'job ready' and seek to reduce time taken or make this more bespoke based on individual need Assess and understand reasons for colleagues leaving in first year and take action to reduce this leaver rate. 	Amanda Robson Deputy Chief Nurse	SMT February 2019 Initial proposals
Rec 5	Training Academy	<ul style="list-style-type: none"> On site facility available in the South East to enable greater capacity for training where the turnover is highest Assess different training environments and options utilising technology 	Tracy Green Helen Escreet	Presented to SMT in February
Rec 6	Continued exit interview scrutiny	<ul style="list-style-type: none"> HR Direct continue to support exit process – enable comparisons to first six months data. Take action to respond to concerns raised Analysis of revised exit documentation already put in place at request of Nursing Council 	Rachel Buxton – HR Direct Services Manager	Review ongoing process June 2019

Recruitment & Retention Action Plan



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No	Action	Deliverables	Action Lead	Initial Target Date
Rec 7	Deliver increased career opportunities for both Donor Carers and Nurses working in BD	<ul style="list-style-type: none"> Identify career options for Donor Carers and Nursing across NHSBT Make clearer how colleagues can move across the organisation – allow shadowing and job swaps where possible Review current career paths within BD and determine whether longer term there are other options available which enhance career paths – links to new job roles and to respond to shortages in nursing etc 	Lynda Rowan Smith to work with SMT to identify workstream	Initial communication around possible pathways April 2019 Review and proposal Summer 2019
Rec 8	Create more flexible working options	<ul style="list-style-type: none"> Appraise opportunities for an enhanced workforce model/new job roles for BD – enabling NHSBT to better respond to peaks in collection, aging workforce and career development Workflow on session evaluation to be completed – consider future options – however do need to embed current change Understand what our colleagues want in terms of flexibility – maybe a requirement for regional differences i.e WEDC demographic of students etc need to be less restrictive 	Lynda Rowan Smith Working with Debbie Richards, Matt Jones and Ella Poppitt	Workshops to be held throughout 2019 and fed into strategy outputs – set up small scale pilots by Summer 2019

Recruitment & Retention Action Plan



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No	Action	Deliverables	Action Lead	Initial Target Date
Rec 9	Detailed recruitment & retention plan to tackle nursing retention and potential shortages – part of corporate piece of work	<ul style="list-style-type: none">▪ Continued shortage of nurses with large numbers leaving the profession and funding cut for nurse training▪ Consider further implications of Brexit▪ Understand in detail the regional variances▪ Work to identify opportunities for moving nurses around the organisation, working with other NHS organisations to provide greater opportunities and greater movement	Katherine Robinson Co-ordinate with the Chief Nurses	Outline delivery plan produced April 2019

Summary



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Turnover

- Hotspots being investigated further
- Action to be taken in reducing those who leave within a year

Recruitment Initiatives

- Recruitment process reviewed
- Clear plans to maximise recruitment success for some hard to fill roles

Time taken to be 'job ready'

- Review onboarding and training lead in times
- Make more bespoke and consider training resource

Diversity

- More to be done to increase diversity but some increased success
- Respond to the aging workforce profile

Workforce Model

- Clearer and more varied career pathways
- Role Design – what will this require in the future to respond to workforce issues i.e nursing shortage, older workers, peaks in work

Engagement

- Continue to improve engagement scores
- Recent changes have helped, and Blood Supply Strategy gives opportunity to listen more

Next Steps



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- Commence delivery of the action plan with Blood Donation Senior Management Team
- Ensure any actions here feed into the Blood Strategy and engagement work
- Identify quick wins and encourage small scale pilots in terms of different ways of working, i.e. set up and pack down, longer sessions etc
- Important that this action plan is monitored and managed through the BD SMT with links to various forums/stakeholders such as Nursing Council, and Lead Nurses
- Challenge our current ways of working and seek opportunities
- Report back on progress in relation to the action plan in 6 months