

Retention Payment Scheme – Frequently Asked Questions

Why did the Trust decide to implement a retention payment?

Cheshire and Wirral Partnership, alongside many other NHS trusts, has experienced significant staffing challenges. Whilst these have been experienced across all clinical services, the situation has been particularly challenging across inpatient services; notably for registered band 5 and 6 nursing posts.

To address these challenges, we have implemented of a number of initiatives, including targeted attraction and recruitment campaigns, international nurse recruitment, fast-track student recruitment, refer a friend scheme and retention initiatives.

Whilst these initiatives have brought some benefits, they have unfortunately not been able to deliver the growth and sustainability within these nursing roles that we require to deliver safe and effective services.

As a result, we have experienced a number of situations where our staffing levels have fallen short of the required numbers and have therefore had to restrict admissions to our inpatient services due to the gaps in staffing levels, or put staff in situations where they are not able to fully deliver the care that is required.

During this time, we have spoken to staff about the pressures they experience on the wards and their concerns about the sustainability of staffing – we recognise the impact of lower staffing levels on workload, morale and wellbeing of all our staff. This is a situation we need to address urgently.

Whilst we have had some success with recruiting agency staff nurses, this is not a sustainable long-term solution and we have needed to consider other ways to attract and retain registered nurses, to ensure we have a stable workforce to deliver safe and effective care.

In addition to inpatient nursing, we have experienced similar problems recruiting staff to other specific groups such as pharmacy and health visiting, with other local organisations in a similar position and offering significant incentives to attract people to these roles.

As an illustration, the following shows the overall cumulative impact of new starters and leavers between November 2021 and February 2023 (all figures show number of full-time equivalents):

- Overall staff in post Trust-wide (all staff groups) increase of 310
- Registered nurses overall increase of 22
- Inpatient services (all staff groups) increase of 40
- Registered community nurses (all community) increase of 22
- Allied health professionals (all) increase of 6.5
- Inpatient registered nurses decrease of 13
- Health visitors decrease of 6

Following significant discussion, it was agreed that in order for us to both retain our workforce within those specific staff groups and attract new staff to those roles, we needed to offer similar incentives to be able to compete with comparable organisations.



We hope the scheme will help us to retain our existing staff in these areas while we focus on external recruitment to fill remaining vacancies. This will help to enhance our skill mix, promote safer staffing in areas where current levels are unsustainable, reduce our reliance on agency staff, and help to support wellbeing at work.

By accepting the payment and the terms and conditions of the scheme, staff in the identified roles are making a commitment to stay with CWP for a period of 12 months. If the staff member who has received the retention payment leaves within 12 months, they would be required to repay this as follows:

Timescale	Payback requirement
Between 0 and 6 months of receipt of the payment	100%
Between 6 and 12 months	50%

The scheme is a pilot and we will be carefully evaluating and monitoring its impact to assess if and how it should be continued going forward, and whether it should be rolled out to any additional roles.

I work in one of the teams experiencing significant recruitment and retention problems. Why have some of my colleagues been given a retention payment but I have not?

All staff working at all bands are valued highly and equally by CWP and this retention payment is not a recognition of value or a reward for contribution to a team, but has been put in place to address severe staffing pressures within specific professional groups and bands.

From a Trust-wide perspective, we have seen an improved uptake of clinical support worker roles in the last year, and a better rate of recruitment into community-based nursing roles. We have also had successful recruitment into vacant band 7 and band 8a inpatient nursing roles. However we have continued to struggle to fill band 5 and 6 inpatient nursing, health visiting and pharmacy roles.

This is why these areas have been selected to pilot the impact of a retention payment. The pilot will be monitored on a monthly basis, with a full review taking place in August 2023 to assess if and how it should be continued going forward, and whether it should be rolled out to any additional roles.

Why is the Trust is not recognising and rewarding my contribution to the team?

Deciding to focus the retention payment on specific groups of staff was a very difficult decision, particularly given the challenging circumstances for all NHS staff in relation to cost of living and NHS pay levels in general.

The retention payment is not a reward or recognition to any team or individual but is intended to improve retention in those staff groups where we have the highest level of substantive vacancies and turnover. The scheme is a pilot and we will be carefully



evaluating and monitoring its impact to assess if and how it should be continued going forward, and whether it should be rolled out to any additional roles.

The retention payment has been implemented as per Agenda for Change and can only be utilised in specific circumstances (Section 5 and Annex 10 of NHS Agenda for Change Terms and Conditions).

I work in a different profession or at a different band to my colleagues who have been offered a retention payment, but I make an equally important contribution to the team. Why has this not been recognised with a retention payment?

All staff working at all bands are valued highly and equally by CWP and this retention payment is not a recognition of value or a reward for contribution to a team, but has been put in place to address severe staffing pressures within specific professional groups and bands.

Whilst we know that recruitment and retention is an issue across many services, professions and bands, in the first instance we have had to focus this scheme on the areas where we have the most significant challenges.

The scheme is a pilot and we will be carefully evaluating and monitoring its impact to assess if and how it should be continued going forward, and whether it should be rolled out to any additional roles.

I am in a temporary role which is not part of the retention pilot, however my substantive role is covered by the scheme. Why have I not received an offer of a retention payment?

If your substantive role is on the list below then you are included in the pilot retention payment scheme:

- Band 5 and 6 inpatient nurses within CYP, SMH and LD care groups
- Band 5, 6, 7 and 8a registered pharmacy posts
- Band 6 health visitors within Starting Well

If you believe you are eligible and have not yet been contacted, please email: cwp.managerselfservice@nhs.net

If I have worked within inpatient services for many years but I am imminently moving to a position in the community within CWP, why am I not eligible for the retention payment?

All staff working at all bands are valued highly and equally by CWP and this retention payment is not a recognition of value or a reward for contribution to a team, but has been put in place to address severe staffing pressures within specific professional groups and bands.

This means that, if you are imminently leaving one of the posts identified to receive the retention payment, you wouldn't be eligible to receive this.



I work in a different service to those who are part of the retention scheme, however I routinely undertake additional hours in that service through the staff bank. Why have I not been included?

We recognise that staff who offer shifts via the temporary staffing bank play a vital role in staffing our teams and that this is particularly the case within our inpatient services.

In the first instance, we are focusing on increasing staffing within substantive band 5 and 6 inpatient nursing roles, as this is the key issue we are trying to resolve. However, the scheme is a pilot and we will be carefully evaluating and monitoring its impact to assess if and how it should be continued going forward, and whether it should be rolled out to any additional roles.

If I am not eligible for a retention payment, what is CWP doing to recognise my contribution, support my development and retain my skills and experience?

CWP's People Strategy and delivery plan will draw together the actions across the Trust to support and recognise the contribution all colleagues make. This includes work across People Services, Associate Directors of Nursing and Therapies, Education, Learning and Development, and Equality, Diversity and Inclusion, amongst others.

Specific areas of work include the **Heart of Care** development programme for clinical support workers (CSWs) and AHP support workers (see below visual for more information or view the latest <u>Heart of Care newsletter</u>).

Other areas of work include: workforce planning (including specific work across transformation projects and staff groups working at a place and system level); reward and recognition; talent management; wellbeing and staff experience.





The People Strategy is currently in draft but will be published once finalised and approved by CWP's People Committee.

We recognise the unique contribution of all of our Allied Health Professionals (AHPs) at CWP. The AHP review that was completed at the end of 2022 highlighted opportunities and challenges for the AHP workforce and made recommendations focused on how we can best support AHPs to join our team at CWP, stay and thrive in the organisation.

The findings and key themes from the review were shared on AHP Day last October and the full report has now been formally shared with the Director of Operations and the Director of Nursing and Therapies.

We are now at the stage of exploring what the review means for AHPs in each of the care groups and how this will inform workforce planning and development in the future. To support this, we are working on an AHP career pathway with the Education Team and are exploring new and additional roles and opportunities to develop a clear career structure for AHPs in CWP, whilst also delivering the best care to our patients.

There is a Trust-wide commitment to listening to the voice of AHPs across the organisation and to support and enhance your career journey within CWP.

What is CWP doing to support colleagues during the national cost of living crisis?

CWP has produced a guide to financial wellbeing, which brings together all the NHS staff deals and discounts, along with guidance around accessing financial support. All this information can be found on the intranet <u>here</u>.

To support with the cost of living, it has been recognised that early access to wages would be helpful to some staff. In response to this, the Trust has launched Wagestream, a service that allows you to access a portion of the money you've already earned before payday. The Wagestream FAQs and how to access the app can be found <u>here</u>.

In addition, the Trust is currently out to tender for a weekly payroll provision for bank pay.