

Temporary Working

Results from an on-line
survey of bank & agency nurses

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Employment Research Ltd

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Employment Research Ltd

Employment Research Ltd is an independent research consultancy formed in 1995. The consultancy undertakes a range of research and evaluation, and for the last five years Employment Research Ltd has undertaken the annual RCN Employment survey and conducted the RCN *Working Well* surveys in 2000 and 2005.

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Temporary Working: results from an on-line survey of bank & agency nurses

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Executive summary

The RCN employment survey in 2005 reported a slight increase in the prevalence of full-time temporary employment among those respondents working as bank and agency nurses. The 2003 survey report described bank and agency nursing as a 'stepping stone' both into and out of nursing employment. Expenditure on bank/agency in the NHS greatly increased between the late 1990s and 2002/3, as increasingly temporary staff were used to address staff shortages as opposed to fluctuations in demand. More recently the National Audit Office report that there has been a decrease in aggregate reliance on temporary nursing.

This survey was designed to examine the experiences and views of bank and agency nurses using an entirely online approach to the research. The survey was publicised using a postcard invitation to RCN members, linked to various websites, and publicised via a sample of agencies, NHS Professionals and nurse discussion forums. The survey achieved a response of 530 completed questionnaires.

Respondent overview

Two main groups of respondent were identified; those who also hold a substantive post and those who work solely for bank/agencies. Respondents were split more or less equally between these two groups.

- A higher proportion of nurses working in temporary roles are aged 40 plus than is the case across all nurses.
- Respondents with substantive posts tend to be younger than those working solely in temporary settings and slightly more are from black and minority ethnic origins.
- Proportionally there are more younger nurses who work for NHS Professionals.

Temporary nurses with substantive posts

- 55% of these respondents do bank/agency on a regular basis.
- On average respondents with a substantive post do five bank/agency shifts a month.
- Just over half (54%) of all respondents work full-time in their substantive posts, with 46% working part-time.
- Two thirds (68%) report that they undertake temporary work in addition to their substantive post in order to provide additional income.
- Other reasons given for doing bank/agency work is to maintain nursing skills (10%) and to ensure that there are enough staff to provide cover in their main work area (11%).
- Older nurses place less emphasis on additional income and more on maintaining skills and sufficient staff.

Nurses working for bank and agency only

- Two thirds of respondents who only work in temporary roles were working as a nurse prior to bank/agency working. One in ten were previously on a career break. In total a third were not active in the nursing labour force prior to doing bank/agency work.
- 85% of these respondents do bank/agency work regularly, working an average of 13 shifts per month.

- Reflecting the previous labour market situation of respondents 30% gave up their previous post because of children/family reasons or a career break – 11% moved into semi retirement and 13% left due to a relocation.
- Gaining flexibility in working hours, dealing with childcare issues and allowing more choice over when they work are the most frequently cited reasons for taking up bank and agency work.
- One in ten respondents reported they took up bank/agency work as they had no alternative, and a third say they would prefer to be in a permanent nursing post.
- Nurses who qualified since 2000 are less likely to have chosen this form of work – two-thirds report they would prefer to be in a permanent nursing post. These nurses are less satisfied with bank/agency work than their more experienced colleagues.
- Whilst flexibility and choice over their working hours are the features most valued by these respondents, the variability of the work supply is a problem for some. One in five feel they are not given enough warning of available shifts, and almost a quarter cannot get the volume of work they want.
- Just over a half (56%) say that bank and agency work provides them with a good income (23% disagree) and the majority (83%) receive paid annual leave.
- About a third of the nurses working solely for bank/agency are concerned about how it may affect their career prospects, and 28% are concerned that it may be difficult for them to get a permanent contract.
- When asked about the disadvantages of bank/agency work, 22% of this group refer to lack of professional development and progression opportunities.

Nature and views of temporary working

- Two-thirds of the bank/agency shifts worked are day shifts, one third night.
- Black and minority ethnic respondents are more likely to work night shifts (50% of shifts worked vs. 30% of shifts worked by white respondents).
- Across all respondents, three-quarters indicate that their current work pattern is their preferred choice, a quarter indicate that it is not. 48% of recently qualified nurses report that their current working pattern is not their preferred choice.
- Respondents (particularly those who work solely bank/agency) perceive the flexibility and choice over hours as the main advantage of bank/agency work whilst those with substantive posts are more likely to see work experience opportunities and the means of supplementing income as advantages.
- Uncertainty and unpredictability of work supply is the main disadvantage (cited by 35% of all), and particularly affects those for whom it is the only source of work (38% refer to it).
- 32% report specifically that they do not have access to the professional development they need.
- Six out of ten respondents are concerned about their provision for their pension.
- Banks are seen more positively in relation to the notice given of shift availability, providing the volume of work wanted, being able to work in a chosen geographical location and in providing appropriate induction.
- Agencies are viewed more positively in terms of fair and timely pay, but less positively in relation to providing sufficient notice of availability of shifts and ability to work in chosen geographical location.

1. Introduction

This report presents the findings from an on-line survey of nurses undertaken by Employment Research Ltd and commissioned by the RCN.

Context

During the 1990s there was increased reliance made by the NHS on temporary staffing. The 2003 Labour Market Review reported a consistent year-on-year increase in expenditure on temporary nursing staff in England since the mid-1990's that resulted in costs almost tripling in five years, from £216 million in 1997/98 to £628 in 2002/03.¹

This trend in the use of temporary staffing to address longer-term staff shortages, as opposed to fluctuations in demand, was both expensive and potentially problematic to quality and continuity of care. Partly as a result of these changes, the NHS established NHS Professionals to help reduce the cost to the NHS of using agency staff.

The recent National Audit Office report² highlights reduced expenditure on agency nursing staff and a slight reduction overall in the use of temporary nursing between 2000 and 2005. Although growth in the nursing workforce has partly driven this reduction, the increases in nursing employment within the NHS over this period were hoped to have a greater impact on the use of temporary nursing than was the case. Significant variation between trusts in the use of temporary nursing was identified, both within and between regions and explanations for this include: variation in labour markets (local recruitment difficulties etc.), mobility of the workforce and variation in sickness absence.

The NAO also describe how the introduction of Payment by Results and Commissioning a Patient Led NHS may make it more difficult in future for trusts to predict their level of staffing needs. Although this has always been the case it is possible that temporary staffing will play an increasingly important role in enabling trusts to meet fluctuations in demand.

From an individual perspective there are advantages and disadvantages to temporary working with some nurses working this way because they have no choice and others as their preferred mode of working.

Previous RCN Annual Employment Surveys (AES) have collated data on the extent of temporary nursing among RCN members and their views on a range of issues pertinent to nurses working in temporary arrangements, either as part of their main job or as an additional job. Although just 3-4% of respondents to the surveys classify their main job as 'temporary' i.e. bank/agency employment (e.g. AES 2005³ had 69 respondents working in NHS bank, 19 other nursing bank, 78 nursing/care agency), approximately 27% work in this way in addition to their main job.

The 2005 AES found that there had been a small increase in the prevalence of full-time working in bank/agency settings, but there is no data available to help explain this finding. The 2003 AES⁴ survey identified bank/agency work as a potential stepping-stone, both into and out of nursing.

¹ Buchan J, Seccombe I (2003) *Fragile future? A review of the UK nursing labour market in 2003*. London. RCN/Queen Margaret University College. Publication code 002 468.

² NAO (2006) *Improving the use of temporary nursing staff in NHS acute and foundation trusts* HC1176 Session 2005-6, 12 July 2006

³ Ball J and Pike G (2005) *Managing to Work differently: Results from the 2005 Annual Employment Survey*, RCN, London. Publication code 003 006.

⁴ Ball J and Pike G (2003) *Stepping Stones: Results from the 2003 Annual Employment Survey* RCN, London. Publication code 002 235.

Method

An online survey was used for several reasons:

- difficulty identifying postal bank/agency nurses in RCN membership records;
- bank/agency nurses likely to be more transient population, so less suited to a postal survey;
- allowed access to a wider population of nurses.

The methodology also had the advantage that the survey could be conducted more quickly and efficiently than postal methods.

On-line surveys rely heavily on publicity to the widest possible audience. For this survey the following steps were taken:

- A link was placed on the home page of the RCN website so that all members could participate in the survey.
- RCN regions were informed of the survey and sent a pack of posters they could forward to their stewards to encourage participation in the survey. They were also sent copy for an email to forward to relevant staff in a bid to cascade awareness of the survey.
- A postcard (with the survey web address) was sent to a sample of 2,000 nurses identified through RCN membership records as working in agency settings⁵.
- Agencies registered as preferred suppliers with the NHS Purchasing and Supply Agency were sent posters and postcards to distribute among their offices and circulate among nurses.
- NHS Professionals were contacted and put a link to the survey on their website.
- Messages were placed on nurse discussion forums to publicise the survey.

After four weeks the survey was closed with 539 respondents. Nine of these respondents reported that they had not undertaken any bank or agency work in the previous 12 months, and thus were excluded from the analysis. Detail of the breakdown of respondents is provided in Section 2.

Report structure

The findings in the report are based on all respondents to the survey who are currently undertaking at least some temporary nursing (530 cases). The report is structured as follows:

- Section 2:** a respondent overview describes the main characteristics of temporary workers in terms of their involvement in bank/agency work (i.e. whether it as an addition to a substantive post or solely temporary.) This section also provides a biographical profile of respondents.
- Section 3:** gives an overview of nurses working in temporary settings who hold a substantive post.
- Section 4:** looks at nurses who are working solely in temporary settings.
- Section 5:** provides information concerning the working patterns, volume of work and grading of nurses working bank and agency settings.
- Section 6:** explores the views of all nurses doing bank/agency work about the advantages and disadvantages of this work. Their views of nursing in general are contrasted with the views of 'average' RCN members surveyed in 2005.

⁵ It was not possible to identify nurses working in bank settings from RCN membership records.

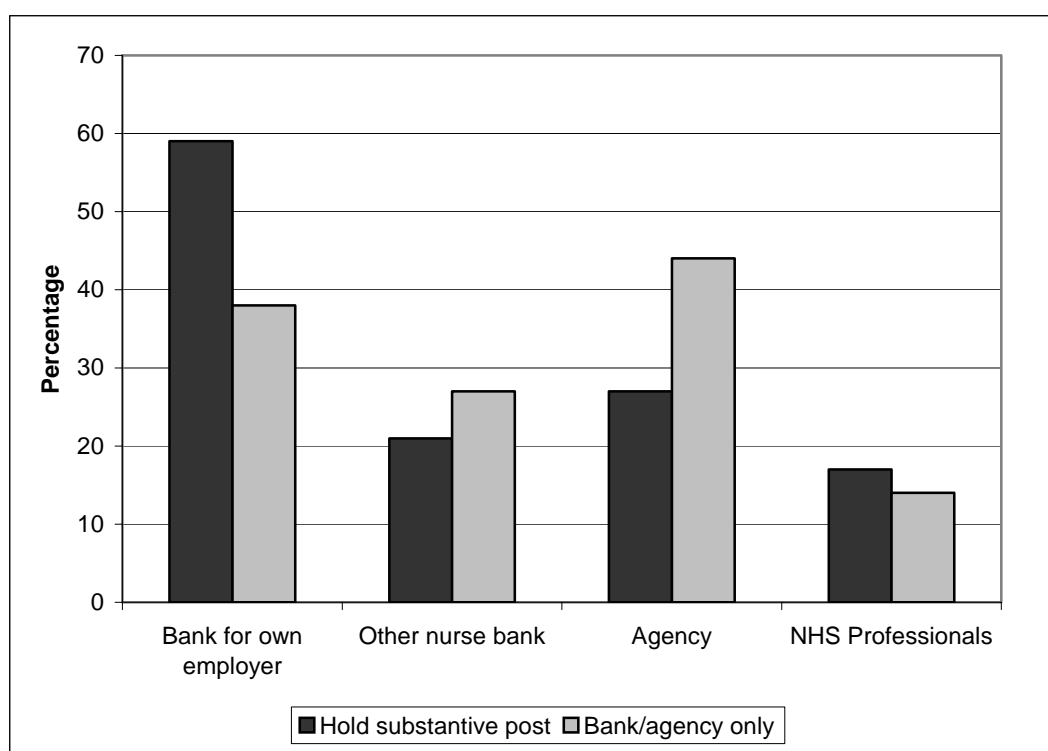
2. Respondent overview

This section summarises the types of bank and agency nurses responding to the survey, their employment and biographical backgrounds.

The first question established whether or not respondents had undertaken any bank or agency work in the previous 12 months. Just under half of all 530 respondents (47%) had undertaken bank work with their own employer, 24% had undertaken bank work with another employer, 36% with a nursing agency and 16% with NHS Professionals. Those who qualified recently are more likely to have undertaken work with NHS Professionals (24% compared to 13% of more experienced respondents).

Respondents were also asked to say whether or not they held a substantive post in addition to their bank and agency work. Respondents were split more or less in half with 46% holding a nursing post, 46% working only for banks/agencies, 3% were students working for a bank/agency and 6% held a non-nursing substantive post in addition to their bank/agency work. The latter group consisted primarily of nurses who, whilst they work in health related occupations, were in less obviously nursing roles such as administration, research, training and audit.

Figure 1: Working for banks/agencies by whether hold a substantive post – percentage



Source: *Employment Research/RCN, 2006*

Those nurses who hold a substantive nursing post in addition to their temporary work are more likely to report working for the bank with their own employer (see Figure 1). Strangely, 38% of those who do not report that they currently hold a substantive post, nonetheless report that they work for the bank with their 'own employer'. It could be that they are referring to working on the bank of the place where they previously held a post or that they are simply referring to the bank they are current working for.

Agency nursing (as opposed to bank or NHS professionals) is more prevalent among nurses not holding a substantive post; 44% compared to 27% of those that do hold a substantive nursing post.

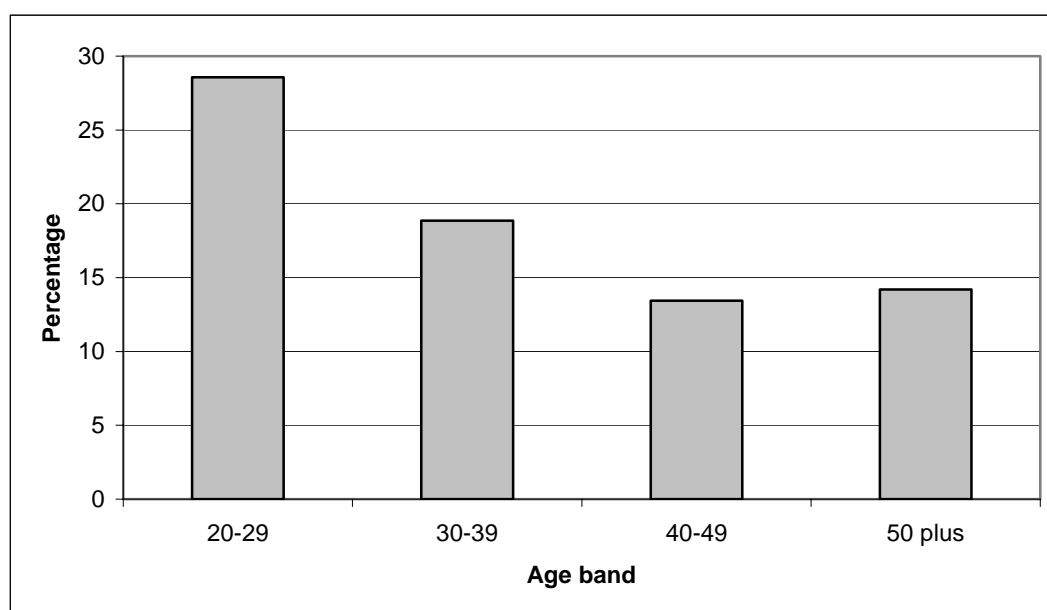
Biographical profile

Respondents were distributed more or less proportionally to the population in terms of country with 82% in England, 11% Scotland, 4% Wales and 2% Northern Ireland. The numbers from each of the smaller countries are insufficient to provide meaningful country level analysis.

Nine per cent of respondents were male and 10% from minority ethnic origins. Overall, more respondents were aged 40 plus than is the case across the whole membership 71% compared to around 60% of RCN members surveyed in 2005⁶ and the average age of respondents to this survey is higher at 44 than is the case among the RCN membership (42). More black and minority ethnic nurses are in the 30-39 age band (31% compared to 19% of white nurses), while more white respondents are aged 40 plus. There is a marginal difference in the ethnic composition of the two key groups 'those who hold a substantive post' (13% black and minority ethnic origin) and those who do bank/agency (8%).

Figure 2 shows that younger nurses (i.e. who typically qualified most recently) are more likely to work for NHS Professionals than their older colleagues. Conversely, younger nurses are less likely to work for 'other' nurse banks and fewer work only for banks/agencies compared to older age groups (37% of 20-29 year olds) compared to 53% of those aged 55 plus).

Figure 2: Working for NHS professionals by age band – percentage



Source: *Employment Research/RCN, 2006*

The 2003 AES⁷ found that bank and agency nurses tend to be slightly older than the average across all respondents and that bank and agency nurses with a main job tend to be younger than those without. These findings are corroborated by the current survey.

Outside of age, there are few biographical differences compared to the 'average' nurses surveyed in the RCN AES. Bank and agency nurses are no more or less likely than other nurses to have children living at home, or to have other caring responsibilities or to live with a partner.

⁶ Ball J and Pike G (2005) *Managing to work differently: Results from the RCN Employment Survey 2005* RCN, London. Publication code 003 006.

⁷ Ball J and Pike G (2003) *Stepping Stones: Results from the RCN Employment Survey 2003* RCN, London. Publication code 002 235.

Where bank and agency nurses differ most from other nurses is in their career plans. Nurses who do bank and agency work as their main job are twice as likely to be planning to leave nursing in the next two years (compared to all respondents).

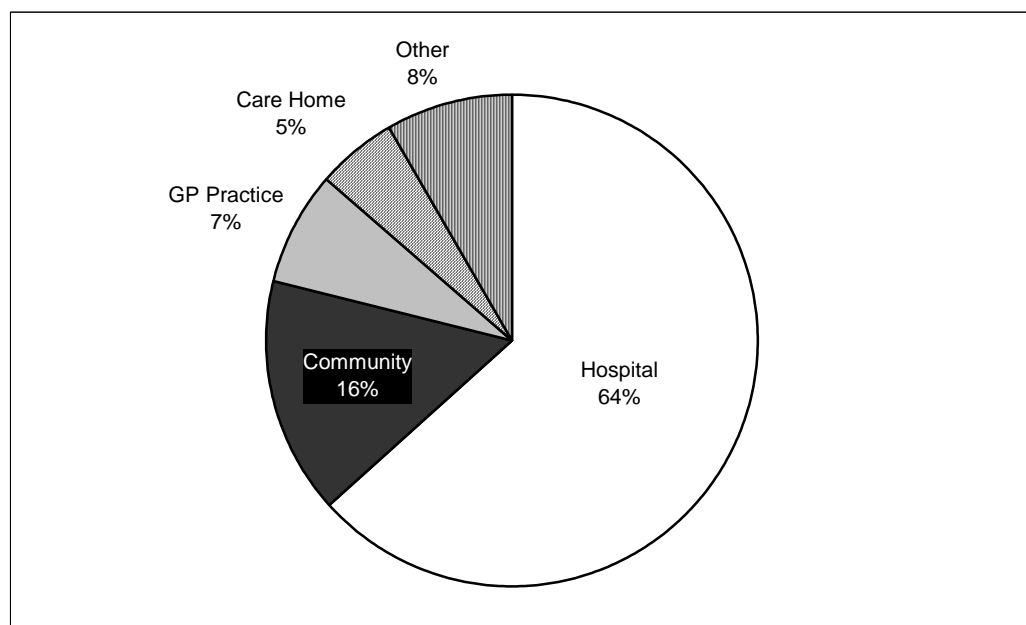
The following two sections present the data for each of the key groups of respondents, first temporary nurses with substantive posts and then those who are working in temporary roles only. We then look at all respondents' experience of bank and agency work and their views of this way of working.

3. Temporary nurses with substantive posts

This section looks exclusively at the 244 respondents who do bank/agency working in addition to holding a substantive nursing post. Compared to all respondents, nurses who hold a substantive post are generally younger than those who solely do bank and agency work, and a slightly larger proportion are of minority ethnic origin.

Nearly nine in ten (87%) are employed in their substantive post in the NHS, nine per cent in independent/private healthcare and four per cent in other employers. Most respondents in this group hold a post in hospital settings (Figure 3: 64%), with 16% in community settings, 7% GP practice, 8% other and 5% care home.

Figure 3: Work settings of those with a substantive post – percentage



Source: *Employment Research/RCN, 2006*

Just over half (54%) are working full-time in their main substantive post, as well as working for a bank/agency – 46% work part-time. Nearly six in ten respondents (57%) are on an AFC pay band, with 30% on a clinical grade (see Table 1). The remaining 13% are on other or SMP grades.

Table 1: Grade of bank/agency nurses with substantive post – percentages

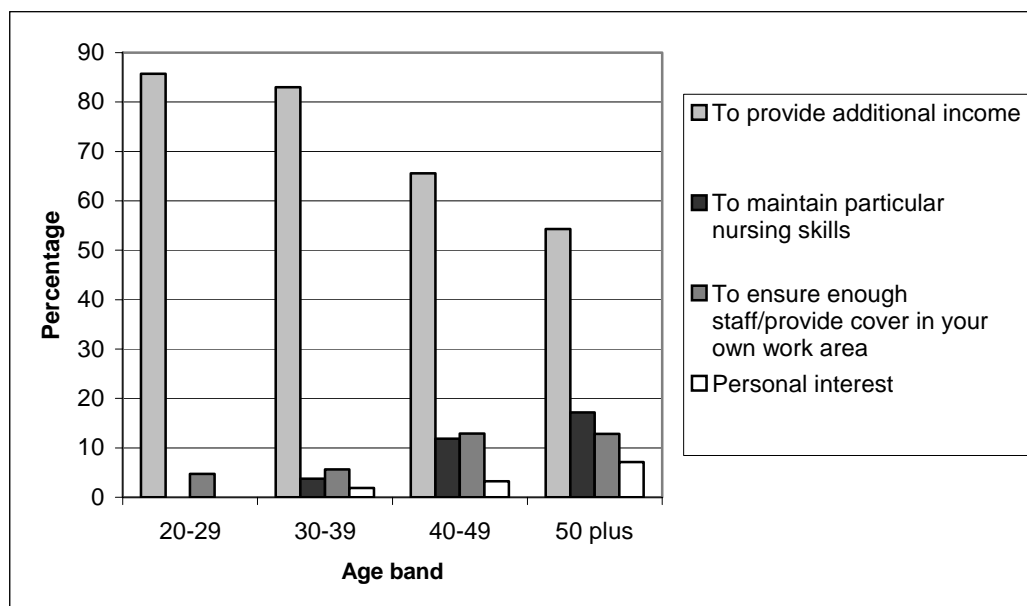
Clinical grade	Percentage	AFC pay band	Percentage
D	21	5	52
E	26	6	38
F	21	7	9
G	27	8	1
H	25		
<i>Base n=100%</i>	<i>62</i>	<i>Base n=100%</i>	<i>109</i>

Source: *Employment Research/RCN 2005*

Respondents were asked to give the main reason that they undertake bank/agency work in addition to holding a substantive post. They were presented with five main response categories (which were derived from the findings from the AES). Just four percent gave a reason other than those listed. In the majority of cases (68%) the main reason for doing bank/agency work for those who also hold a substantive post is 'to provide additional income'. One in ten (10%) say they want 'to maintain particular nursing skills' and 11% want 'to ensure that there is enough staff to provide cover in their own work area' – four per cent do it for 'personal interest', three per cent 'to gain professional development'. Other reasons were given by 2% of respondents (9 cases) with the main feature of responses being to enable more flexibility.

There is some variation in the motivations of different groups of nurses for undertaking temporary work. Older nurses are less likely to do it for financial reasons, larger proportions citing professionally driven reasons - maintaining professional skills, personal interest and to ensure there are sufficient staff to provide cover where they work. There is also an ethnicity difference, although this is not entirely separate to the age related differences. Black and minority nurses more frequently mention 'to provide additional income' as the main reason behind their bank/agency work, than do white nurses, regardless of their age.

Figure 4: Reasons for doing temporary work by age band – percentages (respondents with substantive posts)



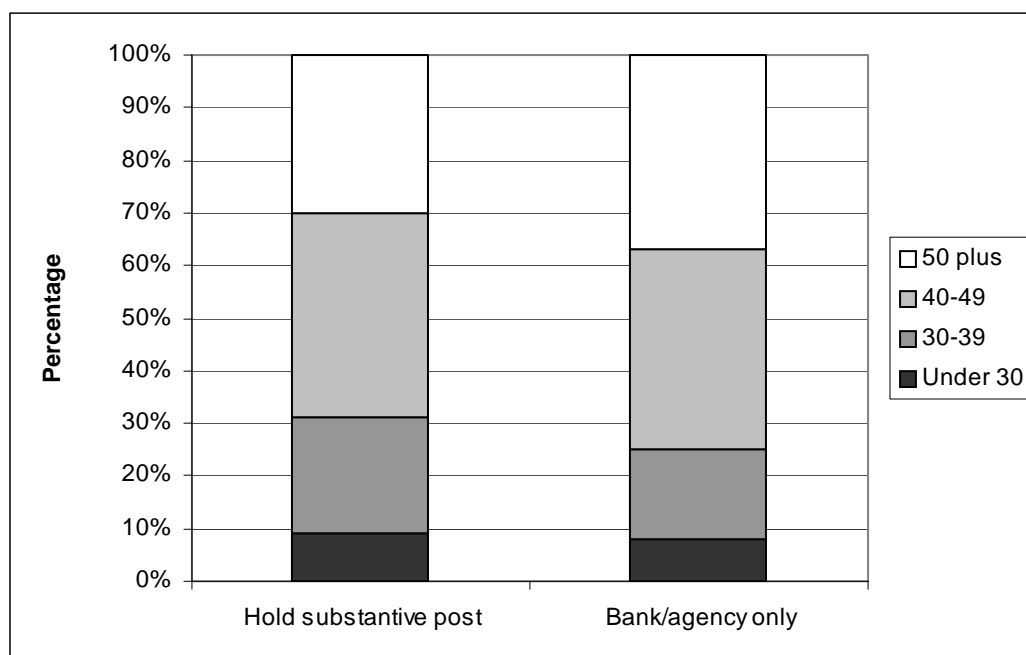
Source: *Employment Research/RCN 2006*

4. Nurses only working for bank/agency

This section looks at the situation of respondents who indicated that they only work for a bank/agency (i.e. they do not have a substantive post as well). Respondents working solely in temporary nursing tend to be older (e.g. 75% are aged 40 plus and 37% are aged 50 and over).

Figure 5 shows the age profiles of these respondents against those who also have a substantive post.

Figure 5: Age profile of respondents – Substantive posts and Bank/agency only (percentages)

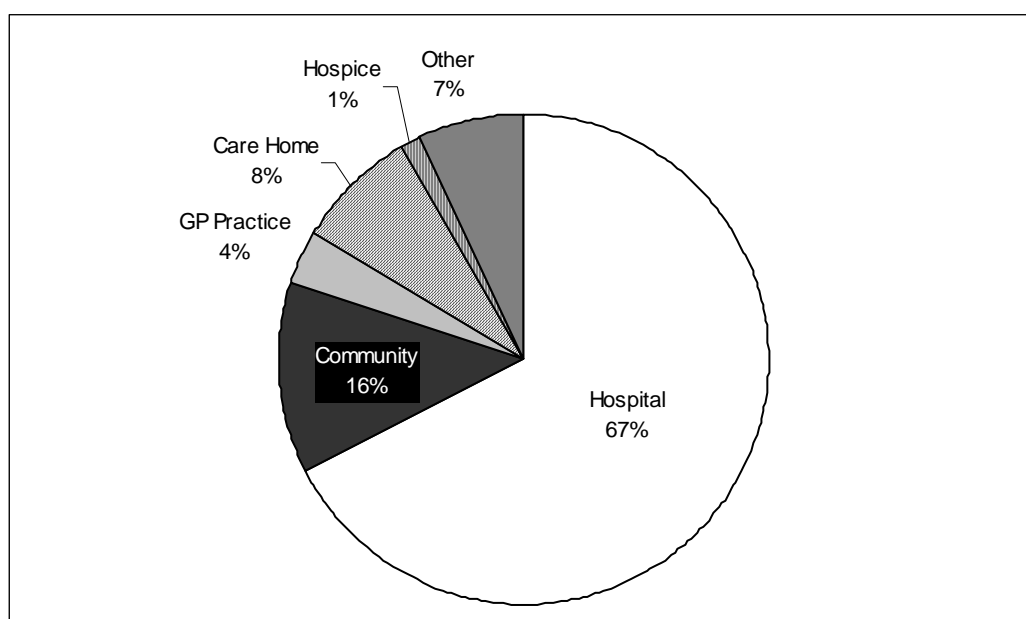


Source: *Employment Research/RCN 2006*

The first question asks about work prior to doing bank/agency work. Of these 242 respondents two thirds (64%) were working as a nurse in the UK, 10% on a career break, 5% working outside nursing in the UK, 4% as a student nurse in the UK, 5% on maternity leave, 2% on long term sick leave, 1% unemployed, 6% working/training outside the UK. In other words almost a third of this group were previously not active in the UK nursing workforce. This reinforces the theory put forward in the 2003 AES that for many nurses, working in the temporary sector is a stepping-stone into nursing employment.

Nearly three quarters (72%) of nurses who currently only do bank/agency work, were previously employed in the NHS, 20% in the independent sector and 7% with other employers.

Figure 6: Previous employer of nurses now only doing bank/agency – percentages



Source: Employment Research/RCN, 2006

Table 2: Grade/Pay band of previous posts – percentages

Clinical grade	Percentage	AFC pay band	Percentage
C/D	27	4/5	61
E	32	6	26
F	17	7	9
G	18	8	4
H/I	6		
<i>Base n=100%</i>	<i>145</i>	<i>Base n=100%</i>	<i>23</i>

Source: Employment Research/RCN 2006

Source: Employment Research/RCN 2006

Unsurprisingly, few of the previous posts held by nurses working bank/agency only were paid on AFC pay bands (just 11%) with the majority having been on a clinical grade previously. The remaining 20% were employed on ‘other’ or SMP grades. Many of the respondents working bank and agency only were on lower grades 59% on D/E grades and 61% on AFC pay band 4/5, when compared to the grades of those still in substantive posts.

Respondents were asked why they had left their previous substantive post (the responses were categorised and are presented in Table 3).

Table 3: Reasons gave up previous substantive post – percentages

	Percentage of cases
Children/family reasons e.g. childcare costs/term-time only	19
Relocation – of self/family/spouse	13
Retirement/early retirement	11
Dissatisfaction with previous post: stress/workload/overworked	11
Maternity/career break/travel, work overseas, voluntary work, etc.	10
Dissatisfaction with post: negative relationships/bullying/harassment	8
To get more flexibility/choice (general)	7
Redundancy/cut backs/ward closures/organisational changes	7
Poor pay/grade/terms & conditions/overtime-pay, etc.	7
Poor management/Lack of support	6
Workload: poor staffing levels/mix/under resourced	6
Choose WHEN work/reduce unsocial hours (holidays/weekends)	5
Sickness/physical limitations – self (including limitations of old-age)	5
STUDY: Difficult to fit study around work/wanted to study	3
Quality of Life – out of work interests, to have a life!	3
Dissatisfaction with previous post - bored/stale; not enough variety	2
Work politics	2
Where work: Wanted change of location/distance to work travel	2
Sickness – dependant	2
NOT respected, valued, appreciated/Lack of recognition	2
Disillusioned with NHS/Acute Sector, etc, / to get out of NHS	2
Wanted to nurse: too much paperwork/budgets/management	2
Dissatisfied with previous post due to role-change/redeployment	2
Get NUMBER hours want, e.g. Wanted fewer hours/part-time	1
Dissatisfaction with previous post – general	1
Dissatisfaction with previous post – lack of career prospects	1
Dissatisfaction with previous post – low staff morale	1
Other personal reasons: divorce, personal stresses, etc.	1
<i>Base n=100%</i>	149

Source: *Employment Research/RCN 2006*

The most frequently cited reason given for leaving their previous post was to look after children (19%). One in ten were taking a career break, 11% retired or took early retirement and 13% mentioned relocation or a spouse's job change. However, there was also a plethora of reasons given that centred around dissatisfaction with their previous substantive post, including:

- stress, workload etc. (11%)
- negative work experiences such as bullying and harassment (8%)
- poor pay/grade etc. (7%)
- poor management/lack of support (6%)
- workload: due to staff shortages etc and low morale (7%)
- bored of previous role/job (2%)
- and a variety of other issues concerned with dissatisfaction with previous job mentioned include: lack of career prospects, general dissatisfaction, role change, lack of respect, not valued or appreciated, work politics, disillusioned with sector.

Other factors included: redundancy (7%), wanted a change of location, sickness and physical limitations (5%).

More nurses in the NHS cited retirement as a reason for leaving their previous post (15% compared to no one in the independent and other sectors). But nurses in the independent and other sectors were more likely to mention ‘poor pay/grade/terms and conditions’ 17% compared to 4% of NHS leavers.

For comparative purposes these respondents were also asked a question about why they currently do bank/agency nursing, using the same five categories as those used for respondents who also hold a substantive post. Not surprisingly fewer (24% vs 68%) cite providing an additional income as the main reason (given this is likely to be their sole income). About one in five (21%) said they did bank/agency work as a means of maintaining nursing skills, 13% for personal interest and 7% to gain experience. A third of respondents (32%) gave an ‘other’ reason for doing bank and agency work. The main reasons cited related to having more control and choice over working hours.

A perhaps more meaningful question asked respondents to describe in their own words what had led them to take up bank/agency work. The responses were coded into themes, and the proportion of cases citing each is presented in Table 4.

Table 4: Reasons for taking up temporary work – percentages

	Percentage of cases
To get more flexibility/choice (general)	25
Children/family reasons: e.g. childcare costs/term-time only	21
Increase choice WHEN work: leave/shifts, reduce unsocial hours	15
Get better pay; Enhanced pay/extra money	14
Good/easy way to return to nursing	11
Only job could get: e.g. no full-time jobs in area/speciality wanted	10
Keep registration/retain skills: e.g. post career break; semi-retired	8
Get NUMBER hours want: e.g. Wanted fewer hours/part-time	6
STUDY: to fit working hours around study (need the money whilst studying)	5
Freedom/independence; less commitment; less responsibility	5
Career/professional development: broaden experience/knowledge base	5
Wanted variety/diversity/ work in different areas/wanted new challenge	4
Retirement/early retirement – doing it to top up pension	3
Less politics	3
Less stress, lighter workload, less pressure, less targets/expectations	3
Sickness/physical limitations – self/(and due to old-age)	3
To get out of NHS or main sector	3
Quality of Life – out of work interests, to have a life!	3
To be a real nurse, less budgets, management, paperwork, etc.	3
Where work: Wanted change of location/distance to work/travel	2
To test out area of nursing/try out speciality before application	2
Disillusioned with work in substantive post: general or unspecified	1
Dissatisfaction with previous post: working relationships/bullying/harassment	1
Sickness: dependents	1
Enjoyment/interest	1
Respected, valued, appreciated	1
Dissatisfaction with previous post - Bad working conditions; staffing levels/mix	<1
Job satisfaction/rewarding	<1
Other personal reasons (divorce, personal stresses, etc.)	<1
<i>Base n=100%</i>	<i>160</i>

Source: *Employment Research/RCN 2006*

Given the above findings about the reasons for leaving their previous work situation, it is perhaps unsurprising that the reasons respondents gave for taking up temporary work primarily surrounded the need to create a work life that enabled family commitments to be incorporated. Thus the most frequently cited reasons are: allowing greater flexibility (25%), childcare/family reasons (21%) and enabling choice of when to work (15%) and suitable hours (6%) and the independence and freedom it allows (5%).

However, also mentioned was: better pay (14%), way of returning to nursing (11%) and a range of factors associated with gaining a wider variety of work, escaping previous work situation, and generally improving quality of life.

Indicative of the changed nursing labour market context since the last AES (2005) is the fact that one in ten respondents report that took up bank and agency because they had no other alternatives – it is the only means of getting suitable work.

Respondents working solely for bank/agencies were asked their views on a range of statements specifically concerning temporary working. The findings are presented in Table 5.

Table 5: Views of temporary working – percentages

	Strongly agree	Agree	Neither	Disagree	Strongly disagree
Working bank/agency suits me well	51	35	8	5	1
I would prefer to have a permanent nursing post	14	19	17	30	20
I usually get the volume of work I want	20	49	9	17	6
I am concerned working bank/agency will affect my career prospects	11	21	24	30	13
I am generally given enough warning of available shifts	15	55	10	16	3
Temporary working allows me more flexibility	65	28	4	3	0
I am able to work in the specialties that suit me best	42	35	12	9	2
I am able to choose where I work	36	41	9	12	3
I am generally treated with respect by permanent staff	27	53	10	8	1
Bad press has affected the way patients treat agency/bank nurses	6	21	23	42	9
Bank/agency work provides me with a good income	18	38	20	19	4
I am able to get the mix of shifts I want	24	45	13	15	3
I am worried it may be difficult for me to get a permanent contract	7	21	18	36	18
I receive paid annual leave (holiday pay)	36	47	4	6	7

Source: Employment Research/RCN 2006

Most respondents are satisfied with their working pattern, 86% reporting that bank/agency working suits them well. This centres to a large extent on this form of working allowing nurses to work the hours they want, get the volume of work they want and enable flexibility in working life with 80-90% agreeing with each of the statements covering these issues.

More than half the respondents (56%) say that bank/agency work provides them with a good income and 83% report that they receive paid annual leave (holiday). In terms of the day-to-day features of temporary working, 80% say permanent colleagues treat them with respect.

One area where there was a more negative response is in relation to the impact on career prospects. Just under a third (32%) agree that working bank and agency working will affect their career prospects and 28% are worried that it may be difficult for them to get a permanent contract.

One in four (27%) report that bad press has affected the way bank/agency staff are treated by patients.

Adding weight to the influence of the current labour market context, a third (33%) say that they would prefer to have a permanent nursing post. Figure 7 shows the differences in views between respondents who qualified in the six years prior to the survey and those who qualified earlier. The situation is much more exaggerated for recently qualified nurses.

Two thirds of nurses who qualified since 2000 would prefer a permanent post compared to just 28% of those who qualified pre-2000. Added to this, far fewer recently qualified respondents report that they are able to get the volume of work they want (32% compared to 73% of more experienced nurses). Also fewer of the more recently qualified group feel they are given enough warning of shifts, feel able to get the mix of shifts they want and are less likely to report that they are treated with respect by permanent staff.

A significant proportion of nurses working in bank/agency have not chosen to be part of the temporary workforce. For this group bank and agency work cannot be regarded simply as a 'stepping stone', but is more akin to a last resort as the only form of nursing employment open to them.

Figure 7: Views of temporary working by time since qualified – percentages



Source: *Employment Research/RCN, 2006*

5. Details of temporary working

Respondents to the survey were asked to provide details of how often they work for banks/agencies and the volume of work and the grading of the work. The nature of temporary working is described before the relative strengths of each form of provision is reviewed.

Volume of bank/agency work

Across all respondents two thirds (69%) report that they undertake bank and agency work regularly and 31% say they do it occasionally. Interestingly there was little difference in between recently qualified respondents and their more experienced colleagues in whether or not they undertake bank/agency work regularly or not.

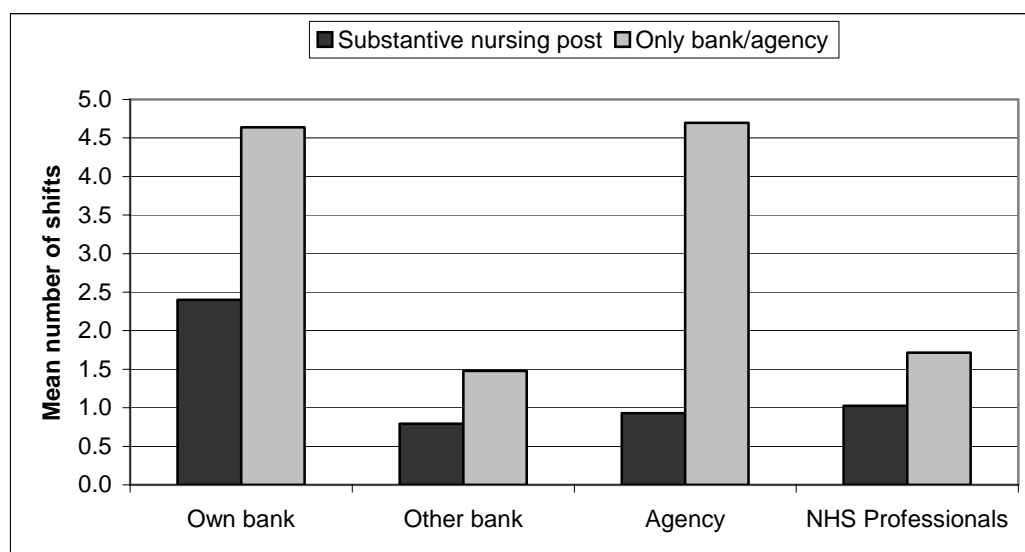
Respondents who report working only for banks/agencies are more likely to work this way regularly (85%) when contrasted with those who hold a substantive nursing post (55%).

More white respondents say they work bank and agency regularly (70% compared to 53% of black and minority ethnic respondents) but this is partly a function of the fact that more black and minority ethnic nurses hold substantive posts as well as working bank/agency.

Three quarters of respondents were registered with one or more banks (63% with just one bank) and 41% of respondents were registered with one or more agencies (30% with just one agency). Younger nurses are more likely to be registered with agencies, whilst fewer are registered with banks. For example, 78% of respondents who have recently qualified (last six years) are registered with agencies compared to 66% of those who qualified earlier.

On average respondents to the survey undertake approximately nine bank and agency shifts per month. Respondents without a substantive post work fewer shifts with bank/agencies (five compared to 13 among those who work solely for banks/agencies). Other than this difference there is little variation between groups of respondents. Figure 8 highlights the differences in number of shifts worked between those respondents who work solely for banks/agencies and those who hold a substantive post.

Figure 8: Number of shifts worked for each provider by working arrangement – mean number of shifts



Source: *Employment Research/RCN, 2006*

On average two thirds of bank/agency shifts (66%) worked by respondents to the survey are day shifts with a third night shifts. The only significant difference here is that black and minority ethnic nurses are much more likely to work night shifts; on average 50% of bank/agency shifts worked by BME respondents are night shifts compared to 30% of shifts worked by white respondents. In addition, approximately 25% of all bank/agency shifts are worked at the weekend, with again BME nurses working more weekend shifts, approximately 40% of all shifts compared to 23% of shifts worked by white respondents at the weekend.

In three quarters of cases their current work situation is their preferred choice whilst a quarter indicate that it is not their preferred work mode. Newly qualified nurses (i.e. those who qualified since 2000) are less likely to report that their current situation is their preferred choice, with almost half (48%) indicating that it is not. This supports evidence of the shifting labour market context, with newly qualified nurses struggling to find posts and forced to take up temporary work instead.

Bank/agency pay

Respondents were asked what grade/pay band (or its equivalent) they are normally paid on when they do work for their own bank, another bank, an agency or NHS professionals.

With some respondents paid on AFC pay bands (approximately 30% in banks and 13% in agencies) and others on clinical grades it is difficult to undertake precise comparisons between different respondents working in each type of temporary setting. Table 5 below shows the overall findings. As far as can be determined from these data it would seem agencies pay at a higher grade than NHS Professionals and NHS banks.

Table 5: Clinical grade/AFC pay band paid by bank/agencies – percentages

	Own bank	Other bank	Agency	NHS Professionals
D grade and below	27	35	34	43
E grade	29	32	31	17
F grade	9	7	11	4
G Grade and above	4	2	10	4
AFC pay band 5 and below	22	17	7	24
AFC pay band 6 and above	8	7	6	9
<i>Base n=100%</i>	<i>299</i>	<i>111</i>	<i>189</i>	<i>103</i>

Source: Employment Research/RCN 2006

Mandatory training

In most cases respondents' most recent annual mandatory training was organised (43%) and paid for (56%) by their employer. As would be expected, nurses who currently hold a substantive post are much more likely to report that their employer has organised and funded their training (Table 6).

Of those who worked for an agency 47% said that an agency organised their training, and similarly for NHS Professionals 28% said that NHSP organised their training. In terms of paying for their training 35% of those who had worked for an agency in the previous 12 months said their agency paid for it and 37% of respondents who had worked for NHSP said that NHSP had paid for their training.

Table 6: Mandatory training: who organised and funded by situation – percentages

	Who organised training?		Who funded training?	
	Hold substantive post	Bank/agency only	Hold substantive post	Bank/agency only
Employer	66	20	84	32
Agency	5	31	4	23
A bank	6	14	7	20
NHS Professionals	2	9	3	12
Self	21	27	3	15
Other	<1	0	1	0
<i>Base n=100%</i>	<i>242</i>	<i>241</i>	<i>242</i>	<i>241</i>

Source: *Employment Research/RCN 2006*

Recently qualified nurses are much less likely to have organised their training independently but otherwise there is little to separate respondents.

Comparison of banks, agencies and NHS Professionals

Table 7 shows the proportion of those respondents who hold a view who agree with each statement (excludes missing/don't know/not applicable) in relation to each form of provision.

Table 7: Views of banks, agencies and NHS professionals – percentages agreeing with each statement

	Bank	Agency	NHS Professionals
Provides the volume of work wanted	71	57	60
Convenient start and finish times	83	79	75
Sufficient notice of availability of shifts	72	49	61
Appropriate induction	68	56	63
Work matching my level of skill and experience	80	75	77
Chance to work in chosen field/specialty	81	75	81
Work in chosen geographical location	92	73	92
Fair level of pay relative to work undertaken	58	86	46
Payment processed in a timely manner	81	94	79
<i>Average base n=100%</i>	<i>170</i>	<i>197</i>	<i>105</i>

Source: *Employment Research/RCN 2006*

Most respondents are satisfied with the service provided by each type of provider. Views of banks are more positive in relation to the notice given of shift availability, providing the volume of work wanted, being able to work in a chosen geographical location and in providing appropriate induction. Views of agencies are more positive in relation to providing a fair level of pay and payment being processed in a timely manner. NHS Professionals and banks are viewed more negatively than agencies in relation to fair pay. Agencies are also seen as less positive in relation to providing sufficient notice of availability of shifts and ability to work in chosen geographical location.

6. Morale and views of bank/agency nurses

This section starts with a description of the views of respondents to this survey regarding nursing and their work-life in general. Bank and agency nurse views are then contrasted with those of other nurses (a cross section of RCN members surveyed in 2005). The final section concludes the report by presenting an overview of respondents' views of the advantages and disadvantages of temporary working.

Views of work and nursing

Respondents were asked to indicate their level of agreement with a range of statements selected from the Annual Employment Survey. These statements were selected to allow the analysis to benchmark responses to the bank and agency nurse survey with all nurses in 2005⁸. Table 8 shows the aggregate responses to the 12 statements and Figure 9 highlights the differences in responses between the 2005 AES and the 2006 bank and agency survey.

Table 8: Views of work and nursing – percentages

	Strongly agree	Agree	Neither	Disagree	Strongly disagree
I would recommend nursing as a career	13	36	20	23	8
I could be paid more for less effort if I left nursing	25	36	21	15	3
I feel I am under too much pressure at work	16	29	31	23	1
Considering the work I do I am well paid	5	22	17	41	15
I would not want to work outside nursing	11	27	21	32	9
I would leave nursing if I could	12	22	24	31	11
I feel satisfied with my present job(s)	10	45	22	18	4
I would find it easy to get another job using my skills	11	33	28	23	5
I feel my work is valued	10	43	17	23	7
I feel able to balance my work and home lives	21	46	12	16	5
I am concerned about my provision for my pension	21	38	21	16	4
I have access to the professional development I need	9	45	13	25	8

Source: *Employment Research/RCN 2006*

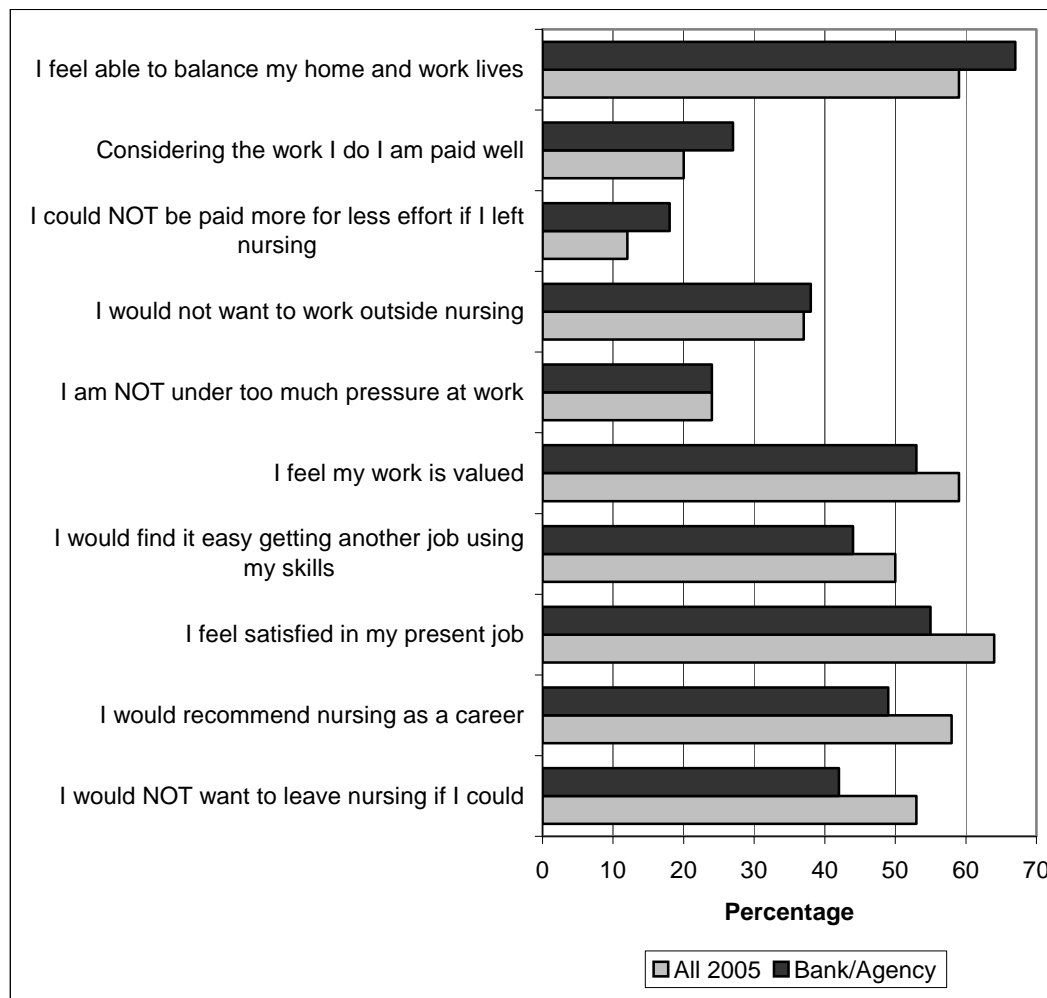
In aggregate, the main features of this analysis are that bank/agency respondents in 2006 feel more positive than the average RCN member surveyed 2005 in relation to pay and their ability to balance home and work lives. Their views of work pressure are roughly the same as other nurses but they respond less positively in relation to career issues, intention to stay in nursing and job satisfaction.

For example, 42% would not leave nursing if they could compared to 53% of all nurses in 2005 and 49% would recommend nursing as a career compared to 58% of all nurses. On the positive side 67% feel able to balance their home and work lives compared to 59% of all nurses and 27% feel well paid considering the work they do compared to 20% of all nurses.

⁸ The figures are not entirely comparable as there is always a change from year to year and the context of the survey influences the nature of responses to surveys such as these.

Two statements, not used in the AES, were included in this survey. Six in ten respondents (59%) say they are concerned about their provision for their pension and a third (32%) report that they do not have access to the professional development they need.

Figure 9: Views of nursing (all in 2005 vs bank/agency respondents 2006) – percentages agreeing with each statement



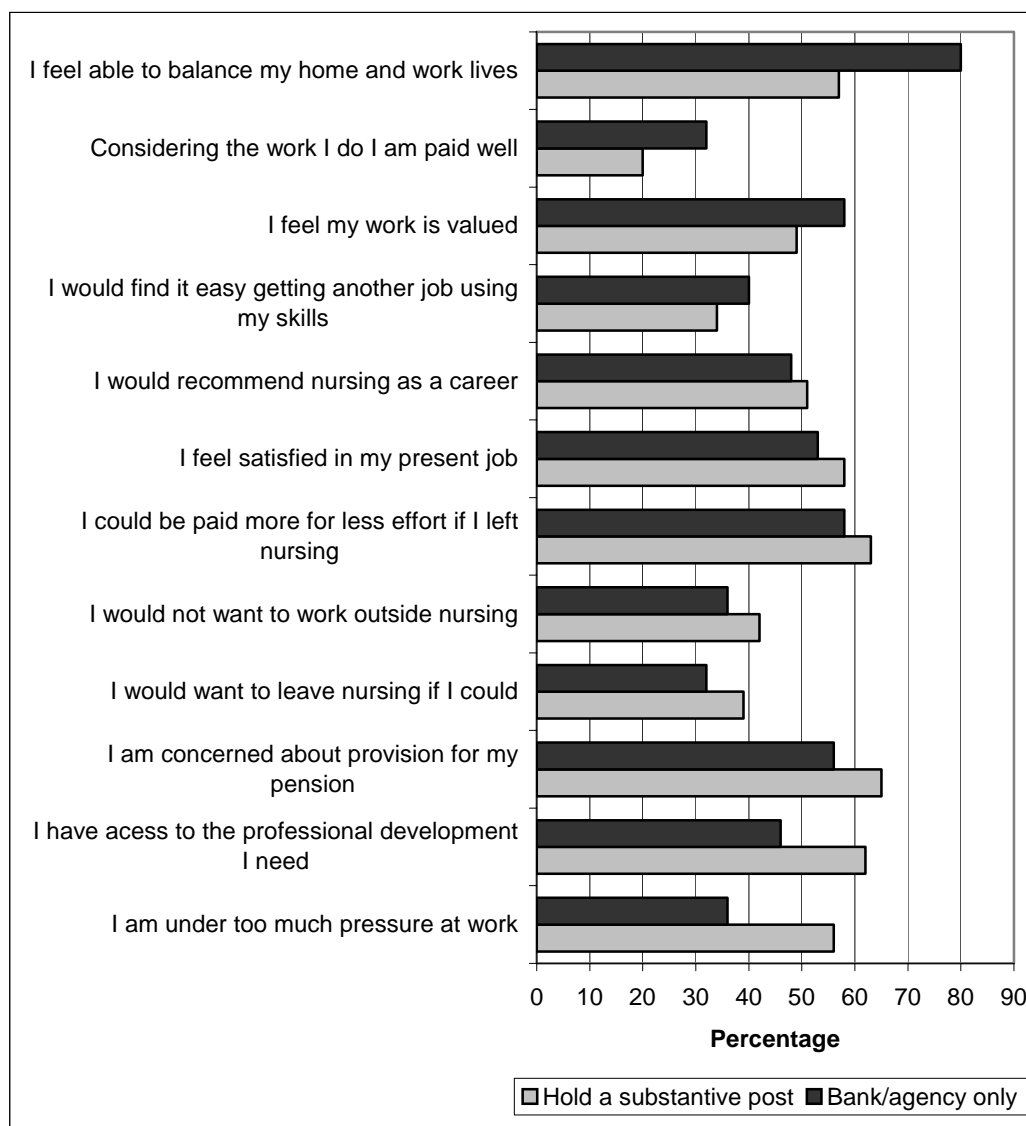
Source: *Employment Research/RCN, 2006*

Respondents holding a substantive post were much more likely to say that they feel under too much pressure at work, 56% compared to 36% of those who are working solely in temporary settings (Figure 10). Linked to this, and of concern from a retention perspective, more recently qualified nurses say that they could be paid more for less effort if they left nursing (73% compared to 59% of their more experienced colleagues).

As reported above, nurses holding substantive posts are less concerned about their CPD and accessing the training they need than nurses who work solely in temporary work (62% saying they can access the professional development they need compared to 46% of those who work only in bank/agency settings). However, respondents who do not have a substantive post are much more likely to say they feel able to balance their home and work lives (80% compared to 57% of those with substantive posts). Related to this, more recently qualified respondents (more of whom hold substantive posts) are more inclined to say that they cannot balance their home and work lives (37% to 19%) and that they have access to the professional development they need (45% to 31%).

Fewer of those working in substantive posts in addition to their temporary work, say that they feel well paid for the work they do (20% compared to 32% of those in temporary settings only).

Figure 10: Views of nursing (hold a substantive post vs bank/agency only) – percentages agreeing with each statement



Source: *Employment Research/RCN, 2006*

Black and minority ethnic respondents were more likely to say they would recommend nursing as a career and less likely to agree that they could be paid more for less effort if they left nursing.

Advantages and disadvantages of bank/agency work

Respondents were asked to describe the advantages and disadvantages of bank/agency work. Tables 7 and 8 summarise the issues that emerged. Overwhelmingly flexibility is the main feature of responses in relation to advantages 43% specifically mentioned gaining flexibility and choice, 19% mentioned ability to choose when to work (i.e. reducing unsocial hours), 5% highlighted the freedom and independence of temporary working.

Linked to flexibility many mentioned family obligations, caring for children, term time working only etc. (7%), being able to work the number of hours wanted (3%).

Pay and income factors were seen as advantages to many: 17% said that pay was enhanced by temporary working; a further 17% mentioned the convenience of being able to top up pay and gain additional income.

Career and professional development issues were mentioned by 15% in being able to broaden experience and learn new skills.

Being able to nurse (a 'real nurse' 4%) and being able to choose specialty and the area in which they work was important (6%). Linked to this the variety of work and working in different areas was cited by 11% of respondents. Also less politics was mentioned by 5%.

Respondents who have qualified in the last six years are more likely to say that it is a convenient way to top up their pay (32% compared to 15% of those qualified pre-2000).

Table 9: Advantages of bank/agency working – percentages

	Hold substantive Bank/agency		% All
	post	only	
To get more flexibility/choice (general)	25	62	43
More choice WHEN work; reduce unsocial hours (nights or weekends)	16	30	19
Better pay; enhanced pay; paid overtime (rather than time off in lieu)	13	22	17
Good or convenient way top earn extra/additional money	34	0	17
Broaden experience, professional development, gain skills	21	8	15
Variety/diversity of work	8	7	11
Children/family (eg. childcare costs, able to work term time only)	6	7	7
Able to choose area/specialty	4	7	6
Maintain registration/skills (e.g. post career break; semi-retired)	9	17	6
Freedom/independence (less commitment; less tied)	3	13	5
Less politics	2	10	5
To do 'real' nursing (less admin/bureaucracy etc.)	3	7	4
Get number of hours want (e.g. wanted fewer hours/part-time)	3	3	3
Less stress, lighter workload, less pressure, less targets/expectations	3	0	3
Networking/meet new people daily/social aspects	4	3	3
Respected, valued, appreciated	1	2	2
Quality of life in general – better work-life balance	1	3	2
Working BANK is good because staff know area/address staff shortages	4	0	2
Able to fit working hours around study/training/being student	0	1	1
Job satisfaction/rewarding	1	0	1
Retirement/early retirement (top-up pension/keep in nursing)	0	1	<1
Location of work (wanted change of location/distance to work/travel)	0	1	<1
Good way to return to nursing	0	1	<1
To test out area of nursing/try out speciality	1	0	<1
Base n=	233	226	503

Source: Employment Research/RCN 2006

Aspects of temporary nursing seen to be advantageous to some can be viewed as disadvantages to others. For example, pay issues many see bank/agency as being paid on a lower grade (12%), no sick/holiday pay (13%), variable or uncertain pay (8%) and no pension (2%).

Where many identify advantages in the flexibility of the working arrangement, other report a lack of work availability or that it is erratic/uncertain and difficult to plan (35%). 11% cite short notice of shifts and late cancellations as a problem with bank/agency working.

Table 10: Disadvantages of bank/agency working – percentages

	Hold substantive post	Bank/agency only	% All
Availability of work: erratic/uncertain/not enough/planning issues	29	38	35
No sick pay or holiday pay	11	15	13
Career development: CPD/problems accessing training	5	22	13
Poor pay / paid on lower grade / AfC changes	16	10	12
Attitude of permanent staff: lack of respect/given worst jobs/worked hardest	8	16	12
Short notice of shifts/change/cancelled upon arrival	11	10	11
Not part of team / isolating / not part of organisation	6	15	10
Unfamiliarity: lack of confidence/experience/fear of making error	15	6	10
Variable or uncertain pay	6	11	8
No continuity of care for patients:	9	7	8
Exhausting/tiring/stressful (especially those working additional hours)	13	<1	6
Job security – fear of being laid off (current conditions)	2	6	4
Always away/travelling/distance from workplace	7	1	3
No pension	1	4	2
Lack of respect (general)	1	2	2
Restricted role: cant influence practice/decision making/development/mentoring	1	4	2
Pressure to do shifts, even if don't want to	4	0	2
No support	1	1	1
Cant always choose preferred area – limiting	2	1	1
Risk of deskilling – not using skills	1	1	1
Working at a level ABOVE capability: unsafe	1	0	1
Scapegoat – get blamed for errors/work not done	0	1	1
Bad bank/agency communication/management	0	2	1
Extra/higher tax	2	0	1
Attitude of bank/agency: lack of respect/support/distrust	0	<1	<1
Attitude of patients/public: lack of respect / lack of confidence	0	1	<1
Working conditions/situation regarding bad staffing/staff mix	0	<1	<1
Working at a level BELOW capability	1	<1	<1
Base n=	208	229	464

Source: *Employment Research/RCN 2006*

One in eight (13%) report that career development can be affected by a lack of access to training and professional development.

Many respondents cite problems associated with isolation and not being part of a team (10%), unfamiliarity with environment and lack of confidence in work (10%). Six per cent say that it is a stressful form of working.

Older respondents are more likely to mention pension issues as a negative aspect of bank/agency working (15% compared to 2% of recent qualifiers). Recent qualifiers are more likely to find bank/agency work stressful and tiring (20% compared to 4% of the more experienced respondents).

More nurses working for bank/agency only (22%) say they are concerned about CPD and their ability to progress compared to those who hold a substantive post (5%). More of those working bank and agency only list the attitude of permanent staff and the fact that they are not made to feel part of a team as a disadvantage of temporary working.

More of those holding a substantive post list unfamiliarity, lack of confidence and concerns about making mistakes as a disadvantage of temporary work (15% compared to 6% of those only working in temporary situations). As an indicator of working excessive hours doing additional bank work, this group are also more likely to say that they find the work exhausting/stressful (13% compared to less than one percent of nurses working bank/agency only).