



SAFE STAFFING SAVES LIVES
MAE STAFFIO DIOGEL YN ACHUB BYWYDAU



Coleg Nyrsio Brenhinol
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RETAINING NURSES IN THE PROFESSION: **WHAT MATTERS?**

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SUMMARY OF KEY FINDINGS

- The literature review and the examination of case studies, including actions taken by Local Health Boards in Wales and parts of the NHS outside Wales, point to a range of strategic and operational initiatives to address the rates of nurse attrition from the service.
- There are examples in Wales where work has been developed both nationally and locally to focus on what is needed to improve the rates of retention in the workforce.
- Whilst the Welsh Government has not been a key driver in providing a national steer on the strategic importance of nurse retention there is a clear strategic intent from within the NHS to support health bodies to identify the key factors which cause dissatisfaction.
- Wales does not have a specific nurse retention strategy to sit alongside the wider workforce strategy.
- At a local level we have seen a mixed response from Local Health Boards in responding to the myriad of workforce challenges in recent years, not least providing safe services during a global pandemic.
- There is evidence of work programmes linked to the issues which affect the turnover rate; however, this is not consistent and universal.
- The case studies, although not vast in number, provide a steer as to some of the strategic considerations explored by organisations outside Wales and the actions taken by health bodies to address those areas most relevant to their localities.

We would recommend that:

- Welsh Ministers take a lead in developing a National Retention Strategy building on the work already secured through the workforce development strategy of Health Education and Improvement Wales (HEIW) and Social Care Wales.
- Welsh Ministers ensure that a National Retention Strategy acts as the foundation for locally delivered Nurse Retention Plans with leadership from Local Health Boards to set the priorities for their localities, based on the themes in the national strategy.
- Local Health Boards drive the development and implementation of local plans to address the rate of attrition focusing on areas such as:
 - staff wellbeing
 - early identification and intervention
 - career pathways and professional development
 - staff engagement
 - staff communications.



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INTRODUCTION

In advance of the May 2021 election campaign for the Welsh Parliament, the Royal College of Nursing (RCN) Wales called for the next Welsh Government to ensure safe and effective care in our NHS with enough nurses to deliver it. One of the specific key demands in its manifesto was for “a national nursing retention strategy for the NHS with increased access to flexible working as one of the policy drivers.”¹

This call was in recognition of one of the challenges facing the NHS, namely, how to ensure the service retains as well as recruits the right number of registered nurses into the service. RCN Wales has commissioned this report to examine whether there is a body of evidence pointing to a range of common success factors in strategies aiming to retain nurses in the profession. And if those factors exist, how were they applied and what evidence is there of their success?

METHODOLOGY

This report is based on data gathered over two phases of research.

The first phase was a literature review extending across the UK and internationally to explore the reasons for high staff turnover in health care and whether there were examples, case studies of organisations that had sought to address this problem with specific steps. As part of this first phase, we also considered the position in Wales and examined the range of discussions and actions by those responsible for delivering local health services, assessing how matters relating to the workforce were considered by the boards and whether specific actions had been taken.

The second phase engaged directly with frontline nursing staff from different parts of Wales in a focus group to check the findings from the literature review and to receive their input on the key challenges that need to be addressed.

¹ RCN Wales. (2020). *Manifesto 2021: Vote for Nursing*.

BACKGROUND

The NHS is one of the biggest employers in the world and health care is one of the most challenging of work environments. Nursing is one of the most pressurised of professions within our hospitals, communities, and care services, delivering care to millions of people in the UK.

In 1949, one year after the creation of the NHS, there were 125,752 whole time equivalent nurses and midwives working in hospitals, treating 2.9m inpatient cases² and 6.1m outpatients. The creation of the NHS also marked the start of a workforce challenge that would continue to the present day, a shortage of nurses. The RCN reported that from September 2017 to September 2018 there were 2,532 more leavers than joiners in the registered nursing workforce. As a result, there were approximately 40,000 unfilled registered nurse vacancies in 2019.³

In 2020, across the UK there were 669,600⁴ nurses working in the NHS, who as part of clinical teams, work to provide safe and effective care for the millions of people who use its services. According to the Nursing and Midwifery Council⁵ this rose to 681,527 at the end of March 2021, with 35,374 nurses registered in Wales and 419 with dual nursing and midwifery roles. In 2020/21, 1,458 nurses joined the register for the first time and 1,243 left. Whilst there was an overall gain for the profession it is only marginal and data does not provide details of those leaving, or which parts of the NHS lost nurses.

However, the number of those leaving, which mirrored the previous year, does not explain the practical difficulties caused by attrition. Not all nurses leaving and joining the register will be like for like in terms of experience and training. The impact of staff turnover and losing people from service is not uniform.

The figures do not provide us with a complete picture. We do know that many of those who join the profession consider leaving at some point in their career and a proportion do so within the first two years. The turnover of nurses and the challenge of retention affect the development of our healthcare workforce and the delivery of clinical care. A critical time for turnover of nurses is during the first year after qualification, and whilst “interventions to reduce turnover and increase retention have been implemented...there is little understanding of which characteristics of these interventions contribute to their success.”⁶

² Rivett, G. (n.d.). *1948-1957: Establishing the National Health Service*. Nuffield Trust. Retrieved January 31, 2022, from <https://www.nuffieldtrust.org.uk/chapter/1948-1957-establishing-the-national-health-service#hospital-and-specialist-services>

³ Senek, M., Robertson, S., Ryan, T., King, R., Wood, E., Taylor, B., & Tod, A. (2020). Determinants of nurse job dissatisfaction - findings from a cross-sectional survey analysis in the UK. *BMC Nursing* 19(88). <https://doi.org/10.1186/s12912-020-00481-3>

⁴ Statista. (2021). Annual number of nurses in the United Kingdom (UK) from 2010 to 2021. Retrieved January 31, 2022, from <https://www.statista.com/statistics/318922/number-of-nurses-in-the-uk/>

⁵ Nursing and Midwifery Council. (2021). *The NMC Register: Wales 1 April 2020 – 31 March 2021 [data report]*. Retrieved January 31, 2020, from <https://www.nmc.org.uk/globalassets/sitedocuments/data-reports/annual-2021/0005d-nmc-wales-register-2021-web.pdf>

⁶ Brook, J., Aitken, L., Webb, R., McLaren, J. & Salmon, D. (2019). Characteristics of successful interventions to reduce turnover and increase retention of early career nurses: A systematic review. *International Journal of Nursing Studies*, 91,47-59. <https://doi.org/10.1016/j.ijnurstu.2018.11.003>



Examining how health boards are complying with the requirements of the Nurse Staffing Levels (Wales) Act 2016, *Progress and Challenge* (a 2019 RCN Wales report)⁷ identified that a core weakness in NHS Wales was the lack of a nursing retention strategy to deal with the challenges of sustaining and supporting those who enter the profession.

Employers, health boards and the Welsh Government have expressed their support of the concept but seem to lack knowledge of, and evidence for, specific policies to improve retention. RCN Wales has commissioned this paper to explore whether a nurse retention strategy for the whole of Wales could work: one that can be translated locally, evidenced by a range of success factors, with policy options and an evidence base to secure improvements. Critically, this is based on case studies from around the UK and oversees confirming what works in boosting retention in the profession.

This report examines evidence for successful tactics and best practice in nursing retention policy in the UK. It will examine examples from Wales and the UK, outlining trends in (and reasons for) nurses leaving and/or staying with their employer, the wider NHS, and the profession.

THE CHALLENGES WE FACE

According to HEIW, the World Health Organization believes that there will be a worldwide shortfall of 18 million health workers by 2030, and that “all levels of socio-economic development face to varying degrees, difficulties in the education, employment, deployment, retention, and performance of their workforce.”⁸

HOW STAFF VIEW THEIR ROLES

The RCN Employment Survey in 2019 consulted with 8,307 members, including 897 from Wales, examining their experiences and views in five key areas: working patterns and workload; pay, earnings and additional work; the nature of work and views about nursing; physical and verbal abuse and bullying; education and training. Nurses in Wales will have contributed to this study.

The report goes into detail, and despite demonstrating a passion and commitment to the value of nursing, many members are indicating a range of concerns that could so easily lead to people leaving the profession. Many nurses have worked longer shifts, for no additional pay, and often at times when they have been unwell. It was reported that 37% of the interviewees stated they were looking for a new job. When asked about the type of job they were seeking, 73.6% said they wished to work within the NHS and out of that figure, 31.7% wanted a similar job and 41.9% wanted a different one.

⁷ RCN Wales. (2019). *Progress and challenge: the implementation of the Nurse Staffing Levels (Wales) Act 2016*. <https://www.rcn.org.uk/professional-development/publications/009-905-1>

⁸ Health Education and Improvement Wales. (2020). *A healthier Wales: our workforce strategy for health and social care*. Retrieved January 31, 2020, from <https://heiw.nhs.wales/files/key-documents/workforce/workforce-strategy-for-health-and-social-care-final-pdf/>

The most common reasons given for seeking a new role are negative ones, including feeling undervalued (72%), stress levels (52%) and not feeling supported by managers (52%). These factors are clear determinants which underpin the challenge of understanding why many nurses consider leaving and, in many cases, do leave. They also help to explain how certain areas of the UK have chosen to respond to the challenge of nurse attrition. The lack of accurate data around attrition is problematic and we do not have nationally published figures for nursing vacancies in the NHS.

The nursing vacancy rate is a critical indicator of the pressure specific health boards or disciplines are under. It is published in the other countries of the UK. RCN Wales estimated there is "a minimum of an estimated 1,612 nurse vacancies in NHS Wales."⁹ We have been able to draw this figure together as an estimate from several sources which demonstrates how difficult it is to accurately pinpoint the nursing vacancy rate.

Managing a substantial workforce whilst ensuring the right number of appropriately trained staff is employed is a continuous human resource problem. Those gaps are largely filled by agency staff and bank nursing. All health boards incur expenditure as a result.

MANAGING BUDGETS AND THE USE OF AGENCY NURSING

One of the consequences of managing a large workforce in a challenging work environment, apart from the constant requirement of understanding how to motivate and support our nursing staff, is that all too often there are significant costs associated with filling the gaps in nurse numbers due to staff absences. As sickness rates have been a particular problem in the NHS, the use of agency nursing has been on the increase, along with the resources required to pay the bill.

The six largest health boards in Wales have reported¹⁰ increases in agency nursing expenditure in 2018/19 compared to previous figures. Collectively in 2019 they spent £69.04m on agency nursing (see table below).

Year	Total cost	Difference (on previous year)
2016	£54.58m	
2017	£52.37m	-£2.21m
2018	£59.1m	+£6.64m
2019	£69.04m	+£9.94m

Source: Wales Online

There have been steady increases in the overall costs of agency nursing, and this is more of a challenge in certain health board areas such as Betsi Cadwaladr, Hywel Dda and Cwm Taf Morgannwg. Since 2016 the overall cost has increased by £14.46m (26.5%).

⁹ RCN Wales. (2020). *The Nursing Workforce in Wales 2020*.

¹⁰ Smith, M. (2020, February 25). The staggering amount spent on agency nurses to keep the Welsh NHS running. *Wales Online*. <https://www.walesonline.co.uk/news/health/agency-nurses-wales-nhs-health-17777702>



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In *Progress and Challenge*,¹¹ RCN Wales sets out the ways in which the Local Health Boards have implemented the legislation to improve the numbers of nurses in adult surgical and medical wards. Each health board in Wales has faced several challenges in recruiting and retaining an appropriate number of nursing staff and have approached the challenges involved differently.

In addition to this report, we have identified a range of health board updates setting out the recent challenges during the pandemic, and health boards' specific strategies in response.

All health boards focus on the workforce. All must report on a variety of challenges in ensuring the right number and mix of workforce, and to differing extents refer to work undertaken to address recruitment and retention.

WHAT DO SUCCESS FACTORS LOOK LIKE AND WHAT HAS BEEN TRIED BY OTHERS?

There are a range of reports and case studies which point to different actions being advanced by health bodies to address retention. In this section we have summarised the key findings according to the broad themes of the activities. Where available we have included any outcomes and results to evidence the impact on the profession and overall rates of retention.

Health Education England (HEE) states, in their report *Growing Nursing Numbers: A Literature Review on Nurses leaving the NHS*,¹² that:

“[a] nurse retention strategy that incorporates a number of options... is likely to be successful in reducing turnover. Focusing efforts initially around newly qualified nurses and specific branches with high turnover should be the first step. This could also enable organisations to evaluate which strategies are the most effective.” (p. 2)

HEE also commissioned research in 2020¹³ to:

- Understand what drives someone to enter the nursing profession, what causes dissatisfaction and potentially exit from the NHS.
- Understand any important influencing factors such as career stage, setting, speciality, seniority, support from the team, culture and leadership.
- Understand spontaneous ideas for retention and support.
- Identify responses to ‘motivation themes’.
- Identify responses to ideas/case studies of interventions to encourage retention, for example, induction, wellbeing support, mentoring, technology (such as wellness apps), coaching approaches.

¹¹ RCN Wales. (2019). *Progress and challenge: the implementation of the Nurse Staffing Levels (Wales) Act 2016*. <https://www.rcn.org.uk/professional-development/publications/009-905-1>

¹² Health Education England. (2014). *Growing nursing numbers: A literature review on nurses leaving the NHS*. <https://www.hee.nhs.uk/sites/default/files/documents/Nurses%20leaving%20practice%20-%20Literature%20Review.pdf>

¹³ NHS England. (2020). *Mullen Lowe research summary – June 2020*. <https://www.england.nhs.uk/wp-content/uploads/2020/12/Mullen-Lowe-Research-Summary-June-2020.pdf>

The research study concluded that several factors would make a difference to the working lives of nurses and that solutions would be needed throughout the nursing journey to be effective. It was acknowledged that offsetting the risk of nurses contemplating leaving the profession would not just happen in one day.

The research was clear in that there is a high degree of consistency in the factors nurses believe will make a difference to their working lives. In fact, this consistency of opinion is explored further in this report where we discuss the views of those nurses who attended our focus group session. The interventions that would help to reinforce their sense of value are based on the consistent themes that have emerged in the HEE research, including:

- **Skills and training development** – there is strong interest in individual career style coaching and input to help guide nurses through their career, a ‘nursing possibilities resource’ and training for emergent leaders who are transitioning from senior clinical roles to leadership with managerial input.
- **Culture** – support to create strong teams and responsive management and a more open culture, to set the tone from above especially for when things go wrong.
- **Health and wellbeing** – welcomed as good support to wider initiatives, but basic changes to working conditions and breaks are needed as key good foundations.
- **Benefits** (significantly) always positioned as of least relevance, but a desire for flexible working and the ability to achieve work life balance is important and offering any special treatment/discounts is likely to be well-received.

Case studies

We have identified a range of organisations who have collated case studies, including the Association of UK University Hospitals, and the NHS Employers.

The Association of UK University Hospitals on the Medical Schools Council website published a *Nurse Retention Best Practice Guide*¹⁴ by their Deputy Directors of Nursing Group in 2017. The Association asked all NHS trusts in England to submit case studies indicating steps taken to address nurse retention. In examining the case studies, we have grouped them according to the themes of employment flexibility, a strategic focus by health organisations, better engagement with staff, and better communications.

Employment flexibility

The University College London Hospitals NHS Foundation Trust set up a ‘Nurse Internal Transfer Scheme’ to enable nurses to move sideways into a different specialty, and Sheffield Teaching Hospitals NHS Foundation Trust established a ‘Transfer Register’ for Band 5 Registered Nurses and Band 2 Clinical Support Workers. The aim of their initiative was to retain staff within the organisation by enabling transfer to another specialty without the need to follow normal recruitment procedures. The case studies highlighted several outcomes that helped to both retain nurses in their local health services, and to identify other challenges and opportunities, including:

¹⁴ AUKUH Deputy Directors of Nursing Group. (2017). *Nurse Retention Best Practice Guide*. Association of UK University Hospitals. <https://www.medschools.ac.uk/media/2326/aukuh-nurse-retention-guide.pdf>



- Increased retention of employees where the schemes have encouraged staff to stay within the organisation even if they leave their original specialty.
- Reduction in time-to-hire as the transfer process requires no pre-employment checks.
- Promotion of hard-to-recruit areas to individuals looking for a specialty change.
- Identification of specialties that may be heading for “crisis” if a high number of requests for transfers are logged.
- Discussion encouraged between staff and managers about the working environment and how to better retain staff.
- Amongst nursing students there is growing awareness of the schemes, which some cited as a reason for choosing their Trust.

A strategic focus by health organisations

Some case studies pointed to specific groups established by NHS bodies to address staff retention and the importance of board leadership as referenced by the Health Foundation report, *A Critical Moment: NHS Staffing Trends, Retention and Attrition*¹⁵ looking specifically at examples amongst NHS trusts in England:

“There is some evidence that this decline in stability and turnover can be slowed. Emerging evidence from NHS Improvement’s retention programme suggests that through data analysis, the engagement of the board and a focus on retention, trusts can improve their retention rates.”

The Newcastle Upon Tyne Hospitals NHS Foundation Trust set up a Nursing and Midwifery Recruitment and Retention Steering Group to enhance and optimise current recruitment and retention in line with the Trust’s strategy. The group ensures key documentation and data relating to nursing and midwifery staffing is up-to-date, robust, and compliant with mandated requirements; monitors vacancies and turnover; oversees and guides nursing and midwifery recruitment processes; and monitors progress against agreed annual priorities. The outcomes seem somewhat vague beyond providing a focus and oversight.

The Imperial College Healthcare NHS Trust has set up a recruitment and retention project to develop, drive and monitor the implementation of a recruitment and retention strategy for nurses and midwives in Bands 2–6. Key outcomes and benefits appear to include:

- Reduction of vacancy and turnover rates.
- Divisional engagement in developing local plans to address recruitment and retention issues.
- Redesign of exit survey to better understand how to retain staff.
- Development of a toolkit and masterclasses to support managers in improving employee engagement and satisfaction.
- Increased focus on hard-to-recruit areas.
- Increased number of student midwives and nurses moving into employment.
- Doubling preceptorship programmes offered to newly registered nurses and ensure staff are given study leave to attend.

¹⁵ Buchan, J., Charlesworth, A., Gershlick, B., & Seccombe, I. (2019). *A critical moment: NHS staffing trends, retention and attrition*. The Health Foundation.
https://www.health.org.uk/sites/default/files/upload/publications/2019/A%20Critical%20Moment_1.pdf

Better engagement with staff

Nottingham University Hospitals NHS Trust formalised a new nursing and midwifery talent management strategy, underpinned by research findings that identify what clinical nurses in Bands 5–7 consider important for developing and retaining talent in nursing. The outcomes reported include:

- Greater involvement, engagement and retention within the registered nursing workforce.
- Attracts new recruits who aspire to international excellence in nursing.
- Provides clearer access to career development and careers guidance.
- Retention of the older workforce through recognition of their knowledge and skills, and by offering a new career pathway.

Better communications

The University Hospital Southampton NHS Foundation Trust established a dedicated retention hotline to support staff that were considering leaving the Trust. The ‘Thinking of Leaving’ hotline was set up in November 2015, and is held within HR as part of the wider resourcing team.

The aims of the hotline were to pre-empt and identify avoidable leavers, use the breadth of opportunity across the Trust to help prevent avoidable leavers, provide a touchpoint independent from the line manager to enable staff to discuss issues influencing their decision to leave the organisation, and inform the development of longer-term strategies to retain staff.

The outcomes reported include:

- Some prospective leavers can be encouraged to stay by providing a wider overview of Trust-wide opportunities.
- The Trust has more granular information about reasons for leaving, which previously had not been captured fully on electronic systems.
- The Trust has the capability to change what might previously have been considered as unavoidable reasons by addressing them through longer-term retention and recruitment strategies.

The University of Bristol NHS Foundation Trust has implemented a Trust-wide Preceptorship Programme for all newly qualified practitioners to support them in delivering safe, effective, patient-centred care, and to guide their professional development. Newly qualified practitioners are expected to start the programme within two months of joining the Trust and are required to attend six sessions in their first six months, and a seventh session within nine months of commencing employment. The sessions cover accountability, managing difficult conversations, quality and safety in the NHS, compassion in practice, leadership, preparing for first appraisal, CPD and career opportunities, managing self and others.

The NHS Employers website also contains a range of recent case studies where bodies have taken positive steps to address retention.



One of those case studies in Lincolnshire¹⁶ saw the United Lincolnshire Hospitals NHS Trust develop a detailed retention action plan in 2018 which outlined the steps the Trust could take to reduce nurse turnover rates. The aim was to address the challenge at all stages of nurses' careers. The target areas for interventions were identified based on the findings from extensive staff engagement, with the Trust focusing activity across all stages of a nurse's career.

There were a range of key benefits and outcomes:

- The creation of a retention action plan which included initiatives focused on four key areas of nurses' careers: supporting new starters, staff mid-career needs, those over the age of 50, and those leaving the Trust.
- Many wards have adopted the use of self-rostering and data from staff surveys shows that there has been an increase in staff satisfaction on the wards, and a reduction in time spent on finalising the roster. Feedback suggests that it has reduced sickness absences.
- All staff members that have had 'itchy feet' conversations have stayed with the Trust.
- Changes to the leavers process has resulted in an increase in completion rates of exit surveys, from 12% to a response rate of 38%.

WHAT DOES THE WELSH POLICY CONTEXT TELL US?

Welsh Government

The Welsh Government does not have an overarching nurse retention strategy and no commitment has been made in the 2021 Welsh Parliamentary election. The responsibility to maintain and recruit a sufficient supply of nursing and other staff critical to the delivery of health services falls to Local Health Boards. There have been a variety of initiatives focusing on recruitment such as the *Train, Work, Live* campaign.

The Chief Nursing Officer's Nursing and Midwifery Priorities for 2019–2021¹⁷ set out the strategic goal to "realise the full potential of the nursing and midwifery professions in order to meet, in partnership with others, the changing health and well-being needs of people living in Wales," and in doing so provides a useful focus on eight themes, some of which would be useful in the context of retention:

- professionalism
- voice and leadership
- workforce and education
- informatics
- research, development and innovation
- promoting population health and wellbeing
- quality and safety of care
- promoting integration of care.

¹⁶ NHS Employers. (2020). *Improving retention at all stages of nurses' careers*. United Lincolnshire Hospitals NHS Trust. Retrieved January 31, 2022, from <https://www.nhsemployers.org/case-studies/improving-retention-all-stages-nurses-careers>

¹⁷ Chief Nursing Officer. (2019). *CNO Priorities 2019–2021*. Welsh Government. <https://gov.wales/sites/default/files/publications/2020-01/cno-priorities-2019-2021%20.pdf>

Health Education and Improvement Wales

HEIW and Social Care Wales published their *Health and Social Care Workforce Strategy*¹⁸ in October 2020. The clear intention of the strategy is to put the wellbeing of staff at the centre of measures to support the workforce where the aim is to deliver “an inclusive, engaged, sustainable, flexible and responsive workforce in health and social care.”

The strategy refers to the need to create a compassionate culture, addressing current challenges and laying the groundwork to prepare those working across health and social care for the challenges of the future, in an environment that is subject to constant change and pressure.

The refreshing overview put forward in the strategy is highlighted in the statement below:

“Many of our future workforce are with us today, and retaining our workforce is as important as recruiting. The actions in each of the seven themes, together with our commitment to supporting the wellbeing of the workforce, will work together to improve the retention of our current workforce, as well as attracting new people into the health and social care workforce. This strategy is not just about ‘more of the same’ – existing approaches are clearly not working, or not working well enough.”

The strategy sets out seven themes to be underpinned by a series of implementation plans and specific actions. The themes mirror some of the thematic approaches pursued elsewhere in delivering programmes of work to support nurse retention, and as seen in the case studies further on in this report, there are clear synergies which would provide a useful steer to the development of any national strategy.

THEME	DESCRIPTOR
1. An Engaged, Motivated and Healthy Workforce	By 2030, the health and social care workforce will feel valued, fairly rewarded and supported wherever they work.
2. Attraction and Recruitment	By 2030, health and social care will be well established as a strong and recognisable brand and the sector of choice for our future workforce.
3. Seamless Workforce Models	By 2030, multi-professional and multi-agency workforce models will be the norm.
4. Building a Digitally Ready Workforce	By 2030, the digital and technological capabilities of the workforce will be well developed and in widespread use to optimise the way we work, to help us deliver the best possible care for people.
5. Excellent Education and Learning	By 2030, the investment in education and learning for health and social care professionals will deliver the skills and capabilities needed to meet the future needs of people in Wales.
6. Leadership and Succession	By 2030, leaders in the health and social care system will display collective and compassionate leadership.
7. Workforce Supply and Shape	By 2030, we will have a sustainable workforce in sufficient numbers to meet the health and social care needs of our population.

¹⁸ Health Education and Improvement Wales. (2020). *A healthier Wales: our workforce strategy for health and social care*. Retrieved January 31, 2020, from <https://heiw.nhs.wales/files/key-documents/workforce/workforce-strategy-for-health-and-social-care-final-pdf/>

During the consultation on the draft, the Nursing and Midwifery Council (NMC) issued their response¹⁹ and made a range of specific recommendations in response to the challenge of retention, stating that the strategy should “consider measures to support newly qualified professionals as they take the first steps in their career.”

The NMC’s recommendations to aid nurse retention included:

- Nurses and midwives should have a period of preceptorship when commencing employment, allowing them access to a named individual in the same field of practice who can be called upon to provide guidance, help, advice and support. Whilst preceptorships can vary in length, “a three-year commitment that supports new entrants through to a successful first revalidation could make a significant difference to early career retention.”
- The strategy should also consider the ‘affirmed practitioner’ who has built on early career learning, and potentially developed some specialism. The NMC outlined how this group is at risk of experiencing burnout, and without investment into training for new roles as care is transformed there is a risk of losing this group from frontline practice.
- The importance of continued learning and development once staff have commenced their careers and the importance of this with a growing and ageing workforce should be recognised. The role of the workforce in supporting the development of the new generation of nursing students is also referred to, as “good quality opportunities for post-registration learning lead to a more satisfied workforce able to provide good quality care.”
- Reference is also made to the importance of revalidation alongside post-registration learning and development in supporting staff retention. There is a requirement for all professionals to revalidate every three years by meeting requirements including those for post-registration learning hours, reflection and feedback. Revalidation is clearly seen as a supportive process which leads to professionals remaining up-to-date where reflection and the sharing of best practice is encouraged. The NMC said that “we know from independent research into the first two years of revalidation that it can play a role in the retention and development of the workforce.”

¹⁹ Nursing and Midwifery Council. (2019). *NMC response to Health Education and Improvement Wales' (HEIW) and Social Care Wales' (SCW) consultation on the development of a Health and Social Care Workforce Strategy*. <https://www.nmc.org.uk/globalassets/sitedocuments/consultations/nmc-responses/2019/nmc-response-to-scw-consultation-on-health-and-social-care-workforce-strategy-10.05.19.pdf>

THE STRATEGIC AND OPERATIONAL RESPONSE OF LOCAL HEALTH BOARDS

Swansea Bay University Health Board

The previous Abertawe Bro Morgannwg Health Board in their report in 2018²⁰ on Workforce Strategy and Priorities from the Integrated Medium Term Plan (IMTP) set out a number of steps to positively affect both recruitment and retention, including:

- increased numbers of students in relevant health and life science courses
- local and overseas recruitment campaigns for nursing and medical staff
- develop the Board's recruitment strategy
- implement the Board's nursing and midwifery strategy
- implement the working longer readiness tool
- maximise retire and return policy
- monitor staff experience strategy
- support staff to train more flexibly to become registered
- support the Welsh Government initiative 'Train, Work, Live'
- undertake exit interviews and develop action plans from the results.

In July 2019 an update on progress with the IMTP was made to the Board.

This contains no mention of a workforce recruitment or retention strategy for staff and no mention of nursing. It did state that an engagement process with 'Service Improvement Boards groups and individuals' was held in which the common theme of the need to recruit and stabilise the workforce was identified.

At this stage very little progress appears to have been made. Since then, the local authority areas of Swansea and Neath Port Talbot have become Swansea Bay University Health Board with the Bridgend local authority area joining Cwm Taf to become Cwm Taf Morgannwg University Health Board

Within the work of the new Swansea Bay Health Board their *Workforce and OD Framework* report in May 2019²¹ set out the challenge they face outlining how the "turnover rate for all staff within the Health Board (excluding junior medical and dental staff) currently stands at 7.71% (December 2018) and has fallen by 1.3% over the last 12 months."

The paper also sets out how "approximately 70% of General Practice Nurses are over the age of 45 (HEE workforce toolkit 2016), with 27% of those over the age of 55 and preparing for retirement", and that retention of the nurses was "vital in order to train the next generation."

²⁰ ABUHB Workforce and Organisational Development Committee. (2018). *Workforce Strategy and Priorities from the Integrated Medium Term Plan (IMTP)* [board paper]. Aneurin Bevan University Health Board. <https://sbuhb.nhs.wales/about-us/key-documents-folder/workforce-and-od-committee-papers/january-2018-workforce-and-od-committee/13-workforce-strategy-and-priorities-from-the-imtp-pdf/>

²¹ Swansea Bay University Health Board. (2019, May 30). *Workforce & OD framework* [board paper]. <https://sbuhb.nhs.wales/about-us/key-documents-folder/board-papers/may-2018-board-papers/4-1-w-and-od-framework-pdf/>



The paper also states that “whilst the overall turnover rate is not disproportionately high, an analysis has indicated that there are certain hot spot areas that need to be addressed and includes in particular the number of nursing staff that leave within two years of appointment”, which bears out the experiences elsewhere in the NHS where staff leave within a couple of years of commencing their employment.

The report sets out the equal importance of both retaining and recruiting staff with several key steps that the Health Board is advancing, based on a view that retention is key:

“To ensure we understand and address the reasons that staff choose to leave the organisation the following actions will be undertaken:

- Implement consistent organisational wide electronic exit interview process.
- Implement a systematic, electronic exit interview process to highlight reasons for leaving and development of strategies to improve retention rates.
- Undertake a specific analysis of leavers’ data, particularly those in the first 12 to 24 months of commencing employment to identify hotspot areas.
- Develop strategies to ensure excellent staff experience.”

The report is equally clear in the way that success will be measured, including a reduction in the turnover rate experienced within the first two years of service.

Aneurin Bevan University Health Board

In May 2019 the Board reported that they had 330 Whole Time Equivalent (WTE) Registered Nursing vacancies.

In the Health Board’s Annual Report 2020–2021²² they refer to the challenges of recruitment which follows the actions that had been reported in 2018. Along with other boards, areas of ongoing concern have been the risk of retirement by staff with significant proportions of the workforce potentially retiring at the same time. In addition to maintaining their focus on intensive recruitment campaigns for nurses, Health Care Support Workers and all vacancies, they also confirmed that they had launched a new retention framework to ensure the Board retains the valuable skills and experience of the workforce.

The annual report outlines how the framework supports staff to have a voice and be engaged, supported and developed whilst maintaining their wellbeing to reach their full potential. It is not clear as to the objectives of the retention framework, and whether they have measured any successes. In its April 2021 report, the Board’s People and Culture Committee²³ refers to the People Plan and how it is influenced by a suite of workforce data collected to inform their strategic direction.

²² Aneurin Bevan University Health Board. (2021). *Annual report and annual accounts*. <https://abuhb.nhs.wales/files/key-documents/annual-reports/aneurin-bevan-university-health-board-annual-report-and-annual-accounts-2020-pdf/>

²³ Aneurin Bevan University Health Board. (2021, April 15). *People and Culture Committee, Thu 15 April 2021..* Retrieved from <https://abuhb.nhs.wales/files/key-documents/other-reports/people-amp-culture-committee-15th-april-2021-v1-pdf/>

There is a focus on the importance of staff experiences and the impact on patient experience, and this health board is clearly sighted on the wellbeing of staff as a critical factor in delivering a sustainable workforce.

The report outlined a series of ‘strategic programmes’ such as employee wellbeing, agile and new ways of working, reviewing the shape of the workforce, recruitment and retention, and learning and development, amongst others.

It is difficult to quantify how successful this work has been to date and for all parts of the NHS the considerable effort in sustaining staffing has taken new prominence during the Covid-19 pandemic and subsequent mass vaccination programme, one based on the extensive organisational reaction to a highly pressurised and changing environment. However, the strategic focus here on the wider determinants of workforce wellbeing do give an indication as to those matters that are deemed to be of importance in supporting the workforce.

Betsi Cadwaladr University Health Board

It is clear from the analysis of the Board papers pre and during the pandemic that they were facing significant staff challenges prior to the onset of Covid-19. Their Board meeting in January 2019²⁴ cited several workforce capacity issues where challenges on a short- and long-term basis were experienced due to the demand on services. The Board paper said:

“We currently replicate hospital services across three or more sites and face recruitment challenges in moving towards new models of primary care. We only deliver a small number of specialist services which attract professionals to work in North Wales. This has resulted in significant gaps in our medical and nursing workforce. In order to provide services, we are reliant on temporary staff which attract higher costs” (p. 96).

Their Board meeting in March 2019²⁵ (p. 367) highlighted a range of secondary care recruitment and retention challenges with “significant issues with recruitment and retention in a number of areas.” The report also states that “retention of new staff in the first two years of service is poor in a number of specialities.”

The Partnerships, People and Population Health Committee²⁶ at its meeting in October 2021 highlighted the recruitment challenges and delays in recruitment due to the pandemic but also outlined the work optimisation programme and the inherent risk to the Local Health Board in terms of staffing. The Board’s ‘People & Organisational Development Strategy – Stronger Together’ is built around five strategic, high-level themes.

The Board papers do not provide any analysis of the factors which cause problems either in recruiting or in retaining staff.

²⁴ Betsi Cadwaladr University Health Board. (2019, January 24). *Health Board public meeting - 24 January 2019*. Retrieved from <https://bcuuhb.nhs.wales/about-us/health-board-meetings-and-members/health-board-meetings/health-board-meetings/24-01-2019-agenda/>

²⁵ Betsi Cadwaladr University Health Board. (2019, March 3). *Health Board public meeting - 3 March 2019*. Retrieved from <https://bcuuhb.nhs.wales/about-us/health-board-meetings-and-members/health-board-meetings/health-board-meetings/agenda-health-board-28-3-19/>

²⁶ Betsi Cadwaladr University Health Board. (2021, October 14th). *People and Population Health Committee 14 October 2021*. Retrieved from <https://bcuuhb.nhs.wales/about-us/committees-and-advisory-groups/partnerships-people-and-population-health-committee/agenda-bundle-ppphc-14-10-21-v1-0-public-session-pdf/>



Cardiff & Vale University Health Board

According to their Annual Report 2020–2021²⁷ “the nursing and midwifery registered staff and unregistered nursing staff make up just over 43% of the total workforce. Given there is a recognised national shortage of registered nurses, the Health Board has made nurse sustainability a high priority on its workforce agenda.”

Their Integrated Medium Term Plan 2018–2021²⁸ sets out their Workforce and Organisational Development Framework stating that “ensuring sustainability of current and future workforce supply, especially in nursing and medical roles, remains a priority for the UHB in 2019 and beyond.” The plan sets out a range of actions to:

- deliver Project 95% (which was successful in recruiting and filling substantive posts) and sustain Project Switchover
- continue to deliver Medical Training Initiative strategy
- monitor the implementation of the Welsh Government Agency and Locum Circular, recruit hard to fill vacancies
- develop talent management and succession planning for senior management posts.

The Health Board also confirmed in their IMTP that “recent work has been focussed on the development of a Nurse Retention Plan to ensure that when [the Health Board] recruit[s the Board] also retain[s] ... nurses. [The Board is] also having great success with [its] nurse adaptation programmes and [has] a ‘waiting list’ of people who wish to join these. Further cohorts are planned for 2019.”

The Service Delivery Plan 2020–2021²⁹ sets out the work the Health Board has undertaken to recruit clinical staff during the pandemic and the steps taken to respond to the emerging concerns of wellbeing and staff support.

²⁷ Cardiff and Vale University Health Board. (2021). *Annual Report 2020-21*. <https://cavuhb.nhs.wales/files/board-and-committees/annual-reports/annual-reports-committees-2020-21/cardiff-and-vale-uhb-annual-report-2020-21/>

²⁸ Cardiff and Vale University Health Board. (2019). *Integrated Medium Term Plan 2019-2022 - Workforce and OD plan*. <https://cavuhb.nhs.wales/about-us/publications1/cardiff-and-vale-integrated-medium-term-plan/integrated-medium-term-plan/integrated-medium-term-plan-2019-2022-workforce-and-od-plan/>

²⁹ Cardiff and Vale University Health Board. (2019). *Integrated Medium Term Plan 2019-2022 - Service Delivery 2021*. <https://cavuhb.nhs.wales/about-us/publications1/cardiff-and-vale-integrated-medium-term-plan/integrated-medium-term-plan/service-delivery-in-2020-21/>

Cwm Taf University Health Board

The Board's Assurance Report for 2018–2021 on compliance with the Nurse Staffing Levels (Wales) Act 2016³⁰ confirms a range of both short- and long-term actions to improve the extent to which a sufficient workforce is available to work within the Registered Nurse and Health Care Support Worker posts on both Section 25B wards and across the wider nursing services.

These include:

- The schemes being led by the Workforce and Organisational Development teams and Corporate Nursing to develop and implement innovative approaches to recruitment of Registered Nurses as well as new Health Care Support Workers.
- Continued development of the overseas Registered Nurse campaign including the uplift of Practice Development Nurses to support this programme.
- Establishment of educational partnerships arrangements with the University of South Wales and Swansea University in relation to the creation of new courses to support the extension of the Nurse Staffing Levels (Wales) Act 2016 to include paediatric inpatient wards, the district nursing principles and mental health workstreams.
- Creation of career pathways including exploring opportunities for Band 4 nursing roles to support CTMUHB (Cwm Taf Morgannwg University Health Board) Integrated Health & Care Strategy

An internal audit report in August 2019, *Retention of Nursing Staff (follow-up report) – Internal Audit 19/20*³¹ confirmed that only limited progress had been made against the original recommendations and agreed actions, specifically in relation to the strategy and action plan. Therefore only limited assurance can be given to manage the risks associated with the retention of staff.

Despite having a strategy and plan, progress has been adversely affected, for example by staff with responsibility for key actions moving on to other posts. There has been a lack of progress in advancing the strategy in a sustained and meaningful way.

Previously to this, in January 2019, the Board considered their IMTP document with nursing and midwifery noted as staff groups 'of particular concern'. There are a number of themes common across all health boards including sickness and the age profile of the nursing staff, with a heavy reliance on agency nursing.

³⁰ Cwm Taf Morgannwg University Health Board (2021, May 27). *Three-yearly assurance report on compliance with the nurse staffing levels (Wales) act 2018-2021*. <https://ctmuhb.nhs.wales/about-us/our-board/board-papers/2021-board-papers/27-may-2021/2-2-14a-nurse-staffing-three-yearly-report-uhb-27-may-2021-pdf/>

³¹ Cwm Taf Morgannwg University Health Board. (2019). *Internal audit report: Retention of nursing staff - Follow up*. <https://cwmtafmorgannwg.wales/Docs/Audit%20and%20Risk%20Committee/016%20October%202019/Part%201/4.%20Retention%20of%20Staff%20Follow%20Up%20Internal%20Audit%20AC%202019.pdf>



Hywel Dda University Health Board

The Annual Assurance report³² for 2020-21 on compliance with the Nurse Staffing Levels (Wales) Act reported on the measures and outcomes in implementing the legislation. The report considered by the Board in April 2021 states that:

“Retention of staff has been an equally important strand of seeking to achieve a sufficient nursing workforce during 2020/21 and the WOD [Workforce and Organisational Development] service has led the development of a comprehensive suite of measures and resources aimed at supporting staff to maintain and restore their mental health and well-being during the exceptional challenges of the pandemic period.”

The report sets out a range of steps to support the workforce, to ensure that the legislative requirements were met, including:

- Assessing required nurse staffing levels to identify workforce needs
- Supporting the interviews of hundreds of potential recruits
- Developing new systems for effectively ‘placing’ new recruits to services in greatest need
- Systematically reviewing performance to support contract extensions where appropriate.

The report confirms that work has been undertaken to increase the registered nursing workforce. Some examples of the actions taken include:

- Contacting registrants who returned to the temporary NMC register in Spring 2020, with 18 registrants accepting job offers as a result
- Individual contact with over 150 ‘inactive’ registered nurses who held nurse bank agreements to encourage them into registrant roles during the COVID-19 period at least
- Individual phone calls to recently retired registrants to explore possible return to work opportunities.

These measures have been somewhat effective with an increase in the number of nurses working in their services, with “an additional 88 WTE [Whole Time Equivalent] registered nurses in post in January 2021 (compared to January 2020) and an additional 71 registered nurses with nurse bank agreements in place.” The report, however, goes on to state that:

“despite these efforts, as the budgeted establishment for registered nurse posts has increased by 65 WTE over this time, the impact on the registered nurse deficit across the Health Board’s nursing services has been small (i.e., a reduction in the deficit by 23 WTE), with the Health Board currently holding 408 WTE registered nurse post vacancies.”

³² Hywel Dda University Health Board. (2021, April 13). *Annual Assurance Report on compliance with the Nurse Staffing Levels (Wales) Act (NSLWA) 2020-2021*. <https://hduhb.nhs.wales/about-us/governance-arrangements/board-committees/quality-safety-and-experience-committee-qsec/qsec-qsec-13-april-2021/item-3-2-1-nurse-staffing-levels-wales-act-draft-annual-report-2020/>

In 2019, reports to the Board identified that across the Health Board there were 430 patient care incidents (eg falls, pressure ulcers) where the nurse staffing level was not maintained (and a further 1,474 where no information on this was provided). Of these 430 incidents it was judged that the low staffing contributed to the incident in 108 cases. This is indicative of the challenges presented by lower staff numbers of which health boards are clearly aware.

Early reports also reference actions taken to attempt to boost recruitment including a ‘Made in Hywel Dda’ programme of apprenticeship which can lead to a registered nursing degree. It also lists various recruitment and retention activities by hospital. There appears, however, a lack of strategic and operational emphasis on how retention could be addressed as a specific area of work for the Board.

Powys Teaching Health Board

Reviewing the evidence for the past few years suggests that whilst they are sighted on the challenges, especially the difficulty in recruiting registered nurses, there is little around the potential for a retention strategy.

Their Integrated Medium Term Plan for 2020/21-2022/23³³ states that “it is anticipated that approximately 48% of the nursing workforce could be over the age of 56 by 2024, which increases the risk of reliance on Bank and Agency Workers.” The report goes on to state that “recruitment of clinical staff remains a challenge. There are significant recruitment pressures on [the] medical, nursing, therapies, and allied health professionals workforce in Powys, reflecting the national picture.”

Despite this, there does not appear to be a move towards a strategic plan to retain staff as one of the tools for ensuring the right number of staff, beyond any measures to recruit.

The Board’s Annual Plan 2020–2021³⁴ outlines a range of staffing issues which are the focus of their work including renewing skills mixes and requirements to identify opportunities to utilise the full extent of staff education and experience, multi-disciplinary teams and the introduction of new roles, and maximise opportunities to widen access to roles within Powys, including reviewing their apprenticeship and volunteering programmes.

There is some understanding of some of the measures which might be effective but there doesn’t appear to be a piece of work which reflects on the outcome of staff surveys and the evidence around the sort of actions which might help reduce the rates of turnover.

³³ Powys Teaching Health Board. (2020). *Integrated Medium Term Plan 2020/2021-2022/2023*.

<https://pthb.nhs.wales/about-us/key-documents/strategies-and-plans/powys-teaching-health-board-integrated-medium-term-plan-2020-2021-to-2022-2023/>

³⁴ Powys Teaching Health Board. (2021). *Annual Plan 2021-2022*.

<https://pthb.nhs.wales/about-us/key-documents/strategies-and-plans/powys-teaching-health-board-annual-plan-2021-22/>



WHAT DID NURSES IN WALES TELL US?

Having examined a range of literature, case studies and reports, we tested some of the ideas with nurses in Wales in a focus group to assess those factors which would make the biggest differences to their working lives and address the risk of more of their colleagues seeking employment elsewhere.

There was support for retention to have a national focus with a recognition that leadership was needed to identify how to be better at retaining staff and develop the profession and the working environment of nurses in a way which is attractive to potential new recruits. Broadly, there was a consensus around the need to address nursing, across all settings where the profession should be better supported and valued in their work. The lack of work flexibility, career pathways and development, the few opportunities for nurses to work in different parts of the service, and a lack of engagement/conversations with staff prior to exit to mitigate the risk of departure are all factors which should be explored and addressed in any work to retain staff.

There were some specific recommendations arising from the focus group including:

- developing mentorships to support newly qualified nurses
- rotational work across more than one health board or service setting
- developing a commitment to remain in service for a minimum of two years post qualification but with support and development
- opportunities for shared roles to support flexible working and staff development
- consideration should be given to supporting those with family needs such as nursery support for those with young children.

CONCLUSIONS AND RECOMMENDATIONS

The literature review and the examination of case studies including actions taken by Local Health Boards in Wales and parts of the NHS outside Wales point to a range of strategic and operational initiatives to address the rates of nurse attrition from the service. In many ways there has been a clear focus from health bodies in the UK to identify those issues most likely to be both the cause of nurses reappraising their career options and the solution.

Wales is not without recognition of the national and local work to focus on what is needed to improve the rates of retention in the workforce. Whilst the Welsh Government has not been a key driver in providing a national steer on the strategic importance of nurse retention, HEIW – in its workforce strategy for health and social care – has stepped into the breach and provided an important strategic document on this issue. There is a clear intent to support health bodies to identify the key factors which cause dissatisfaction in the NHS workplace, recognising that retention is as important as recruitment.

The overall workforce development strategy is of course wider than just the issue of recruitment and it naturally cuts across the whole of the Welsh health and social care system, providing key themes and actions which are designed to underpin the entirety of the service. It is also a fact that Wales

does not have a specific nurse retention strategy to sit alongside the wider workforce strategy.

At a local level we have seen a mixed response from Local Health Boards in responding to the myriad of workforce challenges in recent years, not least providing safe services during a global pandemic. All have focused on the need for safe staffing under their legislative requirements, which is to be expected, and recruitment as a substantive strategic issue pre-Covid-19 and during the pandemic naturally consumed Board attention. There is evidence of work programmes linked to the issues which affect the turnover rate; however, this is not consistent and universal.

The case studies, although not vast in number, provide a steer on some of the strategic considerations explored by organisations outside Wales and the actions taken by health bodies to address those areas most relevant to their localities. Where available there are indicators as to the successes of those measures. The mix of both national strategic themes and focused practical action appears to be a feature which if developed further could provide the NHS with a way forward to boost nurse retention without substantively reinventing what has already been considered.

Consequently, we would recommend that:

- 1** Welsh Ministers take a lead in developing a National Retention Strategy building on the work already secured through the HEIW/Social Care Wales workforce development strategy.
- 2** Welsh Ministers ensure that a National Retention Strategy acts as the foundation for locally delivered *Nurse Retention Plans* with leadership from Local Health Boards to set the priorities for their localities, based on the themes in the national strategy.
- 3** Local Health Boards drive the development and implementation of local plans to address the rate of attrition focusing on areas such as:
 - Staff wellbeing to address the causes of physical and mental ill health.
 - Support for early career nurses to support their transition from student to qualified practitioner.
 - Career pathways and professional development to support an agile workforce with flexible working, professional support through mentoring, training, and team building.
 - A mechanism for staff engagement to capture the views and intentions of staff before they become disillusioned and disengaged.
 - Improved staff communications with open and honest conversations with staff about the challenges they face.



•  **SAFE STAFFING SAVES LIVES**
MAE STAFFIO DIOGEL YN ACHUB BYWYDAU

