

# Nurse Retention Best Practice Guide

AUKUH Deputy Directors of Nursing Group

## Overview

This guide features several case studies from the UK's leading research and teaching NHS Trusts. The case studies describe best practice strategies employed by the Trusts to improve nurse retention. Strategies range from facilitating staff engagement to fostering a culture of recognition and reward. Case studies are grouped by region.

*The Association of UK University Hospitals (AUKUH) is the key leadership body across the UK promoting the tripartite interests of university hospitals: service, teaching and research. The high-quality teaching and research conducted within these institutions allows the standard of care provided to the patients they treat to be at the forefront of best practice throughout the UK. This guide has been put together by the AUKUH Deputy Directors of Nursing Group, who support the AUKUH Directors of Nursing Group in influencing national policy and sharing best practice between NHS Trusts across the UK.*

## Introduction

The NHS has an urgent and growing problem of nursing workforce shortages. According to an NHS Employers survey conducted in 2015, 93% of NHS Provider Trusts had workforce shortages. The average vacancy rate was 10% and almost one quarter of NHS Provider Trusts were estimated to have 121–300 FTE (full-time equivalent) vacancies.<sup>1</sup>

This is as much a problem of retention as it is recruitment. According to data from the Nursing and Midwifery Council (NMC) published in 2017, more registered nurses are leaving than joining the profession, a trend which is being seen in the NHS for the first time and is most pronounced for UK nurses and midwives, who comprise approximately 85% of the NMC register.<sup>2</sup> An NMC survey indicates that, excluding retirement, the top reason for leaving the profession was challenging working conditions, including low staffing levels and high workload.<sup>3</sup>

This guide has been put together by the AUKUH Deputy Directors of Nursing group to share some of the strategies Trusts are employing to improve nurse retention. Strategies range from facilitating staff engagement to fostering a culture of recognition and reward. The case studies are grouped into four regions: “North”, “Midlands / East”, “London”, and “South”. Retention rates between regions vary notably. For example, for AUKUH Acute Trusts, highest and lowest retention rates within each region are as follows:

*Highest retention rates within each region by profession:*

<b>Region</b>	<b>Registered nurse</b>	<b>Registered midwife</b>	<b>Healthcare Support Workers</b>
<i>London</i>	83.9%	89.5%	82.9%
<i>Midlands / East</i>	91.8%	93.2%	89.6%
<i>North</i>	90.9%	93.4%	89.6%
<i>South</i>	88.2%	90.5%	88.2%

*Lowest retention rates within each region by profession:*

<b>Region</b>	<b>Registered nurse</b>	<b>Registered midwife</b>	<b>Healthcare Support Workers</b>
<i>London</i>	80.5%	78.7%	75.7%
<i>Midlands / East</i>	86.4%	85.0%	76.8%
<i>North</i>	85.1%	81.6%	81.9%
<i>South</i>	73.3%	84.9%	70.6%

For more information on how the case studies were collected, please go to Appendix 1.

If you have any questions about this guide, please contact [admin@aukuh.org.uk](mailto:admin@aukuh.org.uk).

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<sup>1</sup> NHS Employers (2015): “NHS Registered Nurse, Supply and Demand Survey Findings”, available [here](#).

<sup>2</sup> NMC (2017): “New figures show an increase in numbers of nurses and midwives leaving the profession”, available [here](#).

<sup>3</sup> NMC (2017): “The NMC Register, 2012/13 – 2016/17”, available [here](#).

## Region: London

Case study one: Imperial College Healthcare NHS Trust

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.

### **About the initiative**

A Steering Group, which meets fortnightly, has been established with the following responsibilities:

- Establishing a ‘Year 1 Implementation Plan’ along with work streams to deliver outcomes to improve recruitment and retention across the Trust.
- Identifying Trust deliverables and divisional / local initiatives.
- Sharing good practice across and beyond the Trust.
- Setting and monitoring key performance indicators to evaluate progress.

An Implementation Group (comprising work stream leads, nursing and midwifery representatives, and members of the communication team) has also been established to work with the Steering Group to co-design and agree initiatives. Meetings take place on a monthly basis.

### **Key outcomes and benefits**

- 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 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-qualified nurses and ensure staff are given study leave to attend.

### **Challenges**

- Ensuring there is capacity to develop and deliver local plans.
- Buy-in and commitment from the board to the ward to implement actions.
- Benchmarking performance with other Trusts due to difficulty in obtaining data.

Case study two: University College London Hospitals NHS Foundation Trust

UCLH NHS Foundation Trust has set up a ‘Nurse Internal Transfer Scheme’ to enable nurses to move sideways into a different specialty.

### **About the initiative**

The aims of the initiative are to:

- Retain staff that are interested in developing their career within the Trust through a sideways move.
- Improve job satisfaction whilst supporting personal development and raising morale and confidence.
- Allows nurses to forecast their own career path and benefit from the range of in house opportunities available.

To be eligible employees must have completed their probationary period and have no performance/conduct issues. Before a transfer is considered and agreed, nurses can work a bank shift to trial a specialty of interest to help them decide whether they would like a permanent transfer.

The process for transfer involves the employee registering their interest via an 'expression of interest' form that must be authorised by the employee's line manager. Once received, the areas of interest are aligned with vacancy data. If there is a vacancy, an informal meeting is arranged between the employee and prospective line manager, and a transfer is facilitated accordingly.

Measures have been set up to prevent wards from destabilising with a rise in vacancies in specific specialties. For example, a vacancy rate of over 40% will mean a transfer is delayed until the ward is safely staffed. The maximum transfer period is ten weeks.

#### **Key outcomes and benefits**

- Increased retention of employees.
- 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 high number of request for transfers logged.
- Encourages discussion between staff and managers about the working environment and how to better retain staff.

## Region: Midlands and East

Case study three: Derby Teaching Hospitals NHS Foundation Trust

Derby Teaching Hospitals NHS Foundation Trust has set up an initiative to be the 'employer of choice' to improve recruitment and retention in the nursing and midwifery workforce.

### **About the initiative**

The initiative has five strands.

The first strand is to improve recruitment through strong marketing of the Trust (led by the communications team) and streamlining time to hire periods.

The second strand focuses on engaging the nursing and midwifery workforce by: promoting completion of the staff survey and develop action plans accordingly; offering bi-monthly cascade of the chief executive briefing to teams across the organisation, with opportunities to contribute to discussion and share ideas; using and promoting the use of social media; and offering drop-in clinics to enable staff to consider career development opportunities.

The third strand looks at improving development opportunities for nurses and midwives. This includes: providing strong preceptorship programmes for newly qualified nurses and midwives; developing partnerships with local universities; adoption of new roles such as the trainee nursing associate; providing mentorship, coaching and motivational mapping activities to maximise employee potential; and arranging masterclasses and internal conferences as opportunities for networking.

The fourth strand focuses on recognises and rewarding the nursing and midwifery workforce, for example, through the 'Pride of Derby' award (for which staff are nominated by colleagues, students and patients / families), and student nurse / midwife awards.

The final strand is about promoting the nursing and midwifery workforce reputation. This is achieved by participation in national projects (such as the HEE Pre-Degree Work Experience module), and participation in publicity events such as a 24 hour 'Tweetathon' for International Midwifery Day. The Trust has also been shortlisted by the Nursing Times awards for the last three years.

### **Key outcomes and benefits**

- Ensure the right staff, with the right skills and knowledge are in the right place at the right time.
- Ensure our nurses and midwives are enabled to deliver the golden thread across care pathways and operate within evidence based policies and procedures.
- Ensure patient's experiences are captured and used to continuously improve practice.
- Ensuring our nursing and midwifery workforce are motivated and enabled to progress to their full potential or at the top of their licence.

- Reducing reliance on bank or agency staff and developing clinical leadership, therefore ensuring that the workforce operates within agreed budgets.

#### Case study four: Nottingham University Hospitals NHS Trust

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

#### **About the initiative**

The aims of the talent management strategy are to: recognise, develop and retain a diversity of nursing talent; develop a culture of staff engagement, involvement and professional excellence; raise the awareness of talent management in senior leaders and managers; and evaluate the effectiveness and impact of specific interventions to inform future strategy.

The strategy, having gained approval from the Chief Nurse, Senior Team and Divisional Leads, is now being integrated into the Trust’s 2017–2020 nursing and midwifery strategy.

The strategy supports several specific projects focusing on nurse retention, including:

- Continuing change of culture to an inclusive leadership culture as part of the journey to achieving the American Nurses' Credentialing Centre Magnet standards.
- Clinical rotation programmes for newly qualified nurses, acute care clinical skills simulation course, and external rotations across acute and community settings to support the career development of staff.
- Development of nursing and midwifery ‘Career Coaches’, who once trained via a talent developing training programme, will be available to provide careers guidance to any nurse and midwife.
- A ‘Chief Nurse Excellence in Care – Junior Fellow’ initiative has been set up, supporting Band 5 nurses to secure one day per week over a one-year period, to take on an improvement project identified as having clinical or patient benefit within their specialty. The initiative provides Fellows with leadership and professional skills training, senior coaching opportunities and regular meetings with the Chief Nurse.
- A ‘Chief Nurse Legacy Mentor’ initiative for experienced late-career nurses who are clinical experts within their field but do not want to continue in full-time clinical work. The nurses will receive one day per week to develop education and clinical teaching resources within a defined specialty, and provide leadership and support to the range of learners within the clinical practice environment.

#### **Key outcomes and benefits**

- Greater involvement, engagement and retention within the registered nursing workforce.

- Attracts new recruits who aspire to international excellence in nursing.
- Provide 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.

### **Challenges**

The current NHS financial climate means that all initiatives that require financial investment and staff resource need to demonstrate impact. This can be complex to quantify and provide. However, embedding the initiatives in a longer-term strategy can help put in processes needed to measure and evaluate success.

## Region: North

Case study five: Sheffield Teaching Hospitals NHS Foundation Trust

Sheffield Teaching Hospitals NHS Foundation Trust has set up a ‘Transfer Register’ for Band 5 Registered Nurses (RNs) and Band 2 Clinical Support Workers (CSWs). The aim of the initiative is to retain staff within the organisation by enabling transfer to another specialty without the need to follow normal recruitment procedures.

### **About the initiative**

Any RN or CSW who has been in their current clinical area for over a year and is not currently subject to sickness, capability or disciplinary processes can put their name forward for the transfer register. If an RN or CSW post becomes vacant, it will be filled by any candidate that has stated that they wish to move to that area. If there are no such candidates, external applicants will be considered. Wherever possible, we try to align the transfer of the RN or CSW with the recruitment of a staff member behind them.

RNs and CSWs appointed into a vacancy will normally meet with the receiving Matron beforehand as an opportunity to clarify the role and the expectations of the Matron. In general, no employment checks are undertaken, as these will have been done on initial recruitment to the Trust (though in some cases, an occupational health check will be carried out if it is required by the specialty the RN or CSW is moving into).

### **Key outcomes and benefits**

- It is easy for the applicant to apply to the transfer register and significantly easier than applying for a job in another organisation.
- It streamlines the recruitment of staff by dealing with internal candidates in a ‘lighter’ way than external candidates.
- It allows some flexibility on the release of staff – standard notice periods are eight weeks, but transfers can be delayed beyond this if necessary.
- It encourages staff to stay within the organisation even if they leave their original specialty.
- There is a growing awareness of this scheme amongst student nurses and is a reason that some student nurses are citing in choosing the Trust.

### **Challenges**

- Some specialties are a net exporter, transferring out more staff than they transfer in. As such, many of the staff recruited in by these areas are new to the organisation, meaning that their induction and preceptor burden is greater than that of the specialties which are net importers.
- It can be too easy for staff to move and on occasions staff have transferred and then asked to move back soon after moving.

Case study six: Leeds Teaching Hospital NHS Trust

Leeds Teaching Hospital NHS Trust has developed a culture of empowerment and engagement to foster retention through an initiative called ‘The Leeds Way’, which shapes the vision, values and goals of the Trust.



### **About the initiative**

The Leeds Way was developed in 2014 by engaging staff in a conversation about the vision, values and goals of the Trust. The campaign was fronted by the Executive Team, who visited all departments to ask staff about key improvements that needed to be made and discuss how problems could be fixed. The ‘Wayfinder’ crowd sourcing platform was also used to engage staff, and a total of 450,000 contributions were received. Outputs were further refined at two large-scale engagement events.

The Leeds Way Values – patient-centred, fair, collaborative, accountable, empowered – have been fully embedded in every aspect of the Trust, including internal and external communications, staff appraisal and development, recruitment, and future strategic planning.

### **Key outcomes and benefits**

- Family and Friends Survey results have been improving year on year – Leeds Teaching Hospital NHS Trust is now the number one rated Trust in West Yorkshire.
- Staff feel ownership of the values.
- The values are simple and achievable, relevant to every member of staff in their own field.
- The values are regularly demonstrated by the Board and Senior Leadership Team.
- Appraisals are modelled around the values and actions are linked to the behaviours required to demonstrate the values.
- Valued-based recruitment is used throughout the Trust to identify these values in prospective employees.

### **Challenges**

- The survey results will have a ‘lifetime’: staff turn-over may mean the sense of ownership amongst the workforce diminishes.
- Sustainability is highly dependent on leadership teams visibly demonstrating these values.
- To maximise the impact there is a need to continue to support the on-going development and adoption of the values amongst our staff.

Case study seven: The Newcastle Upon Tyne Hospitals NHS Foundation Trust

The Newcastle Upon Tyne Hospitals NHS Foundation Trust has 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.

### **About the initiative**

The group comprises of a wide membership to ensure appropriate representation. Members include:

- Deputy Directors of Nursing & Patient Services
- Senior Nurse for Nursing and Midwifery Staffing and Workforce
- Head of Workforce, Engagement and Information

- Head of Midwifery/Deputy
- Human Resources Recruitment Manager
- Simulation Centre Coordinator
- Matron/Clinical Manager representatives
- Nurse Bank Manager/Deputy
- Senior Nurse Practice Development
- Ward Sister/Charge Nurse
- Practice Placement Facilitator
- Data Manager

The group meets every month for two hours, and has the responsibilities of: ensuring key documentation and data relating to nursing and midwifery staffing is up-to-date, robust and compliant with mandated requirements; monitoring vacancies and turnover; overseeing and guiding nursing and midwifery recruitment processes; and monitoring progress against agreed annual priorities.

In addition, multiple work streams have been put in place to enhance recruitment and retention. These are overseen by the Nursing and Midwifery Recruitment and Retention Steering Group and include the following:

- Bi-annual Band 5 open days – events are advertised via social media and invitations are sent to all UK universities at which a student has previously accepted a job in the Trust.
- Return to practice – traditional and Trust-specific routes for return to practice are discussed and monitored.
- Review of HR leaving questionnaires – leaving data is reviewed to identify common themes that require early intervention to maximise staff retention.
- Band 5 and Band 2 internal transfer scheme – a transfer scheme within directorates has been established to ensure that staff can move within their own directorate without needing to undergo the recruitment process.
- Recruitment sub-groups – sub-groups have been established to focus on Registered Nurse and Healthcare Assistant recruitment, and international recruitment. Both sub-groups report to the Nursing and Midwifery Recruitment and Retention Steering Group.

#### **Key outcomes and benefits**

- The steering group's close link with HR has meant that its work is streamlined and consistent with existing recruitment processes.
- Central co-ordination of recruitment and retention work streams allows multiple work streams to be managed and the impact of each analysed and disseminated.
- The group enables pro-active and responsive work to be undertaken with a clear plan in place re-occurring trends to be identified and addressed quickly and efficiently.

#### **Challenges**

The group is intensive and time-consuming for those involved.

Case study eight: University Hospital of South Manchester NHS Foundation Trust

The University Hospital of South Manchester NHS Foundation Trust has developed a nurse drop-in service, predominantly aimed at Band 5 nurses. The service facilitates the discussion of career options available to nurses and the movement of staff within the organisation.

### **About the initiative**

The Lead Nurse for Recruitment and Retention holds a drop-in session every Monday. Nurses are welcome to use this session to discuss career options with the Lead Nurse. As a result of the session, nurses have been sign-posted to coaching, development opportunities, and employee health and well-being support services. Several nurses have also been supported with an internal transfer to another ward or department.

### **Key outcomes and benefits**

- Internal transfers have reduced the number of staff leaving the organisation to gain alternative experiences.
- Nurses have been signposted to support and training services of which they were previously unaware.
- Staff morale can be monitored and additional support can be provided to those teams in which staff morale is low.

### **Challenges**

- Nurses who are being performance-managed use the drop-in as a method of avoidance.
- The internal transfer system can result in an increased vacancy rate in struggling wards and departments.

## Region: South

Case study nine: University Hospital Southampton NHS Foundation Trust

The University Hospital Southampton NHS Foundation Trust established a dedicated retention hotline to support staff that are considering leaving the Trust.

### **About the initiative**

In November 2015, the Trust set up a dedicated ‘Thinking of Leaving’ hotline, which is held within HR as part of the wider resourcing team. The aims of the hotline are to:

- Pre-empt and identify avoidable leavers
- Use the breadth of opportunity across the Trust to help prevent avoidable leavers
- Provide a touch point independent from the line manager to enable staff to discuss issues influencing their decision to leave the organisation.
- Inform the development of longer-term strategies to retain staff.

In addition, early identification of nurse leavers (either through electronic notification or word of mouth) is made to the Trust’s HR Business Partners and is followed up by one-to-one discussions with the staff members to explore reasons for leaving.

Granular detail about reasons for leaving (categorised by avoidable and unavoidable) are now reported to board as part of the monthly staffing information. Examples of avoidable reasons include hours, flexibility, leadership, career progressions. Examples of unavoidable reasons include necessary relocation and retirement.

The initiative was publicised to staff via a letter from the CEO encouraging staff to talk to their line manager or HR via the hotline if they are considering leaving to see if any potential issues can be resolved. The letter was followed up with a leaflet about the initiative attached to staff payslips.

### **Key outcomes and benefits**

- 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.

### **Challenges**

- There was initial concern from the divisions about whether HR offer a truly independent touch point.
- The initiative has limited impact if it is not taken up by staff.
- In some cases, awareness of potential leavers is not alerted early enough to make any significant difference to their decisions.

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.

### **About the initiative**

As an organisation, the Trust employs a high volume of newly qualified practitioners in both adult and children services. A senior project nurse was recruited part-time from August 2015 to oversee the programme, which was launched in October 2015 (before Health Education England Preceptorship Standards). The programme, now into its second year, has received positive evaluations from attendees and is embedded into the organisational culture.

The newly qualified practitioners receive a welcome letter from the Chief Nurse on the first day of their Trust induction, which invites them to join the Preceptorship Programme. 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 Trust runs four preceptorship cohorts between September and March each year, which provides flexibility for the newly qualified practitioners to join different cohorts and attend sessions with alternative groups if they cannot attend those in their own schedule. Sessions are led by multi-professional facilitators including members from the Senior Nurse Team, and are formatted with an emphasis on group discussions, problem-solving, and sharing best practice. Sessions topics include:

- 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

All of these meet the Health Education England Preceptorship Standards. On completing the programme and the preceptorship framework objectives, attendees are awarded a much-coveted hospital badge.

### **Key outcomes and benefits**

The newly qualified practitioners report that they value the programme as it provides additional support and helps their confidence in practice.

### **Challenges**

Protecting the time to release staff to attend the programme sessions can be a challenge particularly when clinical areas have vacancies.

## Appendix 1

### Sourcing best practice case studies

All AUKUH Trusts were invited to submit case studies describing strategies employed by the Trust to improve nurse retention. Trusts with high retention rates for their region, as identified using data from the Model Hospital Dashboard, were individually approached for case study submission.

In total, nine Trusts submitted case studies. These are as follows:

<b><i>AUKUH Provider Trust</i></b>	<b><i>Region</i></b>
<i>Imperial College Healthcare NHS Trust</i>	<i>London</i>
<i>University College London Hospitals NHS Foundation Trust</i>	<i>London</i>
<i>Derby Teaching Hospitals NHS Foundation Trust</i>	<i>Midlands / East</i>
<i>Nottingham University Hospitals NHS Trust</i>	<i>Midlands / East</i>
<i>Sheffield Teaching Hospitals NHS Foundation Trust</i>	<i>North</i>
<i>The Leeds Teaching Hospitals NHS Trust</i>	<i>North</i>
<i>The Newcastle Upon Tyne Hospitals NHS Foundation Trust</i>	<i>North</i>
<i>University Hospital of South Manchester NHS Foundation Trust</i>	<i>North</i>
<i>University Hospital Southampton NHS Foundation Trust</i>	<i>South</i>
<i>University Hospitals Bristol NHS Foundation Trust</i>	<i>South</i>