

# Non-Medical Staff Rostering

## Trust Policy and Procedure

|                                   |  |
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| <b>Approved By:</b>               | Policy and Guideline Committee   |
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## **REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW**

The Non-Medical Staff Rostering Trust Policy and Procedure supersedes the Non-Medical Staff Rostering Policy (March 2013-March 2024).

## 1 INTRODUCTION AND OVERVIEW

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- 1.1 This policy outlines the guidelines and expectations in relation to non-medical staff electronic rostering (e-rostering) at University Hospitals of Leicester NHS Trust (UHL). It has been developed to ensure the Trust is adhering to relevant national guidance; specifically, Lord Carter (2016) and NHS England and Improvement (2019).
- 1.2 To support workforce planning, the Trust uses an e-rostering system to enable safe, effective and fair rostering practices with provision for planned and unplanned leave, i.e., annual leave, study days and parental leave. Specifically in nursing and midwifery, key performance indicators (KPIs), such as the variance in planned versus actual hours and red flags, are captured and utilised for daily operational real-time management of staffing and within bi-annual establishment reviews.
- 1.3 Factors incorporated into e-rostering include responding to service demand, workforce requirements, workforce deliverability and organisational needs.

The benefits of e-rostering include improved workforce data, fewer unfilled shifts, and financial savings (NHS England, 2023). There is recognition of striking the right balance between patient safety, cost and efficiency; in which the e-rostering can contribute to if used to its fullest potential (NHS England and Improvement, 2019).

## 2 POLICY SCOPE

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- 2.1 This policy applies to non-medical staff groups across the organisation.
- 2.2 This policy should be used where a roster is created using HealthRoster and will be applied to all staff in the department fairly and without prejudice, it is to be utilised in conjunction with People Services Policies where appropriate.

## 3 DEFINITIONS AND ABBREVIATIONS

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### Approval (partial and full approval)

Partial approval- the first level of approval usually completed by the ward/department manager once the roster creation process is completed.

Full approval- the second level approval usually completed by the Matron/Service Manager upon notification that the first level approval has been completed. Once fully approved; this indicates that the Matron/Service Manager grants the roster safe and effective.

## **BankStaff**

The Staff Bank supplies temporary staffing to areas within the Trust. The BankStaff product links with Electronic Rostering System and LOOP to support an efficient and safe process to monitor and fill vacant shifts within the organisation

## **Electronic Rostering (e-rostering)**

A suite of computerised software programmes that will produce staffing rosters, reports, manage temporary staffing requirements, pay staff and allow all staff access to their work patterns electronically.

## **Electronic Staff Record (ESR)**

The Electronic Staff Record or ESR is an Oracle-based human resources and payroll database system currently used by the National Health Service (NHS) in England and Wales to manage the payroll for millions of NHS staff members. ESR is not to be confused with Electronic Rostering but is linked to HealthRoster through the ESRGo interface.

## **ESR Go**

An electronic system that links Electronic Rostering System with ESR to enable staff changes to sync across automatically into Electronic Rostering System when made in ESR.

## **Finalisation**

This is the process of “locking down” shifts for submission to payroll; a finalised duty will appear with a padlock on it.

## **HealthRoster**

An e-rostering cloud-based software currently in use at UHL, used for the creation and management of rosters and staff unavailability.

## **Loop**

A cloud-based application whereby staff can submit requests (i.e., days off and/or annual leave) and reviewing/ accepting bank duties.

## **SafeCare**

A system that provides organisational overview for Nursing and Midwifery of staff attendance, hours excess/ short, red flags amongst other real-time operational tools.

## **Red Flags**

The ability for staff to raise a concern on the SafeCare system relating to when staffing levels fall below the required level.

## 4 ROLES

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### 4.1 Executive Lead - Chief Nurse

The Chief Nurse is accountable within the Executive Team for the effective implementation and utilisation of this policy and procedure. The Chief Nurse is responsible for ensuring that e-rostering compliance is maintained and improving for system optimisation.

### 4.2 Lead Nurse for Safe Staffing, Electronic Rostering Service Lead and Matrons for Safe Staffing

- Responsible for the e-rostering systems, service and developments.
- To ensure all required users have access and utilise the system appropriately.
- To monitor and review staff utilisation via obtainable workforce datasets, liaising with service leads whereby improvement in utilisation is recognised.

### 4.3 Electronic Rostering Team

- To maintain and manage all areas of the Electronic Rostering System, ensuring helpdesk provision is provided.
- To educate and support service leaders on rostering and how to ensure effective rostering compliance.
- Work collaboratively with the Clinical Management Group (CMG) budget holders to meet workforce KPI's.
- To monitor and report all live rosters to budget holders, finance, HR, CMG Leads and the Executive Team.
- To check and follow up chase all areas to ensure all rosters are ready to be submitted for absence and pay each month.

### 4.4 People Services

- To support the utilisation of Electronic Rostering by reviewing the impact of the system on the roles and responsibilities of staff.
- To ensure all changes are managed and communicated effectively, interlinking with staff, trust policies, procedures, and job descriptions are updated to reflect those changes.
- ESR master data to be imported into the system within agreed timescales and for the data to be accurate and most relevant.

- To manage electronic payroll files from Electronic Rostering System to pay provider.
- To provide Electronic Rostering data when requested by Staff Side colleagues regarding active investigations.

#### 4.5 **Finance Team**

- To support budget holders and the Electronic Rostering Team to ensure budget and costing data within the e-rostering software is accurate and current to improve workforce utilisation, temporary staffing and budget management.

#### 4.6

- To support the UHL setting and reviewing workforce establishments.

#### **CMG Heads of Operations, CMG Heads of Nursing & Midwifery / Deputy Heads of Nursing**

- To be accountable for e-rostering compliance and implementation of the relevant CMG.
- To continuously work towards achieving and maintaining KPIs, recognising areas of success, and to support areas where improvement may be required.
- To attend Roster Review and Reflect meetings, and to encourage attendance from matrons and ward leaders.
- To review and update establishments and to ensure safe staffing of each ward/departments.
- To notify changes to budget/establishment to the electronic rostering team so changes can be reflected on required systems, via the e-roster demand template change process.

#### 4.7 **Matron/ General Managers**

- To check each planned four-week roster period in conjunction with the rostering calendar, utilising the roster analyser feature on HealthRoster.
  - To ensure Ward Leaders/ Service Managers are supported to meet KPI's, providing action plans and guidance where required, and identifying areas of success.
  - To be aware that continued underutilisation of staff in any area will be identified in roster review and reflect meetings and may require further investigation and training due to risk of not meeting quality and safety standards.

- To ensure timely full-approval; with the KPI to publish rosters six weeks in advance as set out by Lord Carter (2016).

#### **4.8 Ward Leaders/ Service Managers**

- Responsible to their Matrons/ General Managers for implementing the policy at local level and for ensuring compliance.
- The ward/department manager is accountable for completing or appointing a trained individual to create the ward/department roster as set within this policy and the Safe Staffing for Nursing and Midwifery Trust Policy and Procedure (B7/2023).
- Ensure documentation is accurately recorded on the systems; with individuals not making changes/ amendments to their own working records without Line Management consent and oversight.
- To ensure the roster is continuously reviewed to pre-empt staff gaps to mitigate risk to patient safety; escalating when required.
- To ensure timely partial-approval; with the KPI to publish rosters six weeks in advance as set out by Lord Carter (2016).
- Responsible and accountable for the accurate locking (finalisation) of shifts worked for payment by completing the locking shifts or appointing responsible deputies to ensure shifts are locked to meet pay deadlines.  
 To ensure the locking of shifts and unavailability's are accurate for the previous week and completed by 09.30am every Monday morning (Tuesday on Bank Holidays).
- To certify start and finish times, breaks and absence are completed by roster maintainers to preserve transparency and integrity.
- To comply with allocated staffing budget, ensuring expenditure does not exceed the allocated budget unless otherwise agreed.
- To report any changes of personal details received from staff to ESR using the appropriate HR process.
- To assess and liaise with the Electronic Rostering team to assign and remove the appropriate level of access for staff to view and manage rosters in their area in accordance with their role.
- To be responsible for updating and maintaining individual's skills information within the HealthRoster system.

#### 4.9 **All Staff**

- All staff have a responsibility to adhere to the policy.
- To attend work as per their duty roster and adhere to the requirements set out by the roster policy.
- To be reasonable, flexible and showing consideration to their colleagues with their requests in accordance with the rules outlined in the Trust.
- Working the fair distribution of unsocial shifts such as weekends and nights, unless agreed via Flexible Working (You Matter: Colleague Support Policy, A1/2023).
- Notifying and discussing any changes to a planned or worked shift with the Ward Leader/ Service Manager or nominated roster creator.
- To ensure that any changes to personal details are given to Line managers as soon as they occur to ensure ESR is correct and in turn salary is unaffected.
- To check the accuracy of worked hours, pay enhancements, time owing and annual leave, highlighting discrepancies to line managers to resolve identified issues.
- To alert any concerns regarding fraudulent activity on rosters appropriately to line managers.

## 5 **POLICY IMPLEMENTATION AND ASSOCIATED DOCUMENTS**

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### 5.1 **E-rostering**

- The procedure outlined below may be subject to change according to the requirements of the organisation. Full consultation will take place with affected staff as appropriate and where possible. The Trust reserves the right to change or temporarily alter shifts in the event of a major incident or some other circumstances beyond the control of the Trust.



### 5.1.1 Production of duty rosters

- Fully approved rosters should be available for staff a minimum of 6 weeks in advance, this is to enable:
  - I. Staff to have sufficient time to know their rosters and plan their work/life balance.
  - II. Maximise the ability of the Trust the Staff Bank to fill vacant duties.
- All rosters will be composed to adequately cover the identified and agreed demand utilising permanent staff proportionately across all shifts.
- Weekend and night shifts must be filled first, they should not be routinely covered by non-permanent staff.
- All rosters produced should be fair and equitable to all within each ward/unit.

### 5.1.2 Validation/ Approval

- **Partial approval:** Should be completed a minimum of 7 weeks prior to the roster commencing by the Ward Leader/ Service Manager. They should then inform the Matron/ General Manager that the roster is ready for review.
- **Full approval:** Should be completed a minimum of 6 weeks prior to the roster commencing by the Matron/ General Manager. Full approval should only be given if it meets service requirements.

### 5.1.3 Skill Mix (applicable to Nursing and Midwifery Workforce)

- Each department will have an agreed total number of staff and skill mix for each shift, this will be agreed by the Head of Nursing/ Deputy Head of Nursing/ Matron within the CMG; this is known as the Demand Template.
- Senior staff (band 6 and above) should be rostered onto opposite shifts to evenly cover the ward/department with senior presence.
- There should be a designated substantive staff member/ Nurse in Charge per shift that has been identified as possessing the necessary skills and competence required for a coordinating role. This skill should also be reflected on the HealthRoster system.
- Weekends and Bank holidays should not be worked as managerial/ supervisory shifts.

### 5.1.4 Shift Patterns

#### **It is essential that all areas comply with the Working Time Regulations 1998**

- Band 7 managers should not be routinely rostered for weekend, night or bank holiday shifts unless as a requirement in specialist specific areas e.g., Emergency Department, Theatres, ICU, Maternity, Radiology are bleep holding, working with specific staff or to occasionally review service demand out of hours.

- Staff will be required to work a variety of shifts and shift patterns as agreed with their Ward Leader/ Service Manager and as per their contracted hours.
- Staff hours worked, must be balanced each roster period as per their contracted hours. No more than 11.5 hours over or under contracted hours should be carried forward to the next roster.
- Shift start and finish times will be determined by the ward/department manager, Matron and Head of Nursing.
- Staff working non-standard shifts, such as starting late, must be recorded on HealthRoster, including an explanation for the non-standard shift. This is to ensure an accurate record of hours worked.
- Staff may work long shifts, short shifts or a combination of both to meet service requirements.
- For staff who work regular bank shifts, in the interest of clinical safety and the wellbeing of the workforce all members of staff working more than 48 hours in any one week regularly should be reviewed periodically by their manager.
- Staff must not work more than an average of 48 hours over a rolling 17-week period this included both permanent place of employment hours and any temporary staffing work. Where individual members of staff may choose to work more than the average of 48 hours per week they will need to sign and submit to their manager an 'opt out' declaration which can be found within in the 'Working Time Regulations' (WTR) on the Trust's Intranet.
- Staff should not be rostered to work more than 50% of their shifts on nights in a roster period unless they have specifically requested this as part of an authorised flexible working agreement.
- Staff should not be rostered to work more than the following consecutively:
  - 2 x long days (11.5 hours) or
  - 3 x night shifts (11.5 hours) or
  - 5 x early/ late shifts

Any more than this would be at the discretion of the staff member in agreement with their Ward Leader/ Service Manager and will need to meet the service need. If this was to be required, the impact on patient safety and staff wellbeing should be closely monitored.
- A minimum of 2 days off (including sleep day) should be rostered following the last night shift before commencing day shifts.
- For specific workforce groups, there may be a local agreement, with Director-level sign-off, regarding the management of net hours and consecutive shift/ working patterns.

### 5.1.5 Breaks and Rest Periods

- All shifts longer than 6 hours must include a 20-minute unpaid break and shifts of 9 hours or longer must include either 1 x 60-minute unpaid break or 2 x 30-minute unpaid breaks.
- Staff on shifts of 10 hours or more may take a paid discretionary 15-minute break per shift, as agreed with management and subject to service needs which must take priority.
- The designated lead/ Nurse in Charge per shift and the individual are all responsible for ensuring breaks are taken. If breaks are unable to be taken at the agreed time due to clinical need, they should be taken as soon after this point as possible/ raised as a red flag as per the Safe Staffing for Nursing and Midwifery Trust Policy and Procedure (B7/2023).
- In line with WTR breaks are not to be taken at the start or end of a shift or within the first or last hour of the shift as their purpose is to allow rest periods during shifts.
- All staff must have 11 hours rest before their next shift and shift patterns/times will reflect this need.
- All staff must have 24hrs rest every 7 days or 48hrs rest every 14 days in line with WTR.
- If a staff member is assigned an on-call duty, an 11-hour consecutive rest period following a call out to comply with the WTR.

### 5.1.6 Staff Requests

The Trust is committed to achieving a good work/life balance for staff and all requests including flexible working will be considered. These requests by individual staff may not be agreed if their proposed working pattern cannot be accommodated within the service needs. Service needs will take priority when creating a roster ensuring that safe staffing levels and appropriate skill mix is achieved.

- Refer to the You Matter: Colleague Support Policy (ref: A1/2023) for the flexible working procedural detail.
- All staff must use LOOP to apply for requests and annual leave.
- The Ward Leader/ Service Manager will endeavour to meet individual requests. Requests will be considered and granted/ refused dependent on service requirements.
- The Ward Leader/ Service Manager is responsible for approving staff requests and will be sensitive to the cultural needs of staff and requests for religious or cultural festivals will be considered. As with all requests, they will granted if the needs of the service are covered.

- Permitted numbers of requests will be calculated according to an individual's shift patterns and hours of work. This is to ensure fairness to staff and meeting service demand.

| Staff hours per week | Total number of requests permitted per 4 weeks |
|----------------------|--|
| 34.5 to 37.5 hours   | 6 requests                                     |
| 28.5 to 34.4 hours   | 5 requests                                     |
| 22 to 28.4 hours     | 4 requests                                     |
| 16 to 21.9 hours     | 3 requests                                     |
| 9.5 to 15.9 hours    | 2 requests                                     |
| 1 to 9.4 hours       | 1 request                                      |

- Requests not placed cannot be rolled over to the following roster period.
- Personal patterns approved by applying for flexible working are not considered requests.
- Three months' worth of rosters will be visible at any one time for staff to make requests to allow for fair accessibility for all staff. The wards/departments shall manage the opening and closing of rosters. Rosters will close to requests 8 weeks prior to the start date of the roster. Refer to roster calendar located within the appendices (appendix 1).

#### 5.1.7 Annual Leave and Bank Holidays

- Staff must make annual leave and bank holiday requests via LOOP. Please refer to the You Matter: Colleague Support Policy (ref: A1/2023) for the annual leave and bank holiday procedure.
- Annual leave entitlements for the following financial year will be updated automatically in the system. Managers must check the entitlements are accurate and inform the ESR Team if changes are required.
- The Electronic Rostering Team will send out an email on an annual basis to each unit with an attachment detailing action for Ward Leader/ Service Manager to check remaining leave entitlements.

#### 5.1.8 Special Leave/ study leave

- Please refer to You Matter: Colleague Support Policy (ref: A1/2023) for special leave.
- Please refer to Study Leave and Funding Support for Non-Medical Staff Policy and Procedures (ref: B32/2004)

- Study leave must be recorded on HealthRoster and hours assigned as negotiated with the Ward Leader/ Service Manager (Study Leave and Funding Support for Non-Medical Staff Policy and Procedures, B32/2004).

#### 5.1.9 Sickness

- Sickness reporting must be undertaken in accordance with the UHL Sickness Absence Management Policy (ref: B29/2006).
- All sickness must be recorded accurately and in a timely manner on HealthRoster, as soon as possible after the staff member has reported the sickness. Delayed recording will have an impact on employee pay.
- Reason for sickness to be precisely recorded on HealthRoster. Reasons for sickness can aid the organisation to respond promptly and appropriately where a particular sickness cause is prominent.

#### 5.1.10 Headroom

- The Trust has an **average** headroom allowance of 23% incorporated into each establishment, however some areas may have more or less than this percentage due to various reasons. The headroom allows for non-effective days such as annual leave, sickness, study days and other leave. Maternity leave is currently included within this headroom.

#### 5.1.11 Amending rosters

- It is the responsibility of the Ward/Department Manager and Roster Co-ordinator / nurse in charge to amend rosters with non-patient care shifts, i.e. sickness, parental leave etc. Any amendments to the roster should be made as required at the time of the event to maintain a 'live' Roster online.
- All changes made after the roster has been approved must be clearly marked for auditing purposes. If this impacts on the booking of temporary staff this must be communicated to the appropriate Matron or Head of Nursing.
- In the event that circumstances change within the Local Health Economy, Trust or Ward/Department (e.g. major incident declared, more/less beds) then the Trust reserves the right to change the rota with no notice. This will only happen in the event of major change and as much notice as possible will be given.

#### 5.1.12 Escalation of concerns regarding rosters

- Escalation will be undertaken when a CMG draws attention to an issue with staffing which has the potential to impact on the quality and safety of patient care or the ability of staff to take breaks.

- At commencement and throughout the duration of the shift, staffing should be reassessed and if staffing is deemed to be suboptimal, a red flag should be raised via SafeCare as outlined in the Safe Staffing for Nursing and Midwifery Trust Policy and Procedure (B7/2023). This is appropriate to Nursing and Midwifery areas only.
- Service Managers, Matrons, Deputy Heads of Nursing and Heads of Nursing should ensure rosters are fully approved and available for staff by six weeks before the commencement of the roster. If a roster is not completed within this time, individuals should contact the Ward Leaders/Managers for rationale and ensure a satisfactory action plan is in place and inform the Deputy Head of Nursing and Head of Nursing or Service Managers.

#### 5.1.13 Finalisation of Rosters for Payroll

- Duties should be finalised on a daily or weekly basis as it ensures rosters are contemporaneous and easier for the Ward Leaders/ Service Managers to remember changes made to substantive and bank staff. If rosters are going to be finalised monthly, this should be noted and agreed by the Electronic Rostering Service Lead.
- Ward Leaders/ Service Managers nurses should ensure unavailability's (annual leave, study days and sickness) have the correct hours assigned to them before finalising.
- Access to data on HealthRoster shall be confined to those with appropriate authority.

#### 5.1.14 Unplanned system failure/ business continuity

- Report to the Electronic Rostering team immediately and refer to the Electronic Rostering Continuity SOP (available on Intranet).
- To enable continuity in the event of unplanned system failure, it is recommended that the roster is printed after each update. This will ensure that each ward has a hard copy.
- In the unlikely event that staff are unable to access HealthRoster the hard copy (printed roster/ record of staffing) will be updated until such time as the system is available and then this will be updated in the system using the information provided on the hard copy. These are the only circumstances where changes should be made on the hard copy.

### 5.1.15 Self-rostering/ Team-based rostering

- Areas which request to self-roster/ team-based roster will be assessed and reassessed on an annual basis by the Electronic Rostering Service Lead and the Lead Nurse for Safe Staffing (for Nursing and Midwifery)/ Director of workforce group; to ensure service delivery meets service demand.
- In the creation and management of self-rostering/ team-based rostering there must be a set of parameters of roster rules to ensure the following:
  - Provide an adequate skill mix and numbers of appropriately qualified staff to deliver safe care/ complete required duties.
  - Ensure fairness by generating an agreement regarding the number of unsocial duties staff members must complete during a set period (unless a staff member obtains an authorised flexible working agreement).
  - Self-rostering/ team-based rostering should not compensate for the requirement of a flexible working agreement; staff members should be encouraged to apply for a flexible working agreement as per the You Matter: Colleague Support Policy (A1/2023) if their requests are unvaried.
  - Local fairness reporting to be available upon request, including percentages of staff members who are granted and/or declined requests to ensure transparency of shift assignment.

## **6 EDUCATION AND TRAINING REQUIREMENTS**

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- The Trust is aware that the successful implementation of this Policy is reliant on adequate support and effective training for all staff.
- Initial introductory and retraining on E-Rostering will be provided by the E- Rostering team – details of training dates can be found on the Intranet.
- Further training can be provided in response to an identified individual / speciality needs.
- Matrons/Service Managers are responsible for ensuring that senior ward / department staff are appropriately trained and that they maintain a local training record. Ward Leaders/Managers are responsible for ensuring that relevant staff are appropriately trained and that training records are kept.

- All staff will receive and can continually access training to use the LOOP app through the eUHL LOOP tutorial videos and User guides that are available to all Trust employees on InSite. Further support and guidance is available from super users in the work area, first port of call would be the management in that area followed by the Electronic Rostering Helpdesk.

## 7 Process for Monitoring Compliance

| Elements to be monitored                        | Lead  | Tool   | Frequency | Assurance  |
|---|---|--|-----------|--|
| Timely publication and finalisation of rosters  | Ward Leaders/<br>Service Managers<br>and Matrons  | E-Rostering<br>Performance Metrics   | Monthly   | E-Rostering Performance Metrics dissemination to Senior Leaders to prompt response to outliers.<br><br>Monitoring of finalisation progress for all areas; highlighting areas whereby support is required.                |
| E-Rostering safe, effective and efficient KPIs. | Lead Nurse for Safe Staffing/<br>Matrons for Safe Staffing/<br>Electronic Rostering<br>Service Lead | E-Roster<br>Performance Metrics<br>(safety, effectiveness<br>and efficiency)<br><br>Redeployment Report<br><br>SafeCare Compliance<br>Report | Monthly   | Reports to be shared with Deputy Heads of Nursing/<br>Heads of Nursing, Deputy<br>Chief Nurses and Chief<br>Nurse.<br><br>Exception reports to be summarised and shared with the Chief Nurse and appropriate recipients. |

## 8 EQUALITY, IMPACT AND ASSESSMENT

- 8.1 The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.
- 8.2 As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

## 9 SUPPORTING REFERENCES, EVIDENCE BASE AND RELATED POLICIES

- You Matter Colleague Support Policy (A1/2023)
- Safe Staffing for Nursing and Midwifery Trust Policy and Procedure (B7/2023)
- Temporary Staffing UHL Policy (B58/ 2011)
- Temporary Nurse Operational Staffing Policy (Bank & Agency) (B35/ 2016)
- UHL Sickness Absence Management Policy (B29/2006).
- Working Time Regulations Policy (B19/ 2014)



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NHS England and NHS Improvement (2020). *E-rostering the clinical workforce*. [online]

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## **10 PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW**

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- The policy and procedure will be reviewed by the Corporate Nursing Team each year. Required changes to go to P&G Committee for approval.
- The updated version of the policy will be uploaded and available through INsite Documents and the Trust's externally accessible Freedom of Information publication scheme. It will be archived through the Trust's PAGL System.

## Appendix 1- Annual Leave Algorithm

The nursing staff utilisation figure for UHL is 77% with the remaining 23% broken down as follows:

|                |                           |
|----------------|---------------------------|
| Annual Leave - | 11-17%                    |
| Sickness -     | 3%                        |
| Other Leave -  | 3%                        |
| Study Days -   | 2%                        |
| Total -        | less than or equal to 23% |

To calculate how many staff can be absent at any time for annual leave purposes the following algorithm can be used

Ward X has 12.42 WTE nursing staff  
Ward X has 8.27 WTE HCA's  
Total staff 20.69 WTE

% staff on annual leave at any one time can be 15% (0.15)

Therefore:

$12.42 \times 0.15 = 1.86$  WTE nursing staff  
 $8.27 \times 0.15 = 1.24$  WTE HCA's

Total 3.10 WTE on annual leave at any one time

**Please note: This number is based on WTEs in post, therefore needs to be recalculated as staff join and / or leave.**

## Appendix 2- Safe, Efficient and Effective rostering KPIs

|                              |  | Green threshold   | Amber threshold  | Red threshold |
|------------------------------|--|---|--|---------------|
| Safety                       | Red Flags  | All Red Flags are resolved/ reviewed with a note added to document decision-making  | ≥ 1 Red Flag remaining open  |               |
|                              | Planned vs. Actual Hours                         |   | Planned Hours ≤ Actual Hours   |               |
|                              | Required vs. Actual CHPPD                        |   | Required CHPPD ≤ Actual CHPPD  |               |
| Efficiency/<br>Affordability | Additional duties (No of shifts over budget)     |   | No additional shifts   |               |
|                              | Bank Usage                                       |   | N/A  |               |
|                              | Agency Usage                                     |   | 3%   |               |
|                              | Net Hours  | No more than 11.5 hours over or under contracted hours should be carried forward to the next roster per staff member<br><br>The total net hours to be neutral | *Unmanaged net hours which do not comply with the 11.5 hours over or under contracted hours per staff member |               |
| Effectiveness                | Annual Leave                                     | 11-17%  | 10- 10.9% / 17.1- 19.9%  | <9.9% / >20%  |
|                              | Sickness   | 3%  | 3.1- 3.9%  | >4%           |
|                              | Study Leave                                      | 2%  | 2.1- 2.9%  | >3%           |
|                              | Other Leave                                      | 3%  | 3.1- 3.9%  | >4%           |
|                              | Total Unavailability/ Headroom/ Uplift Allowance | ≤ 23%   | 23.1- 29.9%  | >30%          |
|                              | Roster Approval (Full) Lead Time Days            | 42 days (6 weeks)   | > 42 days (6 weeks)  |               |

Appendix 3- E-Roster Calendar

Electronic Rostering Calendar



**EMPLOYEE ONLINE HEALTH ROSTER**

Electronic Rostering Helpline  
Tel: 0116 258 7238  
Email: [electronic.rostering@uhl-tr.nhs.uk](mailto:electronic.rostering@uhl-tr.nhs.uk)

Use the Roster Calendar below to ensure that you achieve the roster creation and finalisation deadlines for your role, department and team

Doc No: 050

**PAYROLL**

ESR/Payroll  
Internal Tel: #67770  
External Tel: 03332 076 562

| HEALTH ROSTER             |           |        | EMPLOYEE ONLINE             |        |            | HEALTH ROSTER                           |           |            | PAYROLL                        |            |  |  |  |
|---------------------------|-----------|--------|-----------------------------|--------|------------|---|-----------|------------|--------------------------------|------------|--|--|--|
| HealthRoster              |           |        | Employee Online             |        |            | HealthRoster                            |           |            | Payroll                        |            |  |  |  |
| All Teams                 |           |        | Staff Member                |        |            | Manager/ Roster writer                  |           |            | Manager / Matron / Service Mgr |            |  |  |  |
| 4 Week Roster Worked From |           |        | E-Roster opens for Requests |        |            | E-Roster Closed for Requests            |           |            | Substantive Payroll Start-End  |            |  |  |  |
|                           |           |        |                             |        |            | Create Roster                           |           |            | Finalise Unit/Team             |            |  |  |  |
|                           |           |        |                             |        |            | E-Roster Partial Approval Deadline Date |           |            | Finalise Manager's Shifts      |            |  |  |  |
|                           |           |        |                             |        |            | E-roster Full Approval Deadline Date    |           |            | Payday                         |            |  |  |  |
| Monday                    | 17-Apr-23 | Monday | 28/11/2022                  | Monday | 20/02/2023 | 20/02/2023                              | Wednesday | 01/03/2023 | Monday                         | 06/03/2023 |  |  |  |
| Monday                    | 15-May-23 | Monday | 26/12/2022                  | Monday | 20/03/2023 | 20/03/2023                              | Wednesday | 29/03/2023 | Monday                         | 03/04/2023 |  |  |  |
| Monday                    | 12-Jun-23 | Monday | 23/01/2023                  | Monday | 17/04/2023 | 17/04/2023                              | Wednesday | 26/04/2023 | Monday                         | 01/05/2023 |  |  |  |
| Monday                    | 10-Jul-23 | Monday | 20/02/2023                  | Monday | 15/05/2023 | 15/05/2023                              | Wednesday | 24/05/2023 | Monday                         | 29/05/2023 |  |  |  |
| Monday                    | 07-Aug-23 | Monday | 20/03/2023                  | Monday | 12/06/2023 | 12/06/2023                              | Wednesday | 21/06/2023 | Monday                         | 26/06/2023 |  |  |  |
| Monday                    | 04-Sep-23 | Monday | 17/04/2023                  | Monday | 10/07/2023 | 10/07/2023                              | Wednesday | 10/07/2023 | Monday                         | 24/07/2023 |  |  |  |
| Monday                    | 02-Oct-23 | Monday | 15/05/2023                  | Monday | 07/08/2023 | 07/08/2023                              | Wednesday | 16/08/2023 | Monday                         | 21/08/2023 |  |  |  |
| Monday                    | 30-Oct-23 | Monday | 12/06/2023                  | Monday | 04/09/2023 | 04/09/2023                              | Wednesday | 13/09/2023 | Monday                         | 18/09/2023 |  |  |  |
| Monday                    | 27-Nov-23 | Monday | 10/07/2023                  | Monday | 02/10/2023 | 02/10/2023                              | Wednesday | 11/10/2023 | Monday                         | 16/10/2023 |  |  |  |
| Monday                    | 25-Dec-23 | Monday | 07/08/2023                  | Monday | 30/10/2023 | 30/10/2023                              | Wednesday | 30/10/2023 | Monday                         | 13/11/2023 |  |  |  |
| Monday                    | 22-Jan-24 | Monday | 04/09/2023                  | Monday | 27/11/2023 | 27/11/2023                              | Wednesday | 06/12/2023 | Monday                         | 11/12/2023 |  |  |  |
| Monday                    | 19-Feb-24 | Monday | 02/10/2023                  | Monday | 25/12/2023 | 25/12/2023                              | Wednesday | 03/01/2024 | Monday                         | 08/01/2024 |  |  |  |
| Monday                    | 18-Mar-24 | Monday | 30/10/2023                  | Monday | 22/01/2024 | 22/01/2024                              | Wednesday | 31/01/2024 | Monday                         | 05/02/2024 |  |  |  |
| Monday                    | 15-Apr-24 | Monday | 27/11/2023                  | Monday | 19/02/2024 | 19/02/2024                              | Wednesday | 28/02/2024 | Monday                         | 04/03/2024 |  |  |  |
| Monday                    | 13-May-24 | Monday | 25/12/2023                  | Monday | 18/03/2024 | 18/03/2024                              | Wednesday | 27/03/2024 | Monday                         | 01/04/2024 |  |  |  |
| Monday                    | 10-Jun-24 | Monday | 22/01/2024                  | Monday | 15/04/2024 | 15/04/2024                              | Wednesday | 24/04/2024 | Monday                         | 29/04/2024 |  |  |  |
| Monday                    | 08-Jul-24 | Monday | 19/02/2024                  | Monday | 13/05/2024 | 13/05/2024                              | Wednesday | 22/05/2024 | Monday                         | 27/05/2024 |  |  |  |
| Monday                    | 05-Aug-24 | Monday | 18/03/2024                  | Monday | 10/06/2024 | 10/06/2024                              | Wednesday | 19/06/2024 | Monday                         | 24/06/2024 |  |  |  |
| Monday                    | 02-Sep-24 | Monday | 15/04/2024                  | Monday | 08/07/2024 | 08/07/2024                              | Wednesday | 17/07/2024 | Monday                         | 22/07/2024 |  |  |  |
| Monday                    | 30-Sep-24 | Monday | 13/05/2024                  | Monday | 05/08/2024 | 05/08/2024                              | Wednesday | 14/08/2024 | Monday                         | 19/08/2024 |  |  |  |
| Monday                    | 28-Oct-24 | Monday | 10/06/2024                  | Monday | 02/09/2024 | 02/09/2024                              | Wednesday | 11/09/2024 | Monday                         | 16/09/2024 |  |  |  |
| Monday                    | 25-Nov-24 | Monday | 08/07/2024                  | Monday | 30/09/2024 | 30/09/2024                              | Wednesday | 09/10/2024 | Monday                         | 14/10/2024 |  |  |  |
| Monday                    | 23-Dec-24 | Monday | 05/08/2024                  | Monday | 28/10/2024 | 28/10/2024                              | Wednesday | 06/11/2024 | Monday                         | 11/11/2024 |  |  |  |
| Monday                    | 20-Jan-25 | Monday | 02/09/2024                  | Monday | 25/11/2024 | 25/11/2024                              | Wednesday | 04/12/2024 | Monday                         | 09/12/2024 |  |  |  |
| Monday                    | 17-Feb-25 | Monday | 30/09/2024                  | Monday | 23/12/2024 | 23/12/2024                              | Wednesday | 23/12/2024 | Monday                         | 06/01/2025 |  |  |  |
| Monday                    | 17-Mar-25 | Monday | 28/10/2024                  | Monday | 20/01/2025 | 20/01/2025                              | Wednesday | 29/01/2025 | Monday                         | 03/02/2025 |  |  |  |
| Monday                    | 14-Apr-25 | Monday | 25/11/2024                  | Monday | 17/02/2025 | 17/02/2025                              | Wednesday | 26/02/2025 | Monday                         | 03/03/2025 |  |  |  |
| Monday                    | 12-May-25 | Monday | 23/12/2024                  | Monday | 17/03/2025 | 17/03/2025                              | Wednesday | 26/03/2025 | Monday                         | 31/03/2025 |  |  |  |
| Monday                    | 09-Jun-25 | Monday | 20/01/2025                  | Monday | 14/04/2025 | 14/04/2025                              | Wednesday | 23/04/2025 | Monday                         | 28/04/2025 |  |  |  |
| Monday                    | 07-Jul-25 | Monday | 17/02/2025                  | Monday | 12/05/2025 | 12/05/2025                              | Wednesday | 21/05/2025 | Monday                         | 26/05/2025 |  |  |  |
| Monday                    | 04-Aug-25 | Monday | 17/03/2025                  | Monday | 09/06/2025 | 09/06/2025                              | Wednesday | 18/06/2025 | Monday                         | 23/06/2025 |  |  |  |
| Monday                    | 01-Sep-25 | Monday | 14/04/2025                  | Monday | 07/07/2025 | 07/07/2025                              | Wednesday | 16/07/2025 | Monday                         | 21/07/2025 |  |  |  |
| Monday                    | 29-Sep-25 | Monday | 12/05/2025                  | Monday | 04/08/2025 | 04/08/2025                              | Wednesday | 13/08/2025 | Monday                         | 18/08/2025 |  |  |  |
| Monday                    | 27-Oct-25 | Monday | 09/06/2025                  | Monday | 01/09/2025 | 01/09/2025                              | Wednesday | 10/09/2025 | Monday                         | 15/09/2025 |  |  |  |
| Monday                    | 24-Nov-25 | Monday | 07/07/2025                  | Monday | 29/09/2025 | 29/09/2025                              | Wednesday | 08/10/2025 | Monday                         | 13/10/2025 |  |  |  |
| Monday                    | 22-Dec-25 | Monday | 04/08/2025                  | Monday | 27/10/2025 | 27/10/2025                              | Wednesday | 05/11/2025 | Monday                         | 10/11/2025 |  |  |  |
| Monday                    | 19-Jan-26 | Monday | 01/09/2025                  | Monday | 24/11/2025 | 24/11/2025                              | Wednesday | 03/12/2025 | Monday                         | 08/12/2025 |  |  |  |
| Monday                    | 16-Feb-26 | Monday | 29/09/2025                  | Monday | 22/12/2025 | 22/12/2025                              | Wednesday | 31/12/2025 | Monday                         | 05/01/2026 |  |  |  |
| Monday                    | 16-Mar-26 | Monday | 27/10/2025                  | Monday | 19/01/2026 | 19/01/2026                              | Wednesday | 28/01/2026 | Monday                         | 02/02/2026 |  |  |  |
| Monday                    | 13-Apr-26 | Monday | 24/11/2025                  | Monday | 16/02/2026 | 16/02/2026                              | Wednesday | 25/02/2026 | Monday                         | 02/03/2026 |  |  |  |
| Monday                    | 11-May-26 | Monday | 22/12/2025                  | Monday | 16/03/2026 | 16/03/2026                              | Wednesday | 25/03/2026 | Monday                         | 30/03/2026 |  |  |  |
| Monday                    | 08-Jun-26 | Monday | 19/01/2026                  | Monday | 13/04/2026 | 13/04/2026                              | Wednesday | 22/04/2026 | Monday                         | 27/04/2026 |  |  |  |
| Monday                    | 06-Jul-26 | Monday | 16/02/2026                  | Monday | 11/05/2026 | 11/05/2026                              | Wednesday | 20/05/2026 | Monday                         | 25/05/2026 |  |  |  |
| Monday                    | 03-Aug-26 | Monday | 16/03/2026                  | Monday | 08/06/2026 | 08/06/2026                              | Wednesday | 17/06/2026 | Monday                         | 22/06/2026 |  |  |  |
| Monday                    | 31-Aug-26 | Monday | 13/04/2026                  | Monday | 06/07/2026 | 06/07/2026                              | Wednesday | 15/07/2026 | Monday                         | 20/07/2026 |  |  |  |
| Monday                    | 28-Sep-26 | Monday | 11/05/2026                  | Monday | 03/08/2026 | 03/08/2026                              | Wednesday | 12/08/2026 | Monday                         | 17/08/2026 |  |  |  |
| Monday                    | 26-Oct-26 | Monday | 08/06/2026                  | Monday | 31/08/2026 | 31/08/2026                              | Wednesday | 09/09/2026 | Monday                         | 14/09/2026 |  |  |  |
| Monday                    | 23-Nov-26 | Monday | 06/07/2026                  | Monday | 28/09/2026 | 28/09/2026                              | Wednesday | 07/10/2026 | Monday                         | 12/10/2026 |  |  |  |
| Monday                    | 21-Dec-26 | Monday | 03/08/2026                  | Monday | 26/10/2026 | 26/10/2026                              | Wednesday | 04/11/2026 | Monday                         | 09/11/2026 |  |  |  |
| Monday                    | 18-Jan-27 | Monday | 31/08/2026                  | Monday | 23/11/2026 | 23/11/2026                              | Wednesday | 02/12/2026 | Monday                         | 07/12/2026 |  |  |  |
| Monday                    | 15-Feb-27 | Monday | 28/09/2026                  | Monday | 21/12/2026 | 21/12/2026                              | Wednesday | 30/12/2026 | Monday                         | 04/01/2027 |  |  |  |
| Monday                    | 15-Mar-27 | Monday | 26/10/2026                  | Monday | 18/01/2027 | 18/01/2027                              | Wednesday | 27/01/2027 | Monday                         | 01/02/2027 |  |  |  |
| Monday                    | 12-Apr-27 | Monday | 23/11/2026                  | Monday | 15/02/2027 | 15/02/2027                              | Wednesday | 24/02/2027 | Monday                         | 01/03/2027 |  |  |  |
| Monday                    | 10-May-27 | Monday | 21/12/2026                  | Monday | 15/03/2027 | 15/03/2027                              | Wednesday | 24/03/2027 | Monday                         | 29/03/2027 |  |  |  |


Calendar Month. This pay period must be finalised from the roster bar by midnight on the 2nd of the following month

Daily (via SafeCare), Weekly (non-SafeCare areas). All previous week duties must be finalised by Monday 9am

Daily (via SafeCare), Weekly (non-SafeCare areas). All previous week duties must be finalised by Monday 9am

Every Thursday for Bank Weekly. Bank Monthly and Substantive pay is 27th each month (moves forward if 27th occur on wkend/Bhol)

## Appendix 4- Nurse in Charge SafeCare Expectations of Use

  
**University Hospitals  
of Leicester**  
NHS Trust

### SafeCare Expectations of Use Nurse in Charge (NIC) Role

**Mandatory:**

|         |  |
|---------|--|
| Step 1. | <ul style="list-style-type: none"><li>• Login is required once per shift, at the beginning of the duty</li><li>• Log onto SafeCare during handover with the NIC from the previous duty</li></ul>   |
| Step 2. | <ul style="list-style-type: none"><li>• Check-in all staff members who are present on duty</li></ul>   |
| Step 3. | <ul style="list-style-type: none"><li>• Shift finalisation for those who were present on the previous duty</li></ul>   |
| Step 4. | <ul style="list-style-type: none"><li>• Assess staffing on duty as per the Safe Staffing for Nursing and Midwifery Trust Policy and Procedure (2023) and if required, to raise a Red Flag to indicate potential staffing issues.</li></ul> |

Non-mandatory/ available for use if required:





- Professional judgement can be entered to alter the Red, Amber, Green status of a shift; if staffing is deemed unsafe and a Senior Nurse response is required, the NIC should escalate via the use of Red Flags.
- Updating tasks on SafeCare is not required unless the NIC felt it was necessary to include.

Discontinuation:

- Acuity and dependency documentation on SafeCare to be discontinued; acuity and dependency to be reviewed throughout the duty and included in daily staffing decision-making. Specific concerns regarding acuity and dependency on a duty to be included in Professional Judgement and/or a Red Flag.

SafeCare live link: <https://uhl.allocate-cloud.co.uk/SafeCareMobile/UHLLIVE/Account/Login>

HealthRoster link: <https://uhl.allocate-cloud.co.uk/HealthRoster/UHLLIVE/Login.aspx?ReturnUrl=%2FHealthRoster%2FUHLLIVE%2FReactClient%2F#/HealthRoster/MyWard/MyRosters/HomePage>

We are compassionateWe are proudWe are inclusiveWe are one team

## Appendix 5- Payroll Process

### Electronic Substantive Pay Process

