

## Booking of Staff from the Nurse Bank

Effective: June 2009

Review: June 2012

### 1. Introduction

This document is of relevance to Directorate Managers, Matrons, Ward/departmental clinical staff, and Patient Services Co-ordinators. It defines the process for requesting staff from the Nurse Bank and certifying their working hours. This policy should be read in conjunction with the Operational Policy for the Nurse Bank.

### 2. Funding for the use of bank nurses

2.1 The Nurse Bank **must not be utilised to provide additional staffing if this action will incur an over establishment.** It is to be used against established posts, which are not covered, i.e. only to cover maternity leave, sickness/absence leave or vacant posts.

As a general principle there will be **no identified budget** at ward/departmental level for Nurse Bank. However, in exceptional circumstances and in agreement with the Finance Department a budget may be identified which supports flexible working arrangements. Directorate Managers will be aware of any such arrangements which have been agreed with the Finance Director.

2.2 Booking must therefore be carefully managed and controlled, as there is a potential risk of overspending against the staff budget.

2.3 Before booking a bank nurse all other options to cover the staffing short fall should be considered, including:

- Reconfiguring the duty rota
- Attempts to seek help from other wards in the same speciality
- Attempts to seek help from other wards of different speciality.
- The working of additional hours by part-time staff
- Full time staff working the shift and taking time back at a later date
- Over-time must only be considered as a final option.

### 3. Booking of bank nurses

All bookings for bank staff must be made through the Newcastle Nurse Bank system BSMS (Bank Staff Management System).

Bookings can be made through a variety of modes:

- By telephone
- By email
- By web booking

All of these modes will undergo background checks before a confirmation is made e.g. Professional registrations patent, Criminal Records Bureau check performed and no Working Time Directive breach.

All requests for staff within the following 72 hours must be made by telephone to the Nurse Bank Office as this would constitute a 'short notice' request

The BSMS system allows requests for staff to be entered by either the staff in the Nurse Bank Office or by the Ward Manager and their designated deputy in their absence via the web system. Each shift entered into the system generates a unique job reference number and payment for bookings made outside this system cannot be guaranteed. All external staff from Agencies will be booked through the Nurse Bank office or via the Patient Service Co-ordinators if out of hours.

### **3.1 Authority to Book**

The Trust's Corporate Governance rules delegate authority for the booking of Nurse Bank or agency staff to the Directorate Manager (or Head of Department), Clinical Director, Management Executive member and Personnel Manager.

However, in the case of Nurse Bank for practical reasons authority has now been given to operational staff as detailed below

#### **3.1.1 When pre-booking bank nurses to provide cover for vacancies or unpaid absences**

The minimum level of authorisation must be by the person with continuing responsibility for the clinical area (the Ward Manager) or their designated deputy in their absence. Once a shift requirement is identified a request is entered on the system and both the Nurse Bank and the ward will attempt to fill it.

#### **3.1.2 Short notice requests to cover unexpected absences during normal working hours**

Short notice requests are identified as requests for the immediate following 72 hours. The minimum level of authorisation must be by the person with continuing responsibility for the clinical area (the Ward Manager) or their designated deputy in their absence. These shifts will be phoned to the Nurse Bank Office for entry onto the system and Nurse Bank staff will attempt to contact bank staff and/or refer the shift to the Agency if this has been sanctioned by the speciality manager (this is done by exception).

### **3.2 Out of normal working hours**

A list of available bank staff is held centrally by the Patient Services Co-ordinator on the RVI site – this is regularly updated and reflects current availability status. Authorisation at ward level must be confirmed by the Patient Services Co-ordinator / Night Sister who will then make contact with available bank nurses to secure a booking

In the event of an emergency, clinical need must be a priority and the authorisation of a bank nurse can be obtained by the on-call manager.

#### **4. Confirmation of Bookings**

Any bookings that are made are confirmed with the respective ward either by telephone where details are taken of the recipient of the message or via the web system in those areas utilising the web-based facility.

#### **5. Certifying hours worked**

At the end of each shift worked the Bank Nurse must have their time sheet signed by the Nurse in Charge of the shift to authorise payment for the hours worked. The nurse in charge of the particular duty is responsible for ensuring that the time sheets are completed correctly and accurately prior to certification. (NB. meal breaks are not to be paid).

5.1 The BSMS system allows payment for shifts worked to be confirmed by both Nurse Bank staff and designated ward staff in areas that utilise the web function of signing timesheets online. This allows for a more direct process. The staff allowed to carry out this process are determined by the ward manager.

5.2 The time sheets for shifts authorised for payment will be held in the area of processing (either the Nurse Bank Office or at Ward level). The Nurse Bank system is capable of providing an audit trail regarding the sign off of individual shifts, e.g. when it was processed, where it was processed and who processed the pay claim.

#### **6. Audit**

The Nurse Bank is responsible for ensuring the production of a monthly payroll report for each ward that has used Bank Nurses during that period. These reports are sent to the Nurse in Charge of the ward and the Matron, for that respective ward, each month. The Ward Manager, or his/her deputy in their absence, is responsible for checking these. They must confirm that the details of this report are correct or highlight any discrepancies and return the form to the Nurse Bank within 10 working days. The Nurse Bank are subsequently responsible for monitoring the return of this information and for addressing any discrepancies.

Failure to comply with this requirement will be considered to be a breach of the policy and will result in the Nurse Bank informing the respective Directorate Manager of any breach.

#### **7. Monitoring and Review**

7.1 The Nurse Bank Manager will instigate an annual review of the staff designated the appropriate authority to use the Bank Staff management system.

7.2 A monthly validation of the ward bank costings will take place with an acceptable compliance rate of 90%.

7.3 This policy will be reviewed every 3 years. Comments on the content or implementation of the policy should be directed to the Nurse Bank Manager

**Person Responsible for Review:** Nurse Bank Manager

**THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST**  
**IMPACT ASSESSMENT – SCREENING FORM A**

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	<b>Booking of Staff from the Nurse Bank</b>	Policy Author:	<b>Peter Savage</b>
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		I believe this policy does not discriminate against any group or individual
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
	• Disability – learning difficulties, physical disability, sensory impairment and mental health problems.	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4(a).	Is the impact of the policy/guidance likely to be negative? <i>(If “yes”, please answer sections 4(b) to 4(d)).</i>	No	The process will be clearer and more explicit
4(b).	If so can the impact be avoided?		
4(c).	What alternatives are there to achieving the policy/guidance without the impact?		
4(d)	Can we reduce the impact by taking different action?		

<b>Comments:</b>	<b>Action Plan due (or Not Applicable):</b>
	N/A

Name and Designation of Person responsible for completion of this form: .....Peter Savage..... Date:.....03/09/2009.....

Names & Designations of those involved in the impact assessment screening process:.....Peter Savage, Nurse Bank Manager.....

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)

*For advice on answering the above questions please contact Helen Lamont, Deputy Director Nursing & Patient Services, or, Christine Holland, Senior HR Manager. On completion this form must be forwarded electronically to Steven Stoker, Clinical Effectiveness Manager, (Ext. 24963) [steven.stoker@nuth.nhs.uk](mailto:steven.stoker@nuth.nhs.uk) together with the procedural document. If you have identified a potential discriminatory impact of this procedural document, please ensure that you arrange for a full consultation, with relevant stakeholders, to complete a Full Impact Assessment (Form B) and to develop an Action Plan to avoid/reduce this impact; both Form B and the Action Plan should also be sent electronically to Steven Stoker within six weeks of the completion of this form.*