Trusted urged to cut their agency spend as pay regulations loom

By Petra Kendall-Raynor

Acute NHS trusts in England are to pilot an online system aimed at reducing the amount of money they spend on temporary staff.

NHS Employers is recruiting 50 trusts to participate in the project, which requires them to supply information including data from electronic staff records and hospital episodes systems.

Ruth Warden, deputy head of employment services at NHS Employers, said that trusts will be able to measure the productivity of their organisation compared with others in various specialties, including cardiology and orthopaedics.

Productivity will be plotted against many factors including numbers of permanent and agency staff, skill mix and the cost of hospital episodes.

‘It could be that if a trust is less productive, it may have higher numbers of agency staff. Each trust would need to check the possible reasons for lower productivity,’ said Ms Warden.

Five trusts tested the system last year and the positive feedback prompted NHS Employers to establish the pilot.

The health service spent more than £2.2 billion on temporary staff between 2009 and 2011, and NHS Employers wants trusts to reduce agency spend.

RCN head of policy Howard Catton said that there may be good reasons for trusts using agency staff and warned against arbitrarily cutting numbers as a result of benchmarking.

‘If there is an over-reliance on agencies, the solution is likely to involve employing more permanent staff,’ said Mr Catton.

Pay and conditions
Meanwhile, healthcare agencies and trusts are preparing for the introduction of regulations in October that will entitle agency workers to the same pay and conditions as permanent employees after 12 weeks with the same employer.

NHS Employers has already stated it will work with employers and agencies to look at how the financial and administrative impact of new agency worker regulations, which apply to all employment sectors, can be shared and controlled.

Employment agency Reed, which has around 600 nurses on its books, has been holding seminars with NHS trusts on the changes since last year.

Reed Specialist Recruitment’s senior human resources consultant Linda Marshall said there was concern across all sectors about the additional costs associated with the regulations.

‘This is coming at exactly the wrong time for a lot of NHS trusts, which are supposed to be going the other way and saving money.’

She added that although some agency workers were already paid at NHS rates, she did not see how organisations would be able to avoid absorbing additional pay costs resulting from the regulations.

RCN head of employment relations Josie Irwin explained that she understood such concerns, but said:

‘The regulations are good news for agency nurses and will encourage a committed workforce.’

Plan to reduce rate of caesarean section

NHS guidelines on caesareans could be modified to encourage more women to have natural births.

The National Institute for Health and Clinical Excellence (NICE) is consulting on proposed changes to its caesarean section guideline, reflecting recent evidence that the procedure may not be the best course of action if the mother has had previous caesareans or is HIV positive.

The new draft says women who have had up to four caesareans should be told that their risk of fever, bladder injuries, surgical injuries and rupture of the womb is the same with a planned caesarean as with a planned vaginal delivery. Women who request a caesarean due to fear of childbirth should be offered mental health counselling before a final decision is made, NICE proposes.

Royal College of Midwives quality and audit development adviser Jane Munro said: ‘We are particularly pleased to see an appropriate discussion of the risks and benefits of caesarean section, as well as the importance of women’s psychological needs and possible fears about birth.’

NICE claims the caesarean rate in England was 13 per cent of all births in 1992, but rose to 23 per cent in 2008/9. The new guidance is due to be published in November.

To comment on the consultation, which runs until June 20, go to http://guidance.nice.org.uk/CG/WaveR/97