



NHS Pay Review Body Evidence

Recruitment and retention of ambulance staff

Employer submission

November 2015

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1.0 Introduction

- 1.1 Following the submission of evidence by staff side for a National RRP, employers represented by AACE wish to provide the following for the attention of the NHS PRB. This evidence should be considered alongside the staff side submission.
- 1.2 Employers have been working with staff side following the Secretary of State's letter¹, requesting we work together to resolve some recruitment and retention issues for ambulance staff following the pay dispute.

2.0 Recruitment

- 2.1 Employers accept that there are recruitment and retention issues within the Service. The recruitment issues have been brought about by a lack of supply, as a consequence of a dip in HEE commissions in 2010/11 and some Ambulance Trust not maintaining adequate recruitment arrangements. These are being addressed by HEE with a 87% increase in commissions. The Paramedic Evidence Based Education Project report² aims to develop a consistent approach to educating potential paramedics which will assist Services. Additionally HEE have supported some short term solutions for internal pathways (developing current staff to paramedic roles) and the inclusion of paramedics on the Shortage Occupation List has helped. Each Trust has plans to mitigate the shortage of paramedics and vacancies have lessened over the past 6 months.
- 2.2 Recruitment issues in Ambulance Trusts tend to be localised with specific hard to fill locations. Some Trusts offer incentive schemes to attract staff to these areas. Popular locations often achieve a waiting list of potential recruits.

3.0 Retention

- 3.1 Trusts have experienced retention issues but do not believe these are solely pay related. Evidence submitted by employers to the National Ambulance Strategic Partnership suggest that the reasons for leaving relate to the nature of work, impact of demand, shift working and wellbeing issues relating to the demands of working in a performance culture. This evidence was provided in collaboration with local Trade Unions. Pay is not cited as the main reason for leaving Trusts. It is one of many reasons.

¹ Secretary of State for Health letter to NHS Staff Council staff side chair
<http://www.nhsemployers.org/~media/Employers/documents/Pay%20and%20reward/jHunt%20to%20CMcAnea%20210115>

² Paramedic Evidence Based Education Project (PEEP) report
<http://hee.nhs.uk/wp-content/blogs.dir/321/files/2014/04/PEEP-Report.pdf>

- 3.2 With pay not being cited as the main reason for leaving in our joint surveys it was felt, by employers, that the criteria set by the NHS PRB could not be met and as such determined not to provide a joint submission. We understand Staff Side have surveyed members independently about matters relating to pay and this will be presented to the NHS PRB. We acknowledge paramedics are not paid at the same level as some other clinical staff who operate in similar circumstances i.e. autonomy and challenging environmental factors and this causes frustration amongst staff.
- 3.3 Further to this, no Trust currently uses the flexibility afforded under Agenda for Change to offer local RRP's. This would suggest pay is not the main reason for leaving as we have a facility to award RRP's up to 30% if so desired, although some Trusts do offer forms of local incentive payments.
- 3.4 It is correct that paramedics are leaving Trusts but the pattern seen by employers is that qualified staff are enjoying more varied opportunities in the wider NHS system. Many are able to leave to take opportunities in Primary Care and Out of Hours providers for an offer which is significantly different to the Ambulance Service; different roles, no emergency work, less demand, no overruns, no shift work, often more money and increasingly, clinical and career development opportunities. Equally staff move between Ambulance Trusts for career opportunities. Employers paying more, we believe, cannot resolve, on their own, the issues qualified staff state for leaving such as stress, workload, demand and the lack of a wellbeing culture due to the current relentless focus on performance.
- 3.5 Employers do not accept the evidence supplied by staff side regarding 'role creep' or their assertion that paramedics should be paid a band 6 is relevant for the purposes of the NHS PRB panel. Using an RRP to bridge a perceived or real banding gap does not appear to be the purpose of this award, although we accept a solution does need to be found to resolve this ongoing debate.

4.0 Funding

- 4.1 Employers, as all NHS bodies must deliver services within their financial envelope. Any changes to terms and conditions have to be affordable.
- 4.2 If we assume that there are 14,945 paramedics³ (as of March 2015) employed by GB Ambulance Trusts, the cost of the proposed National RRP at an average of £4,980 (as quoted by staff side³) would cost the Service £74 million per annum. This excludes the cost of RRP payments that would be allocated to vacant posts
- 4.3 Importantly, this additional expenditure would not address many of the underlying problems or improve the quality of services to patients. Focusing additional funding on increasing our human resource capacity would enable employers to reduce the currently unsustainable levels of workforce utilization and support and facilitate more widespread access to clinical and career development opportunities which may be a far more potent retention strategy.

4.4 Employers suggest this would be unaffordable without central funding or the need to make significant service changes which may impact performance and patient care. This is especially so given Trusts are currently consuming additional demand without matched funding.

4.5 Without national funding, such additional expenditure we believe is unwarranted in the context of a national RRP.

5.0 Conclusion

5.1 Collectively and individually Ambulance Trusts are continuing to refresh their approach to recruitment and retention. The new national forum has given employers and staff side a fresh impetus and commitment to developing a workplace that is fit for the modern ambulance service. The employers' side remains absolutely committed to the partnership and will continue to work with staff side on the matters identified in the agreed terms of reference and any other matters that will improve the recruitment and retention of qualified paramedics.

³ Statistics quoted in staff side submission for recruitment and retention of ambulance staff NHS pay review body evidence