Belfast Health and Social Care Trust
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FOI/25713

8 November 2021

Nursing Agency Spend

Enquiry:
Can you please provide a breakdown of Nurse Agency spend by Clinical Area (e.g. A&E, Theatres, Outpatients, Maternity/O&G, etc.) for the period of April 2020 – March 2021.

Please see attached for breakdown

Total spend: £45,818,274

Information for context:

Mental Health:
The agency spend in Mental Health can mainly be attributed to a 20% Vacancy rate across the nursing family and an increase in sickness absence, some of which is directly related to staff affected by Covid-19.
We also note an increase in both demand and acuity resulting in consistent bed occupancy over 100% in the Adult Mental Health Inpatient centre.

Learning Disability
The agency spend in Learning Disability can be attributed to a 39% Vacancy rate across the nursing family and in addition as a result of staff suspensions in relation to the ongoing Investigations surrounding historical abuse at Muckamore Abbey Hospital.

Adult, Community and Older Peoples Services (ACOPS)
The agency spend in Community Nursing is attributed to a significant registered nursing vacancy rate and sickness absence, including Covid-19 related absence, across the Community Nursing Service.
Vacancy rates and sickness/Covid absence had a particular impact on Knockbreda District Nursing Team; Grove District Nursing Team, as well as Out of Hours District Nursing Service. In order to maintain a safe responsive service, these three teams were supported with additional agency nurses.

Child Health
In RBHSC there has been minimal spend on nurse agency. For the most recent financial year, this equates to about 0.3 wte Band 5. However some spend was required due to gaps in the Service, as recruitment of children`s nurses in the main comes from the annual Regional recruitment and happens once a year. Coupled with a consistent level of sickness/ absence and in particular maternity leave, there has been a need to bolster staffing within Specialist areas like PICU, theatres and the medical/ surgical wards due to increased complexity and acuity of patients.
However once all vacancies are filled the aim is always to fully reduce any agency spend where possible.