

LEAVERS CHECKLIST FOR MANAGERS

This Leavers Checklist is to be completed by the Line Manager for **all** leavers including those on fixed term or temporary contracts, secondment to the Trust or contracted workers e.g. locums and Agency.

A signed copy of the form should be retained by the Line Manager:

| Leaver Name:R | Department: |
|-------------------------|---------------|
| Date of Leaving: | Line Manager: |
| Date of Dept. Transfer: | |

| | Action | Date Completed (where applicable) | Manager's Initials / Comments |
|--------------------|--|--|-------------------------------------|
| dure | Manager acknowledges end of employment, and directs employee to access the Exit Interview – Questionnaire, which is available through Employee Self Service (ESS) on HRPTS. | | |
| Leaver's Procedure | Manager completes leaver's form with employee including calculating annual leave allowance in accordance with the Leaver's Process via HRPTS – MSS. NB : Payroll closedown may cause delays in updating HRPTS/payment of final salaries or monies owed. Details of Payroll closedowns are available from "Your HR": 90635678 | | |
| e | Over Payments – if there is any overpayment all monies will be deducted in full from the final salary. If there is still a balance due Payroll will invoice Income Department to chase recoupment. | | |
| Finance | Training Expenses – if employee has received training fees which require recovery if the employee leaves within an agreed minimum period of service, manager to notify Payroll to arrange deduction from final salary. (Please refer to the Study Assistance Policy) | | |

| | | |
|------------|---|------|
| | Authorised Signatories (if applicable) – Manager to notify Finance Manager of leaver. | |
| | Lease Car Holder – Manager to notify Finance Manager of leaver. | |
| | Child Care Vouchers – Manager to ensure leaver completes an 'Opt Out Form' (available on the Hub) and forward to HR Improving Working Lives Team. | |
| | Cycle to Work Scheme – Manager to notify Travel Co-Ordinator (Estates Dept.) of leaver. | |
| | Files, papers, manuals, diaries, library items – Agree arrangements for handover and return and sign when all received/returned as appropriate. | |
| e | Workload Handover – Manager to arrange to meet with employee to arrange full handover. | |
| Governance | Appointments (if applicable) – confirm all patient related notes, dictation and letters have been completed and signed. | |
| 0 | Hand over notes (where applicable) – confirm all hand over notes are complete and up to date. | |
| | Office/Desk telephone – Arrange to amend telephone lists and update any voicemail messages / out of office. | |
| Mana | ollowing equipment and property must be ref ager or agree arrangements for handover and received. | |
| | Remote Access (Fob or Pin Access Codes) –Once received the manager will forward to ICT Manager. | |
| | Computers, Laptops – Once received the manager will forward to ICT Manager. | |
| nent | IT Hardware and Software – USB stick, removable media, SD cards, information storage devices, copies of programmes and Trust issue devices. Once received the manager will forward to ICT Manager. | |
| Equipment | Access to IT Systems – Manager to identify access to systems where accounts need to be deactivated and inform System Managers e.g. PAS, PARIS,LABS,RIS | |
| | Mobile phone, pager, charger, headphones and any accessories – Once received the manager will forward to ICT Manager. | |
| | ID Badge – Once received the manager will forward to the relevant Security Office Manager. | |

| Car park Pass – Once received, pass to the relevant Security Office. Manager to ensure Leaver completes Cancellation Form (available on the Hub) and forwards it to Estates Department, Musgrave Park Hospital. | |
|---|--|
| Keys, entry cards and fobs and door access codes – Once received the manager will forward to Site Security Manager. | |
| Any other equipment supplied by the Trust to carry out role. | |
| Trust issued Uniform (if applicable) – Once received the manager will forward the uniform to Trust Sewing Room (BCH site) for safe disposal. | |

Managers Declaration

I confirm that I have fully completed this checklist with the above named employee in line with Trust Policy and that the instructions have been carried out in full.

Name: ______ Signature: ______

Date: _____

Employees Declaration

I confirm that I have returned all Trust property and equipment held by me.

I declare the information given on this form is complete and correct. I understand that if I knowingly provide false information I may be liable for prosecution and civil recovery proceedings.

Name: ______Signature: ______

Date: _____

HRPTS EXIT QUESTIONNAIRE

Exit Interview - Questionnaire

To help us to ensure the best employment experience for our staff we would like to know more about what influenced your decision to leave this organisation. This information will only be available to authorised staff for monitoring and reporting on overall leaver questionnaire responses. Your individual information will not be shared with anyone. Please note: This questionnaire is not for reporting workplace issues requiring further action - these should be referred using relevant policy and procedure.

Q.1 - Reasons you have been attracted to new-employment / change in employment status - select up to 3

| Ans - Reason1: | ۲ |
|----------------|---|
| Reason2: | ۲ |
| Reason3: | ۲ |

Q.2 - Reasons for leaving employment with this Organisation - select up to 3

| Reason1: | ~ |
|----------|---|
| Reason2: | ~ |
| Reason3: | ~ |

Q.3 - Would you recommend this Organisation as place to work? No

| Ans - | | Yes | |
|--------|---|-----|--|
| Alla - | - | 100 | |

Ans

The options for response to Q1 are as follows:-

- **Better Development opportunities** •
- Better location (travel/access) .
- **Career Change** .
- Improved WLB •
- Overall better employer .
- Permanent/longer term contract .
- Promotion/better pay .
- Reason not related to work(place)
- Other

The options for response to Q2 are as follows:-

- Lack of development opportunities .
- Lack of permanent post
- Lack of promotion prospects .
- Poor work conditions .
- Poor work relations .
- To achieve improved WLB .
- Unsatisfactory Line management .
- **Unsatisfactory Senior management** .
- Unsuitable location (travel/access)
- Other

RETENTION WITHIN MUCKAMORE ABBEY HOSPITAL

Introduction

Management within Adult Social Primary Care Directorate have requested support from the Modernisation and Workforce Planning Team (M&WFP Team) within HR in relation to concerns regarding the number of staff leaving based within Muckamore Abbey Hospital due to (Voluntarily Resignation/Retirement).

An analysis over the period April 2016- September 2017 identified that there were 21 staff who voluntarily left the Trust within the ASPC Directorate based at Muckamore Abbey.

| Reason for Action | Pay Band | No. of leavers |
|-------------------|----------|----------------|
| Resignation | Band 3 | 2 |
| | Band 5 | 7 |
| Resignation Total | | 9 |
| Retirement | Band 3 | 4 |
| | Band 5 | 5 |
| | Band 6 | 1 |
| | Band 7 | 1 |
| | Band 8 | 1 |
| Retirement Total | | 12 |

In the first instance feedback is sought from those staff leaving in the format of exit interviews however only one of the above staff who left undertook an exit interview on HRPTS.

Proposed Approach

Parameters: Applicable for those staff resigning or retiring from the Trust with effect from 1 February 2018 – 31 March 2018. This excludes those leavers whose departure is not voluntary, eg: Employees who were dismissed as a result of disciplinary action, employees who left due to ill health through retirement/termination.

- 1. Line manager within the ASPC Directorate on becoming aware that the employee is resigning/retiring should personalise the attached letter and share via e-mail and provide them with protected time to undertake the online survey via Survey Monkey.
- 2. Learning & Development staff (who administer survey monkey with Human Resources) will provide the Modernisation and Workforce Planning team with details of those staff who have indicated they are happy to participate in a telephone exit interview on a (Bi-weekly basis suggested).

- 3. The M&WFP team will make contact with those who have indicated they are prepare to undertake the telephone exit interview and organise at mutually convenient time.
- 4. Only as a failsafe the M&WFP team will check those leavers processed on HRPTS and cross reference those who did not undertake the survey and remind them undertake survey.
- 5. The M&WFP Team will produce reports and provide summary analysis with the Directorate to take forward.





APPENDIX 1

(DATE INSERTED)

Dear Colleague (NAME INSERTED)

Invitation to have your say on leaving Muckamore Abbey Hospital

I would like to take this opportunity to thank you for your valuable contribution whilst working for the Trust in Muckamore Abbey and to wish you well for the future. I am inviting you to complete a questionnaire via survey monkey. Please click on link :- ANNETTE TO INSERT

The purpose of the survey is to help us to identify areas where we can improve by establishing any contributing factors that may have influenced your decision to leave. We are eager to hear from and get the views of as many staff as is possible. I encourage you to participate by completing this Questionnaire in the link provided below.

The survey has been produced by the Human Resources and Organisational Development and I wish to assure you that all responses will be totally anonymous and confidential. Management within the Muckamore Abbey Hospital will not have access to the information on an individual level.

When completing the survey you will asked whether you would be happy to participate in a telephone exit interview. I would encourage you to also participate in this interview as it will provide an invaluable source of information to help us improve going forward.

Thanking you in anticipation.

Yours faithfully

Service Manager

APPENDIX 2

Draft Exit Interview Questionnaire



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All responses will be anonymous and confidential Muckamore Abbey Hospital, Adult Social & Primary Care Directorate

1. Personal Details:

| First Name: | |
|---------------|------|
| Surname: | |
| Staff Number: | |
| Band: | |
| Job Title: | |
| | |

Job Family:

| i | _ |
|---|-----|
| | |
| | |
| | 100 |
| | |
| | |

2. Reason for Leaving:

On what basis are you leaving the Trust?

- □ Resignation
- □ Retirement
 - _ Temporary Contract

Please select your main reason for leaving? (Select one)

- Working relationship with manager
- □ Working relationship with colleagues
- Lack of Training and Development
- □ Flexible working / Work life balance
- Promotion prospects / Career prospects
- Unsuitable location
- \square Wellbeing and safety at work
- Not satisfied in job role
- Pay / Terms and Conditions
- Return to Education
- Retirement
- End of Fixed Term Contract
- Other (Reason) ______

Please select any other reasons which contributed to you deciding to leave the Trust? (Select a maximum of two)

- □ Working relationship in the team
- Lack of Training and Development
- □ Flexible working / Work life balance
- Promotion prospects / Career prospects
- Unsuitable location
- Wellbeing and safety at work
- Not satisfied in job role
- Pay / Terms and Conditions
- Return to Education

3. Destination on Leaving:

On leaving are you joining a bank within the Trust?

- YES
- ° NO

Have you secured a job within another organisation?

- YES
- NO (please progress to Q5)

4. What sector is your new job in?

- ^C HSC Organisation
 - □ Northern Trust
 - □ South Eastern Trust
 - □ Western Trust
 - □ Southern Trust
 - 🗆 BSO
 - □ NIBTS
 - □ Other NHS Organisation (Please Specify) _____

What AFC band is your new position? _____

- Other Public Sector
- Private Sector
- C Voluntary Sector
- Other (Please Specify) _____

5. Would you recommend the Belfast Trust as a place to work?

- ° YES
- ° NO

6. Would you be happy to participate in a telephone interview?

- ° YES
- ° NO

If yes please enter contact telephone numbers:

Home: _____

Mobile: _____

Thank you for your co-operation.

APPENDIX 3

Telephone Questionnaire- Mary

APPENDIX4

Follow up e-mail to leavers issued by M&WFP- Annette to draft

EXIT INTERINGUAR SUMMARY REPORT



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SUMMARY REPORT



ASPC Directorate, Muckamore Abbey Hospital (MAH)

Modernisation & Workforce Planning Team

Human Resources

16 August 2018

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1. Introduction

Management within Adult Social Primary Care Directorate requested support from the Modernisation and Workforce Planning Team (M&WFP Team) within Human Resources in relation to concerns regarding the number of staff leaving voluntarily from Muckamore Abbey Hospital (MAH) through resignation or retirement.

Within the Trust all staff processed as leavers (with the exception of Medical and Dental) and who leave voluntarily are invited to undertake an Exit questionnaire on the Human Resources Payroll Travel and Subsistence (HRPTS) system via Employee Self Service.

An action of the Muckamore Abbey Task and Finish Group was that exit interviews would be undertaken on a pilot basis by the (M&WFP) Team as an alternative to completion of the Exit Questionnaires on HRPTS.

^{The} pilot took place during the period December 2017 – April 2018. The (M&WFP Team) conducted eleven exit interviews with staff. All interviews took place with the agreement of staff on an anonymised basis and were conducted either in person at MAH or McKinney House, with one interview conducted by telephone.

Information obtained was gained through open and honest discussion with staff using an Exit Interview questionnaire. The Exit Interview Questionnaire, designed for this exercise, is attached as **Appendix 1**.

2. Analysis of information from Exit Interviews

Quantitative Analysis

Of the eleven staff interviewed seven resigned and four retired.

One member of staff interviewed was from the Administrative and Clerical occupational group with 'ne remaining 10 being Band 5 nurses. Seven of these nurses resigned and three retired.

All of the seven nurses who resigned secured Band 5 posts with other HSC Trusts. It is worth noting that five of these staff went to the South Eastern Trust in areas outside of Learning Disability Nursing.

45% of staff (5 headcount) cited wellbeing and safety at work as the main reason for leaving. It is also worth noting that a further three staff cited wellbeing and safety at work as a contributory reason to their decision to leave. Three members of staff cited "Retirement" as the main reason for leaving, one member of staff cited "Not Satisfied in Job Role" as a main reason for leaving, one person citing "Lack of training and development" and another staff member citing "Unsuitable location".

"Working relationship with manager", "not satisfied in job role" and "wellbeing and safety at work" as highlighted earlier, featured as contributory reasons for leaving and was selected by multiple staff.

64% would not recommend MAH as a place to work, however, 82% would recommend Belfast Trust as a place to work, with 18% undecided/cannot comment.

Qualitative Analysis

Below is a synopsis of the issues identified. Selected quotes from staff are displayed overleaf with a comprehensive listing provided in **Appendix 2**.

- Patient Safety/Governance

- Well Being and Safety at Work

- Physical Aggression
- Stress/low morale

- Management of Staff

- Investigations/Safeguarding
- Lack of support from line management/senior management
- Lack of presence of senior management on site (8B)
- Work/life Balance
- Communication
- Induction, Training
- Job Satisfaction

Quotes from Staff Interviewed



From the findings of the Exit interviews it is clear that an action plan needs to be developed to address some of the concerns cited as the reasons why staff left. Based on the findings to date the M&WFP team recommend the following actions be implemented.

- > Adequate induction programme to support newly qualified band 5 staff.
- > Ensure staff complete preceptorship in a timely manner.
- > Review of new staff at quarterly intervals.
- > Time to reflect on practice where incident of challenging behaviour occurs.
- > Awareness on appropriate use of CCTV.
- > Feedback process on all IR 1 forms.
- > Identify what safe staffing levels are for all shifts and ensure ward is adequately resourced.
- > Demonstrate a cohesive management approach by senior managers within the hospital.
- > Increased visibility on an ongoing basis of Senior Management on site.

Conclusions

The exit interviews carried out with the staff in Muckamore Abbey Hospital to date have been invaluable. They have helped to identify a wide range of issues that can be addressed by management. This exercise, together with the implementation of the recommendations should help to retain staff in the future and to engage staff in the process of improving their working experience within Muckamore Abbey Hospital which ultimately will result in an improved client experience.

Appendix 1

Exit Interview Questionnaire



Muckamore Abbey

Questionnaire to be completed by Modernisation & Workforce Planning Team within Human Resources and will be used flexibly and adapted to the circumstances of the interview.

| * 1. <u>Personal Details:</u> | |
|-------------------------------|---------------|
| First Name: | Date: |
| Surname: | Completed by: |
| Staff Number: | |
| 3and: | |
| Job Title: | Trained in |
| Ward: | |
| Line Manager: | |
| Last Day of Service: | |
| * Job Family: | |

* 2. Reason for Leaving:

2.1 On what basis are you leaving the Trust?

- Resignation
- □ Retirement
- □ Temporary Contract

2.2 Please select your main reason for leaving? (Select one)

| | Working relationship with manager Working relationship with colleagues Lack of Training and Development |
|--------|---|
| | Promotion prospects / Career prospects |
| | Flexible working / Work life balance |
| | Wellbeing and safety at work |
| | Not satisfied in job role |
| | Pay / Terms and Conditions |
| | Other (Reason) |
| Explor | e response further |



2.3 Please select any other reasons which contributed to you deciding to leave the Trust? (Select a maximum of two)

| | | _ | - | |
|---|---|---|---|--|
| ┝ | _ | - | - | |
| | | | | |
| | | _ | _ | |
| _ | | | - | |
| - | - | | | |
| | | | | |
| | | | | |

Working relationship with managerUnsuitable locationWorking relationship with colleaguesReturn to EducationLack of Training and DevelopmentEnd of Fixed TermPromotion prospects / Career prospectsRetirementFlexible working / Work life balanceRetirementWellbeing and safety at workPay / Terms and ConditionsOther (Reason)Image: Contract in the same interval of the same i

Explore response further

- 3. * Do you feel anything could have been done to encourage you to stay?
- 4. What have you enjoyed whilst working in Muckamore Abbey?

5. What have you found challenging whilst working in Muckamore Abbey?

6. Would you recommend Muckamore Abbey as a place to work?

- YES Explore
- NO Explore

* 7. Would you recommend Belfast Trust as a place to work?

- YES Explore
- NO Explore

8. Where are you going?:

8.1 Have you secured a job within another organisation?

YES

NO (please progress to 7.3)

| * 8.2 What sector is your new job in? |
|---|
| HSC Organisation |
| Northern Trust |
| □ South Eastern Trust |
| □ Western Trust |
| Southern Trust |
| □ BSO |
| |
| □ Other NHS Organisation (Please Specify) |
| * What AFC band is your new position? |
| Other Public Sector |
| Private Sector |
| Voluntary Sector |
| Other (Please Specify) |

8. 3 On leaving are you joining a bank within the Trust?

YES

.10

Thank you for your co-operation. *

Appendix 2

| | Synopsis of Issues listed |
|-------|---|
| | Related quotes from staff |
| Patie | nt Safety/Governance |
| ٠ | Clients need time, attention and consistency. Client group has changed dramatically, now more forensic and challenging, if there is an incident of challenging behaviour there is not enough staff to respond in a timely manner |
| • | Continuity of care fractured due to number of bank and agency staff |
| | |
| • | Insufficient/dangerous staffing levels, staff need to be MAPPA trained, so use of agency staff is therefore not a realistic option as they are unfamiliar with the clients and not a true replacement for staff on the ward |
| ٠ | A lot of expectations in terms of restraining but without the staffing levels to deliver |
| • | Registration at risk, there are not the resources to deliver |
| ē | I submitted around 50 IR1 forms, never was there any follow up or debrief or learning yet in one of these incidents 3 people were injured |
| ٠ | No nursing supervision |
| • | Insufficient staffing levels resulting in clients not getting enough attention and potential for medication errors |
| Well | Being and Safety at Work |
| 0 | Physical Aggression |
| 0 | Daily risk of physical harm |
| 0 | Mental scars from violence |
| 0 | Incidents of completely unexpected aggression |
| 0 | Staff just going through the motions of their role as everyone feels compromised due to investigations |
| 0 | Made to feel guilty if you have to go home as a result of an injury |
| Stres | s/morale low |
| | Morale at an all time low |
| | Poor staff morale affects mental health |
| | Increasingly challenging more recently, even difficult to get toilet and meal breaks |
| | Moved from pillar to post |
| | Staff are falling off their feet have not ate meals, and are pulled for having a drink of water on the wards (following surveillance on CCTV) |
| | Staff feel vulnerable |
| | Expected to do 10 things at once |
| | Muckamore used to be a community, that is no longer the case |

| | Feel | burnt | out, | exhausted | |
|--|------|-------|------|-----------|--|
|--|------|-------|------|-----------|--|

- Poor staff morale due to agency staff paid enormous wages but not fulfilling full role (undertaking one to ones).
- 20-25 nurses started in Muckamore from my university class approximately only 2 remain working here

Management of Staff

Investigations/Safeguarding

- > Inappropriate use of cameras
- No support regarding safeguarding
- Everyone is under suspicion
- Blame Culture
- > Spot checks feel like spying
- Investigations take too long

Lack of support from management/senior management

- Not appreciated
 - Senior managers were not working as a team. Conflict filtered down and arguments from senior managers filtered down - power struggle
 - Never see management unless something is wrong. Senior Management (8B & above) never seen on the ground.
- No support from senior management
- * Managers are available but afraid to roll up their sleeves
- Band 6 staff are counted in the skill mix but not involved in direct patient care and should be able to assist in times of need

Worklife Balance

 No flexibility with Rotas, rotas not completed 4 weeks in advance so cannot arrange childcare

Induction, Training

- Feel I have not been listened to previously or have confidence that something will happen
- No feedback or checking from senior management if ok following injury
- Only one 1:1 meeting with ward manager in two and a half years
- Managers highlight all the wrongs there is a lack of positive feedback
- New band 5 staff are leaving as they are thrown in at the deep end

Communication

- Mandatory basic induction not completed, not aware of what to do when sick for example
- Insufficient support following on from induction

- Nurse in charge within my first month, not prepared as new to the post and first post from university, didn't feel there was enough support in place and didn't feel comfortable being put in position.
- First day on duty really taken aback at the way staff on the ward were spoken to by management, staff were really upset and ended up in tears.

Job Satisfaction

- Qualified nurses are not used to their full potential. Extremely understaffed resulting in me completing B3 duties as opposed to B5
- Preceptorship not getting completed due to staffing levels not being utilised as a B5 nurse, spends a lot of time undertaking B3 role, escorting etc. as a result, my nursing qualification and training are wasted. Can't take observe com't due
- wasted. Can't take charge, can't do care plans, feel like a spare part
 A lot of nursing time spent on computers/paperwork taking time away from engaging and interacting with patients



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SUMMARY REPORT

Muckamore Abbey Hospital (MAH)



(For the period October to December 2019)

Modernisation & Workforce Planning Team Human Resources 31st December 2019

1. Introduction

Management within the Adult Social Primary Care Directorate requested support from the Modernisation and Workforce Planning Team (M&WFP Team) within Human Resources relating to the increasing number of staff leaving Muckamore Abbey Hospital (MAH) through resignation or retirement.

Within the Trust all staff processed as leavers (with the exception of Medical and Dental) who leave voluntarily are invited to undertake an Exit questionnaire on the Human Resources Payroll Travel and Subsistence (HRPTS) system via Employee Self Service. As there has been a poor completion response rate on HRPTS it was agreed that as an alternative face to face interviews would be undertaken by the M&WFP Team with staff exiting Muckamore Abbey Hospital.

Face to face interviews took place from the end of October 2019 to December 2019. Whilst 22 names were given to the M&WFP Team, three staff had already left the service and only six others had handed in their notice. As a result, during this period Exit interviews were undertaken with the agreement of the six staff on an anonymised basis at Muckamore Abbey Hospital.

Information obtained was gained through open and honest discussion with staff using an Exit Interview questionnaire. The Exit Interview Questionnaire used for this exercise, is attached in **Appendix 1**.

2. Analysis of information from Exit Interviews

The following section summarises the responses to the questions contained in the Exit Questionnaire.

Question 2. Reason for Leaving

Of the six staff interviewed five resigned and one retired. Five staff were from the Nursing occupational group – two were Band 5 Staff Nurses and three staff were Band 3 Healthcare Support Workers. Four of these staff resigned and one is retiring. One staff member was from the Medical and Dental occupational group.

Two staff cited "Wellbeing and Safety at work" as the main reason for leaving. It is worth noting that both of these staff were Band 3 Healthcare Support Workers (HCSW) and one further staff member cited "Wellbeing and Safety at work" as a contributory reason for their decision to leave. The other HCSW Band 3 and one of the Staff Nurses Band 5 cited "Career/Promotion prospects" as the main reason for leaving. One Staff Nurse Band 5 cited "Retirement" as a main reason for leaving, however, it should be noted that this staff member stated that they had decided to retire much earlier than intended and had taken voluntary early retirement resulting in them receiving a reduced HSC pension and lump sum. The remaining member of staff cited "Flexible working/Work life balance" as their main reason for leaving.

"Other Reason/s" featured as the contributory reason for leaving and was selected by multiple staff.

Question 3. Could anything have been done to encourage you to stay at MAH?

Of the six staff interviewed, five confirmed there was nothing that could have been done to encourage them to remain working at MAH, the remaining member of staff stated that they would have had no issues remaining at Muckamore, however, they had already given a commitment to move to another Trust on improved flexible working arrangements.

Question 4. What have you enjoyed whilst working in MAH?

All staff responded it was the great team of staff and working with the patients.

Question 5. What have you found challenging whilst working in MAH?

Below is a synopsis of the issues identified:

- Exposure to Physical Aggression;
- Dealing with extremely challenging behaviour;
- Pressure put on staff to return to work after sustaining work place injury;
- Very stressful environment;
- Staff feeling very vulnerable, under constant scrutiny;
- Qualified staff fearful for their registration;
- Low morale;
- Negative publicity & public perception of the hospital and care delivered to patients;
- Endeavouring to maintain good relationships with relatives as a result of the negative publicity;
- Lack of certainty regarding future of Muckamore;
- Need to secure alternative employment due to vulnerability of MAH's future;
- Unsafe staffing levels pressurised environment;
- High levels of agency staff;
- Pay of Agency staff in comparison to Trust staff;
- Management of agency staff (who are on significantly higher salaries than those having to manage them);
- Balancing work and caring responsibilities;
- Lack of support by line management for staff left on the wards following suspension of other staff involved in hospital safeguarding investigations;
- Lack of presence of new senior management team on the wards.

Question 6. Would you recommend MAH as a place to work?

Four of the six staff stated they would not recommend MAH as a place to work as a result of the issues identified in response to question 5 above.

The other two staff made the following comments:

- Staff were friendly
- Workplace was improving
- Interesting work

Question 7. Would you recommend the Belfast Trust as a place to work?

One staff member stated they would recommend the Belfast Trust as a place to work, however, they also commented that when things become difficult, the Trust is slow to respond. The others either stated that they would not recommend the Belfast Trust as a place to work as they felt the Investigation at MAH had been badly handled by the Trust, or, they felt unable to comment as they had not experienced working elsewhere in the Trust.

Question 8.1. Have you secured a job in another organisation (If yes, where)?

The five staff who resigned have all obtained employment within the HSC sector. One B5 Staff Nurse has obtained a promotion within the Northern Trust. One staff member is moving to a job share post in the Southern Trust. Of the three Healthcare Support Workers, one has taken a significant reduction in hours to take up a post in an Adult Resource Centre in the South Eastern Trust, one member of staff has taken a lower banded post as a HCSW Band 2 (outside of learning disability) within the Northern Trust and the other HCSW has obtained a B3 post in Oldstone, a residential unit for patients from MAH within the Belfast Trust.

Question 8.2. On leaving, are you joining a 'Bank' within the Belfast Trust?

Three staff stated they would not be joining the 'Bank', whilst one indicated that they were joining the Agency that supplies staff to MAH. The remaining three staff were already on the Trust 'Bank', with only one indicating that they would consider continuing to work on the 'Bank' in Muckamore Abbey Hospital.

3. Conclusion

The Exit interviews carried out with the staff in Muckamore Abbey Hospital have been invaluable. It should be noted that a number of the staff interviewed were very emotional and deeply regret that they felt they had no alternative but to either resign or retire from their posts.

It is hoped that the above responses and the actual staff comments contained in **Appendix 2** identify a range of issues that can be addressed by management and assist in the future retention of staff at Muckamore Abbey Hospital.

Exit Interview Questionnaire

Muckamore Abbey

HSC Belfast Health and Social Care Trust

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Questionnaire to be completed by Modernisation & Workforce Planning Team within Human Resources and will be used flexibly and adapted to the circumstances of the interview.

* 1. Personal Details:

| _ Date: |
|---------------|
| Completed by: |
| |
| - |
| Trained in |
| - |
| |
| |
| |
| |

* 2. Reason for Leaving:

2.1 On what basis are you leaving the Trust?

- □ Resignation
- □ Retirement
- □ Temporary Contract

2.2 Please select your main reason for leaving? (Select one)

| | Working relationship with manager Working relationship with colleagues | Unsuitable location Return to Education |
|--------|---|--|
| | Lack of Training and Development | End of Fixed Term Contract |
| | Promotion prospects / Career prospects | Retirement |
| | Flexible working / Work life balance | |
| | Wellbeing and safety at work | |
| | Not satisfied in job role | |
| | Pay / Terms and Conditions | |
| | Other (Reason) | |
| Explor | e response further | |

2.3 Please select any other reasons which contributed to you deciding to leave the Trust? (Select a maximum of two)

| Promotion prospects / Career prospects Retirement Flexible working / Work life balance Image: Constraint of the second secon | Working relationship with manager Working relationship with colleagues Lack of Training and Development | Unsuitable location Return to Education End of Fixed Term Contract |
|---|---|---|
| Wellbeing and safety at work | Promotion prospects / Career prospects | Retirement |
| Not satisfied in job role Pay / Terms and Conditions | Flexible working / Work life balance | |
| Pay / Terms and Conditions | Wellbeing and safety at work | |
| | Not satisfied in job role | |
| Other (Reason) | Pay / Terms and Conditions | |
| | Other (Reason) | |

Explore response further

- 3. * Do you feel anything could have been done to encourage you to stay?
- 4. What have you enjoyed whilst working in Muckamore Abbey?
- 5. What have you found challenging whilst working in Muckamore Abbey?
- 6. Would you recommend Muckamore Abbey as a place to work?
- YES Explore
- NO Explore

* 7. Would you recommend Belfast Trust as a place to work?

- YES Explore
- NO Explore

8. Where are you going?:

8.1 Have you secured a job within another organisation?

YES

NO (please progress to 8.3)

| * 8.2 What sector is your new job in? |
|---|
| HSC Organisation |
| □ Northern Trust |
| □ South Eastern Trust |
| □ Western Trust |
| □ Southern Trust |
| □ BSO |
| |
| □ Other NHS Organisation (Please Specify) |
| |
| * What AFC band is your new position? |
| Other Public Sector |
| Private Sector |
| Voluntary Sector |
| Other (Please Specify) |
| |

8.3 On leaving are you joining a bank within the Trust?

YES

NO

Thank you for your co-operation. *

Appendix 2

| | Quotes from staff |
|---|---|
| • | Never thought I would ever leave Muckamore having dedicated so many years of my career here, but it's too stressful and the pressure is too great. |
| • | Feel at risk of physical harm on a daily basis, have been assaulted in the past and feel unable to put up with attacks on me – just can't take it anymore. |
| • | Mental scars from physical assault, worried in case I totally over react if assaulted again. |
| • | Incidents of completely unexpected aggression, feel targeted as it's never done in front of other staff. |
| • | Patient profile has changed dramatically. As a result patients are displaying much more challenging behaviour which is putting everyone under a great deal of stress and strain. On occasions when the ward has been short staffed, I'm left with the one patient with extremely challenging behaviour for all of the 12 hour shift. |
| • | Feeling of isolation as patients are in individual Pod's so you spend a lot of the shift on your own with the one patient. |
| • | Not enough staff for the number of patients. |
| • | Too stressful after all that's happened over the past year. Lack of staff and high number of agency staff who are not a true replacement for permanent staff on the ward. An awful lot expected despite the current situation. |
| • | Feel as though you not only have to look after the patients but also the agency staff as they aren't familiar with the patients and you are trying to ensure their safety also. |
| • | Stressful being in charge of a ward and managing agency staff who are getting paid more than the other qualified nurses on the ward. |
| • | Poor staff morale due to agency staff paid enormous wages but not fulfilling full role. |
| • | Bad publicity really taking its toll as many of us come from small communities and you feel it is reflecting on you as an individual. |
| • | Ward staff feel very unsupported - member of team came into ward to advise they had just been suspended and to collect their belongings but staff on duty were left really upset and shell shocked – had a massive impact on everyone, but were just left to get on with it. Absolutely nothing was said to the ward staff by line management and acted as if nothing had happened. Think someone should have at least spoken to the ward staff to reassure and support everyone. It's a very stressful environment to be working in. |
| • | Muckamore Abbey Hospital won't exist in the future, they are looking to close it. As a result there is no job security. |
| • | Taking up a post with reduced pay/ hours but anything is better than continuing to work here. |

| ٠ | Poor staff morale due to agency staff paid enormous wages but not fulfilling |
|---|--|
| | full role. |

- Only two trained Band 5 nurses on duty per shift. Other M/H Units I have worked in have 2-3 Band 6's on duty on each shift.
- Trained staff spend so much time on paperwork taking time away from engaging and interacting with patients. Feel guilty and ward staff feel they are not being supported.
- Made to feel guilty if you have to go home as a result of an injury. Being put under pressure to get back to work as soon as possible.
- There is nothing on site to occupy the patients in the evenings which leads to frustration and boredom.
- Despite informing managers that things were very difficult and demands of the job were causing me stress, nothing was done until after I had to take sick leave.
- Ward staff haven't met new senior management team, it would be great to see them on all of the wards.
- When things go wrong it takes the Trust too long to address and respond to issues.