



Nursing Roster Procedure

1. Guiding Principles

Effective roster practices consider the needs of the patient, the staff and the organisation and are the mechanism to ensure that staffing resources are appropriately allocated to meet service delivery requirement. Cooperation communication and goodwill contribute to efficient and effective rosters.

The overarching principles are that rosters:

- ensure sufficient and suitably skilled personnel are allocated to deliver high quality and safe patient care and appropriately meet anticipated service demands
- comply with relevant regulatory frameworks including [industrial agreements](#), and WA Country Health Service (WACHS) [Occupational Safety & Health Policy](#) and legislation relating to [fairness and equity](#).

This procedure has been developed to guide a consistent process across WACHS. There may be variances of circumstance in individual regions however adherence to these principles is an expectation.

It is acknowledged that rosters are a key component in staff satisfaction and retention. The accommodation of staff requests will be considered where practicable, distributed equitably however the priority of a roster is to meet service needs.

2. Procedure

- The manager of a ward unit or department (however titled) is responsible for ensuring that the authorised roster is balanced in regards to service needs, ward profile requirements based on workload, [ANF 2018 Agreement](#) and [United Voice 2018 Agreement](#) requirements (i.e. Nursing Hours per Patient Day) and skill mix.
- Rosters are to be authorised and published within a minimum of 28 days prior to the commencement of that dated roster.
- In extenuating circumstances, a roster may be posted less than 28 days prior, but not less than 14 days.
- Rosters may be altered at any time by the manager or nominated delegate; however this must be in consultation with the staff members affected. This will enable appropriate management of the nursing services of the department.
- Prior to the date of the changed shift, the manager or nominated delegate is to notify the employee concerned.
- Individual requests in regards to flexible work arrangements and specific requests for shift types and /or days off are to be in line with [WACHS Flexible Working Arrangements Policy](#).
- Prior to changing any long-standing informal agreements, such as set days or shift patterns, advice must be sought from the Human Resources (HR) Department.

2.1 Roster Requests

- Roster requests are a preference, in determining requirements of the service the request may be accommodated or declined.
- Roster templates are provided for staff requests eight (8) weeks prior to the roster commencement date.
- A minimum of one (1) week is provided for staff to make requests for the roster period.
- The approved roster is published 28 days prior to the roster commencement date.
- Staff may request 40% of their roster preferences.
- The table below demonstrates the number of shifts worked per roster and maximum requests considered per roster for staff.

Shifts per fortnight	10	9	8	7	6	5	4	3	2	1
Maximum requests per roster	4	4	3	3	2	2	1	1	1	1

- Any ongoing (regular) requests will need to be requested each fortnight and will form part of the 40% of requests considered.
- Staff who accrue days off (ADOs) may request their preferred ADO date.
- If additional requests are wanted, the staff member is to discuss with the manager to determine if the requests are able to be accommodated. These additional requests are not submitted on the roster template and will be considered, while taking into account staff profiles, skill mix equity and service requirements.
- If a specific request cannot be accommodated within the roster, the staff member may seek to negotiate a shift 'swap' with a colleague.
 - This negotiated change is to be with a staff member within their own roster demographic e.g. a registered nurse (RN) to swap with an RN, and enrolled nurse (EN) with an EN and be within an equivalent skill level.
 - For all shift 'swaps' the staff member is to discuss with the ward / unit / department manager for confirmation and approval.
- While every attempt is and should be made to meet staff requests, the provisions of the agreements must be adhered to and the roster must meet the needs of the organisation. A request does not guarantee the shift wanted.
- Staff, through the **WACHS Flexible Working Arrangements Policy**, may request general preference for shift patterns, e.g. night shift only, which may be used as a guide when completing rosters throughout the year.

2.2 Rostering Guide

Fatigue is a risk associated with shift work and excess hours of work often related to sleep deprivation. In mitigating this risk, the following points are to be considered.

- The preceding roster pattern.
- The direction of rotation
 - Roster in a forward direction:
 - day – evening – night – day
 - as opposed to: day – night – evening – day.

- Staff moving from night to day duty to be rostered off duty for 20 hours immediately preceding the commencement of the changed duty.
- Days/evenings and night shifts are not to be rostered within the same week [for full time staff covered by the Australian Nursing Federation (ANF) Agreement and within the fortnight for staff covered by United Voice Agreement].
- There is to be a minimum of 9.5 hours between the finish of one shift and the commencement of the next shift.
- No split shifts.
- No RN/Midwife is to work more than seven (7) consecutive days (unless requested and approved).
- No EN is to work more than six (6) consecutive days (unless requested and approved).
- No staff member is to work more than five (5) consecutive nights (unless requested and approved).
- No staff member is to be rostered more than 10 duties in a fortnight.
- No split days off – (unless requested) staff are to be free from duty for not less than two (2) full days in each week, or four (4) full days in each fortnight.
- Endeavour to roster an early shift prior to days off.
- Endeavour to roster a late shift following days off.
- Those with ADOs accruing to be given the opportunity and encouraged to have ADOs rostered monthly, consider linking this with days off.
- All overtime must be authorised by the appropriate delegated authority, with consideration to previous hours of work ensuring safe hours and appropriate rest breaks.
- Appropriate skill mix.
- Allocation of the appropriate job code is to be noted (i.e. triage, preceptor etc.).
- If 12 hour rosters are in place refer to local 12 hour conditions.

2.3 Clinical Staff Mandatory Training Study Day and Employee Development

- Attendance at and completion of annual mandatory training is the responsibility of the staff member and is to be discussed with the manager who will facilitate rostering to attend. It is preferable for this to occur in the month of anniversary commencement.
- Staff are to organise a meeting with the manager to determine how best to facilitate their individual development needs.

2.4 Leave Requests – Annual Leave, NW Leave, TOIL and ADOs

Consideration must be given to:

- fair and equitable granting of requested leave
- the number of FTE that may be on leave at any one time
- leave requests to be submitted six (6) weeks prior to publication of roster
- reasonable notice provided for extended leave, inclusive of maternity leave, secondment or long service leave to facilitate efficient planning and contingency, which may include a recruitment process
- ADO accrual and the opportunity for ADOs to be rostered each month
- leave liability and effective management inclusive of a formalised plan of action.

2.5 Time off in Lieu (TOIL)

Under the provisions of both the, ANF 2018 Agreement and United Voice 2018 Agreement, WACHS employees who are required to undertake additional work outside of their contracted ordinary hours of duty may elect to accrue time off in lieu (TOIL) of payment proportionate to the payment in which they would otherwise be entitled.

- Accrual of TOIL is not permitted without authorisation from the manager.
- Approval must be sought by staff with the manager prior to the staff member working outside of contracted hours of duty.
 - TOIL may be authorised for clinical emergency or other unexpected clinical need or may be requested by the line manager.
- A minimum of 30 minutes of additional work on a single occasion is required for formal accrual of TOIL.
 - Additional work of less than 30 minutes is not recorded in a TOIL log sheet, with arrangements for acquittal of such additional time to be agreed between the staff member and the manager.
- Staff members required to undertake additional work at the direction of their manager may elect to accrue TOIL in accordance with the provisions of the relevant industrial agreement.
- TOIL accrual and acquittal must be documented, reviewed and approved by the manager.
- Timely acquittal of accumulated TOIL is encouraged, at a time that is mutually agreed between employee and manager.

2.6 Roster deficits

Deficit identified within a roster may be addressed through:

- liaison with other wards/units/departments and negotiation to reallocate excess staff to the identified shortfall
- offer casual staff hours and part-time staff additional hours or shifts
- review shortfalls with the Clinical Nurse Manager (CNM) / Coordinator of Nursing (CON) / Director of Nursing (DON)/Health Service Manager (HSM) to seek approval for Nurse West temporary staff.
 - The contracting of agency staff requires Regional Director Nursing & Midwifery review and authorisation.

The use of the indirect care providers such as managers, education staff or infection control staff to back-fill shifts must follow local procedures/escalation and business continuity planning.

2.7 Rostering of all newly employed nurses

All newly appointed staff and those returning following an absence of six (6) months or greater are to complete the Workplace Orientation and WACHS Induction program and are to be provided with appropriate supervised shifts in their clinical area of employment.

- Within the first week of employment all new employees are to be rostered to attend an orientation/induction with supernumerary time as needed based on experience / skill.
- All new staff are allocated a buddy/support/preceptor/staff development nurse (SDN) for a minimum of one shift following their initial orientation period.

- On this shift, they are allocated their own patient caseload and the buddy / support / preceptor / SDN is to be available to provide support, assistance and advice as required.
- The buddy / support / preceptor / SDN is identified on the roster and the daily staffing sheet or board so **all** staff are aware of the responsibility of the buddy / support / preceptor to support the new staff member.
- The [Professional Practice Framework](#) will identify the timeline in which attaining skills is required.
- Those returning from extended leave are to negotiate with the Manager the time required to re-orientate

2.8 Rostering agency staff members

Specific skills are requested of contracted staff, in line with the position they are filling (i.e. triage, ALS or epidural management) these are to be verified by the manager prior to commencement.

- All new agency staff members commencing at a WACHS facility are to attend a workplace orientation program for the first day of their contract.
- On their second shift, the agency staff member is to be allocated their own patient caseload and a buddy/support is to be available to provide support and advice as required.

2.9 Rostering and management of single nursing post Remote Area Nurses

There are a number of designated Remote Area Nursing Posts across the WACHS.

All Agreement and rostering conditions described in the ANF 2018 Agreement apply to these nurses.

Formalised orientation of the Remote Area Nurse (RAN) is the responsibility of the RAN manager and must ensure:

- all appropriate paperwork and required training has been completed prior to arrival at site
- on arrival at the site, a handover/ orientation in a supernumerary shift.

2.10 Placement of Student Nurses

- WACHS fully supports the placement of RN and EN students.
- All requests for student placements are requested through SONIA a centralised database, these are accepted or declined based on local processes.
- The student is to be allocated a preceptor for every shift they are working and the preceptor is to be clearly documented within the roster. The preceptor is responsible for supervising the student and their orientation to the ward/unit area.

2.11 New Graduates

The rostering of new graduates is in accordance with their orientation plan and preceptor, the skill mix of the clinical area and in accordance with workload priorities and patient care requirements.

2.12 New shift systems or hours of work

Where there is a proposal to create a new shift system or hours of work, these are to be risk assessed, trialled, monitored and evaluated with relevant consultation of staff and /or unions as per the EBA.

2.13 Flexible Work Arrangements

As per the WACHS Flexible Working Arrangements Policy WACHS is committed to promoting a flexible and responsive work arrangement framework that assists staff to balance their work and other life responsibilities.

The value of flexible work practices is acknowledged, it is a collaborative and cooperative approach between managers and employees that requires regular review and needs to be managed reasonably, fairly and transparently without disadvantage.

- Staff wishing to apply for a flexible work arrangement must follow the policy and put their request in writing and include the details of the arrangement sought and the reasons.
- Flexible work arrangements include the use of set days or set shifts, changes to roster start and finish times.
- The manager and the senior nurse of the facility are to discuss and respond to the request within the timeframe outlined in the policy.
- Agreements are to be recorded and forwarded to HR for recording in staff personnel files.
- All flexible work arrangements are reviewed every six (6) months or earlier if the circumstances for one or both parties' changes.

3. Definitions

Roster Profile	The number of designated staff required each shift. The roster profile is flexible adjusting to acuity and activity, the available bed numbers and the allocated Nursing Hours per Patient Day.
Roster Templates	<p>Roster templates are used to set up the planned base shifts staffing classifications, numbers of each level of staff for a defined roster period.</p> <p>Roster templates allow staff to request a specific shift including days off for a roster that is yet to be published. The template is made available at least eight (8) weeks prior to the commencement of the roster.</p> <p>ADOs may be requested on this template.</p>
Flexible Work Arrangements Policy	WACHS policy that outlines responsibility in applying for a flexible work arrangement and the timeframes in which response is to be provided.
Ordinary hours of work	<p>The ordinary hours of work are to be an average of 38 per week for 1.0 full time equivalent (FTE).</p> <p>Staff who work a roster across all shift types (day/afternoon/ night duty) are eligible to accrue ADOs and will work 40 hours/ week or 80 per fortnight as full time hours. Part time staff must work a minimum of 41 hours per fortnight to be entitled to accrue ADOs.</p>

4. Roles and Responsibilities

4.1 The role of the Ward/Unit/Department Manager is to provide an effective roster that meets service needs, ward profile requirements and skill mix to ensure the provision of safe and high quality, evidence based nursing / midwifery care to patients by:

- appropriate management of FTE, inclusive of leave
- application of Nursing Hours per Patient Day, inclusive of monitoring and reporting
- negotiation and facilitation of approved flexible work arrangement agreements
- authorisation of roster
- validation of rosters
- appropriate skill mix is achieved
- addressing shortfalls in roster
- escalating shortfalls and difficulties with rostering to the senior nurse at site
- ensure the roster is entered into RoStar and verification messages (particularly related to breaches in Agreement condition) are reviewed rectified
- ensuring roster portfolio holder has the necessary skills, knowledge and understanding of EBAs, RoStar training and knowledge of this procedure.

4.2 The role of the Roster Portfolio Holder

- Ensure completion of RoStar training.
- Ensure the roster template is available to all staff eight (8) weeks in advance.
- Appropriately roster as per this procedure and the EBA.
- Discuss any issues arising with the roster with the manager as soon as practicable.

4.3 The role of the Clinical / Registered Nurse/ Midwife, Enrolled Nurse

- Ensure roster requests comply with this procedure and EBAs.
- Discuss with the manager, any change in circumstances or difficulties with the roster as soon as possible.
- Proactively pursue completion of mandatory training elements including Performance Development opportunities.
- Comply with the WACHS Flexible Working Arrangements Policy.

5. Compliance

It is an expectation that staff will comply with this procedure. Any concerns regarding compliance are to be addressed with the individual concerned and if unable to be resolved, escalated to the appropriate line manager.

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS. WACHS staff are reminded that compliance with all policies is mandatory.

6. Records Management

All WACHS corporate records must be stored in the approved Electronic Documents and Records Management System.

[Records Management Policy](#)

7. Evaluation

An annual evaluation of this procedure is to occur to ensure any update to the Industrial Agreements or other directives have been incorporated.

Monitoring of compliance with this document is to be carried out by Coordinator of Nursing/Director of Nursing/Health Service Manager, every 12 months using the following means or tools:

- Verify that this procedure is tabled at senior nurse meetings
- Changes or updates are communicated to staff through intranet policy update

8. Standards

[National Safety and Quality Health Service Standards - 1.5](#)

9. Legislation

[Health Services Act 2016 \(WA\)](#)

[Equal Opportunity Act 1984 \(WA\)](#)

10. References

[ANF 2018 Agreement](#)

[United Voice 2018 Agreement](#)

11. Related Forms

Nil

12. Related Policy Documents

WACHS [Flexible Working Arrangements Policy](#)

WACHS [Occupational Safety & Health Policy](#)

WACHS [Occupational Safety & Health Policy](#)

13. Related WA Health System Policies

Nil

14. Policy Framework

Employment

**This document can be made available in alternative formats
on request for a person with a disability**

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