Missed, Late and Shortened Shifts Policy

Supportive Bridge Ltd | Community Support and Healthcare Staffing | Bradford, England

POLICY AT A GLANCE

- **A missed shift can be a safeguarding matter,** not just poor service. Someone may be left without food, drink or help for hours.
- **Tell the office as soon as you know** you will be late or cannot get there. Never just turn up late or not at all.
- **Workers never cancel or swap shifts privately** with a person or with each other. All changes go through the office.
- **Late means more than 30 minutes** from the agreed time, unless the plan says the timing is critical, when it is 15 minutes.
- **If a shift is running late, the office tells the person,** gives a realistic new time, and checks whether they need anything urgently.
- **Every missed shift is investigated** the same day, the person is checked on, and the Duty of Candour applies where they came to harm.
- **Our target is zero missed shifts.** Late shifts are monitored monthly and reported to the Nominated Individual.

SERVICE DETAILS (fill in before issuing)

Registered Manager	
Nominated Individual	
Office phone and office hours	
On-call number (out of hours)	
Monitoring system used	
Date issued	
Next review date	

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1. PURPOSE

1.1 This policy explains how Supportive Bridge Ltd ("Supportive Bridge", "we", "us") makes sure people receive the support they are expecting, at the time they are expecting it, and what happens when a shift is missed, late or cut short.

1.2 Missed and late visits are the most common complaint about home and community support, and the most common cause of harm. A person waiting for their morning support may not have eaten, may need the toilet, or may be sitting in the cold worrying.

1.3 It reflects Regulation 9 (Person-centred care), Regulation 12 (Safe care and treatment), Regulation 17 (Good governance) and Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and NICE guideline NG21 on home care.

2. SCOPE

2.1 Supportive Bridge Ltd operates two arms, and this policy applies to both: our **healthcare staffing service**, supplying care and support workers to care homes, hospitals and other providers; and our **community support service**, where our own support workers visit adults and older people in their own homes, including council housing, on morning and evening shifts, to support them with daily living.

2.2 Supportive Bridge does **not** provide personal care. Personal care is a regulated activity under the Health and Social Care Act 2008 and we will provide it only if and when we are registered with the Care Quality Commission. Our support workers provide non-personal support such as companionship, meal preparation, shopping, domestic help, prompting, and support to get out and about. This policy is written to meet both local authority provider assurance requirements and the standards we will be assessed against at CQC registration.

2.3 This policy applies to every shift we are contracted to deliver through our community support service, and to everyone involved in planning, delivering and monitoring them.

2.4 Where we supply a worker to a client organisation and that worker cannot attend, we tell the client as early as possible and try to supply a replacement, as set out in section 11.

2.5 Failing to attend a shift without telling the office, or leaving early without authority, may lead to action under our Disciplinary Policy.

3. DEFINITIONS

Term	What it means
Missed shift	A shift that did not happen at all, or happened so late that it no longer served its purpose, for example a breakfast shift delivered at lunchtime.
Late shift	A worker arriving more than **30 minutes** after the agreed time, or more than **15 minutes** where the support plan says the timing is critical.
Shortened shift	A worker leaving before the planned time, or not completing the agreed tasks.
Time-critical shift	A shift where timing matters for the person's health or dignity, for example medicines that must be taken at set intervals, a person with diabetes who needs food at a set time, or someone who cannot get up unaided.
Cancelled shift	A shift cancelled in advance by the person, their family or by us, with agreement.

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4. PREVENTING MISSED AND LATE SHIFTS

4.1 Most missed shifts are caused by planning, not by individual workers. We reduce them by:

- planning rotas with realistic travel time between homes, allowing for traffic, parking and weather, and never back-to-back shifts that cannot physically be worked;
- giving workers their rota in advance, with any change confirmed by the office;
- identifying time-critical shifts in the support plan and prioritising them;
- keeping a small pool of bank workers and making sure managers can cover shifts themselves if needed;
- not accepting packages we cannot reliably staff, and telling the funding authority where we cannot;
- monitoring log-in data to spot patterns of lateness early;
- reviewing whether shift times still suit the person at every review.

4.2 Where a rota cannot be worked as planned, workers must tell the office rather than trying to make up time by cutting shifts short.

5. IF A WORKER IS GOING TO BE LATE

5.1 The worker must:

- ring the office or the on-call manager as soon as they know, not when they arrive;
- say how late they expect to be;
- not ring the person directly to rearrange, unless the office asks them to.

5.2 The office will:

- decide whether to send another worker instead;
- ring the person, or their family where agreed, to explain, apologise, and give a realistic new time;
- ask whether they need anything urgently, and whether a neighbour or relative can help in the meantime;
- where the shift is time-critical, arrange an alternative worker or contact the person's GP, district nurse or family as needed;
- record the lateness, the reason, who was told and when.

6. IF A WORKER CANNOT ATTEND AT ALL

6.1 The worker rings the office as early as possible, and out of hours rings the on-call number. Workers must never text a colleague and assume it is covered, arrange their own swap, or tell the person directly that no one is coming.

6.2 The office will, in this order:

- check whether any other worker on shift nearby can take it;
- contact bank workers;
- ask a supervisor or the Registered Manager to cover it personally;
- where the shift still cannot be covered, ring the person, explain honestly, apologise, and agree what will happen. Where the shift is time-critical or the person is at risk, contact family, the GP, district nurse, NHS 111 or, in an emergency, 999;
- tell the funding authority where the contract requires it;

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- record everything, including times and who was contacted.

6.3 We never simply leave a person without support and record it as "staff sickness". Someone is always responsible for making sure the person is safe.

7. IF A SHIFT IS MISSED

7.1 A missed shift is treated as an incident. On discovering it, the office:

MISSED SHIFT: IMMEDIATE ACTIONS

1. **Check the person is safe.** Ring them. If there is no answer, send someone to the address and follow the no-reply procedure in the Lone Working Policy. Call 999 if there is reason to believe they are at risk.
2. **Arrange support now,** even if it is late, unless the person says they no longer want it.
3. **Apologise honestly** to the person and, where agreed, their family. Do not minimise it or blame a worker.
4. **Assess harm:** have they missed medicines, food, drink, or been unable to get up or use the toilet? Get medical advice if needed.
5. **Record it** on an incident form and in the person's record, with times.
6. **Tell the funding authority** where the contract requires it.
7. **Consider a safeguarding referral** to Durham County Council on 03000 267 979 where the person was left at risk, and a CQC notification once we are registered.
8. **Apply the Duty of Candour** where the person suffered harm, following our Incident Reporting and Duty of Candour Policy.

7.2 The Registered Manager investigates every missed shift within one working day, finds out why it happened, and puts an action in place. Investigation looks at the rota, the notification process and the cover arrangements, not only at the individual worker.

8. SHORTENED SHIFTS AND UNFINISHED TASKS

8.1 Workers must stay for the full planned time unless the person asks them to leave, in which case the worker records it and tells the office. Leaving early because the tasks were finished quickly is not acceptable: the remaining time belongs to the person, and can be used for conversation, company, or something they would like doing.

8.2 Where a task could not be completed, the worker records what was not done and why, and tells the office the same day.

8.3 Log-in and log-out data is checked against planned times. A pattern of short shifts is investigated and, where unexplained, treated as a disciplinary matter, because recording time that was not worked is falsification.

9. CANCELLATIONS BY THE PERSON

9.1 People may cancel a shift, for example if they are going out or have family staying. The office records the cancellation, who asked for it and when, and confirms it with the person.

9.2 Where cancellations become frequent, the Registered Manager reviews whether the support still fits the person's needs and discusses it with them and the funding authority. Where someone repeatedly cancels and there is any concern about their wellbeing or about pressure from another person, we treat it as a possible safeguarding matter.

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9.3 Where the person is not at home for a planned shift and we have not been told, the worker follows the no-reply procedure and the office carries out a welfare check.

10. MONITORING

10.1 The office knows at all times which shifts are running. Workers log in and out of every shift, and the office acts on any shift not logged in within 15 minutes of the start time, as set out in our Lone Working Policy. That check protects both the worker and the person.

10.2 The Registered Manager reviews, each month:

- the number of missed shifts, with the reason for each;
- the number and pattern of late shifts, by worker, area, time of day and day of the week;
- shifts shorter than planned;
- cancellations;
- complaints relating to timing.

10.3 Our target is **zero missed shifts**. Any missed shift is reported to the Nominated Individual, with the reason and the action taken. Lateness figures are reported monthly, and where a particular run or time of day is repeatedly late, the rota is changed rather than the worker blamed.

11. OUR STAFFING ARM

11.1 Where a worker we have supplied to a client organisation cannot attend a booked shift, the office tells the client as early as possible, offers a replacement worker where we can, and records what happened. Repeated non-attendance by a worker is addressed under our Disciplinary Policy.

11.2 We do not leave a client to discover at handover that no one is coming.

12. BEING OPEN WITH PEOPLE

12.1 People are told at the start of the service what to expect: their planned shift times, the fact that times can vary by up to 30 minutes, that we will ring if we are running later than that, and what to do if no one arrives. This is in the Service User Guide, with the office and on-call numbers.

12.2 We encourage people to ring us if a worker has not arrived. Nobody should sit and wait wondering.

13. ROLES AND RESPONSIBILITIES

Role	Responsibilities
Nominated Individual	Makes sure the service has enough staff and cover arrangements to deliver the shifts we have accepted, and reviews missed and late shift data at least quarterly.
Registered Manager	Makes sure rotas are realistic, cover is available, missed shifts are investigated the same day, people are told and apologised to, and external reports are made.
Office and on-call staff	Monitor log-ins, respond immediately to lateness and non-attendance, arrange cover, contact people and record everything.
Support workers	Attend on time, ring the office as soon as they know of any problem, stay for the full shift, and never arrange changes privately.

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14. TRAINING

14.1 This policy is covered at induction, including what counts as late, who to ring and when, and why a missed shift can be a safeguarding matter. It is reinforced in supervision and in team meetings.

15. MONITORING AND REVIEW

15.1 Missed and late shift data forms part of our monthly quality report and our Governance and Quality Assurance reporting. Trends feed into rota planning, recruitment and training.

15.2 This policy is reviewed every year, or sooner if data, a complaint or an incident shows it needs to change.

16. LEGISLATION AND GUIDANCE

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, especially Regulations 9, 12, 17, 18 and 20
- Care Quality Commission (Registration) Regulations 2009 (notifications)
- Care Act 2014
- NICE guideline NG21: Home care, including guidance on visit length and continuity
- United Kingdom Homecare Association guidance on scheduling and missed visits
- Local Government and Social Care Ombudsman findings on missed calls

17. RELATED POLICIES AND FORMS

Related policies: Lone Working; Support Planning and Risk Assessment; Safeguarding Adults; Incident and Accident Reporting and Duty of Candour; Complaints, Concerns and Compliments; Business Continuity; Medication; Support Records and Record Keeping; Governance and Quality Assurance; Disciplinary.

Forms: Missed Shift Report (Appendix A); Incident Report; Monthly Timeliness Report; Rota; Service User Guide.

18. DOCUMENT CONTROL

Version	Date	Approved by	Role	Reason
1.0			Nominated Individual	New policy for local authority assurance and CQC registration

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APPENDIX A: MISSED SHIFT REPORT

Complete for every missed shift, on the same day. A missed shift is an incident and may be a safeguarding matter.

Person / address / date of shift	
Planned time and tasks	
Was this a time-critical shift? Why?	
When and how did we find out it had been missed?	
Why was it missed?	
What did we do to check the person was safe? (times)	
Was support provided later? When, and by whom?	
Harm: medicines, food, drink, toileting, distress?	
Who was contacted: person, family, GP, 111, 999, funding authority (times)	
Apology given: by whom, when, how	
Safeguarding referral made? CQC notified? Duty of Candour applied?	
Why did this happen? (rota, cover, notification, other)	
Actions to stop it happening again, owner and date	
Signed (Registered Manager) and date	

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