



Policy:

HR 014 Engagement and Deployment of Short-Term Staffing

Executive Director Lead	Executive Director of People
Policy Owner	HR Advisor
Policy Author	HR Advisor

Document Type	Policy
Document Version Number	2.0
Date of Approval By PGG	29 November 2021
Date of Ratification	11/01/2022
Ratified By	PEOPLE COMMITTEE
Date of Issue	December 2021
Date for Review	07/2024

Summary of policy

This policy provides guidance to managers and other staff on the options to follow when there is an identified need to engage short term staffing.

Target audience	All managers and staff who engage staff (including Agency staff) on a temporary basis
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Keywords	Temporary Staffing, Agency, Bank, Self-employed, IR35
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Storage & Version Control

This is version 2.0 which replaces the previous version (1.1).

This policy replaces a previous policy - Engaging Individual Self-Employed Contractors (Off-Payroll).

This policy will be available to all staff via the Sheffield Health & Social Care NHS Foundation Trust Intranet and on the Trust's website. The previous version will be removed from the Intranet and Trust website and archived. Any copies of the previous policy held separately should be destroyed and replaced with this version.

Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
0.1	New draft policy created	21 October 2017	New policy commissioned by EDG on approval of a Case for Need (Aug 17). First draft completed by Guy Hollingsworth – Chair of Agency and Off Payroll Management Group.
0.2	Revised after comments from other members of the Agency and Off Payroll Management Group. Circulated for wider consultation	24 November 2017	A number of small changes. Reduction in length of section re self-employed contractors as some of the detail is more for a guidance note.
0.3	Revised after comments received Submitted to Joint Policy Group	8 December 2017	Including more detail on duties and revised flowchart.
0.4	Revised after discussion at Joint Policy Group	20 December 2017	Small addition to section 6.1.
0.5	Small revisions after PGG mtg in Jan	31 January 2018	
0.6	Small revisions after PGG mtg in Feb	15 February 2018	Change to title of external organisation. Link to external HMRC website added. Section on training added.
0.7	Changes made following comments from Care standards	26 March 2018	Formatting and spelling changes. New section (6.8) on Induction.
1.0	Ratification and issue		
1.1	Extension to review date	11 January 2021	PGG approved an extension to review date. New review date 31 May 2021.
	Due for review	31 May 2021	New template used. Reviewed to ascertain still fit for use. Emphasis on the consideration of fixed term contracts where the use of bank or agency is common and responsibility for managers to use the HMRC assessment tool. Removal of reference to the Vacancy Control Panel.
		24 May 21	PGG approved an extension to review date due to consultation with a number of stakeholders and collation of feedback. New review date 31 May 2021

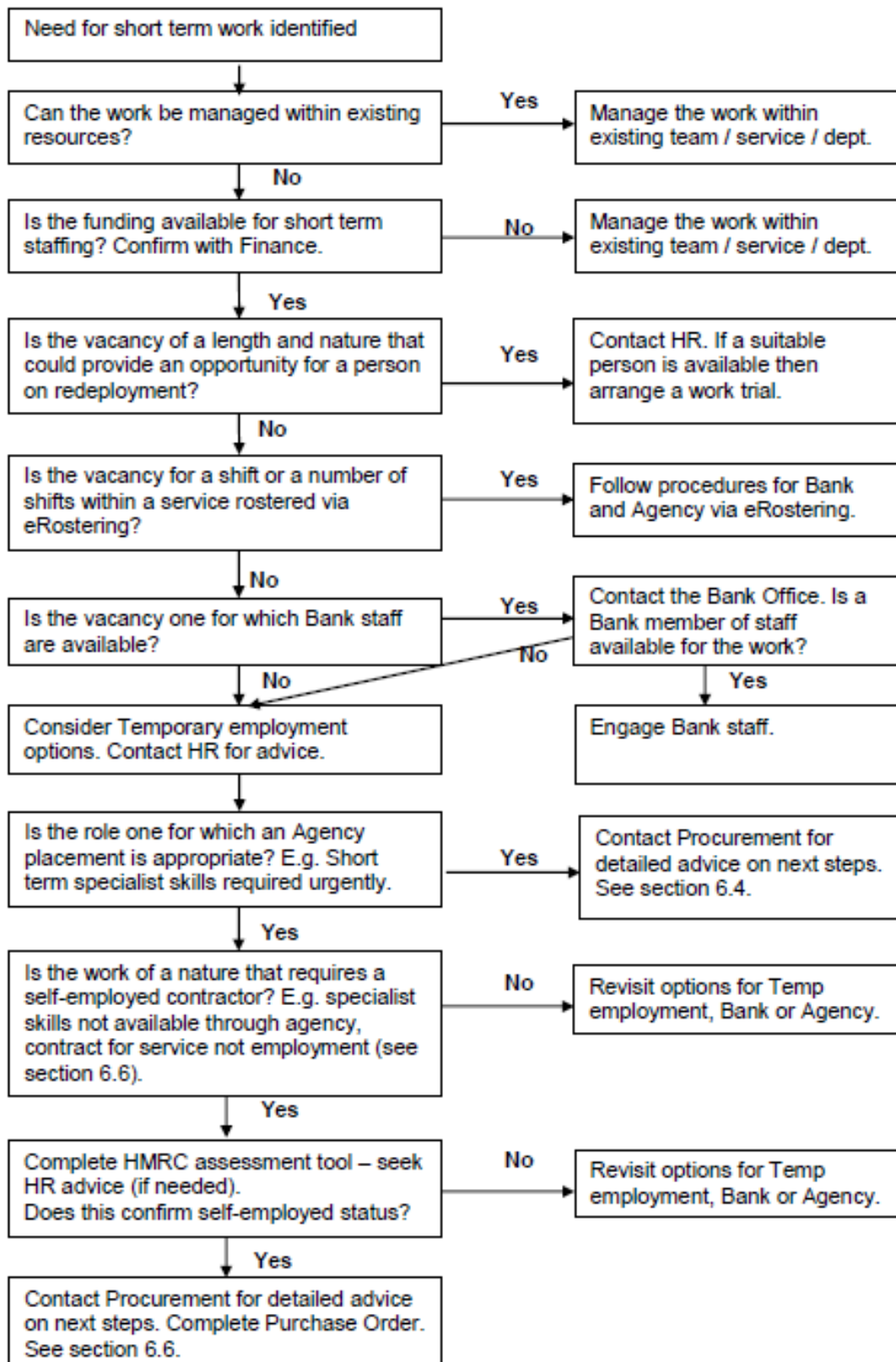
	Revision after consultation with recruitment	July 2021	6.3, 6.4 sections to include paragraph - Converting short term staff into fixed term contracts (or perm where appropriate)
		26 July 21	PGG approved an extension to review date. Staff side unable to sign off policy prior to the next PGG meeting (26 July 2021) due to date of JPG meeting. New review date of 31 August 2021
		25 October 2021	The original author of the policy left the Trust and due to staffing levels, we were unable to review the policy within the extended timescale. Resource has now been allocated and we expect to present the policy at the next PGG meeting. New review date of 25 th November PGG)
	Revision after consultation with Bank Office	October 2021	6.4 section to include paragraph - For all Agency staff engagement the pre-employment checks undertaken by the agency must be checked and reviewed through the Bank Office using the procedure outlined in appendix 3
	Removal of section 6.5.3	October 2021	TUPE of GP surgeries in 2020

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Flowchart

DETAILED FLOWCHART FOR ENGAGEMENT OF SHORT TERM STAFFING



1 Introduction

This policy provides guidance to managers and other staff on the options to follow when there is an identified need to engage short term staffing.

2 Scope

This policy is Trust wide. It applies to all employees of SHSC, any staff who are seconded to SHSC, contract and Agency staff and any other individual working on SHSC premises.

3 Purpose

The purpose of this policy is to guide managers and other staff on the options to choose when engaging staff on a short term basis.

The definition of short term in this context will vary dependent on the circumstances and includes;

- The need to cover a temporary staffing gap
- The need for staff for a short term piece of work

Short term employment (Fixed Term Contract/ FTC) or the use of Bank should always be the first consideration prior to the use of Agency staff.

The engagement of staff on a self employed basis can only be considered when employment, Bank and agency options are not available.

Any engagement of self employed staff must be consistent with HMRC tax rules.

4 Definitions

FTC	Fixed Term Contract
Bank staff	Staff who are employed by the Trust on a Bank contract. This may be staff who are “Bank only” or staff who have a Bank contract as well as a substantive contract.
Off Payroll	Staff engaged by the Trust on a self employed basis and paid by invoice rather than a payroll process.
On Payroll for Tax purposes	Where Self-employed staff are engaged by the Trust but paid via a payroll process.
HMRC	Her Majesty’s Revenue and Customs. Responsible for the collection of Tax and National Insurance.
NHSI	NHSI (NHS Improvement). This agency has a range of functions that includes the setting of rules for agency engagement and agency capped rates.
PGME	Post Graduate Medical Education. The team in the Trust that oversees the recruitment and training of junior medical staff.

5 Duties

5.1 Executive Directors

- To ensure that an overall policy and framework is in place to guide managers in the engagement of short term staffing

- To regularly update and disseminate guidance in relation to authorisation levels for Agency placements that breach capped rates

5.2 Service Directors / Senior Managers

- To ensure that staff within their area are aware of and comply with this policy and any related guidance and procedures
- To work to reduce the use of Agency staff wherever possible
- To ensure that any decisions on expenditure are authorised correctly in line with procedures
- To ensure that any engagements of Agency staff that are in breach of national approved capped rates are authorised at the correct level in accordance with current guidance

5.3 Managers

- To follow this policy and any related guidance and procedures in relation to the engagement of short term staffing
- To reduce the use of Agency staff wherever possible
- To seek the most cost effective solution for all short term staffing gaps
- To ensure that all temporary staffing arrangements are within allocated budget resources
- When engaging Agency staff, agree and review the duration/ length of time they are utilised for regularly
- To ensure that the Trust's Standing Financial Instructions are followed at all times and that any decisions on expenditure are made within limits of the Scheme of Delegation

5.4 Staff in charge of shifts

- To follow correct procedures when needing to cover immediate staffing gaps with Bank or Agency staff, including consideration of the appropriate placement of bank and agency staff in these positions

5.5 Finance Department

- To provide regular reports to senior managers on the cost of Agency and Bank staff in their service area

5.6 Human Resources Department

- To advise managers on, and assist with;
 - Recruitment process
 - Fixed Term contracts
 - HMRC assessment on Employment status
 - Pre-employment checks
- To ensure that there is a process in place for responding to concerns raised by managers in relation to Bank and Agency staff. This duty is in conjunction with the Deputy Chief Nurse in relation to nursing staff, the Medical Director in relation to medical staff and the Procurement Team in relation to non medical non clinical staff groups

5.7 Procurement Team

- To advise managers on Agencies that are approved under agreed frameworks
- To monitor and process Purchase Orders and Invoices for Agency and off payroll staff
- To regularly update and disseminate guidance on approved frameworks and Agency capped rates

- To ensure that the Trust has contracts in place with approved framework agencies that support the provision of suitably qualified, trained and approved staff
- To advise and assist on HMRC assessment on Employment status

5.8 Bank Office

- To recruit Bank staff and ensure a supply of Bank staff
- To advise managers on the availability of Bank staff and processes for deploying Bank staff
- To maintain an up to date list on the intranet of staff roles that are available via Bank
- To advise substantive staff on the process for applying for a Bank contract
- To regularly update and disseminate guidance on the deployment of Bank staff

5.9 eRostering Team

- To develop and maintain the eRostering system to support the effective deployment of Bank staff in services rostered via eRostering
- To develop and maintain the eRostering system to monitor the deployment of Agency staff in services rostered via eRostering
- To report on Agency and Bank usage within services rostered via eRostering
- To regularly update and disseminate guidance on the use of the eRostering system

5.10 PGME Office

- To maintain a Bank system for junior medical staff whereby existing substantive junior medical staff can also cover additional shifts on Bank
- To seek the most cost effective use of Agency staff where Bank staff are not available

6 Procedure

6.1 General Requirements

There will be a range of circumstances that give rise for the need for services to engage temporary staffing. These include:

- Gaps in staffing arising from vacancies and pending permanent recruitment
- Staffing gaps for staff arising for a number of reasons (including parental leave)
- A requirement to undertake short term pieces of work
- The need for specialist skills for a finite period of time
- Particular circumstances dictate that someone outside the Trust should be engaged (for example, certain investigations)

Managers must ensure that in the management of temporary staff they follow this policy and any related guidance.

Managers must seek the most cost effective solution.

Managers are responsible for ensuring that they act within agreed financial limits and in line with the Authorised Signatory List (ASL).

Before undertaking the engagement of any short term staffing managers must ensure that agreed funding is available.

Where a need for short term work arises the manager must first consider if this can be covered within existing staffing arrangements. For example:

- Prioritisation of tasks within existing staffing –

- Reallocation of tasks within existing staffing in line with existing Job Descriptions
- Temporary deployment of staff from one area to another consideration skills, competencies and training required
- Where there remains a need for temporary staffing then, as laid out in the above flow chart, options for temporary staffing engagement must be considered in the following order:
 - Suitability for a person from the redeployment register
 - Temporary employment options or use of Bank staff
 - Engagement of staff from an Agency
 - Engagement of staff on a self employed basis for the delivery of a defined outcome

6.2 Temporary employment options

The advantages of employment include an established process including formal checks (references, DBS checks etc.), a robust selection process, formal accounting for the individuals Tax and NI liabilities and consistency and stability in the make-up of the workplace.

It is also recognised that there is the potential for termination costs (e.g. redundancy) and this needs to be factored into the consideration.

Temporary employment options include:

- Additional hours for part time staff on a time limited basis (e.g via increase in hours within current contract or additional bank shifts)
- Fixed Term contract
- Secondment
- Act up arrangements

Managers should seek advice from HR and follow the Trust's Recruitment process and policy when enacting temporary employment options.

6.3 Use of Bank – general requirements

The Trust has Bank staff available for certain staff groups. An up to date list of staff groups where Bank staff may be available is maintained on the Trust's Intranet (see Bank staffing under the People Directorate Page).

Bank staff may be substantive staff who also have a Bank contract and "Bank only" staff. Where Bank staff are potentially available (the staff group required is one in which Bank staff are available) then this option must be considered prior to the engagement of Agency.

The process for the engagement of Bank staff will vary dependent on the staff group concerned and the nature of the vacancy (for example: shift or longer term booking). Where managers have a concern in relation to the performance of a Bank member of staff they must report this to the Bank Office.

Wherever possible consideration should be given to a fixed term contract. HR can provide guidance on the process.

6.3.1 Use of Bank to cover vacant slots in services that are managed via eRostering

Managers must use the eRostering system to record required Bank shifts and make these available to Bank staff. Shifts must be made available to Bank staff before engaging Agency staff.

Detailed Guidance in relation to Bank and Agency via eRostering will be updated regularly and is available from the Bank Office, the eRostering Team and via the Bank Pages (under HR pages) on the Intranet. Managers must follow this guidance.

6.3.2 Use of Bank staff to cover vacancy in services not managed via eRostering.

Bank arrangements must be considered prior to the use of Agency for any of the staff groups currently available via Bank. A list of staff roles that are available via Bank is maintained on the Intranet. Advice should be sought from the Bank Office.

6.4 Use of Agency staff - general requirements

Where neither an employment option nor the use of Bank staff is available then Managers can consider the engagement of Agency staff.

All Agency staff engaged to work at the Trust must come from an Agency approved under one of the relevant NHS frameworks. Managers must seek advice from the Procurement Team.

All engagements for Non-Medical Non Clinical Agency staff will be contracted for by the Procurement Dept. Managers must not enter into any engagement of Agency staff for this staff group directly.

For all Agency staff engagement, the pre employment checks undertaken by the agency must be checked and reviewed through the Bank Office using the procedure outlined in appendix C.

Where a manager is considering the use of Agency staff for any role that could be filled by a person on the redeployment register then they must consult with HR to see if a suitable skilled redeployee is available.

The Trust is part of the North of England Commercial Procurement Collaborative (NoE CPC) and will abide by the arrangements agreed between the North of England Commercial Procurement Collaborative and framework agencies.

All Agency staff engaged to work at the Trust must be within the rates of pay authorised by NHSI. These are referred to as capped rates. Information on current capped rates is available from the Procurement Team and via this link:

<https://improvement.nhs.uk/resources/reducing-expenditure-on-nhs-agency-staff-rules-and-price-caps/#h2-rules-and-price-caps> (NB copy and paste this link into your web browser.)

The manager when engaging Agency staff will need to agree and review the duration/length of time they are utilised for regularly.

Additional approval by a Director is required for any agency placement that breaches NHSI caps.

Wherever possible placements should be transferred to a fixed term contract. HR can provide guidance on the process.

Managers should also be aware that once an agency worker has completed a 12-week qualifying period in the same role, under Regulation 5 of the Agency Worker Regulations, they would be entitled to the same basic working and employment conditions as they would have received had they been recruited directly.

Where managers have a concern in relation to the performance of an Agency member of staff then they must report this as follows;

- Nursing qualified and unqualified, to the Bank office – who will liaise with senior nursing staff
- Junior Medical staff, to the PGME Office

- Senior Medical staff, to the Medical Director, Deputy Medical Director or Clinical Director
- Non-Medical Non Clinical staff, to the Procurement Team

6.4.1 Agency placements in units that use eRostering

Requests for agencies to fill vacant shifts can only be made after the vacant shifts have been made available to Bank staff.

In exceptional circumstances (eg hard to fill staff groups) and at short notice (as defined by the current guidance) shift requests can be made concurrently to Bank and Agency.

Request to Agencies to fill vacant shifts must be managed through the eRostering system and in line with current guidance.

Once Agency staff have been requested the vacant shift must still remain open to Bank staff. This applies even if the shift has been filled by an Agency member of staff – up until 24 hours before the commencement of the shift.

Request to Agency for block bookings outside of the eRostering system can only be authorised at a higher management level (as determined by current guidance).

6.5 Medical Staff

The principles and details outlined in this policy also apply in relation to Medical Staffing. In addition the following applies;

6.5.1 Junior Medical Staff

Short-term gaps in staffing should be covered through Bank arrangements wherever possible. Bank arrangements for junior medical staff are managed via the PGME Office.

Only where Bank / Internal Locum cover is not available should Agency use be authorised.

Engagement of short term agency Junior Medical staff will be coordinated via the PGME Office.

Longer term gaps in junior medical staffing should be filled by recruitment wherever possible. Only where recruitment is not possible should agency use be considered.

The Trust regularly issues guidance on the Approval routes for engagement of agency medical staff. This also outlines the higher level of approval required for a placement that breaches the NHSI capped rates.

The Trust has arrangement with a 3rd party supplier to reduce the cost of agency Medical staff and this system must be used for both short term and longer term agency Medical staff.

6.5.2 Senior Medical staff

This section also covers GP roles where these are in secondary care services.

Longer term gaps in senior medical staffing should be filled by recruitment wherever possible, including the use of the Locum Consultant role. Only where recruitment is not possible should agency use be considered.

The Trust regularly issues guidance on the Approval routes for engagement of agency medical staff. This also outlines the higher level of approval required for a placement that breaches the NHSI capped rates.

The Trust is working with a 3rd party supplier to reduce the cost of agency Medical staff and this system must be used for both short term and longer term agency Medical staff.

6.6 Engagement of Self Employed Contractors (IR35)

Engagement of Self Employed Contractors should only be considered where employment, Bank and Agency options are not available or are not viable. (For example: if Agency arrangements are not specialist enough to meet the resourcing requirements.)

The Trust cannot enter into any engagement with a self employed contractor (including via a Personal Service Company (PSC)) in circumstances where the HMRC Employment Status assessment tool has confirmed that Tax and National Insurance deductions are required as for an employee.

Engagement of Self Employed Contractors should be limited to circumstances where the Trust is engaging an individual to provide a defined service rather than engaging a person in a work role. This will mean that the contract with the person is for a set of defined outcomes and is not on the basis of a range of tasks akin to a job description. Payment may be calculated on an hourly rate but this on the basis of the expected hours to complete the task and not an agreed amount of hours per week.

A manager intending to engage a self employed contractor should initially consult with HR to ensure that this is not a de facto employment situation. This will include the manager to complete the HMRC Employment Status assessment tool, which can be accessed via the following link: <https://www.gov.uk/guidance/check-employment-status-for-tax>

If the outcome of the HMRC Employment Status assessment tool is that the engagement should be classed as Employed for Tax purposes then Tax then the engagement of a self employed contractor via procurement cannot continue. The manager should revisit options for temporary employment, Bank, or Agency use.

The outcome of the HMRC Employment Status assessment tool should be kept on file.

Only if the outcome of this tool confirms that the nature of the engagement is a self employed one for tax purposes should the engagement proceed via a procurement route. The manager should liaise with the Procurement Team to ensure that procurement procedures are followed.

No engagement or commitment to make an engagement (whether verbal or in writing) should be made prior to the completion of all the necessary procedures referred to in this policy.

Any engagement of a self-employed contractor must be requisitioned in advance of an engagement as per standard procurement processes. The requisition should be appropriately authorised in line with the Trust's Scheme of Delegation.

Additionally, engagements of this type must also have the Directorate's Executive Director approval on the requisition to confirm that he/she is assured that other avenues have been explored.

Engagements will be subject to appropriate pre-engagement checks (references/DBS checks etc.) This will vary according to situation where the person will be located. The manager undertaking the engagement will be responsible for ensuring that these checks take place.

Independent references must be obtained wherever possible.

A Disclosure and Barring certificate will be required where this would apply to an employee.

In any circumstances where there is a connection between the person being engaged and a senior manager in the Trust then the requirements regarding registering an interest would also apply as per Paragraph 8 of the Trust's Standing Orders "Interest of Officers in Contracts, Canvassing of, and Recommendations by, Directors in relation to Appointments, and Relatives of Directors and Officers.

The Procurement Team will issue a contract for services to the contractor on receipt of an appropriately approved requisition.

The contractor is required to quote the Trust's official order number on their invoice. Failure to quote an order number will result in the invoice being returned to sender per usual procurement process.

Standard payment terms of 30 days apply to all contractors and should cover the A4C rates for the job role as a minimum.

6.7 Training for short term staff

For temporary employees (eg staff on Fixed Term contracts) - it is the responsibility of the manager to ensure that they undertake required training (inc mandatory training).

For Bank staff - The Bank Office is responsible for ensuring that staff undertake the Mandatory Training required for Bank staff. Should there be additional training specific to the role being undertaken then this will be the responsibility of the manager.

For Agency staff – the Agency is responsible for ensuring that their staff are adequately trained for the roles for which they are provided. For Agency staff on longer term placements it is for the manager to determine if they should also attend further internal training.

For Self Employed engagements – the manager is responsible for ensuring that the person engaged has had the training necessary for the provision of the service that they are contracted to provide.

The Trusts Mandatory Training policy and related documents on the Training section of the Intranet are available for reference.

6.8 Induction for short term staff

Please refer to the Trust's Induction Policy (section 6.14 and Appendix H – Local Employee Induction Checklist) for requirements on Induction for short term staff.

6.9 Disputes

All employees will operate under a contract of employment with the Trust.

Agency staff will operate under a contract with the Agency.

Self-employed contractors will sign a contract for service drawn up by Procurement. This will be a standard NHS Terms and Conditions of Contract for the Provision of Services.

All disputes should refer to the contract in place in the first instance. Actions will depend on the type of contract. Employment contract disputes will be covered by employment law; whilst procurement contracts are covered by commercial laws.

7 Development, Consultation and Approval

HR Advisers in conjunction with staff side, HR senior management team and key stakeholders have been involvement in the review and development of the policy to ensure that it is fit for purpose.

Key Stake holders have been consulted with and minor changes to the policy have been made to reflect the feedback given. Key Stakeholders include:

- Erostering
- Bank office
- Recruitment/ HR
- Procurement
- Finance
- PGME office
- Staff Side

Changes to the policy are reflected in the Policy version control and amendment log.

The policy has been reviewed by the Joint Policy Group.

The policy is due for review and consultation in July 2024.

8 Audit, Monitoring and Review

Monitoring Compliance Template						
Minimum Requirement	Process for Monitoring	Responsible Individual/group/committee	Frequency of Monitoring	Review of Results process (e.g. who does this?)	Responsible Individual/group/committee for action plan development	Responsible Individual/group/committee for action plan monitoring and implementation
A) Monitoring of expenditure on Agency and Bank	Monthly Finance Reports	Bank Agency eRostering Steering Group	Monthly	Bank Agency eRostering Steering Group And Service Senior Management teams	Bank Agency eRostering Steering Group	Effective Staffing Group
B) Monitoring of Bank Fill Rates	Reports from eRostering System	Bank Agency eRostering Steering Group	Monthly	Bank Agency eRostering Steering Group	Bank Agency eRostering Steering Group	Effective Staffing Group

This policy will be reviewed in July 2024.

9 Implementation Plan

Action/ Task	Responsible Person	Deadline
Upload new policy onto intranet and remove previous version of the Policy.	Policy Governance/Communications Teams	Within 5 days of ratification

10 Dissemination, Storage and Archiving (Control)

Once ratified this Policy will be placed on the Trust's intranet as both an HR and a Finance policy.

Responsibility for disseminating this policy rests with the Policy Governance/Communications Teams.

Notification of the new policy will be included in the weekly Connect.

Staff with particular roles in the policy (eg staff in HR, Procurement, Bank, eRostering) will be individually alerted to the new policy.

Version	Date added to intranet	Date added to internet	Date of inclusion in Connect	Any other promotion/ dissemination (include dates)
1.0	April 2018	April 2018		And disseminated via SHSC Directors email.
1.1	19/01/2021	Not necessary as an administrative amendment only.		
2.0	December 2021	December 2021	December 2021	Via Connect

11 Training and Other Resource Implications

There are no specific training needs arising from this Policy.

This policy makes reference to the eRostering system. Training on the eRostering system is provided by the eRostering team. This is provided directly to relevant staff in teams that use eRostering.

Recruitment training for managers is delivered by the HR dept and provided through the Training Dept. Details are available on Training pages of the intranet.

12 Links to Other Policies, Standards (Associated Documents)

Recruitment and Selection Policy

Grievance Policy

Equal opportunities and Dignity at Work Policies

Redeployment Policy

Induction Policy

Mandatory Training Policy

Secondment Policy

NHSI documents on agency use and capped rates. Use the following link ((NB copy and paste this link into your web browser)

<https://www.england.nhs.uk/reducing-expenditure-on-nhs-agency-staff-rules-and-price-caps/>

13 Contact Details

Title	Name
Bank staffing Manager	Angela Hinchsliff
Procurement Team Leader	Nathan Kelly
eRostering Project Manager / Systems Administrator	Nin Uppal – Graves / Amanda Harris
Head of Equality & Inclusion (Senior Manager for Bank and eRostering)	Liz Johnson
HR Directorate Partners	Emily Seville Debra Butterworth Maria Jessop
Finance	Matt White

Appendix A

Equality Impact Assessment Process and Record for Written Policies

Stage 1 – Relevance - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies. EIA- on employees with flexible working- travel extra commute costs- disabilities- unsocial hours potential to be lost or gained or required to work

NO – No further action is required – please sign and date the following statement.
I confirm that this policy does not impact on staff, patients or the public.

*I confirm that this policy does not impact on staff, patients
or the public*

**YES, Go
to Stage 2**

Stage 2 Policy Screening and Drafting Policy - Public authorities are legally required to have 'due regard' to eliminating discrimination, advancing equal opportunity and fostering good relations in relation to people who share certain 'protected characteristics' and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don't know and note reasons). Please see the SHSC Guidance and Flow Chart.

Stage 3 – Policy Revision - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
Age	Issues of fairness in terms of access to development opportunities in the form of secondments need to be considered		Made clear the link to the secondment policy
Disability	Issues of fairness in terms of access to development opportunities in the form of secondments need to be considered		Made clear the link to the secondment policy
Gender Reassignment			
Pregnancy and Maternity	Issues of fairness in terms of access to development opportunities in the form of secondments need to be considered		Made clear the link to the secondment policy

Race	Issues of fairness in terms of access to development opportunities in the form of secondments need to be considered		Made clear the link to the secondment policy
Religion or Belief			
Sex	Issues of fairness in terms of access to development opportunities in the form of secondments need to be considered		Made clear the link to the secondment policy
Sexual Orientation			
Marriage or Civil Partnership			

Please delete as appropriate: - Policy Amended / Action Identified (see Implementation Plan) / no changes made.

Impact Assessment Completed by: Kerry Scott and Liz Johnson 19.11.21

Appendix B

Review/New Policy Checklist

This checklist to be used as part of the development or review of a policy and presented to the Policy Governance Group (PGG) with the revised policy.

		Tick to confirm
Engagement		
1.	Is the Executive Lead sighted on the development/review of the policy?	<input checked="" type="checkbox"/>
2.	Is the local Policy Champion member sighted on the development/review of the policy?	<input checked="" type="checkbox"/>
Development and Consultation		
3.	If the policy is a new policy, has the development of the policy been approved through the Case for Need approval process?	N/A
4.	Is there evidence of consultation with all relevant services, partners and other relevant bodies?	<input checked="" type="checkbox"/>
5.	Has the policy been discussed and agreed by the local governance groups?	<input checked="" type="checkbox"/>
6.	Have any relevant recommendations from Internal Audit or other relevant bodies been taken into account in preparing the policy?	<input checked="" type="checkbox"/>
Template Compliance		
7.	Has the version control/storage section been updated?	<input checked="" type="checkbox"/>
8.	Is the policy title clear and unambiguous?	<input checked="" type="checkbox"/>
9.	Is the policy in Arial font 12?	<input checked="" type="checkbox"/>
10.	Have page numbers been inserted?	<input checked="" type="checkbox"/>
11.	Has the policy been quality checked for spelling errors, links, accuracy?	<input checked="" type="checkbox"/>
Policy Content		
12.	Is the purpose of the policy clear?	<input checked="" type="checkbox"/>
13.	Does the policy comply with requirements of the CQC or other relevant bodies? (where appropriate)	N/A
14.	Does the policy reflect changes as a result of lessons identified from incidents, complaints, near misses, etc.?	N/A
15.	Where appropriate, does the policy contain a list of definitions of terms used?	N/A
16.	Does the policy include any references to other associated policies and key documents?	<input checked="" type="checkbox"/>
17.	Has the EIA Form been completed (Appendix 1)?	<input checked="" type="checkbox"/>
Dissemination, Implementation, Review and Audit Compliance		
18.	Does the dissemination plan identify how the policy will be implemented?	<input checked="" type="checkbox"/>
19.	Does the dissemination plan include the necessary training/support to ensure compliance?	<input checked="" type="checkbox"/>
20.	Is there a plan to i. review ii. audit compliance with the document?	<input checked="" type="checkbox"/>
21.	Is the review date identified, and is it appropriate and justifiable?	<input checked="" type="checkbox"/>

Appendix C Agency Staff Checklist Process

Agency Staff Check Process

The following process applies when new Agency staff are put forward by an Agency. Agencies providing mental health nursing and support work will provide this information directly.

When using Agency for other than the above the persons requiring agency must check with procurement that the Agency is one that can be used.

Sending Pre- employment information to SHSC

Agencies are requested to provide the following documents to SHSC for agency staff they wish to put forward to work at SHSC:

- A Pre-Employment Check Form (PEC) that has been completed by the agency.
- A CV
- A copy of References For Nursing Assignments
- Confirmation of Covid19 vaccination status where this is required

Agencies are requested to send the above documents to the following email address:

Bank.Office@shsc.nhs.uk

Using the following email headings:

PEC CONFIDENTIAL – NURSE – (REF: Initials and date of sending) or

PEC CONFIDENTIAL – SUPPORT STAFF – (REF Initials and date of sending)

For clinical agency appointments

Once the appropriate checks have been completed by SHSC the bank office will contact the Trust ERostering office, the ERostering team will:

- Make a record of the completed checks and keep a copy of the form on file
- Put the applicants onto the Erostering System
- Confirm to the agency that the person can now be booked for SHSC shifts noting any areas that are not seen as suitable for that particular worker.

For non - clinical agency appointments

Once procurement have confirmed the agency can be used the manager requesting the agency use must request a copy of the Pre-Employment Check (PEC) form and CV from the Agency – the person must not start until these have been checked.

The manager must send the PEC only to the Bank office Bank.Office@shsc.nhs.uk with the following heading **PEC CONFIDENTIAL – Administration /other – (REF: Initials of proposed agency worker and date of sending)**.

The manager will be responsible for checking the CV for suitability.

Once the Bank office have completed appropriate checks the Bank office will contact the person requesting Agency use to confirm that the Pre-Employment Check (PEC) form completed by the Agency has been checked and the person can be used for the assignment.