

Policy:

HR 020 Long Service Awards

Executive or Associate Director lead	Director of Human Resources
Policy author/ lead	HR Adviser
Feedback on implementation to	HR Adviser, Head of Communications

Document type	Policy
Document status	FINAL for Policy Governance Group
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Date of consultation	2016 to 2018
Date of verification	Verified at JPG 24-10-18 and JCF 28-11-18, 30-01-19 and via email 15-01-19 PGG on 11-02-19
Date of ratification	21 February 2019
Ratified by	Executive Directors' Group
Date of issue	21 February 2019
Date for review	30 December 2022 (extended to Feb 23 at December 2022 PGG and second extension to April 23 at Feb 23 PGG)

Target audience	All Trust staff
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Keywords	Long service, award, awards, NHS
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Policy Version and advice on document history, availability and storage

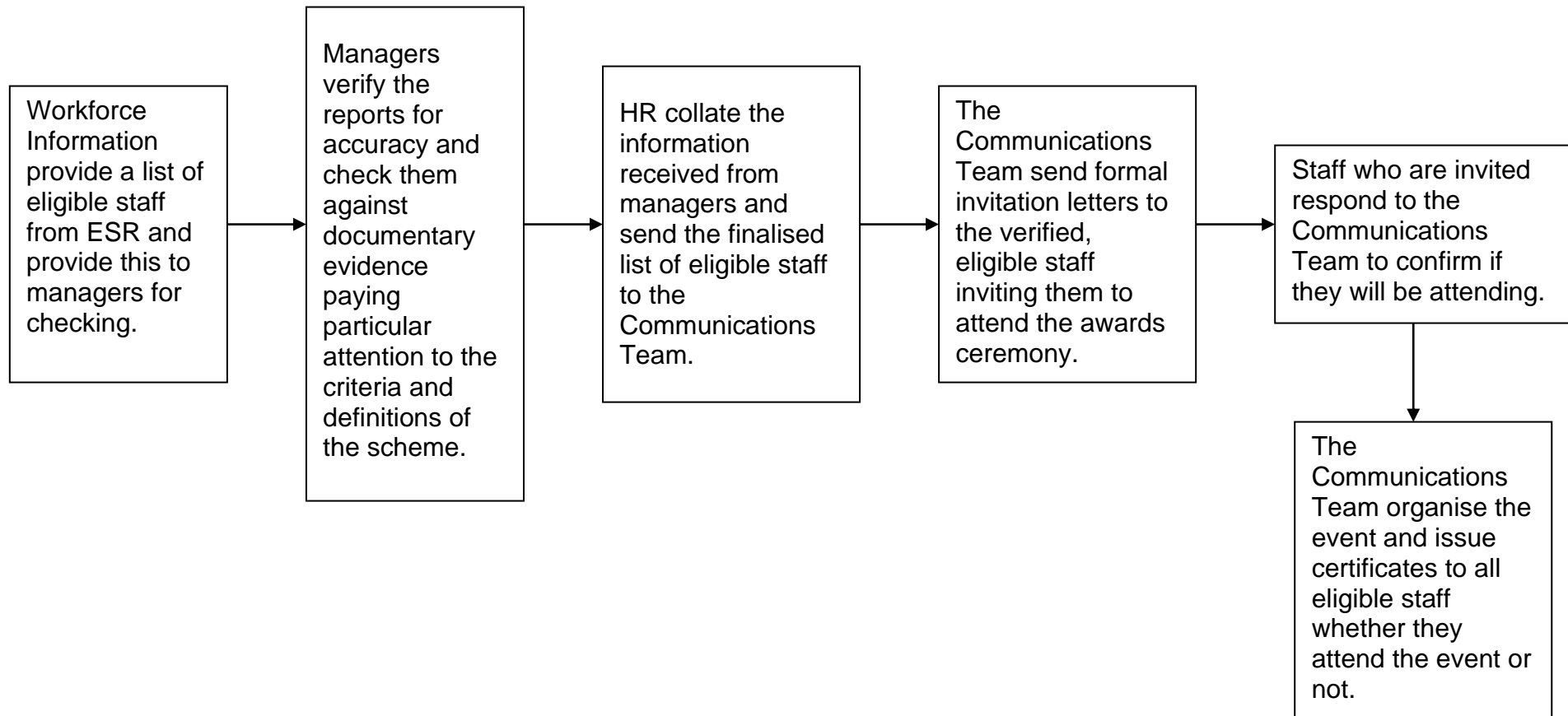
This is version 1.

This policy will be available to all staff via the Sheffield Health & Social Care NHS Foundation Trust Intranet and on the Trust's website.

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Flowchart



1. Introduction

Sheffield Health and Social Care NHS Foundation Trust (SHSC) values its staff and recognises the positive contribution that they make to the health and welfare of service users. In recognition of long and loyal service, the Trust will provide a long service award, to any member of staff who attains 30 years of continuous service with the NHS and other eligible healthcare organisations. The long service award will take the form of an invitation to the annual Recognition and Achievement Awards ceremony along with a Long Service Award certificate. In order to qualify staff must have worked the required number of years' continuous service by the identified qualifying date.

2. Scope

This policy applies to all substantive employees of the Trust. See definitions below.

3. Definitions

Qualifying Date – 01 January each year

Continuous Service – 30 years' service with the NHS and other eligible healthcare organisations.

A break of one year or less is acceptable for the purposes of this policy alone.

4. Purpose

The purpose of this policy is to provide managers and staff with guidance and information regarding long service awards, ensuring that all staff are treated equitably irrespective of their race, ethnicity, marital status, cultural background, religion, belief, disability, gender, sexual orientation or age.

5. Duties

Responsibility of the Human Resources Department

It is the responsibility of the Human Resources Department to ensure full compliance with this policy and, in conjunction with the Communications Team, put in place systems and procedures to support its application.

The Human Resources Department will, on an annual basis (early December), send to managers a long service award report identifying employees who may be eligible to receive a long service award as at a qualifying date [1st January].

HR will collate the information received from managers and send the finalised list of eligible staff to the Communications Team.

Responsibility of Managers

It is the responsibility of all managers to ensure that all long service award reports are verified for accuracy and checked against documentary evidence paying particular attention to the criteria and definitions of the scheme.

It is the responsibility of managers to raise any queries regarding length of service at the point at which they are verifying the details of any potentially eligible employee in order that other sources of documentary evidence can be sought.

Responsibility of the Communications Team

It is the responsibility of the Communications Team to send formal invitation letters to verified eligible staff inviting them to attend the awards ceremony.

The Communications Team will be responsible for arranging the ceremony, booking the venue, including refreshments and issuing certificates to eligible staff whether they attend the ceremony or not.

6. Process

6.1 Eligibility

- 6.1.1 Managers will be responsible for verifying the details of potentially eligible employees against records held on personal files and issuing the Long Service Award electronic claim form to HR within the specified timescale. HR will determine the deadline for nominations on an annual basis to ensure adequate time to put in place all necessary arrangements. Nominations received after the given deadline will not be processed and will be deferred until the following year.
- 6.1.2 All current employees who have achieved continuous service for 30 years (with a break of one year or less) with the NHS or other eligible healthcare organisations will be eligible for the award. This includes staff who have TUPE'd over from other services in the City e.g. the Local Authority.
- 6.1.3 In order to qualify for the award staff must have worked the required 30 years continuous service by the qualifying date [1st January] with the NHS or other eligible healthcare organisations.
- 6.1.4 The Long Service Award applies to current Primary Job Assignments only and excludes Bank Only employees. Bank employees who have achieved 30 years' service may be considered for a separate award in the future.
- 6.1.5 A career break would count as Trust service for the purposes of the Long Service Awards calculation.

- 6.1.6 For employees who started working for the Trust as Bank Only and then subsequently gained a substantive post- the total length of the Trust service would be eligible for the award calculation as long as any break in service was one year or less. It is the responsibility of the line manager to provide relevant information to confirm this.
- 6.1.7 Staff who have retired and returned to work for the Trust may be eligible to receive a Long Service Award based on their length of service, providing that the break in service is one year or less.
- 6.1.8 Staff who may have had an honorary contract at another organisation, or if part of their 30 year service is covered by such a contract, may be eligible to receive a Long Service Award providing that they meet the rest of the criteria and have not had a break in service of more than one year.
- 6.1.9 Any individual who is dismissed for misconduct will not be eligible to attend the awards ceremony.
- 6.1.10 Staff who resign from their position in the Trust will not be eligible to receive an award if they complete 30 years service but leave before 31st December (the cut-off date for the eligibility calculation).

6.2 **Award and Presentation**

- 6.2.1 All current employees who have met the eligibility criteria set out in this Policy will receive a Long Service Award certificate whether they attend the annual Recognition and Achievement Awards ceremony or not.
- 6.2.2 All eligible Staff will be contacted by the Communications Team in advance and invited to attend the annual Recognition and Achievement Awards ceremony. Eligible staff will be entitled to invite another member of staff or family member.
- 6.2.3 Staff are only eligible to receive the award and receive an invitation to the annual Recognition and Achievement Awards ceremony in the year that they have worked the required 30 years continuous service.
- 6.2.4 Presentation of the Long Service Awards certificate will take place at the annual Recognition and Achievement Awards ceremony. For eligible staff who do not wish to attend the Recognition and Achievement Awards ceremony, their certificate will be posted to them.
- 6.2.5 An employee who achieves 30 years or more service after the determined deadline of 1st January each year will receive their award certificate and invitation to the Recognition and Achievement Awards the following year.

- 6.2.6 A member of staff who achieves their 30 years or more service but leaves their employment before the annual presentation will continue to be eligible for their award. This should be raised by the employee prior to leaving the Trust and the employee's manager must notify the Human Resources Department immediately to enable arrangements to be made for the employee's award to be forwarded to them.
- 6.2.7 Eligible staff can only receive the Long Service Award and invitation to the annual Recognition and Achievement Awards once.
- 6.2.8 Eligible staff who are unable to accept the invitation to the annual Recognition and Achievement Awards due to a pre-existing commitment (e.g. booked holiday abroad) may apply for a deferral of the invitation to the following year by emailing awards@shsc.nhs.uk. Eligible staff can only apply for deferral once.

7. Dissemination, storage and archiving (Control)

This Policy will be available through the Policy Section of the intranet and is available to all staff. The Policy can also be accessed externally via the SHSC Trust website.

8. Training and other resource implications

There is no additional training requirement.

9. 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
Review of the policy	HR Policy Governance Process	HR Senior Management Team	Every 4 years Review date Dec 2022	HR Senior Management Team	HR Senior Management Team	Not applicable

10. Implementation plan

Action / Task	Responsible Person	Deadline	Progress update
New policy to be uploaded onto the Intranet and Trust website.	Director of Corporate Governance	Within 5 working days of ratification	February 2019
A communication will be issued to all staff via the Communication Connect immediately following publication.	Director of Corporate Governance	Within 5 working days of ratification	February 2019

11. Links to other policies, standards and legislation (associated documents)

Not Applicable.

12. Contact details

<i>Title</i>	<i>Name</i>	<i>Phone</i>	<i>Email</i>
HR Adviser	Kerry Scott	0114 2263974	kerry.scott@shsc.nhs.uk
Head of Communications	Jane Harris	0114 2716706	awards@shsc.nhs.uk

13. References

Not Applicable.

Appendix A – Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
1	Initial discussions at EDG	2016	HR SMT agreed that a Case of Need was not required as EDG had already approved the need for this policy and prior to new Policy Governance procedures.
	New policy under development.	2016 to 2017	NEW POLICY
	New author in place.	2017	-----
	Consultation with the Head of Communications, Staff Side, HR and Managers where relevant.	October 2018	-----
	EDG consideration of the draft policy.	October 2018	-----
	Joint Policy Group and Joint Consultative Forum.	November 2018 December 2018 via email January 2019 via email	Verification.
	Policy Governance Group.	January 2019	Approval. Since Jan PGG an amendment has been made to the break in service.
	Policy Governance Group.	February 2019	Amendment to break in service. Changed from one month to one year.
	EDG ratification.	January 2019	Ratification.

Appendix B – Dissemination Record

Version	Date on website (intranet and internet)	Date of “all SHSC staff” email	Any other promotion/ dissemination (include dates)
1	February 2019	In Connect February 2019	N/A

Appendix C – Stage One Equality Impact Assessment Form

Equality Impact Assessment Process for Policies Developed Under the Policy on Policies

Stage 1 – Complete draft policy

Stage 2 – Relevance - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? If **NO** – No further action required – please sign and date the following statement. If **YES** – proceed to stage 3

This policy does not impact on staff, patients or the public (insert name and date)

See below

Stage 3 – Policy Screening - 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 on equality impact assessment for examples and detailed advice this can be found at <http://www.shsc.nhs.uk/about-us/equality--human-rights>

	Does any aspect of this policy actually 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	NO	N/A	N/A
DISABILITY	NO	N/A	N/A
GENDER REASSIGNMENT	NO	N/A	N/A
PREGNANCY AND MATERNITY	NO	N/A	N/A
RACE	NO	N/A	N/A
RELIGION OR BELIEF	NO	N/A	N/A
SEX	NO	N/A	N/A
SEXUAL ORIENTATION	NO	N/A	N/A

Stage 4 – Policy Revision - Make amendments to the policy or identify any remedial action required (action should be noted in the policy implementation plan section)

Please delete as appropriate: ~~Policy Amended / Action Identified / no changes made/~~ NEW POLICY.

Impact Assessment Completed by (insert name and date)

KERRY SCOTT, DEC 2018

Appendix D - Human Rights Act Assessment Form and Flowchart

You need to be confident that no aspect of this policy breaches a persons Human Rights. You can assume that if a policy is directly based on a law or national policy it will not therefore breach Human Rights.

If the policy or any procedures in the policy, are based on a local decision which impact on individuals, then you will need to make sure their human rights are not breached. To do this, you will need to refer to the more detailed guidance that is available on the SHSC web site

<http://www.justice.gov.uk/downloads/human-rights/act-studyguide.pdf>

(relevant sections numbers are referenced in grey boxes on diagram) and work through the flow chart on the next page.

1. Is your policy based on and in line with the current law (including case law) or policy?

Yes. No further action needed.

No. Work through the flow diagram over the page and then answer questions 2 and 3 below.

2. On completion of flow diagram – is further action needed?

No, no further action needed.

Yes, go to question 3

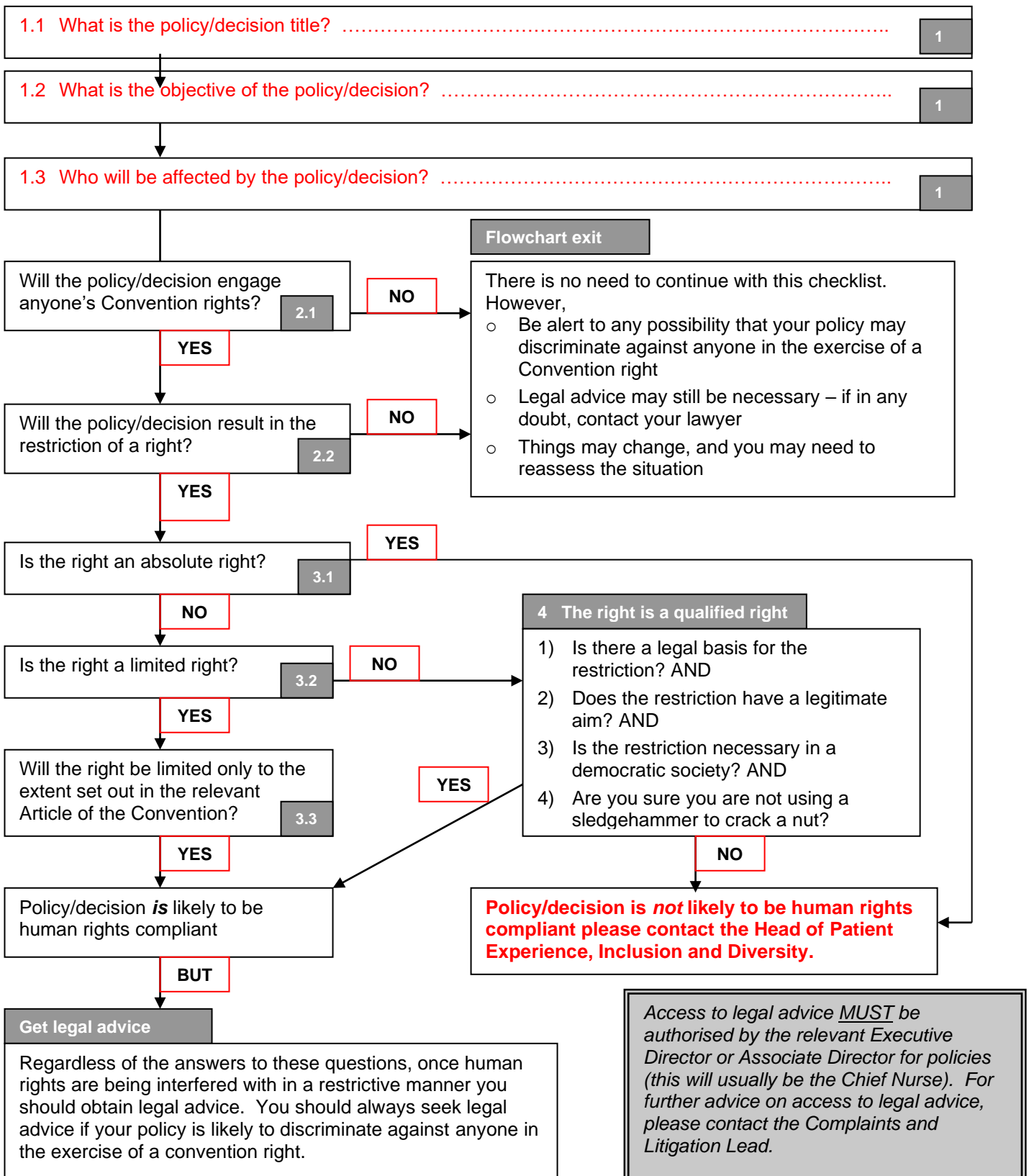
3. Complete the table below to provide details of the actions required

Action required	By what date	Responsible Person

Human Rights Assessment Flow Chart

Complete text answers in boxes 1.1 – 1.3 and highlight your path through the flowchart by filling the YES/NO boxes red (do this by clicking on the YES/NO text boxes and then from the Format menu on the toolbar, choose 'Format Text Box' and choose red from the Fill colour option).

Once the flowchart is completed, return to the previous page to complete the Human Rights Act Assessment Form.



Appendix E - Development and consultation process

- Need for policy was established in 2016 following a request from Staff Side at the Joint Consultative Forum.
- HR SMT approved this requirement.
- EDG approved this requirement and were provided with the very first draft of the policy in 2016.
- The Long Service Awards process evolved during 2016 and 2017 so it wasn't possible to set policy at that time.
- A new author was established in 2018.
- From July 2018, the author consulted with the Communications Team to finalise the policy.
- The author also consulted with relevant managers and HR colleagues as appropriate.
- EDG received the draft policy in October 2018.
- Staff Side consultation took place at the Joint Policy Group 24-10-18 and verified at the Joint Consultative Forum 28-11-18 and 30-01-19.
- Policy was finalised in December 2018 and Staff Side approved it via email.
- Policy Governance Group received in January 2019. Approved but there has since been an amendment with regards to the break in service - amended from one month to one year.
- Ratified by EDG in February 2019.

Appendix F –Policies Checklist

1. Cover sheet

All policies must have a cover sheet which includes:

- The Trust name and logo X
- The title of the policy (in large font size as detailed in the template) X
- Executive or Associate Director lead for the policy X
- The policy author and lead X
- The implementation lead (to receive feedback on the implementation) X
- Date of initial draft policy X
- Date of consultation X
- Date of verification X
- Date of ratification X
- Date of issue X
- Ratifying body X
- Date for review X
- Target audience X
- Document type X
- Document status X
- Keywords X
- Policy version and advice on availability and storage X

2. Contents page X

3. Flowchart X

4. Introduction X

5. Scope X

6. Definitions X

7. Purpose X

8. Duties X

9. Process X

10. Dissemination, storage and archiving (control) X

11. Training and other resource implications X

12. Audit, monitoring and review X

This section should describe how the implementation and impact of the policy will be monitored and audited and when it will be reviewed. It should include timescales and frequency of audits. It must include the monitoring template as shown in the policy template (example below)

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) Describe which aspect this is monitoring?	e.g. Review, audit	e.g. Education & Training Steering Group	e.g. Annual	e.g. Quality Assurance Committee	e.g. Education & Training Steering Group	e.g. Quality Assurance Committee

X

- 13. Implementation plan X
- 14. Links to other policies (associated documents) X
- 15. Contact details X
- 16. References X
- 17. Version control and amendment log (Appendix A) X
- 18. Dissemination Record (Appendix B) X
- 19. Equality Impact Assessment Form (Appendix C) X
- 20. Human Rights Act Assessment Checklist (Appendix D) X
- 21. Policy development and consultation process (Appendix E) X
- 22. Policy Checklist (Appendix F) X