Human Resources Policy No. HR69

**Acting Down**

Sponsor: Head of Human Resources in conjunction with Director of Corporate Affairs

Date agreed by LNC: September 2011

Date agreed by Board:

Date of next review: June 2014

Version: 1
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1. **INTRODUCTION**

1.1 The term ‘acting down’ is used to refer to situations where, as the result of an emergency or crisis, a consultant is required to undertake duties which would normally be performed by a non-consultant member of medical or dental staff. It does not apply to duties that a consultant undertakes as part of his or her normal workload but which could also be undertaken by a non-consultant member of staff.

1.2 The Trust aims to minimise the use of acting down as much as possible. However it is recognised that there will be some circumstances in which it becomes necessary. This policy sets out the circumstances in which “acting down” may be undertaken by consultant medical staff, the authorisation process required, the claims process and rates of pay.

2. **SCOPE**

2.1 This policy applies to all consultant medical and dental staff required to “act down”. It does NOT apply to other grades of medical and dental staff.

2.2 In implementing this policy, managers must ensure that all staff are treated fairly and within the provisions and spirit of the Trust’s Policy HR01 ‘Equality and Diversity’.

3. **ACTING DOWN BY CONSULTANTS**

3.1 Acting down places an increased burden on consultants and should be the exception rather than the rule. All efforts must be made to avoid it through, for example, effective management of absences (including holidays and sickness) and absence cover for non-consultant career grades by comparable staff.

3.2 Consultants are not contractually obliged to act down or to be compulsorily resident on-call to cover the duties of non-consultant staff.

3.3 Consultants will be requested to act down only when there is a critical shortage of non-consultant staff and the only alternative would be to close the department.

3.4 Acting down arrangements will be implemented only when it is clinically safe to do so.

3.5 Where all efforts to obtain appropriate junior doctor cover have failed and:

- If the matter is within normal working hours, the matter should be referred to the Centre Chief (or nominee) for the area who will decide on how cover should be provided. If acting down is required the Centre Chief/nominee will authorise it. In the absence of the Centre Chief/nominee the matter should be escalated through the normal management line where acting down is recommended.

- Outside normal working hours or where line management is unavailable, the consultant on-call for the specialty concerned will judge whether the department can safely operate with the staffing levels at its disposal; if it cannot, the consultant must discuss the options available with the Trust Board Director On Call, who will decide whether or not to authorise the acting down.
3.6 If acting down by the on call Consultant is authorised, the authorising Centre Chief/nominee/Manager will make arrangements where possible for another consultant of the same specialty to be on call to support the acting down Consultant. Wherever possible this should not be for a whole overnight period or other lengthy or other such lengthy period. The authorising Centre Chief/nominee/Manager will also e-mail the Service Manager with confirmation of the agreement for acting down (and additional on call arrangements where agreed) and copy this to the Consultants concerned (who should use this as the basis for their claim for payment).

3.7 Following any period of acting down, the normal compensatory rest periods required for compliance with the Working Time Regulations should be observed to ensure safe delivery of service.

4. **RATES OF PAYMENT FOR ACTING DOWN**

Where acting down is authorised and worked it will be paid at 2.5 times the normal PA/sessional rate plus single standard time off, to be taken within an agreed period.

4.1 Where the acting down requirement is for non-resident on-call cover then the hours on call but not at work will be paid at the normal sessional rate, with any time called out being paid at the acting down rate.

4.2 Consultants called upon to support an acting down consultant by providing on call cover will be paid their normal PA/sessional rate.

4.3 The consultant acting down should make their claim for payment in writing via their Centre Manager, who will authorise the payment to Pay Services. The claim should set out details of the period covered and should be submitted by the end of the month following that in which the acting down occurred. Payments will be included on payslips as “Acting Down”.

5. **MONITORING ARRANGEMENTS**

5.1 Centre Chief will be responsible for monitoring Acting Down in their Centre.

5.2 The Director of Finance will be responsible for providing management information relating to payments and claimants on a monthly basis.

5.3 Overall Trust management of Acting Down will be discussed quarterly by the Hospital Executive Committee. Centre Chiefs will be expected to report to this meeting on the use of Acting Down and the addressing of capacity shortfalls to reduce the requirement for Acting Down in the future.

5.4 The effectiveness of the arrangements for acting down within the Trust and the terms set out in this policy will be reviewed periodically by the LNC.