Paper 11

	Paper 11			
Reporting to:	Trust Board – 31 March 2016			
Title	Annual Appraisal and Pay Progression Policy			
	Employee Performance Management Policy			
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	Erica Cobbold, Human Resources Business Partner			
Previously considered by	Policy Approval Group			
Executive Summary	This paper has been prepared to provide an overview of the new Annual Appraisal and Pay Progression Policy (W12) and Employee Performance Management Policy (W10) and accompanying procedures:  Employee Performance Management Policy (W10) This policy merges two existing Trust Policies (Maintaining High Standards of			
	Performance HR06 and Managing Poor Performance HR63) into one easier to follow process. The new process includes an informal and formal management process and a final performance management meeting which could result in Retraining, Redeployment or termination of employment. Staff side have been involved in the formation of this policy and procedure and agreed it at TNCC in February. The Policy and Procedure has been agreed at PAG and therefore, is being presented as part of the final approval process.			
	Incorporating incremental Pay Progression into the Appraisal Policy and Process  Agenda for Change introduced earned annual increments nationally in 2013. This is in Annex W of the Agenda for Change Terms and Conditions of Employment Handbook. This means that in order to be awarded an increment, staff in pay bands 1-8b (not at the top of their pay band) must meet set criteria to earn their increment, (listed below).			
	A working group was established with members of Finance, Payroll, ESR, Human Resources, Corporate Education, managers and staff side representatives in November 2015 to agree how to implement this in our Trust. Following a number of working party meetings the following criteria have been agreed for staff to be eligible to be awarded an annual increment:  a. Completion of a recorded annual appraisal within 12 months of the previous appraisal (within the post holder's ability)  b. Compliance with Statutory Safety Update training requirements (unless the individual has been prevented from attending by the line manager or insufficient places were available as confirmed by the Head of Education)  c. Not being subject to a live formal disciplinary sanction, the disciplinary panel will make an individual assessment on a case by case basis  d. Achievement of work objectives identified prior to appraisal  e. Demonstration of Trust Values in day to day work			

Failure to achieve any of the above criteria will result in incremental progression being withheld and the staff member will not be eligible for consideration for an increment until their next incremental date. In addition the payment of an increment may be temporarily delayed when: • the staff member is subject to a formal Personal Improvement Plan (PIP) at the time of the appraisal meeting, and • there is a record of notification to the individual that this will affect their ability to earn an increment For staff in pay bands 8c, 8d and 9, the last 2 pay points on their scale are nonrecurring and are reviewed annually at appraisal. This means that staff in these grades must meet all the criteria to maintain their final 2 pay points. Failure to meet all the criteria could result in an increment being removed and the individual moving down to the pay point below on their incremental date. They would then be eligible for consideration to move back up to the next pay point at their next appraisal. **Strategic Priorities** 1. Quality and Safety Reduce harm, deliver best clinical outcomes and improve patient experience through our **Quality Improvement Strategy** 2a) Healthcare Standards: To develop a transition plan, with supporting mitigation actions and contingency **Operational Performance** plans, that ensures the safety and short term sustainability of challenged clinical Standards services. 2014/15 To address the existing capacity shortfall and process issues to consistently deliver national healthcare standards. 2014/15 To undertake a review of all current services at specialty level to inform future service and business decisions. 2015/16 2b) Healthcare Standards: Service Complete and embed the successful reconfiguration of Women and Children's Reconfiguration services Develop a sustainable long term clinical services strategy for the Trust to deliver our vision of future healthcare services through our Future Fit Programme 3. People and Innovation X Develop our leaders and promote staff engagement to make our organisation a great place to work through our People Strategy Develop a robust Investment Strategy to modernise our equipment and estate to support service transformation and increase productivity through the use of technology) Community and Partnership | Embed a customer focussed approach and improve relationships with our GPs through our Stakeholder Engagement Strategy Develop a transition plan that ensures financial sustainability and addresses liquidity Financial Strength: Sustainable Future issues pending the outcome of the Future Fit Programme If we do not deliver **safe care** then patients may suffer avoidable harm and poor **Board Assurance Framework** clinical outcomes and experience (BAF) Risks If we do not implement our **falls** prevention strategy then patients may suffer serious Risk to **sustainability** of clinical services due to potential shortages of key clinical staff If we do not achieve safe and efficient **patient flow** and improve our processes and capacity and demand planning then we will fail the national quality and performance standards If we do not have a clear **clinical service vision** then we may not deliver the best services to patients X If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale and patient outcomes may not improve If we are unable to resolve our (historic) shortfall in **liquidity** and the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment

Care Quality Commission (CQC) Domains	☐ Safe ☐ Effective ☐ Caring ☐ Responsive X Well led		
Receive Review Note X Approve	Recommendation  To APPROVE the Policy and Procedures.		



## Employee Performance Management Policy W10

#### Part of Policy Cluster for Performance and Development Policies

#### **Human Resources Policy Cluster Ref. B**

Within the Cluster additionally refer to:

**Development and Training** 

**Appraisals** 

Knowledge and Skills Framework

Performance Related Increments

Acting Up

Sponsorship of Healthcare Workers for Professional Registration Training

Secondment

Within relevant Clusters additionally refer to Equality and Diversity HS11 Management of Health and Safety: Risk Assessment Forms

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1.5	Dec 15	Erica Cobbold	5 <sup>th</sup> draft	Amendments made from Working Group Discussion

## Previous individual policy version history overleaf Relevant Policy Version History

Maintaining High Standards of Performance Policy- previously HR06

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Managing Poor Performance Policy - previously HR60

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#### 1 Policy Statement

- 1.1 The Trust requires that all staff perform to at least the minimum standards required by the role for which they are employed. This policy is designed to encourage improvements in standards of performance and to ensure that reasonable sanctions are applied when required standards are not met.
- 1.2 The purpose of the procedure is NOT to handle matters relating to:

misconduct, unacceptable behaviour, wilful or serious negligence. These cases will be handled in accordance with the Trust's Disciplinary Policy (HR36).

**capability issues** where they are due to ill health or disability. Such issues may be managed under a range of policies including:

HR31 Managing Attendance and Employee Wellbeing

HR32 III Health Retirement

HR40 Employment of People with Disabilities

- 1.3 This policy forms part of the Policy Cluster for Performance and Development.
- 1.4 Reference should be made to the Probationary Periods (HR74), which applies to staff new to the Trust.
- 1.5 This policy is supported by the Trust Procedure that is available from the Trust Intranet, including a flowchart providing an overview of the processes, additional guidance, Frequently Asked Questions (FAQ's) and Standard Documents/Forms and Letters.
- In implementing this policy, managers must ensure that all staff are treated fairly and within the provisions and spirit of the Trust's Equality and Diversity Policy (HR01). Special attention should be paid to ensuring the policy is understood when using it for staff new to the NHS or Trust, by staff whose literacy or use of English is weak or for persons with little experience of working life.
- 1.7 Managers must respect the confidentiality of the employee at all times and not disclose any personal information to a third party, with the exception of where advice is being sought from their line manager, the HR Department or the Occupational Health Department.

#### 2 Scope

- 2.1 This policy applies to all staff directly employed by the Trust whether full time or parttime, temporary or permanent including those employed via the Temporary Staffing Department but excluding doctors and dentists, for whom separate procedures apply under HR07 Disciplinary Policy for Doctors and Dentists.
- 2.2 Employees of 'student' or 'trainee' status will, additionally, remain subject throughout their training to the requirements of the appropriate training programme and, where appropriate, of the professional or statutory body responsible for the training programme. Failure to satisfy any of these requirements may be regarded as grounds for dismissal.
- 2.3 Matters relating to the performance and capability of Trust Board Directors are covered by the arrangements set out in their Statement of Terms and Conditions of Employment.
- 2.4 The procedure does not apply to individuals employed by agencies or other contractors. Performance and capability issues for these individuals should be referred to the

appropriate employer and, where appropriate, the individual removed from working within the Trust.

#### 3 Duties and Responsibilities

#### 3.1 Managers have a responsibility to:

- Understand the policy and procedure and how they can apply it.
- Determine the standards required for any role within their team and make their employees aware of the standards of performance expected of them.
- Ensure employees are competent to undertake the duties and tasks required of them.
- Implement this policy and ensure that all employees are aware of their responsibilities
- Liaise with other relevant departments as required i.e. HR, Pay Services, Pensions, Occupational Health, Health and Safety.
- Ensure that the employee is made aware of any developments or decisions made as relevant.
- Maintain accurate records in accordance with this policy.
- Make available all relevant Trust policies to the employee (these are also available on the Trust's Intranet and the Internet).

#### 3.2 Employees have a responsibility to:

- Achieve a satisfactory level of performance and standards required by the Trust.
- Use their best endeavours and skills to help the Trust achieve its objectives.
- Carry out reasonable instructions/requests of supervisors and managers promptly and efficiently.
- Notify managers of any concerns they have regarding their ability to undertake the duties and tasks required of them.
- Accept any reasonable offers of support or additional training in an effort to improve their performance.
- Attend any meeting arranged in accordance with this policy and procedure Observe the policies and procedures of the Trust.

#### 3.3 Human Resources have a responsibility to:

- Provide support and guidance to staff and managers on the implementation and application of this policy.
- Monitor the application of this policy cluster and update it as required.

#### 4 Regular Performance Management

- 4.1 Managers should always be monitoring the performance of all their staff. Employee performance should be managed throughout the entire employee lifecycle, this includes:
- 4.2 Induction Corporate Induction and local Trust induction. Local induction by the manager should establish the standards of performance, skills and knowledge for the role and specific objectives
- 4.3 Appraisal yearly appraisals allow staff and managers to review performance in the previous 12 months and agree objectives for the following year. Appraisals should occur twice in the first year of any new role (Refer to W12).

Regular Feedback – recognition of good or unsatisfactory performance should occur on a regular basis by informal conversations with the manager. Giving constructive feedback where required.

4.4 Statutory and Mandatory Training Updates – as and when required

#### 5 Managing Unsatisfactory Performance

- 5.1 <u>Informal Performance Management Meeting</u>
- 5.1.1 Where the performance of an employee is deemed to be unsatisfactory the manager will hold an informal meeting with the individual to discuss this in more detail and agree the next steps as required. The manager will ensure the employee has received a copy of this policy and the accompanying Procedure Document. More detail on the content and nature of this meeting can be found in the Procedure Document to support this policy.
- 5.1.2 There is no right to be accompanied at informal meetings or discussions however if an individual wants support from a colleague employed by the Trust they may attend the meeting to support the individual as long as it does not delay the meeting/conversation taking place.
- 5.1.3 When Informal Performance Management action fails and an employees performance continues to be deemed as unsatisfactory a Formal Meeting will be arranged.
- 5.2 Formal Performance Management Meeting
- 5.2.1 At Formal Meetings employees are entitled to be accompanied by either their trade union representative or Trust employed work colleague. The employee will be responsible for contacting their TU representative or trust employed work colleague.
- 5.2.2 More detail on the content and nature of this meeting can be found in the Procedure Document to support this policy.
- 5.2.3 When Formal Performance Management action fails and an employee's performance continues to be deemed unsatisfactory a Final Formal Meeting will be arranged.
- 5.3 Final Formal Meeting
- 5.3.1 More detail on the content and nature of this meeting can be found in the Procedure Document to support this policy.
- 5.3.2 At this meeting consideration will be given to
  - 1. Further Training/Monitoring and support
  - 2. Redeployment
  - 3. Downgrading
  - 4. Termination of the employee's contract of employment on the grounds of capability

#### 5.4 Right of Appeal

An employee has the right to appeal against the decision of the chair of the Final Performance Management Meeting under this procedure. The appeal should be made in writing to the next level of management within 10 working days of receipt of written confirmation of the decision.

More detail on the content and nature of this meeting can be found in the Procedure Document to support this policy.

#### 6 Concerns Regarding Professional Registration or Regulatory Body

Where there are concerns regarding an employee's fitness to practice and they hold professional registration, consideration must be given by the responsible manager to discuss this with their relevant professional advisor, involving the Head of HR. The ultimate decision to refer lies with the appropriate Director. The Trust will not await the outcome of any separate investigation undertaken by the regulatory authority before taking appropriate action under this policy and the Procedure Document supporting this policy.

#### 7 Training

- 7.1 Training required to fulfil this policy will be provided in accordance with the Trust's Training Needs Analysis. Management and monitoring of training will be in accordance with the Trust's Development and Training Support Policy (HR59/W12).
- 7.2 This information can be accessed via the Learning Zone pages on the Trust intranet.

#### 8 Review Process

The Trust will review this policy every 5 years, unless there are significant changes at either national policy level, or locally.

#### 9 Equality Impact Assessment (EQIA)

This policy applies to all employees equally.

#### 10 Process for Monitoring Compliance

Aspect of compliance or effectiveness being monitored	Monitoring method	Responsibility for monitoring	Frequency of monitoring	Group or Committee that will review the findings and monitor completion of any resulting action plan
Access and uptake to be monitored	At policy review access and uptake of policy entitlement to be reviewed	HR Team	On policy review	TNCC
Organisations expectations in relation to staff training	Management and monitoring of training will be in accordance with the Trust's Development & Training Support (HR59) and Risk Management Training Policy			

#### 11 References

#### Legislation

- Equality Act 2010
- Employment Rights Act 1996

#### Other references

The NHS Employers Website provides further information on managing NHS employees www.nhsemployers.org

NHS Terms and Conditions Service Handbook (AfC)



# Annual Appraisal and Pay Progression Policy W12

#### Part of Policy Cluster for Performance and Development Policies

Human Resources Policy Cluster Ref. B

Within the Cluster additionally refer to:

Development and Training

Employee Performance Management Policy

Acting Up

Sponsorship of Healthcare Workers for Professional Registration Training

Secondment

Within relevant Clusters additionally refer to Equality and Diversity

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#### **Policy Version History**

Workforce Policy W12 part of Policy Cluster. B

**Version History** 

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1.2	Feb 16	Mary Beales	2nd draft	Amendments made from consultation process
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#### **Relevant Policy Version History**

Appraisals Policy- previously HR10

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Knowledge and Skills Framework Policy - previously HR44

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#### **Version history**

Version	Date	Author	Status	Comment
V1	Jan 2016	Head of Education	Draft	New Policy to incorporate new policy format, incorporation of Trust Values, Pay Progression. This policy also amalgamates and updates policies HR10 and HR44 (Knowledge and Skills Framework) which are now obsolete

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#### 1.0 Statement, Overview and Responsibilities

- 1.1 This Policy sets out the requirement for all staff in the Trust to have an Annual Appraisal and has been developed from Agenda for Change terms and conditions of employment including Annex W. It does not cover appraisal arrangements for Medical and Dental staff.
- 1.2 Managers and staff are jointly responsible for ensuring that every member of staff has a timely Annual Appraisal which supports effective work performance. Managers must schedule and carry out appraisals in line with the policy and both staff and managers must prepare for a mutually meaningful discussion which is properly recorded.
- 1.3 Failure to adhere to this policy by the individual or manager may constitute misconduct and result in formal disciplinary proceedings taken in line with the Trust Disciplinary Policy (HR36), which could result in dismissal.

#### 2.0 Annual Objectives, including use of the KSF and/or competency frameworks

- 2.1 In accordance with the Trust Performance Management Framework, every member of staff under Agenda for Change will have a set of annual written work objectives, KSF outline, or competency framework, that is linked to Trust Values. This will be used as part of the criteria for performance assessment in the Annual Appraisal.
- 2.2 Departments that wish to continue to use the KSF Outline and/or a Competency Framework process may do so if relevant and useful to the post (e.g. for new recruits). The requirement to meet a KSF Outline or a Competency Framework must be specified in the staff member's annual objectives.

#### 3.0 Failure to Agree Objectives, Competency Framework or KSF Outline

- 3.1 Where a post holder and the line manager disagree about the content or level of a KSF outline, a competency framework or a set of annual objectives, the following procedure will apply:
  - a. Written advice will be sought by the line manager from HR for annual work objectives, or from the Head of Education for KSF Outlines and Competency Frameworks and this is discussed with the post holder
  - b. If the individual and their line manager continue to disagree about the content and/or level of a KSF Outline, a Competency Framework, or a set of Annual Objectives, either has the right to refer the matter for consideration by the next level of management via HR16 Grievances Policy at the informal stage in the first instance. This must be within 3 months of the written objectives being drafted and shared with the individual.

#### 4.0 Annual Appraisal

- 4.1 The following should be held and recorded on the appraisal form:
  - A discussion on how the individual has met their objectives.
  - A discussion on how the individual has demonstrated the Trust Values in their work.
  - An overall rating of the staff member's performance in accordance with the Guidance Notes and the impact on the staff member's incremental progression
  - Expected outcomes from education, learning and development activities that were identified and agreed. It is also essential that attendance at statutory/mandatory training is discussed and recorded on the Personal Development Plan.

- 4.2 Pay Increments are automatically awarded if the individual meets the criteria required. Where an increment is withheld, it is the responsibility of the line manager to ensure this is done in advance of the payroll deadline for the relevant month, (using an ESR Change of Circumstance Form). The line manager must also formally notify the member of staff (see appendix C of the Procedure) in writing of:
  - the withheld increment
  - the reason for this
  - any relevant performance management measures, and
  - the date the individual will next be eligible for consideration for an incremental award.

#### 5.0 Record Keeping and Monitoring

- 5.1 The Employee-Led Appraisal Record (Appendix A) <u>must</u> be completed and signed by the individual and the line manager. Copies are retained:
  - one on the individual's personal file
  - one kept by the individual, and
  - one forwarded to the Corporate Education team for the purposes of organisational monitoring and planning only. This copy may be forwarded electronically by scanning or by electronic submission via the Intranet.
- 5.2 All copies will be held in accordance with the provisions of the Data Protection Act
- 5.3 The Corporate Education Team provides Trust managers with monthly reports showing the appraisal compliance status of every individual employee, department and Care Group. This is monitored and challenged by each succeeding level of management until compliance is achieved.

#### 6.0 Pay Progression

#### **Key Principles**

- 6.1 The Trust expects that employees who have demonstrated appropriate levels of performance and delivery will progress through the pay points of their pay band annually. This is in keeping with Section 1.9 of the Agenda for Change (AfC) Terms and Conditions handbook.
- 6.2 Pay progression is not an automatic right and there are certain circumstances where pay progression may be <u>withheld</u> (where any of the criteria in section 7.1 are not met), or <u>delayed</u> (see section 7.2 below).
- 6.3 Pay progression for employees on the last two pay points of Bands 8c, 8d and 9 will be non-recurring and reviewed annually.
- 6.4 With the exception of 6.3 above, staff already on the top of their band will not be affected by Pay Progression however they will be expected to undertake an annual Appraisal and meet the criteria outlined in 7.1 below.
- 6.5 Where a manager believes there are grounds to withhold or delay an individual's increment, they should seek advice from the HR Team.
- 6.6 Where an employee's pay progression is withheld, they will have the right to request a review of the decision.

#### 7.0 Pay Progression Criteria

- 7.1 Agenda for Change does not define appropriate levels of performance and delivery. The Trust has defined this in this Policy as follows:
  - a. Completion of a recorded annual appraisal within 12 months of the previous appraisal
  - Compliance with Statutory Safety Update training requirements (unless the individual has been prevented from attending by the line manager or insufficient places were available as confirmed by the Head of Education)
  - Not being subject to a live formal disciplinary sanction, see section 7.5 below
  - d. Achievement of work objectives identified prior to appraisal
  - e. Demonstration of Trust Values in day to day work
- 7.2 The payment of an increment may be delayed when:
  - the staff member is being managed under the Formal Performance Management process at the time of the appraisal meeting, and
  - there is a record of notification to the individual that this will affect their ability to earn an increment
- 7.3 Where an increment is delayed it will become payable on successful conclusion of the PIP so long as all the other criteria at 7.1 above are also met. It will not be backdated to the individual's incremental date and this will not change. The increment will become payable from the date the manager and employee sign off the formal Performance Improvement Plan and the manager will need to notify Payroll Services accordingly.
- 7.4 An increment will not be unreasonably withheld when the individual has been unable to meet the performance requirements specified because of something beyond their control, such as the failure of a line manager to meet with the staff member to hold their Annual Appraisal or failure to release the staff member for Statutory and Mandatory training.
- 7.5 If an employee receives a formal disciplinary warning, under the Trust Disciplinary Policy (HR36), the panel will make an individual assessment on a case by case basis. The assessment will review whether and/or how that misconduct issue has affected the achievement of performance objectives, their ability to perform their role and demonstrating the Trust Values. Where the panel believes there has been no impact, incremental progression will be awarded and the panel will formally advise the individual of this at the time of the hearing. It will be for the panel to determine for how long an individual will not be eligible for consideration of an increment, (if a formal warning is longer than 12 months).
- 7.6 Staff who have failed to meet the performance criteria for reasons of long-term sickness or paternity/maternity absence will not have their increment unreasonably withheld, so long as they are not subject to any performance sanctions under Trust Policies.
- 7.7 In accordance with the Trust Policy on Verification of Professional Registration (HR04), it is the responsibility of every employee who is required to be registered with a regulatory body to ensure that they maintain their registration. Failure to maintain registration may result in action being taken under HR36 Disciplinary Policy. Failure to maintain registration within an appraisal period, which is a requirement to practice a profession or which is a confirmed requirement for the post (as detailed on the person specification), is likely to result in the withholding of an increment for that period, in addition to any other appropriate proceedings or consequences.

#### 8.0 Requesting a Review of a Pay Progression Decision

8.1 If a post holder has had an incremental award withheld or delayed and the post holder feels this is not reasonable and/or is malicious and not in accordance with the stated criteria, the

HR Policy Cluster Ref. B Policy W12

post holder has the right to refer the matter for consideration by the next level of management via HR16 Grievance Policy at the informal stage in the first instance.

#### 9.0 Training

9.1 There is no mandatory training associated with this policy. Training is available for managers and staff to ensure the correct application and fair use of the policy and procedures and to assist in making sure that discussions are skilful, constructive and meaningful. Managers are expected to have attended a training session prior to carrying out appraisals under this policy and training attendance is recorded. Briefing sessions for all staff to access are available as well as supporting materials in written and audio-visual formats.