

<b>Reporting to:</b>	<b>Trust Board, 31 July 2014</b>
<b>Title</b>	HR Policies
<b>Sponsoring Director</b>	Workforce Director
<b>Author(s)</b>	Senior Human Resources Business Partner
<b>Previously considered by</b>	TNCC Policy Group, TNCC, Policy Approval Group and HEC
<b>Executive Summary</b>	<p><b>HR72 On-Call Policy (Revised)</b></p> <p>The On-Call Policy provides a single set of harmonised terms and conditions for on-call work for Agenda for Change staff.</p> <p>The harmonisation of legacy on-call arrangements also means the termination of all remaining unsocial hours payments that were protected until such time as harmonisation of on-call payments was achieved as stated in Agenda for Change Terms and Conditions of Employment.</p> <p>Staff in all affected departments will receive a variation of contract letter, setting out a 12-week notice period prior to the implementation of the new policy.</p> <p>Once the policy has been approved by Trust Board, managers will be asked to complete the local SOPs during the notice period to ensure staff understand the on-call arrangements applicable in their department.</p> <p><b>HR16 Grievances and Disputes Policy (Revised)</b></p> <p>The Grievance Policy has been substantially revised to make the policy simpler and clearer. The policy is for the resolution of:</p> <ul style="list-style-type: none"> <li>Individual grievances</li> <li>Collective grievances</li> </ul> <p>The aim of the policy is to formulate arrangements which ensure a fair, effective, consistent and timely method of dealing with grievances. The policy is not intended to apply to the settling of differences relating to:</p> <ul style="list-style-type: none"> <li>Dismissal or other disciplining matters</li> <li>Individual sanctions that result from disciplinary action</li> <li>Suspension from work</li> <li>Any policy with its own review or appeal mechanism</li> </ul> <p>New sections have been included outlining duties, the right to be accompanied and facilitated discussions. Important changes include:</p> <ul style="list-style-type: none"> <li>A reduction in the number of stages in the policy. There are now only 3 stages in the process - informal, formal and appeal.</li> <li>A requirement for an employee to complete a 'Record of Grievance Document' prior to a grievance proceeding (Appendix A &amp; B). This form must clearly state what outcome the employee is seeking</li> <li>Re-wording of the section on 'status quo'. This has been updated to the following:</li> </ul> <p>"At the point at which a grievance is raised, a request for status quo may be made by the employee. The request needs to be recorded and</p>

	<p>specified on the record of grievance form (Appendix A). This will be considered by the Director of Workforce and will take account of the overall position of the Organisation. This is no automatic right for Status Quo to apply to a grievance situation".</p> <p>A flow chart of the process (Appendix C) to support employees and managers</p> <p>A hearing is not required at Stage 2 nor is HR representation at this stage. The requirements are for a manager to meet with the employee, gather information, write to the employee and inform them about the outcome.</p> <p>Modified two sept process removed</p>
<p><b>Strategic Priorities</b></p> <p>1. Quality and Safety</p> <p>2a) Healthcare Standards: Operational Performance Standards</p> <p>2b) Healthcare Standards: Service Reconfiguration</p> <p>3. People and Innovation</p> <p>4. Community and Partnership</p> <p>5. Financial Strength: Sustainable Future</p>	<p><input type="checkbox"/> Reduce harm, deliver best clinical outcomes and improve patient experience through our Quality Improvement Strategy</p> <p><input type="checkbox"/> To develop a transition plan, with supporting mitigation actions and contingency plans, that ensures the safety and short term sustainability of challenged clinical services. 2014/15</p> <p><input type="checkbox"/> To address the existing capacity shortfall and process issues to consistently deliver national healthcare standards. 2014/15</p> <p><input type="checkbox"/> To undertake a review of all current services at specialty level to inform future service and business decisions. 2015/16</p> <p><input type="checkbox"/> Complete and embed the successful reconfiguration of Women and Children's services</p> <p><input type="checkbox"/> Develop a sustainable long term clinical services strategy for the Trust to deliver our vision of future healthcare services through our Future Fit Programme</p> <p><input checked="" type="checkbox"/> Develop our leaders and promote staff engagement to make our organisation a great place to work through our People Strategy</p> <p><input type="checkbox"/> Develop a robust Investment Strategy to modernise our equipment and estate to support service transformation and increase productivity through the use of technology)</p> <p><input type="checkbox"/> Embed a customer focussed approach and improve relationships with our GPs through our Stakeholder Engagement Strategy</p> <p><input type="checkbox"/> Develop a transition plan that ensures financial sustainability and addresses liquidity issues pending the outcome of the Future Fit Programme</p>
<p><b>Board Assurance Framework (BAF) Risks</b></p>	<p><input checked="" type="checkbox"/> If we do not deliver <b>safe care</b> then patients may suffer avoidable harm and poor clinical outcomes and experience</p> <p><input type="checkbox"/> If we do not implement our <b>falls</b> prevention strategy then patients may suffer serious injury</p> <p><input checked="" type="checkbox"/> Risk to <b>sustainability</b> of clinical services due to potential shortages of key clinical staff</p> <p><input checked="" type="checkbox"/> If we do not achieve safe and efficient <b>patient flow</b> and improve our processes and capacity and demand planning then we will fail the national quality and performance standards</p> <p><input type="checkbox"/> If we do not have a clear <b>clinical service vision</b> then we may not deliver the best services to patients</p> <p><input checked="" type="checkbox"/> If we do not get good levels of <b>staff engagement</b> to get a culture of continuous improvement then staff morale and patient outcomes may not improve</p> <p><input checked="" type="checkbox"/> If we are unable to resolve our (historic) shortfall in <b>liquidity</b> and the structural imbalance in the Trust's <b>Income &amp; Expenditure</b> position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment</p>
<p><b>Care Quality Commission (CQC) Domains</b></p>	<p><input checked="" type="checkbox"/> Safe</p> <p><input checked="" type="checkbox"/> Effective</p> <p><input type="checkbox"/> Caring</p> <p><input checked="" type="checkbox"/> Responsive</p> <p><input checked="" type="checkbox"/> Well led</p>

Receive     Review

Note       Approve

**Recommendation**

To APPROVE the Trust's On-Call Policy and Grievances and Disputes Policy.

## Grievance Policy

HR16

Please refer to the manager's guidance in relation to the implementation of this policy

Version:	V2
V1 issued	July 2014
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Document Lead	Human Resources Business Partner
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## Version Control Sheet

<b>Document Lead/Contact:</b>	
Document ID	HR16
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Distribution	Please refer to the intranet version for the latest version of this policy. <b>Any printed copies may not necessarily be the most up to date</b>
Key Words	Grievance, facilitated discussion, outcome, informal, formal, appeal
Dissemination	Staff Quarterly Newsletter, HR pages on the Intranet, Team Brief and specific training

### Version history

Version	Date	Author	Status	Comment
2.1	May 2014	Anna Martin	Draft	Draft Policy to TNCC Policy Group 9 <sup>th</sup> June 2014. Full redraft of original policy. Suggested amendments received.
2.2	June 2014	Anna Martin	Draft	Updated Draft Policy after discussion at TNCC Policy Group 9 <sup>th</sup> June <ul style="list-style-type: none"> <li>• Reworded paragraph 2.3</li> <li>• Updated flow chart</li> <li>• Reworded paragraph 7</li> <li>• Amended paragraph 8.3</li> </ul>
2.3	July 2014	Anna Martin	Draft	Updated Draft Policy after discussion with TNCC representatives

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## **1 Document Statement**

1.1 This policy is for the resolution of:

- Individual grievances
- Collective grievances

1.2 The responsibility for patient care and services is the concern of both the Trust and the Unions. It is in the interest of both the Trust and the employees that grievances should be resolved quickly. The aim of this policy therefore is to formulate arrangements which ensure a fair, effective, consistent and timely method of dealing with grievances taking into account the above.

1.3 The timescales set out in this policy are to be applied but may be varied by mutual agreement, which should be recorded in writing. However, every effort should be made to settle grievances as quickly as possible. Therefore it is an expectation that both the Trust and the employees/s should actively work together to resolve the grievance with a commitment to attend any meetings arranged to address the matters concerned.

1.4 It is expected that all grievances be raised as soon as is reasonably possible and in all events within 3 months of knowledge of the action being complained of.

## **2 Overview**

2.1 This policy applies to all staff employed by the Trust.

2.2 This policy is to be used in situations where an individual employee or group of employees has a grievance against a management decision or action. It is designed to bring these matters to a speedy and fair conclusion.

2.3 Any member of staff who feels they are being discriminated against in relation to a protected characteristic under equality legislation, or feels they are the subject of bullying and harassment should follow the specific policy and procedures relating to these.

2.4 This policy is not intended to apply to the settling of differences relating to:

- Dismissal or other disciplining matters
- Individual sanctions that result from disciplinary action
- Suspension from work
- Any policy with its own review or appeal mechanism

2.5 Staff covered by the Agenda for Change Agreement who have a grievance concerning their job banding should raise the matter under the specific policy relating to this.

2.6 In implementing this policy, managers must ensure that all staff are treated fairly and within the provisions and spirit of the Trust's Equal Opportunities Policy. Special attention should be paid to ensuring the policy is understood when using it for staff new to the NHS or Trust.

2.7 If this policy is utilised as a means of appeal where the relevant policy does not contain its own mechanism, the appeal will be heard under stage 3 of this policy.

2.8 If an employee wishes to report possible malpractice, wrongdoing or illegal activities they must do this in accordance with Trust policy HR05: Whistleblowing which can be found on the intranet.

2.9 If the grievance is proven to be knowingly malicious or vexatious, the individual raising it will be subject to disciplinary action in line with the Trust Disciplinary Policy.

2.10 In the interest of good staff relations, each stage of the policy should be undertaken without unreasonable delay. Whilst any delay should be kept to a minimum it is also

acknowledged that each case will be individual. Managers should communicate the timeframe, which must be reasonable, within which they will respond to the Grievance.

### **3 Duties**

#### **3.1 *Trust Board***

The Board has responsibility to oversee this policy and ensure that appropriate processes and actions are in place to ensure employees are treated in a fair and consistent manner.

#### **3.2 *Directors/Chief Operating Officer (COO)/Assistant COO***

Are responsible for ensuring appropriate systems and processes are in place across their Care Groups and Departments to monitor timescales grievance matters, disseminate shared learning from any matters arising from the cases and ensuring that grievance matters are dealt with in a timely manner and in accordance with this policy.

#### **3.3 *Line Managers***

Line Managers are responsible for ensuring employees are aware of this policy and its contents. Any manager who is undertaking any formal stage of the policy would be expected to contact the Workforce Directorate in the first instance for advice and support on the implementation of the policy.

#### **3.4 *Workforce Directorate***

The Workforce Directorate will provide support and guidance to the process to ensure a fair and consistent process is followed.

#### **3.5 *All Staff***

Where an employee wishes to be accompanied or represented during the stages of the policy by either their trade union representative or trust employed work colleague they will be responsible for arranging this.

#### **3.6 *Trade Unions***

The role of the trade union representative or Trust employed work colleague is to act as an advocate and to provide the employee with advice and support on matters relating to staff grievance.

### **4 Right to be accompanied**

4.1 The employee has the right to be accompanied by a companion at any meeting under the grievance policy. The companion may be an accredited representative of a Trade Union / Professional Organisation or colleague employed by the Trust. Family members or partners who are also employed by the Trust are not able to accompany an individual unless they are required to assist with disabilities or language difficulties.

4.2 The companion is allowed to address the meeting, to put and sum up the case, respond on the employee's behalf to any views expressed at the meeting and confer with the employee during the meeting.

4.3 Where appropriate, those with disabilities or language difficulties, may have the attendance of a supporter or interpreter.

### **5 Status Quo**

5.1 At the point at which a grievance is raised, a request for status quo may be made by the employee. The request needs to be recorded and specified on the record of grievance form (appendix A). This will be considered by the Director of Workforce and will take account of the overall position of the Organisation. There is no automatic right for Status Quo to apply to a grievance situation.

## **6 Disciplinary/Performance Management Policy/Managing Attendance**

6.1 Where a grievance is raised during disciplinary/performance management/managing attendance proceedings:

- The disciplinary/performance management/managing attendance proceedings may be temporarily suspended in order to deal with the grievance **OR**
- The grievance and disciplinary/performance management/managing attendance proceeding may be run concurrently where they are considered to be interlinked.

## **7 Facilitated discussion**

7.1 In order to support the individuals to reach an agreement on a way forward without the need to invoke a formal policy, both parties can volunteer to participate in a facilitated discussion (similar to mediation).

7.2 A facilitated discussion is a confidential process that seeks to help to resolve disputes in the workplace. It is an informal process where colleagues whose relationship is under strain have the opportunity to air their differences in a voluntary, safe, confidential meeting with the other party, in the presence of a facilitator.

7.3 A facilitator must be someone who has not previously been involved in the issue, whose involvement is considered to be beneficial by both parties, and their involvement must be agreed by both parties.

7.4 Facilitated discussion can be used at any point in the policy, for example where, other informal approaches have been unsuccessful, or if the employee wants to consider it as an alternative to the formal policy. .

7.5 If both parties agree to engage in the facilitated discussion process as a way of resolving their issues, then the manager must contact the workforce team as soon as possible so this can be arranged.

7.6 If facilitated discussion is explored and it is not successful, the formal grievance policy can be invoked.

7.7 If a grievance has been raised but it has been decided to pursue facilitated discussion, the grievance may be paused while that discussion is taking place. If the issue is resolved informally or through facilitated discussion, the formal grievance will be closed.

## **8 The Grievance Stages**

### **8.1 Stage 1 - Informal**

As a good employer, the Trust would encourage individuals to deal with as many issues or concerns as possible as early and as informally as possible. If an individual believes that it is necessary to invoke the Grievance policy, Stage 1 provides the opportunity to deal with an issue in a structured but informal manner.

8.1.1 Where an individual wishes to invoke Stage 1 of the grievance policy, they should make it clear to their manager that they are raising a grievance informally and clarify the outcome they are seeking.

8.1.2 If the complaint is about the line manager then the individual can discuss the matter with their manager's manager in the first instance. No action will normally be taken unless agreed with the individual first.

8.1.3 Once they are aware of the issue, the line manager will acknowledge receipt and arrange to meet with the individual without unreasonable delay to discuss the

issues and seek a resolution. Should this meeting require rearranging, this will be done within 5 working days of the original date.

## **8.2 Stage 2 – Formal**

If the grievance has not been resolved informally or the employee feels that the informal process is not appropriate, then they can raise the matter formally. To do this, they must put the complaint in writing by completing the Record of Grievance Form (Appendix 1). This form must be submitted to their line manager. If the grievance concerns the individual's line manager, then it should be submitted to the line manager's manager.

8.2.1 The Record of Grievance Form should explain the basis of the grievance. It is helpful to include any relevant dates, facts and any thoughts the individual may have on the outcome they are seeking.

8.2.2 On receipt of the Record of Grievance Form the line manager will:

- arrange a meeting with the individual to discuss the grievance;
- ensure the meeting is in private;
- respect the employee's confidentiality;
- take notes of the issues the employee wishes to raise at the meeting;
- consider all the points raised;
- Seek the agreement of the individual to any steps or actions to try and resolve the grievance.

8.2.3 The manager will acknowledge receipt and arrange to meet with the individual without unreasonable delay. Should this meeting require rearranging, this will be done within 5 working days of the original date.

8.2.4 Depending on the grievance, the complaint may need to be investigated and the meeting may need to be adjourned. A further meeting will be arranged with the individual following the investigation. They will be kept informed of the progress of the investigation. Investigations will be dealt with as confidentially and sensitively as possible.

8.2.5 Once the grievance has been considered the employee's line manager will write to them with the outcome within 5 working days.

8.2.6 The individual has the right of appeal to the next level of management under Stage 3 of this policy within 10 working days of receipt of the outcome letter.

## **8.3 Stage 3 – Appeal**

If the employee is not satisfied with the outcome at Stage 2, they may appeal. To do this, they must appeal in writing using the Record of Grievance Form (Appendix 1). The Form must be completed clearly and fully, setting out the grounds of the appeal in line with the list below. Additional documents can be included with the Form to support the appeal. The Record of Grievance Form and any supporting documents will be considered to be a complete record of the individual's case at the appeal hearing.

8.3.1 Appeals can be made in relation to the following circumstances:

- that their grievance was not upheld where the evidence does not support this outcome;
- the correct policy or process was not followed;
- new evidence has come to light that would change the outcome;
- the outcome is inconsistent with how others have been treated.

- 8.3.2 The manager will acknowledge receipt and arrange to meet with the individual without unreasonable delay, and will confirm the details of the meeting in writing. Should this meeting require rearranging, this will be done within 5 working days of the original date.
- 8.3.3 The purpose of the appeal hearing is not to re-hear the case, but to hear the points of appeal stated in the Record of Grievance Form.
- 8.3.4 The individual has the right to be accompanied at the appeal hearing by their companion.
- 8.3.5 The outcome of the appeal may be to overturn or confirm the original decision or apply a different resolution, including facilitated discussion if appropriate. The appeal outcome will be confirmed in writing within 10 working days of the appeal hearing. There is no further right of appeal.

**9 Records**

- 9.1 A copy of the Record of Grievance Form, the outcome letter and any formal meeting notes will remain on the individual’s personal file.

**10 Training Needs**

- 10.1 It is expected that any manager involved in the grievance process would receive training and/or at least be supported by a Workforce representative for guidance on the process.
- 10.2 Any manager who is undertaking any of the formal stages of the policy would be expected to contact the Workforce Department in the first instance for the advice and support on the implementation of the policy.
- 10.3 All managers are expected to disseminate information in relation to this policy to staff.

**11 Review Process**

- 11.1 This policy will be reviewed if there are legislative changes or where the Trust deems it necessary.
- 11.2 In order that this document remains current, any of the appendices to the policy can be amended and approved during the lifetime of the document without the document strategy having to return to the ratifying committee.

**12 Equality Impact Assessment (EQIA)**

- 12.1 This policy applies to all employees equally and does not discriminate positively or negatively between the protective characterises.

**13 Process for Monitoring Compliance**

The monitoring of this policy includes an annual audit of the points set out in the table below. Where non-compliance is identified an action plan will be drawn up and monitored at the Workforce Committee. Where remedial action can be taken immediately, the action must be recorded appropriately.

Aspect of compliance or effectiveness being monitored	Monitoring method	Responsibility for monitoring (job title)	Frequency of monitoring	Group or Committee that will review the findings and monitor completion of any resulting action plan
The policy is fairly	Use of	Senior HR	Yearly	Workforce committee

applied to staff in a transparent manner	workforce database	Business Partner			
Number of cases being referred to HR Advisors/Managers for support	Use of workforce database	Senior Business Partner	HR	Yearly	Workforce committee
Number of appeals against decisions taken under this policy.	Use of workforce database	Senior Business Partner	HR	Yearly	Workforce committee
Ongoing discussions with TNCC representatives	Deputy Director of Workforce	Ongoing		TNCC	

## 14 References

- Legislation
  - Employment Act 2008
  - Employment Tribunals (Constitution and Rules of Procedure) (Amendment) Regulations 2008
  - Employment Rights Act 1996 as amended
  - Employment Rights Dispute Resolution Act 1998
  - Employment Relations Act 1999
  - Employment Rights Act 2004.

Previous legislation covering discipline and grievances at work was historically found in the Employment Act 2002 and the Employment Act 2002 (Dispute Resolution) Regulations 2004 (SI 2004/752). However, the procedures were repealed in their entirety from 6 April 2009 under the Employment Act 2008)

- CIPD – Good Practice Guidelines for Disciplinary and Grievance Procedures (Members only section of website)
- ACAS – Code of Practice for Disciplinary and Grievance Procedures - [http://www.acas.org.uk/media/pdf/k/b/Acas\\_Code\\_of\\_Practice\\_1\\_on\\_disciplinary\\_and\\_grievance\\_procedures-accessible-version-Jul-2012.pdf](http://www.acas.org.uk/media/pdf/k/b/Acas_Code_of_Practice_1_on_disciplinary_and_grievance_procedures-accessible-version-Jul-2012.pdf)
- HR Inform Guidelines for Disciplinary and Grievance Procedures (Members only section of website)

## 15 Associated Documents

HR01 Equality and Diversity Policy. Available from [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR06 Maintaining High Standards of Performance. Available from [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR07 Disciplinary Policy for Doctors and Dentists. Available from [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR09 Alcohol and Substance Misuse. Available from [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR30 Annual Leave & Public Holidays. Available from [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR31 Managing Attendance & Employee Wellbeing [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR63 Managing Poor Performance [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR65 Occupational Health Service. Available from [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
HR66 Staff Counselling Service. Available from [http://intranet/hr/HR\\_Policies.asp](http://intranet/hr/HR_Policies.asp)  
Managing Allegations against Staff who work with Children  
[http://intranet/document\\_library](http://intranet/document_library)

**Appendix A**

**SHREWSBURY AND TELFORD HOSPITAL NHS TRUST  
 RECORD OF GRIEVANCE AT STAGE 1**

To be completed by the employee (or representative) raising a Grievance.

<b>Name:</b>		<b>Date:</b>	
<b>Job Title:</b>		<b>Ward/ Department:</b>	
<b>Address:</b>			

<b>Have you attempted to resolve the issue previously?</b>	<b>Yes/No</b>	<b>If yes, with whom?</b>	
<b>Outcome:</b>			

**NATURE OF GRIEVANCE**

<b>Who is your grievance against?</b>	
<b>Give brief but specific details of the nature of your grievance (Please attach any supporting information to the Form)</b>	
<b>What outcome do you seek?</b>	

Signed:..... Date:.....

**Appendix B**

**SHREWSBURY AND TELFORD HOSPITAL NHS TRUST  
RECORD OF GRIEVANCE AT STAGES 2 OR 3**

To be completed by the employee (or representative) raising a Grievance.

<b>Name:</b>		<b>Date:</b>	
<b>Job Title:</b>		<b>Ward/ Department:</b>	
<b>Address:</b>			

**NATURE OF GRIEVANCE**

<b>Who is your grievance against?</b>	
<b>Give brief but specific details of the nature of your grievance (Please attach any supporting information to the Form)</b>	
<b>What outcome do you seek?</b>	

**IF THIS GRIEVANCE HAS PREVIOUSLY BEEN CONSIDERED AT EITHER STAGE 1 OR 2, PLEASE SUMMARISE THE OUTCOME:**

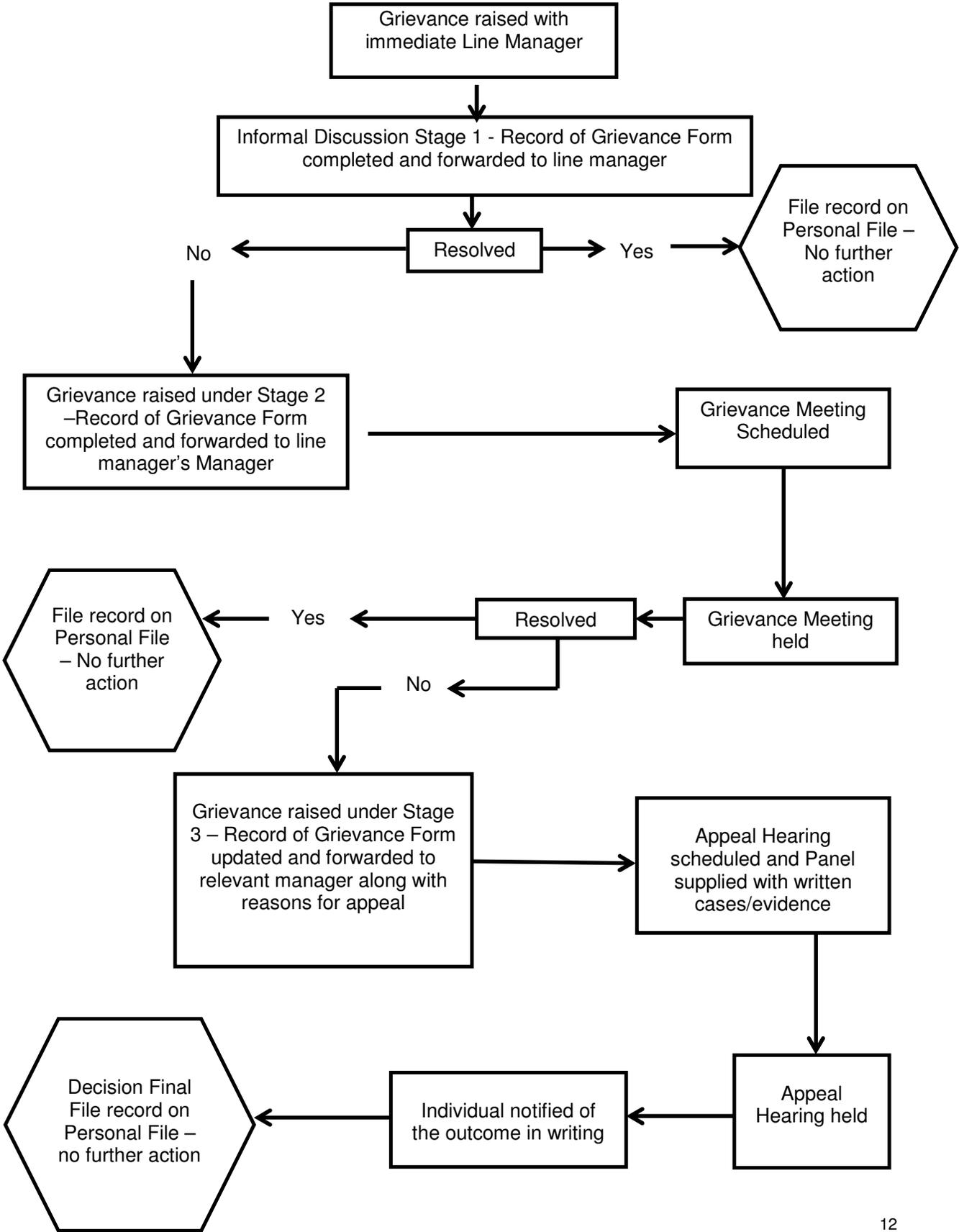
(attach any notes or letters or documentation relevant)

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**Signed:**..... **Date:**.....

OUTLINE OF GRIEVANCE PROCESS

Facilitated discussion can be used at any stage of the process



## On-Call Policy

HR 72

Version:	V1
V1 issued	
V2 approved by	TNCC & Policy Approval Group
V2 date approved	July 2013
V2 Ratified by:	Trust Board
V2 Date ratified:	
Document Lead	Senior Human Resources Business Partner
Lead Director	Workforce Director
Date issued:	August 2014
Review date:	July 2017
Target audience:	All staff employed under Agenda for Change Terms and Conditions

## Version Control Sheet

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Document ID	HR72
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Issue Date	August 2014
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Distribution	Please refer to the intranet version for the latest version of this policy. <b>Any printed copies may not necessarily be the most up to date</b>
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Dissemination	Intranet, by variation of contract letter to staff in affected departments, staff quarterly newsletter, chatterbox

## Version history

Version	Date	Author	Status	Comment
1	22/07/14	S Hayes	Final	Consultation on the creation of this policy took place as follows: 25 <sup>th</sup> March, 1 <sup>st</sup> April, 15 <sup>th</sup> April, 29 <sup>th</sup> April, 6 <sup>th</sup> May, 13 <sup>th</sup> May, 20 <sup>th</sup> May, 3 <sup>rd</sup> June, 11 <sup>th</sup> June, 1 <sup>st</sup> July, 23 <sup>rd</sup> July 2014.

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## **1 DOCUMENT STATEMENT & OVERVIEW**

- 1.1 This policy sets out the Trust's local arrangements for the payment of on-call work under the national framework of Agenda for Change. The requirement for on-call arrangements within a particular department is determined by the departmental manager in line with our need to provide patient services.
- 1.2 The Trust is committed to the operation of contractual on-call arrangements and payment systems that are fair, consistent and equitable.

## **2 SCOPE**

- 2.1 This policy applies to the posts of all employees covered by the Agenda for Change Terms and Conditions of Service, regardless of pay band. It does not cover on-call payment arrangements for Directors, medical and dental posts, bank staff or the posts of workers not employed by the Trust.
- 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'. Special attention should be paid to ensuring the policy is understood when using it for staff new to the NHS or Trust, or by staff who may have an essential skills need in literacy or those whose first language is not English or for persons with little experience of working life.

## **3 DEFINITIONS**

- 3.1 Compensatory Rest 

Rest taken later (ideally during the same or following day) to compensate for an interrupted statutory rest break. Please see section 10.
- 3.2 Daily Rest 

The break between working days in accordance with the Working Time Regulations. Please see paragraph 10.2.
- 3.3 Frequency periods 

The unsocial hours period is split into 9 frequency periods per week. These would typically be of between 10 – 15 hours in length as appropriate for the needs of the service.

For example, the on-call periods may be 5 frequency periods of weekday evening/night, 4 frequency periods over a weekend and 2 frequency periods within a Public Holiday (please see the definition of a Public Holiday below).

Each service's on call arrangement should specify the length, start and finish times for its frequency periods.
- 3.4 On-call arrangement 

A contractual arrangement between the Trust and the employee for the employee to be available for on-call work outside core departmental working hours - either at the workplace, at home or elsewhere - and to work as and when required.

3.5	On-call Availability	An obligation to be available and ready to undertake work of an emergency nature as part of an organised way of working.
3.6	On-call work	Work of an emergency nature which arises outside departmental core working hours.
3.7	Standard individual working hours	Hours which are regularly worked by an individual and fixed by contract of employment, to a maximum of 37.5 hours per week.
3.8	Core departmental working hours	Hours within which the department/service provides its usual services.
3.9	Overtime	Defined by Agenda for Change Terms and Conditions of Service Section 3. This on-call policy does not incorporate any agreement for guaranteed overtime.
3.10	Public Holiday	Defined as 00:00 – 23:59 (midnight to midnight) on the relevant date.
3.11	Resident On-Call	Physically at work ready to be called out to undertake work (where the service need is such that time cannot be allowed for travel between home and the workplace).
3.12	Standby	A requirement for staff to be carrying out their normal duties at the workplace, and at the same time ready to undertake on-call work.
3.13	Unsocial hours	<p>Defined by Agenda for Change Terms and Conditions of Service Section 2. On weekdays the period 20.00 – 06.00 is classified as unsocial hours.</p> <p>Saturdays, Sundays and Public Holidays are all classified as unsocial hours and are defined as the periods midnight to midnight.</p>
3.14	Week	Seven calendar days as set out in the department/service on-call arrangement (usually Sunday - Saturday inclusive).

### 3.15 Working Time

**Where an arrangement is defined as On-Call or Standby** (please see 3.5 and 3.12 above), working time is time spent working. Time spent sleeping whilst being available for work as part of one of these on-call arrangements **is not** working time.

**Where an on-call arrangement is defined as resident on-call** (please see 3.11 above), working time **is** both time spent sleeping and time spent working.

Time spent travelling in relation to on-call work is also working time.

## 4 RESPONSIBILITIES

4.1 It is the responsibility of the line manager to ensure that:

- On-call arrangements match service requirements and are reviewed in the light of changing service needs;
- Employees understand their contractual obligations in participating in the on-call arrangements;
- The skill level required in order to be competent for on-call working is defined;
- The minimum number of on-calls per annum in order an individual remains competent is defined;
- The quality and safety of the on-call service is maintained, in exceptional circumstances by requiring members of staff to participate where necessary;
- A rota is published in advance (ideally at least 3 months ahead) to enable participants to plan;
- The rota takes account of periods of flexible working commitments;
- The frequency and type of each employee's commitment is equitable, taking account of approved flexible working agreements, rostered days off or matters requiring exclusion (in accordance with 6.2 or 6.3 below);
- All participants in the on-call arrangement are fit for work (in accordance with their Professional Code of Conduct and Trust attendance rules) during and immediately following a period of on-call working;
- They ensure they are aware of any requirement for compensatory rest (in accordance with section 10) immediately after the on-call availability period so that they can arrange cover for that working time as necessary;
- The overall working patterns and rostering templates for the department are developed to take account of on-call work, specifically the requirement to enable adequate compensatory rest (e.g. shift templates may include the rostering of a day off after a period of on-call availability, or not rostering on-call on the night of a rostered day off etc.);
- Departmental standard operating procedures are agreed, shared and followed regarding the short notice cover of a rostered on-call availability period;
- Departmental standard operating procedures are written, shared and followed regarding how a rostered on-call availability period is covered when the named individual is on annual leave;

....cont'd

- Departmental standard operating procedures are written, shared and followed regarding how the need for compensatory rest is communicated (e.g. phone call, message book) following an on-call availability period in order that the compensatory rest is not disturbed;
- They adhere to this Policy.

4.2 It is the responsibility of employees to:

- Ensure that they are fit for work (in accordance with their Professional Code of Conduct and Trust attendance rules) during and immediately following a period of on-call working;
- Ensure that their line manager is aware of any requirement for compensatory rest (in accordance with section 10) immediately after the on-call availability period;
- Adhere to the Trust's normal attendance and absence reporting requirements;
- Adhere to the Trust's normal expectations in terms of timeliness;
- Ensure that work to resolve call-outs is done by themselves or others at an appropriate time (i.e. during the out of hours period for work requiring urgent resolution, and during the following working day for work that can safely be deferred)
- Ensure that to resolve a call-out they explore the possibilities of telephone or internet resolution or safe deferment to the following working day, before taking a decision to physically attend Trust premises;
- Own their on-call rota commitment once the rota has been set and published, ensuring service continuity by swapping with a colleague where they are unable to meet their commitment, and informing the appropriate people (e.g. manager, switchboard) of the change;
- Work flexibly with their line manager to ensure the service is adequately staffed over certain periods such as Christmas and New Year;
- Report and act on their own sickness absence in accordance with their local policy;
- Adhere to this Policy.

## 5 GENERAL

- 5.1 The work carried out when an individual is on-call is considered to be a task within (or part of) their full role. It is not expected to be the full, daytime role.
- 5.2 The department must develop and maintain its own Standard Operating Procedure for on-call arrangements in accordance with Appendix 2.
- 5.3 The normal individual and departmental working hours of a department/service must be determined locally with reference to service need.
- 5.4 Within the nine frequency periods set out in this policy, each department/service must determine the time periods that their specific on-call service will cover in accordance with service need.
- 5.5 Where a manager considers it to be beneficial for service need that a frequency period is split between several members of staff (e.g. over the Christmas period), they may take the decision to do this after discussion with staff.
- 5.6 Whether or not an on-call arrangement is required is determined by the workload of the relevant department/service.

- 5.7 This policy applies as an overarching framework to all departmental on-call arrangements. However, the skills and abilities required to carry out on-call work and the work to be done during on-call are to be determined by each department/service with reference to service need.
- 5.8 Where an on-call arrangement is risk assessed as being unsafe, and the manager of the department/service is unable to restore the quality and safety of the arrangement through volunteers, that manager reserves the right to require individuals to participate in the on-call arrangement.

## **6 PARTICIPATION IN ON-CALL ARRANGEMENTS**

- 6.1 Where an on-call arrangement is required by a department/service, the manager of the service will specify the type of rotas that are required and the minimum numbers of participants.
- 6.2 It is a contractual requirement that all employees of a service/department are automatically included in its on-call arrangements unless they have a written variation of contract excluding them from the on-call element of their role because of an agreed flexible working agreement, for specific health reasons or reasons linked to the Equality Act 2010.
- 6.3 In certain circumstances (e.g. where an employee is pregnant or has a health condition) it will be necessary to carry out a risk assessment of their on-call duties to ensure that their health and safety needs are considered.
- 6.4 An individual can swap their on-call availability commitments with colleagues under the following conditions:
- 6.4.1 They carry out a minimum number of on-calls (to be specified by the department/service) to ensure they remain competent to carry out on-call; **and**
  - 6.4.2 Their manager may monitor the number of swaps and take action to restrict swaps (e.g. where an individual is considered to be working excessive hours); **and**
  - 6.4.4 Once swapped, the on-call availability period is owned by the new individual and they take responsibility for covering it as necessary.

## **7 AVAILABILITY PAYMENT**

- 7.1 Each employee participating in an on-call arrangement will be paid a flat rate per hour of on-call availability, pro-rated to the length of their department's availability period, in recognition of being available to work. This applies whether they are:
- 7.1.1 Available and ready to be called out to undertake work (On-Call);
  - 7.1.2 Carrying out their normal duties at the workplace and ready to undertake on-call work (Standby);
  - 7.1.3 Physically present at work ready to be called out to undertake work (Resident On-Call).

- 7.2 There is a different rate of payment for On-Call, Standby and Resident On-Call availability, recognising the different levels of commitment that these arrangements bring.
- 7.3 Within each category of availability, the rate of availability payment is the same for all participants regardless of the pay band of the individual, the full time or part time status of the individual or the work done if called-out.
- 7.4 Where tiered on-call systems are required, the availability payment will remain the same, regardless of the tier of on-call.
- 7.5 The Availability Payment rates are included at Appendix 1. The Trust can guarantee an annual review of on-call availability payments by the Executive Team when the pay review publishes its findings, with consideration of a pay rise.
- 7.6 The availability payment is claimed on a timesheet and paid a month in arrears.
- 7.7 The availability payment is the same regardless of day of the week and is not enhanced for availability on Saturdays, Sundays or general public holidays.
- 7.8 During periods of absence the employee is unavailable for work and therefore is not entitled to receive the availability payment.
- 7.9 On occasion an individual's normal working day may be unexpectedly extended slightly into their on-call frequency period due to the needs of the service (e.g. Theatre overruns). In this case, the individual will be paid at the appropriate overtime rate for their extended working day. Additionally, the on-call availability payment will be paid. The department/service must resolve any operational implications in order to cover emergencies that may arise during the period the on-call individual is unavailable.
- 7.10 On occasion an individual may be asked to carry out overtime and at the same time be available for on-call. In these circumstances, the individual will be paid the on-call availability payment and at the appropriate overtime rate for any overtime worked. Should the individual receive a call-out, their overtime payment will cease and they will be paid at the appropriate payment rate for the call-out. Once the call-out is complete the individual will be paid at the appropriate overtime rate for any remaining overtime work carried out. The department/service must resolve any operational implications that may arise.

## **8 PAYMENT FOR CALL-OUTS**

- 8.1 Payment for full time and part time employees will be made at time and a half of the role carried out when on-call, with the exception of public holidays which will be paid at double time.
  - 8.1.1 Where the individual is carrying out their own role when on-call, the exact rate of payment will be their own normal pay point.

8.1.2 Where the individual is carrying out a specific role when on-call, payment will be made at the Band applicable to the role.

8.1.2(i) Where the specific role is paid at a Band higher than the individual's current pay Band, the exact rate of payment will usually be no higher than one increment above the individual's own normal pay point. Where the individual's current pay point is below the pay band of the on-call role then the minimum pay point of the higher band should be used.

8.1.2(ii) Where the specific role is paid at a Band lower than the individual's current pay Band, the exact pay point to be paid will be specified by the Department.

8.2 An automatic payment of 30 minutes working time will be paid for each call-out, plus travelling time, whether the work done is physically on Trust premises, over the telephone or on the internet.

8.3 Working time begins when the individual receives the call notifying them of the issue, and ends either at the end of the 30 minute period or when the individual ceases to work on that issue (whichever is the longer).

8.4 If work associated with a call-out continues past 30 minutes, payment will be made for the actual time worked.

8.5 Where further calls are received during one 30 minute period, they do not attract additional payments of 30 minutes.

8.6 Where further calls are received outside a 30 minute period, a new 30 minute period will begin.

## **9 PAYMENT FOR TRAVELLING TIME**

9.1 Travelling time is only payable for physical attendance at work premises. Actual travelling time may be claimed up to the maximum travelling time specified by each department/service as appropriate for the needs of that service.

9.2 Travelling time will be paid at the same rate as work done when on-call and must be recorded clearly on the timesheet as travelling time.

9.3 Where as part of a call-out an employee is required to travel between work premises, travelling time will be paid at the same rate as on-call work done and must be recorded on the timesheet as part of the time claimed to complete the call-out.

9.4 Travelling time between home and work will be paid for any journeys that are undertaken as a result of a call-out. Travelling time will not be paid for home to work journeys that are part of an individual's normal working day (e.g. where an employee remains in work following a call-out and carries out their normal working day, their work-to-home journey at the end of the day is considered to be normal daily travelling and will not be paid as on-call travelling time).

## **10 RECORDING AND AUTHORISING AVAILABILITY AND WORKING TIME**

- 10.1 All time an employee is required to be available for work must be recorded on a timesheet.
- 10.2 All time taken to complete a call-out must also be recorded on a timesheet. All timesheets must be authorised for payment by the relevant line manager.
- 10.3 Courtesy calls (calls which notify the individual that they need to be aware that some emergency work may occur) are not classed as working time. Where a courtesy call system is used, working time does not begin until the individual receives the call confirming that they are required to actually commence work.
- 10.4 Travelling time must be clearly recorded as such on the timesheet.

## **11 TIME OFF IN LIEU (TOIL)**

- 11.1 Participants in on-call arrangements have the right to make a request for TOIL at plain time rates instead of pay in respect of call-outs, in accordance with the Agenda for Change Terms and Conditions of Service Section 3, paragraph 3.5. If the TOIL can be accommodated by the service/department, it must be rostered and ideally be taken within 1 month of accrual. However where the TOIL cannot be taken for genuine operational reasons within 3 months of being worked, payment must be made at the rate applicable to when the work was done.
- 11.2 Employees who are required to be available as part of an on-call arrangement over a public holiday are entitled to one day's leave back in lieu of the lost public holiday. Where an employee is required to be available for several availability periods over a public holiday, they cannot claim more than one day's leave back. A day's leave is defined as 7.5 hours, pro rata for part timers (the individual's normal working day) in accordance with Section 13 of the Agenda for Change Terms and Conditions of Service. The employee's public holiday entitlement should be reduced by the appropriate amount, and the same amount of lieu time recorded and managed as TOIL.
- 11.3 Where an availability period is covered by several employees over a public holiday, the TOIL time they are entitled to is pro rated to the time they were available, to a maximum of 7.5 hours.
- 11.4 The maximum number of public holidays an individual is entitled to (as leave or TOIL) is capped annually at the number available in that leave year.

## 12 COMPENSATORY REST

- 12.1 In relation to on-call arrangements, the Trust requires that all staff adhere to the requirements of the Working Time Directive and Section 27 of the Agenda for Change Terms and Conditions of Service – specifically:
- **Daily Rest**  
All adult workers are entitled to at least 11 consecutive hours daily rest in every 24-hour period. Young workers (those aged under 18) are entitled to a consecutive rest period of not less than 12 hours daily rest in every 24-hour period.
  - **Weekly Rest**  
All workers are also entitled to an uninterrupted weekly rest period of 35 hours (including the eleven hours of daily rest) in each seven day period. Where this is not possible they should receive equivalent rest over a 14 day period, either as one 70 hour period or two 35 hour periods.
- 12.2 The Working Time Directive recognises that in a health setting, due to the need to maintain patient care, it may not always be possible for an individual to achieve the necessary rest break whilst on-call. In these circumstances, the employee is entitled to compensatory rest **equal to the amount of rest that was lost** - not the entire rest period.
- 12.3 Compensatory rest is paid when it falls on a day an individual is rostered to be at work. In these circumstances there will be no detriment to an individual's normal pay as a consequence of taking compensatory rest.
- 12.4 Where an individual has a rostered day off immediately after a period of on-call, this will be used for compensatory rest. In these circumstances, compensatory rest is unpaid. Compensatory rest is not to be carried over until the next working day after a rostered day off.
- 12.5 In some circumstances, it may be possible for the individual to achieve the necessary daily or weekly rest within the on-call availability period. In this case, no additional compensatory rest is required.
- 12.6 Each service/department is responsible for detailing the practical arrangements for compensatory rest in their Standard Operating Procedure.
- 12.7 Where an employee has been unable to achieve the necessary daily or weekly rest within the on-call availability period, they must take the appropriate amount of compensatory rest within a reasonable period – ideally during the same or following day. It is important that the individual takes account of their personal health and safety and their professional obligations in relation to compensatory rest. The requirement for compensatory rest and the timing of that rest must be discussed with the employee's manager in accordance with the department/service's Standard Operating Procedure.
- 12.8 Management guidance on the Trust's approach to compensatory rest is available and must be read in conjunction with this policy.

### **13 TRAVELLING EXPENSES**

- 13.1 Travelling expenses will be paid for the journeys from home to work and vice versa, and for any travel required as part of a call-out.
- 13.2 Travelling expenses will be paid in accordance with normal Trust business mileage rates.
- 13.3 Home to base mileage may be taxable in accordance with Inland Revenue guidelines.
- 13.4 Employees with lease cars will incur an additional tax liability when claiming any home-to-base mileage, including on-call mileage. Prior to making any claims, it is recommended that lease car users contact Pay Services or HM Revenue & Customs directly for the most up to date guidance.
- 13.5 Travelling expenses between home and work will be paid for any journeys that are undertaken as a result of a call-out. Travelling expenses will not be paid for home to work journeys that are part of an individual's normal working day. (e.g. where an employee remains in work following a call-out and carries out their normal working day, their work-to-home journey at the end of the day is considered to be normal daily travelling and will not be paid as on-call travelling expenses).

### **14 HOME TO WORK TRAVEL TIME**

- 14.1 Maximum periods of travel time must be specified by each department/service as appropriate for the needs of that service, and would be expected to be within 30 minutes.

### **15 ACCOMMODATION**

- 15.1 The Trust will provide free accommodation where the department requires a resident on-call scheme.
- 15.2 The Trust may provide free accommodation where an individual's home to work travel time is greater than the department's specific requirements for on-call attendance. .
- 15.3 Free accommodation may also be provided in exceptional circumstances, with the prior agreement of the relevant Director and the Workforce Director.
- 15.4 Where an individual chooses to sleep in Trust accommodation although 15.1, 15.2 or 15.3 do not apply, they must pay standard Trust accommodation fees.

### **16 PENSIONABLE PAY**

- 16.1 For members of the NHS Pension Scheme the availability payment is classed as pensionable pay. Payments for work done are pensionable at single time up to a maximum of 37.5 hours, and non-pensionable thereafter.

## 17 CONTACT ARRANGEMENTS AND ASSOCIATED REIMBURSEMENT

17.1 Contact arrangements for individuals who are on-call will be agreed by the department/service, taking account of cost-effectiveness, mobile network coverage and the needs of the service. It is expected that the normal contact arrangements will be via mobile phone or pager, although in exceptional circumstances the manager has the right to reimburse other contact arrangements where this is necessary due to network coverage or service need. The Trust will pay the charges associated with any contact arrangements that it supplies, and reimburse the cost of any calls made on personal telephones. Claims must be made on the Trust's expenses form.

## 18 TRAINING NEEDS

18.1 There is no mandatory training associated with this guidance. If staff have queries about its operation, they should contact their line manager in the first instance.

18.2 The Workforce Director will be responsible for monitoring the implementation of this policy and will arrange for the process to be periodically audited.

## 19 REVIEW PROCESS

19.1 This document will be reviewed as necessary in line with changes in legislation, Agenda for Change terms and conditions, the needs of the service or best practice.

19.2 In order that this document remains current, any of the appendices to the policy can be amended and approved during the lifetime of the document without the document strategy having to return to the ratifying committee.

## 20 EQUALITY IMPACT ASSESSMENT (EQIA)

20.1 This policy applies equally to all staff employed under the Agenda for Change terms and conditions of employment and does not discriminate positively or negatively between protected characteristics.

## 21 PROCESS FOR MONITORING COMPLIANCE

<b>Aspect of compliance or effectiveness being monitored</b>	<b>Monitoring method</b>	<b>Responsibility for monitoring (job title)</b>	<b>Frequency of monitoring</b>	<b>Group or Committee that will review the findings and monitor completion of any resulting action plan</b>
All payments being made through the payroll in relation to on-call are within the scope of this policy.	Payroll reports	Payroll Services Manager	6 months	Remuneration Committee Workforce Committee Finance committee
Management implementation of policy	Payroll audit of timesheets incorrectly completed / authorised	Payroll Services Manager	Monthly	Workforce Committee

## **22 References**

NHS Agenda for Change Terms and Conditions of Service Handbook: available from Trust Intranet.

## **23 Associated Documentation**

Equality Act 2010

## Rates for Availability Payments as at July 2014

	Category of On-Call Availability		
	Standby	Available from Home	Resident On-Call at the Workplace
Payment per 12 hour availability session	£3.92	£15.70	£19.63
Payment per hour of availability session	£0.33	£1.31	£1.64

**Minimum Content of Local Standard Operating Procedures**

Under the auspices of the overall Trust On-Call Policy, each service/department requiring an on-call arrangement is required to develop its own local Standard Operating Procedure (SOP).

The pay and conditions of individuals participating in on-call arrangements are determined by Trust policy HR72 On-Call.

It is the responsibility of the departmental manager to develop and maintain this SOP to deliver their service.

Managers will work with staff, and their staff side representatives, to discuss and develop their department's SOP. The SOP is the responsibility of the line manager to finalise in the best interests of the service.

The local SOP must be developed in accordance with the Trust's overall On-Call Policy, in particular Section 4 'Responsibilities', and contain *as a minimum*:

This Standard Operating Procedure describes the local arrangements for on-call provision for the following service:	
Date of Issue:	

<b>Definitions and Descriptions</b>	
The normal working day is:	
For this service, on-call arrangements are required to cover the following periods (please specify as appropriate) :	Weekday nights Weekends Public Holidays
The length(s) and start and finish times for on-call availability periods are:	Weekday nights Weekends Public Holidays
The frequency of on-call availability is expected to be:	
The type of on-call arrangement that this department provides is:	On-Call/ Resident or Standby (please delete)
The service(s) that is(are) covered by this	

on-call arrangement are:	
The role(s) that are required to be carried out within this on-call arrangement are:	Normal daily role/specific role (please detail)
The payment rate for work done when called out for the role(s) to be carried out when on-call are:	Please detail specifically: Normal daily role – which will be paid at the individual's normal hourly rate  Specific role (please detail) – which will be paid at Band [please insert] and pay point [please insert] in accordance with 8.1.1 & 8.1.2 of the policy
The types of work that are expected to be carried out during the on-call period as an emergency are:	
The types of work that can be safely left until the following normal working day are:	
The number of staff required to participate in this arrangement (as a minimum/maximum) are:	
The minimum skill level for an individual to be deemed competent for on-call work is:	
The minimum number of on-calls to be worked per annum in order to maintain competence is:	
The on-call arrangement will be reviewed at regular intervals to ensure that it remains fit for the needs of the service	

<b>Travel Time</b>	
A written risk assessment has been carried out of the department's specified travel time for attendance at work premises when called out, in relation to service need. The risk assessment is attached to this SOP as an Appendix.	
The department's specified travel time for attendance at work premises when called out is:	

<b>The safety of the on-call service</b>	
The rota will be risk assessed to ensure that it is safe to provide the on-call service where there are either short or long-term gaps in the rota due to sickness, leavers, vacancies etc.	
The manager who is responsible for ensuring all on-call availability slots are covered, by allocation if necessary, is:	
The manager who will, in exceptional circumstances, require members of staff to participate where necessary, is:	

<b>Management Escalation</b>	
The triggers that require escalation to more senior departmental or Trust management are:	

<b>Rostering</b>	
The person responsible for creating and publishing the rota is:	
The rota will be published	..... weeks/months (please specify) in advance
Each rota will cover a period of:	..... weeks/months (please specify)

<b>Sickness and other short notice absence</b>	
The procedure to follow should the on-call individual call in sick (or require other absence) at short notice is:	
The manager will ensure that the on-call rota is adequately covered during sickness or other short notice absence by:	

<b>Longer term absence</b>	
The manager will ensure that the on-call rota is adequately covered during long term absence (e.g. longer term sickness, maternity leave, vacancies etc.) by:	

<b>How the rota is covered during periods of annual leave</b>	
Before the rota is set and published, the department manager is the owner of the rota slot and therefore responsible for planning to cover annual leave slots. Once the rota is set and published, the individual owns their on-call rota commitment and must swap that commitment with colleagues when annual leave is required.	
Is the booking of annual leave allowed over a period when the individual is rostered to be on-call?	Please specify
Can leave be booked in advance and on-call rota created around the leave?	Please specify

<b>Swapping on-call availability shifts</b>	
The process for swapping shifts is:	

<b>Time Off In Lieu</b>	
The process for recording and taking TOIL is:	

<b>Compensatory Rest</b>	
The process for giving compensatory rest is:	
The communication necessary (and using what method) between the on-call individual and the manager in order to agree compensatory rest arrangements is:	

<b>Normal Working Day Overruns</b>	
The rules for the emergency cover of on-call if an individual's normal working day overruns into the on-call period are:	

<b>Public Holidays</b>	
The department covers on-call availability on all public holidays by:	Please specify (does the department split the availability period etc)?

<b>Exceptional Circumstances</b>	
Please specify the types of exceptional circumstances you would expect an individual to encounter, and what you would expect them to do when faced with these (i.e. discuss and agree the approach with their manager)	

<b>Contact Arrangements</b>	
The contact arrangements for on-call are (please detail):	

<b>Job Status/Action Log</b>	
When called out, the individual must record action taken by:	
When called out, the individual must record the status of the job they are called in to undertake (completed/in progress/requires additional resource/escalated to x etc) by:	

<b>Media Enquiries</b>	
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Any media enquiries out of hours must be dealt with in accordance with the Media Policy and Procedure which is available from the intranet. There are also guidance notes available at [http://intranet/news/Media\\_Resources.asp](http://intranet/news/Media_Resources.asp)

**PLEASE ENSURE THAT YOU SEND A FINAL COPY OF THIS SOP TO PAY SERVICES**