TEMPORARY STAFFING POLICY

<table>
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<th>Amendments</th>
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<td>October 2010</td>
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Ratified by: Trust Executive Committee & Employment Partnership Forum

Reviewed by: Assistant Director of Workforce and OD

Date: October 2010

Ratified by: Trust Executive Committee

Date issued: January 2011

Interim Update: June, 2012

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Impact Assessment Carried Out By: Assistant Director of Workforce and OD

Contact names for comments: Assistant Director of Workforce and OD
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- Recruitment & Selection Policy
- Induction Policy
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- Professional Registration Policy and Procedure
- Policy on the Involvement of Volunteers
- Appraisal Policy

1.0 INTRODUCTION

1.1 This policy forms part of Ashford & St Peter’s Hospitals NHS Trust’s (ASPH) commitment to create a positive culture of respect for all individuals including staff, patients, their families and carers as well as community partners. The Trust’s values (the ‘4Ps’) and Staff Pledge are integral to all aspects of day-to-day life in the organisation and underpin the application of all our employment policies and procedures.

1.2 Although jobs are normally offered to staff on a permanent basis, there will, from time to time, be a need to recruit temporary staff. Such a need may arise when:

- there is a need for extra staff to work for a limited duration on a one-off task or project;
- extra staff are needed to cover seasonal peaks
- extra staff are needed to cover the absence of permanent staff, for example sickness absence or maternity/paternity leave.
- there is a need to prevent or eliminate an excessive backlog of work

The Trust views temporary staffing as a valid and valuable resource, which may be appropriate in a variety of different jobs and at different levels of seniority. It recognises that workers engaged on a temporary basis can make a valuable contribution to the Trust and that they should be treated with the same respect as permanent employees.

2.0 PURPOSE

2.1 This policy sets out procedures and protocols for the use of temporary staffing at ASPH. The policy is intended to address the following:

- safeguarding the quality of patient care
- minimising agency costs and ensuring value for money
- ensuring the health, safety and welfare of our patients
- improving our monitoring systems of temporary staff usage and spend within the organisation
- encouraging the recruitment and retention of staff
- clarifying who is eligible to book and authorise temporary staff and their roles and responsibilities
- ensuring a consistent approach across the Trust
- setting out the framework for the management and performance of providers, to ensure high quality, affordable and safe care is delivered by staff engaged on a temporary basis.
3.0 SCOPE

3.1 This policy applies to all individuals in all staff groups who work at the Trust on a temporary basis, whether they be Agency workers/Contractors, Bank Workers, NHSP Staff or Fixed Term Employees. For volunteers, refer to the Policy on the Involvement of Volunteers on TrustNet.

4.0 DEFINITION OF TEMPORARY STAFF

4.1 Agency Workers – Individuals supplied to the Trust by employment agencies, who have signed up to comply with the NHS Code of Practice for The Supply of Temporary Staffing (implemented through the “Buying Solutions Framework”). Agencies who are not part of the “Buying Solutions Framework” may only be used in exceptional circumstances with the express approval of an Executive Director.

4.2 Bank Workers – Individuals who are registered with the Internal Trust Bank and who work within the Trust as and when the service requires it. These individuals work on the basis that the Trust is not obliged to offer them any work assignments and in return the individuals are not obliged to accept any work assignments offered to them by the Trust.

4.3 NHS Professionals Staff – An NHS organisation which employs staff and supplies them on an as required basis to other NHS organisations.

4.4 Fixed Term Employees – Individuals with a contract of employment with the Trust, which is due to end when a specified date is reached, a specified event does or does not happen or a specified task has been completed. Examples include provision of cover for maternity leave, long term sickness or career breaks, to complete a specific project, to carry out work with time limited funding or to avoid unnecessary redundancies during an agreed planning process for structural or organisational change.

4.5 Self-employed Contractors – Individuals who work for themselves rather than another person or company. They provide and invoice their services directly to the Trust, usually via a Service Level Agreement (SLA) or equivalent.

5.0 ROLES AND RESPONSIBILITIES

5.1 It is the responsibility of the Director of Workforce and Organisational Development to ensure that the policy for recruitment and use of temporary staff complies with current legislation, Department of Health guidance, service level agreements and recognised best practice.

5.2 Line Managers - It is the responsibility of managers to comply with this policy and recruit and use temporary staff in an effective and efficient manner. Specifically line managers are responsible for:

- recruiting temporary staff according to the procedures and only in the circumstances laid down in this policy.
- ensuring the temporary worker has the appropriate knowledge, skills and experience for the post covered.
- ensuring that the relevant employment checks have been carried out for Agency Workers and Contractors.
• ensuring that Agency workers are only booked through agreed agencies unless approval is given by an Executive Director to approach non “Buying Solutions Framework” agencies. In this event the manager must also complete a risk assessment (See Appendix 1, page 12). A risk assessment should also be undertaken in the case of Contractors.
• providing appropriate local induction for all temporary staff.
• ensuring that Bank Workers and Fixed Term Employees are appraised annually, have a Personal Development Plan and undergo mandatory training.
• preventing Fixed Term Employees from being less favourably treated than permanent employees.
• ensuring that the correct information/paperwork has been submitted to the agency, Payroll and the Human Resources Department.

5.3 **Workforce & Organisational Development Department** - It is the responsibility of the Workforce & Organisational Development Department to:

• run the Trust’s Internal Bank and ensure that Bank Workers undertake mandatory training.
• ensure that the required employment checks for Bank Workers and Fixed Term Employees are undertaken before commencement and for the duration of their engagement.
• ensure Bank Workers and Fixed Term Employees attend the Trust’s Corporate Induction
• issue relevant contracts/terms of engagement to temporary staff in a timely manner on receipt of the correct information/paperwork from managers. Contracts will not be issued to Agency Workers/Contractors.
• be able to offer advice to managers on matters relating to the recruitment, booking, use and termination of temporary staff.
• monitor the duration and nature of temporary bookings/assignments in regard to employment status
• report on and monitor the usage of temporary staffing within the Trust.
• manage contract for supply of temporary staff through NHSP
• ensure that a live list of framework agencies (and those with SLA) is maintained and available to managers on TrustNet

6.0 **STANDARDS**

6.1 **Advertising and Recruitment**
Bank Workers and Fixed Term Employees will be recruited in accordance with the Trust’s Recruitment and Selection Policy. NHSP and agencies, who have signed up to the “Buying Solutions Framework”, are expected to comply with the “NHS Code of Practice for the Supply of Temporary Staffing” and therefore with the standards listed below.

6.2 **Pre-employment Checks**
• References – all temporary staff will have two satisfactory references covering their recent employment history, one of which will be from their current or most recent line manager, covering the last three years of employment.
• Occupational Health – all temporary staff will undergo an occupational health check to ensure fitness to work.
• Criminal Records Bureau checks – all temporary staff will have an appropriate level CRB check in line with the Trust’s CRB Policy.
• Registration – all staff temporary staff requiring professional registration must provide proof of registration before working and proof that they are maintaining their registration during their engagement with the Trust. This also applies to temporary staff, who as a
requirement of the job must hold a specific non-clinical qualification or be a member of a non-clinical professional body. (See Professional Registration Policy and Procedure).

6.3 Induction
It is mandatory that all temporary staff are inducted into the Trust. Bank Workers and Fixed Term Employees will attend the Trust Corporate Induction. If Bank Workers are also employed substantively by the Trust, this is not necessary, but managers must ensure that they have up-to-date mandatory training.

All temporary staff working in an area for the first time must receive a local induction into their role in order to ensure that they are able to fulfil their duties without risk to themselves, others or the organisation. A handbook outlining key information for the relevant department should be produced.

6.4 Mandatory Training
All temporary staff must undertake mandatory training as specified for their role. For Bank Workers and Fixed Term Employees, this will be provided by the Trust.

6.5 Appraisal
All Fixed Term Employees will have an annual appraisal. (See the Trust's Appraisal Policy). The Trust supports appraisal for all Bank Workers. Bank Medical Staff are required to have an appraisal by their specialty to meet the requirements for revalidation. NHSP and agencies must also provide annual appraisals.

7.0 AGENCY WORKERS/CONTRACTORS

7.1 Booking Agency Workers/Contractors
Any line manager who considers it is necessary to book Agency Workers/Contractors must follow the relevant decision tree and seek the appropriate authorisation. (See Appendices 1, 2, 3, 4 and 5). The request form – See Appendix 5 - and risk assessment form - see Appendix 1 – should be retained within the Division for a period of 6 months.

Agency Workers/Contractors should only be engaged as a last resort after considering all other staffing alternatives. Whenever possible Bank Workers should be booked as a first option, NHSP (for appropriate staff groups) as a second option and Agency workers/Contractors only as a last resort.

SLA agencies should be approached in the first instance, when an agency doctor is absolutely required and then refer to other agencies on the framework. If a doctor is booked off framework then a Risk Assessment Form must be completed and retained by the Division for a period of 6 months.

It should be noted that that due to the high cost of Agency Workers/Contractors like for like cover will not always be possible. Managers must assess whether the work could be covered by a lower grade or for fewer hours.

Only authorised signatories should sign timesheets for Agency Workers/Contractors. If possible, this should be a manager who has daily contact with the member of staff and can monitor their hours of work.

7.2 Payment for Agency Workers/Contractors
Rates of pay to Agency Workers shall be negotiated between the member of staff and their agency. The Trust will make no negotiations with Agency Workers over pay.
For Self-employed Contractors, the Trust will agree rates of pay directly with the contractor.

7.3 **Agency Workers/Contractors and Sick Leave**
Sickness absence and associated pay for Agency Workers is a matter between the worker and their Agency as the employer.

Self-employed Contractors are not entitled to paid sick leave from the Trust.

7.4 **Agency Workers/Contractors and Annual Leave**
Leave and associated pay for Agency Workers is a matter between the worker and their employer, the Agency.

Self-employed Contractors are not entitled to paid annual leave from the Trust.

7.5 **Agency Workers/Contractors and Pre-employment Checks**
The Trust is not responsible for carrying out employment checks listed in 6.2. For Agency Workers these will be undertaken by the Agency and the Agency must provide confirmation to the Trust that these have been carried out. Contractors must provide evidence of pre-employment checks, which will be verified by the Trust as appropriate. Managers must request written confirmation that these pre-employment checks have been undertaken, where appropriate, before engaging individual Agency Workers/Contractors. Evidence of employment checks must be retained by Divisions for a period of 6 months.

In exceptional circumstances, and following express authorisation from an Executive Director, when there is no alternative but to book Agency Workers from an agency, which is not part of the “Buying Solutions Framework”, or a self-employed contractor, the manager must also carry out a risk assessment. (See Appendix 1).

7.6 **Agency Workers/Contractors Induction and Mandatory Training**
Agency Workers/Contractors must have a local orientation provided by the Trust each time they work in a new area. They should be fully compliant with mandatory training specific to the role they are engaged to fulfil. This will be provided by the agency for Agency Workers and in the case of Contractors arranged for themselves.

7.7 **Agency Workers/Contractors and Performance**
The Trust expects the same performance standards from Agency Workers/Contractors as it does from its permanent staff.

If a manager has concerns over an Agency Worker’s performance they should contact the Agency in the first instance to discuss their concerns. If the required improvements are not made, the manager should ask the agency to supply an alternative member of staff. This also applies to NHSP staff.

If a manager has concerns over a Contractor’s performance, they should discuss the concerns with the Contractor and if necessary terminate the contract for services, in line with the terms agreed in the SLA or equivalent.

8.0 **BANK WORKERS**

8.1 **Booking Bank Workers**
Any line manager who considers it is necessary to book Internal Bank or NHSP staff must follow the relevant decision tree and seek the appropriate authorisation for each staff group as appropriate. (See Appendices 2, 3, 4 and 5). All booking requests to be retained by the Division for a period of 6 months.
Should the Trust not require an individual to complete any work assignments or the individual has not accepted any offers of work assignments for a period of 6 months, then the individual will be removed from the bank register. This does not prevent them rejoining the bank at a later date, but in this event all employment checks must be redone. Therefore, it is imperative that managers should not book a Bank Worker, without contacting the Temporary Staffing Team to ascertain whether they are still registered with the bank, if they have not booked them to work within their department within the previous 6 months.

Only authorised signatories should sign timesheets for Bank Workers. If possible, this should be a manager who has daily contact with the member of staff and can monitor their hours of work.

8.2 Payment for Bank Workers
Bank Workers will be paid at the appropriate bank rate for the job they are required to complete. Details of current bank rates are available from the Temporary Staffing Team.

8.3 Bank Workers and Sick Leave
The individual will receive Statutory Sick Pay for occasions of sickness, depending on their levels of earnings. The Payroll Department can advise regarding entitlements. The same applies for Statutory Maternity and Paternity Pay entitlements.

8.4 Bank Workers and Annual Leave
Statutory annual leave will be accrued in relation to hours worked in line with the European Working Time Regulations.

8.5 Bank Workers and Pre-employment Checks
The Trust will carry out all pre-employment checks listed in 6.2 prior to registration on the bank and during registration on the bank.

8.6 Bank Workers Induction and Training
Bank Workers must attend Corporate Induction in order to be registered on the Bank. They must also attend relevant periodic mandatory training provided by the Trust in order to remain on the Bank register. Bank Workers will be paid for their Corporate induction days once they have completed 30 bank shifts, but will not be paid for mandatory training days.

8.7 Bank Workers and Disciplinary and Grievance Procedures
Due to the nature of the terms of engagement between Bank Workers and the Trust, Bank Workers will not be subject to disciplinary and grievance procedures. Concerns raised about individual Bank Workers will be investigated and may result in that person being removed from the bank register. This does not apply to staff who are also employed on a fixed-term or permanent basis within the Trust, who are subject to Trust policies.

8.8 Permanent Employees working as Bank Workers
Permanent employees may choose to work hours extra to their substantive contract on the Internal Trust Bank. In order to ensure that the number of extra hours worked is reasonable, thereby safeguarding both patient care and patient safety and the health and well being of the individual themselves, the following measures have been introduced:

- A member of staff will not be employed for more than half of her/his annual leave/bank holiday allowance – each member of staff should have at least three weeks a year as actual leave.
- A member of staff on annual leave will not be employed for more than 48 bank hours per week (averaged over a 4-week period) *
• The total of contracted hours and additional Bank hours worked must not exceed 48 hours a week (averaged over a 4-week period) *

• It is not acceptable to work a night shift in between two consecutive day shifts (or vice versa).

• Staff having sickness absence in their substantive post, will not be permitted to work Bank shifts until they have worked 5 shifts (pro-rata for part-time workers).

• Staff being managed formally under the Trust’s Disciplinary, Sickness or Capability procedures may not be permitted to work Bank shifts.

• In departments where there is a regular on-call commitment, staff must agree any Bank working with their manager.

It is at the manager’s discretion whether to offer bank shifts to permanent employees.

* In accordance with the European Working Time Directive staff may elect to sign a disclaimer which will allow them to exceed the 48 hour limit. The Trust Policy is nevertheless to encourage staff to work within the above guidelines.

9.0 FIXED TERM EMPLOYEES

9.1 Employing Fixed Term Employees

Fixed Term staff should only be employed when a permanent appointment is inappropriate as the post is genuinely time limited (see para. 4.4) and other temporary staffing solutions are considered unsuitable.

Fixed Term Employees should be recruited in accordance with the Trust’s Recruitment and Selection Policy by completing a business case and Establishment Recruitment Form (ERF) and submitting these for approval through the Vacancy Recruitment Panel.

The temporary nature of employment should be made clear to appointees and the period of their employment and the reason for its fixed term should be expressly stated in the contract of employment. Normally the period of employment specified should be less than 12 months.

The Trust will carry out all the relevant pre-employment checks prior to commencement of employment.

9.2 The Rights of Fixed Term Employees

These individuals are entitled to terms and conditions of employment that are no less favourable, on a pro rata basis, than the terms and conditions of a comparable permanent employee, unless there is an objective justification for offering different terms. They are therefore entitled to receive the same pay, annual leave and sick pay entitlements as permanent staff pro rata to the duration of the contract.

They will also be treated in the same way as permanent employees in relation to opportunities for training, promotion, transfer and appraisal.

They are subject to the all the Trust’s Policies and Procedures.

They may claim unfair dismissal after one year (over 51 weeks) of employment. **The non renewal of any fixed term contract does constitute a dismissal so it must be carried out fairly and for a fair reason.** Managers must write to an employee whose fixed term contract is coming to an end, setting out the reason the contract will not be renewed. The manager must hold a meeting with the fixed term employee to discuss the matter (including
any other posts which may be available in the Trust) and offer the right of appeal if the contract is not renewed.

They are entitled to be paid redundancy pay after two years of continuous employment.

If a Fixed Term Employee believes they are being treated less favourably than comparable permanent employees because they are fixed term, or the Trust has infringed their rights under this policy in any other way, they may request in writing from the Trust a written statement to be provided within 21 days giving particulars of the reasons for the treatment.

9.3 Limiting the Use of Successive Fixed-Term Contracts
If Fixed Term Employees have their contracts renewed, or if they are re-engaged on a new fixed term contract when they already have a period of four or more years of continuous employment, the renewal or new contract takes effect as a permanent contract unless one of the following applies:

- Employment on a fixed-term contract is objectively justified. This means that it has to be shown that the use of a further fixed term contract will achieve a legitimate objective (e.g. a genuine business objective), is necessary to achieve that objective, and/or is an appropriate way of achieving that objective.
- The period of four years has been lengthened under a collective or workplace agreement.

In practice, there would be very few circumstances within the Trust where successive fixed term contracts of more than four years would be justified or desirable. Such a proposal must be discussed with the Directorate General Manager and Human Resources Business Partner.

In certain circumstances, gaps between two fixed term contracts can count towards periods of continuous employment. This is the case where the gap between two contracts is:

- less than one calendar week;
- due to a temporary cessation of work;
- as a result of a custom or arrangement made in advance between the employer and the employee.

Thus, if the same temporary employee was engaged repeatedly on a succession of temporary contracts, it is possible that the whole period of employment, including the gap between individual contracts, would stand to be counted as continuous service. This is particularly likely to be the case if the gaps between the contracts are relatively short in comparison to the periods of employment.

9.4 Existing Employees and Fixed Term Contracts
An employee on an existing permanent contract who applied for and was appointed to a fixed term post would become a “Fixed Term Employee” and lose their permanent status. However, they would retain their continuity of service and in the event of the fixed term contract not being renewed they would potentially be eligible for a redundancy payment based on their total service. Once their total service was greater than one year, they would also be entitled to claim unfair dismissal.

In the case of existing employees, it should be considered whether a secondment or acting arrangement would be more appropriate. Under a secondment or acting arrangement the employee would have the right to return to their old post when the post they had moved to
ended. In this case the permanent post could be filled during this period on a fixed term basis. This can be varied by negotiation between the parties.

10.0 FUTURE DEVELOPMENTS

10.1 The Government has reached an agreement with the CBI and the TUC that Agency Workers will be given equal treatment with directly recruited staff in at least basic working and employment conditions, after 12 weeks in a given job. The changes, which implemented the Temporary Agency Workers Directive, came into force on 1st October 2011.

11.0 DISSEMINATION AND IMPLEMENTATION

11.1 This policy will be stored in the “employment policies” and Temporary Staffing section of the Trust Intranet and thus available to all staff.

11.2 The policy will also be circulated to Operational Management levels 1, 2 and 3, all HR professionals and staff side representatives. It will be the responsibility of those managers to ensure that their own staff who have any responsibility for engaging/booking Temporary Staff are made aware of the amended policy. It is also the responsibility of managers to ensure that both they and their staff are properly trained and updated in the use of employment policies.

12.0 MONITORING

12.1 Human Resources staff will work closely with directorate managers to support and monitor compliance with this policy and suggest further operational amendments as appropriate. Human Resources staff will also monitor legislation, case law and best practice to ensure that the policy is kept up to date as appropriate. For monitoring arrangements for local induction, refer to the Staff Induction Policy.

13.0 REVIEW

13.1 Policies will be reviewed when statutory requirements/best practice guidelines dictate, or no longer than 3 years after the previous review/initial ratification.

14.0 ARCHIVING ARRANGEMENTS

14.1 This is a trust-wide document and archiving arrangements are managed by the Quality department who can be contacted to request master/archived copies.

15.0 REFERENCES


Fixed Term Employees (Prevention of Less Favourable Treatment) Regulations, October 2002
## APPENDIX 1

### RISK ASSESSMENT FORM

**RISK ASSESSMENT FORM FOR NON BUYING SOLUTIONS FRAMEWORK AGENCY WORKERS AND CONTRACTORS**

Form to be completed by Line Manager to make assessment of an agency worker (supplied by an agency which is not part of the Buying Solutions (formerly PASA) Framework) or a self-employed contractor’s suitability to work. Risk assessment must be carried out by the Line Manager, countersigned by the relevant Divisional General Manager / Head of Service and authorised by the Deputy Chief Executive/Executive Director before the individual commences work.

**AN AGENCY WORKER/CONTRACTOR WILL ONLY BE PERMITTED TO WORK ONCE WRITTEN EVIDENCE OF SATISFACTORY PRE-EMPLOYMENT CHECKS HAS BEEN RECEIVED AND SUITABILITY FOR THE POST HAS BEEN ESTABLISHED.**

<table>
<thead>
<tr>
<th>Agency Worker/Self-employed Contractor Name</th>
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<tbody>
<tr>
<td>Post to be covered</td>
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<tr>
<td>Department</td>
</tr>
<tr>
<td>Name of Agency/Company</td>
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<tr>
<td>Has the line manager received written evidence of CRB disclosure?</td>
</tr>
<tr>
<td>Date of CRB clearance (within last 3 years)?</td>
</tr>
<tr>
<td>Has the line manager received written evidence of OH clearance?</td>
</tr>
<tr>
<td>Date Occupational Health cleared (within last 3 years)?</td>
</tr>
<tr>
<td>Has the line manager received two satisfactory references received from previous line managers covering a minimum of the past 3 years employment?</td>
</tr>
<tr>
<td>Has the line manager received written evidence of current professional registration (where applicable) and verified the same on the website of the appropriate professional body?</td>
</tr>
<tr>
<td>Has a senior professional member of staff (Specialty Consultant, Matron/HON, Head of Profession) assessed the worker’s ability/qualifications to carry out the duties of the post?</td>
</tr>
<tr>
<td>Name of professional member of staff who carried out assessment</td>
</tr>
<tr>
<td>Question</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Has the line manager received evidence that the worker has been appraised within the last 12 months?</td>
</tr>
<tr>
<td>Will the worker be supervised?</td>
</tr>
<tr>
<td>Does the post involve lone working?</td>
</tr>
<tr>
<td>Has the worker previously worked in the department?</td>
</tr>
<tr>
<td>Will the worker receive a local induction pack on arrival for which he/she has to sign?</td>
</tr>
<tr>
<td>Name of person to whom worker will report on commencement of shift</td>
</tr>
</tbody>
</table>

**Line Manager Name & Designation**

**Signature**

**Date**

**DIVISIONAL GENERAL MANAGER / HEAD OF SERVICE TO APPROVE**

**Name**

**Approved / Not approved**

**Signature**

**Date**

**DEPUTY CHIEF EXECUTIVE/EXECUTIVE DIRECTOR TO APPROVE**

**Name**

**Approved / Not approved**

**Signature**

**Date**

**THIS FORM SHOULD BE RETAINED BY THE LINE MANAGER FOR A PERIOD OF 6 MONTHS**
Nursing Bank/Agency Decision Tree

Gap in minimum staffing levels identified

Specific need for extra staff (e.g. ‘special’)

Identify grade of staff required and essential hours needed

Can today’s staff lengthen their hours?

No

Check duty roster – can anyone change their shift?

No

Review grade needed – can you compromise?

No

*Notify line manager and/or other Matron – can any other ward/dept help? Check with CSNP who will have corporate overview for redeployment. If unable to redeploy

No

Contact Healthroster bank co-ordinator (9-5 Mon-Fri)

If Bank cannot fill shift

Agreed authorised manager will contact NHSP

If NHSP cannot fill, contact CSNP who will look for further redeployment in case activity or nursing need as changed.

Unable to redeploy

Call Executive Director (In hours) or SSM (Out of hours)
**APPENDIX 3**

Medical Staff (all grades)
Temporary Staffing Decision Tree

Gap in minimum staffing levels identified

- Consideration of internal resolution:
  - check prospective cover arrangements of rota
  - can staff cross-cover from other areas within directorate/Trust on temporary basis
  - temporary extension of hours (within EWTD)
  - change annual leave/study leave arrangements
  - change their shifts
  - review grade needed
  - ensure rota hours are being fully utilised

Specific need for extra staff (e.g. high numbers of patients, acuity of patients)

No internal resolution identified
Discussion with DGM or DD (or deputies)

DGM or DCD submits an electronic temporary staff request form by e-mail to Deputy CEO (or nominated deputy)

*(Out-of-hours, approval to be sought from the on call Executive Director by individual proposing the booking)*

Deputy CEO (or Executive Director) approves and e-mails form back to DGM or DD for action

*(Out-of-hours, individual who has made the booking to e-mail relevant GM and CD with details)*

Booking of temporary staff to be logged at directorate level for reporting purposes, as follows:

For Departments with or without Healthroster Access please follow the Temporary Staffing Request Flowchart on page 19 below
Non-Nursing and Non-Medical Staff
Temporary Staffing Decision Tree

Gap in minimum staffing levels identified

Consideration of internal resolution:
can staff cross-cover from other areas within directorate/Trust on temporary basis
temporary extension of hours (within EWTD)
change annual leave/study leave arrangements
review grade needed

Specific need for extra staff (e.g. sickness absence, additional workload)

No internal resolution identified
Discussion with DGM or DD (or deputies)

DGM or DD submits an electronic temporary staff request form by e-mail to Deputy CEO (or nominated deputy)

(Out-of-hours, approval to be sought from on call Executive Director by individual proposing the booking)

Deputy CEO (or Executive Director) approves and e-mails form back to DGM or DD for action

(Out-of-hours, individual who has made the booking to e-mail relevant DGM and DD with details)

Booking of temporary staff to be logged at directorate level for reporting purposes, as follows:

For Departments with or without Healthroster Access please follow the flowchart on page 19 below:
APPENDIX 5

Temporary Staffing Request Form

This request form must be approved by the Deputy Chief Executive/Executive Director

See Flowchart below

<table>
<thead>
<tr>
<th>BOOKING REFERENCE NUMBER, DEPARTMENT AND COST CENTRE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
</tr>
<tr>
<td>Healthroster Booking Reference Number</td>
</tr>
<tr>
<td>Enter Healthroster Number</td>
</tr>
<tr>
<td>Cost Centre</td>
</tr>
<tr>
<td>Request number from Temporary Staffing Team (put ‘X’ in box)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FULL NAME, JOB TITLE AND BAND/GRADE OF STAFF MEMBER TO BE COVERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Title to be covered</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ALTERNATIVES EXPLORED AND REASON FOR BOOKING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specify what alternatives have been explored to cover the shift, (see relevant decision tree for further guidance)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reason for Request (Put ‘X’ in appropriate box)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternity Leave</td>
</tr>
<tr>
<td>Training</td>
</tr>
<tr>
<td>Duty Change</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ASSIGNMENT DETAILS, START AND END DATE, HOURS AND BREAKDOWN OF HOURS (maximum of one month booking period at a time)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start Date</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>Breakdown of Shifts and hours:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DETAILS OF TEMPORARY WORKER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Temporary Worker</td>
</tr>
<tr>
<td>Job Title</td>
</tr>
<tr>
<td>Band/Rate of Pay</td>
</tr>
<tr>
<td>Supplied by internal Trust bank or External</td>
</tr>
<tr>
<td>Internal Bank Locum</td>
</tr>
</tbody>
</table>

[not on Framework please complete Risk Assessment Form]
<table>
<thead>
<tr>
<th>Requestor name</th>
<th>Job Title</th>
<th>Telephone number</th>
<th>Date</th>
</tr>
</thead>
</table>

### DEPUTY CHIEF EXECUTIVE/EXECUTIVE DIRECTOR APPROVAL

<table>
<thead>
<tr>
<th>Name</th>
<th>Job Title</th>
<th>Date</th>
</tr>
</thead>
</table>

Any questions please contact the Temporary Staffing Team on Ext. 4357 or 4370
Temporary Staffing Request Flowchart

1. Requestor completes Temporary Staffing Request Form
2. Risk Assessment Form to be completed for Non Framework Agencies (Link)
3. Form e mailed to Deputy Chief Executive/Executive Director with Risk Assessment form (if applicable)
4. Is temporary staff request approved Yes or No
   - Yes
     - Form (complete with reference number and name of person covering shift) e mailed to ‘TempStaffingRequest’ mailbox
     - Temporary Staffing Team add shift to Healthroster and generate booking reference number
     - Booking reference number added to form and e mailed back to requester
     - Requester e mails name of person covering shift to ‘TempStaffingRequest’ mailbox for addition to Healthroster booking system
     - All Shifts worked recorded on Healthroster booking system
   - No
     - Form (complete with reference number and name of person covering shift) e mailed to ‘TempStaffingRequest’ mailbox
     - Is temporary staff request approved Yes or No
       - Yes
         - Requester adds request to Healthroster to generate reference number
         - Name of person covering shift added to Healthroster
         - Form (complete with reference number and name of person covering shift) e mailed to ‘TempStaffingRequest’ mailbox
       - No
         - Copy of form and risk assessment retained in department for clinical governance monitoring for 6 months and quarterly reporting at divisional clinical governance committee monitoring number of requests and risk assessments completed

5. End of process
### APPENDIX 6

**Equality Impact Assessment Summary**

Name of author: Kate Clarke

Policy/service: Temporary Staffing Policy

<table>
<thead>
<tr>
<th>Background</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Description of the aims of the policy</td>
</tr>
<tr>
<td>• Context in which the policy operates</td>
</tr>
<tr>
<td>• Who was involved in the process</td>
</tr>
</tbody>
</table>

- The Temporary Staffing Policy sets out overall policy for recruitment and selection of temporary staffing at Ashford and St Peters Hospitals NHS Trust (the Trust) and incorporates agreed procedures for recruitment and selection of temporary staffing within the organisation, ranging from identifying the need to recruit the temporary member of staff through to orientation into the Trust. This is written in accordance with the Department of Health (2002) Code of Practice for the Supply of temporary staffing and the legislation under the Fixed Term Employees (Prevention of Less Favourable Treatment) Regulations (October 2002)

This policy forms part of Ashford & St Peter’s Hospitals NHS Trust’s commitment to create a positive culture of respect for all individuals including staff, patients, their families and carers, as well as community partners. The Trust’s values (the 4 Ps) and The Staff Pledge are integral to all aspects of day to day life in the organisation and underpin the application of all our employment policies and procedures.

- NHS environment, legislation, Agenda For Change Terms and Conditions, Government agenda
- HR Department, Employee Partnership Forum, Operational Managers, Staff Networks and the Trust Executive Committee

<table>
<thead>
<tr>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td>• A brief account of how the likely effects of the policy was assessed (to include race and ethnic origin, disability, gender, culture, religion or belief, sexual orientation, age)</td>
</tr>
<tr>
<td>• The data sources and any other information used</td>
</tr>
</tbody>
</table>

- During the period January to March 2011, the diversity profile of the Trust’s usage of temporary staffing will be analysed and recommendations will be made accordingly.
Key Findings
• Describe the results of the assessment
• Identify if there is adverse or a potentially adverse impacts for any equalities groups

• To be confirmed.

Conclusion
• Provide a summary of the overall conclusions

• To be confirmed

Recommendations
• State recommended changes to the proposed policy as a result of the impact assessment
• Where it has not been possible to amend the policy, provide the detail of any actions that have been identified
• Describe the plans for reviewing the assessment

• To be confirmed

Guidance on Equalities Groups

<table>
<thead>
<tr>
<th>Race and Ethnic origin (includes gypsies and travellers) (consider communication, access to information on services and employment, and ease of access to services and employment)</th>
<th>Religion or belief (include dress, individual care needs, family relationships, dietary requirements and spiritual needs for consideration)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Disability (consider communication issues, access to employment and services, whether individual care needs are being met and whether the policy promotes the involvement of disabled people)</th>
<th>Sexual orientation including lesbian, gay and bisexual people (consider whether the policy/service promotes a culture of openness and takes account of individual needs)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Gender (consider care needs and employment issues, identify and remove or justify terms which are gender specific)</th>
<th>Age (consider any barriers to accessing services or employment, identify and remove or justify terms which could be ageist, for example, using titles of senior or junior)</th>
</tr>
</thead>
</table>

| Culture (consider dietary requirements, family relationships and individual care needs) | Social class (consider ability to access services and information, for example, is information provided in plain English?) |