

# RECRUITMENT AND SELECTION POLICY

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<http://www.intranet.sheffieldccg.nhs.uk/policies.htm>

## POLICY AUDIT TOOL

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

<b>Please give status of Policy:</b>		<b>Revised</b>
<b>1.</b>	<b>Details of Policy</b>	
1.1	Policy Number:	HR020/01/2020
1.2	Title of Policy:	Recruitment and Selection Policy
1.3	Sponsor	Chief Nurse
1.4	Author:	HR Manager
1.5	Lead Committee	Governance Sub Committee
1.5	Reason for policy:	Legislative and best employment practice
1.6	Who does the policy affect?	All employees
1.7	Are the National Guidelines/Codes of Practices etc issued?	NHS Employment Check Standards Health and Safety and Employment Legislation ACAS Codes of Practice
	Has an Equality Impact Assessment been carried out?	Yes
<b>2.</b>	<b>Information Collation</b>	
2.1	Where was Policy information obtained from?	As per 1.6
<b>3.</b>	<b>Policy Management</b>	
3.1	Is there a requirement for a new or revised management structure for the implementation of the Policy?	No
3.2	If YES attach a copy to this form.	n/a
3.3	If NO explain why.	Current management structure satisfactory
<b>4.</b>	<b>Consultation Process</b>	
4.1	Was there external/internal consultation?	Yes
4.2	List groups/persons involved	Joint Staff Consultative Forum
4.3	Have external/internal comments been included?	No
4.4	If external/internal comments have not been included, state why.	n/a
<b>5.</b>	<b>Implementation</b>	
5.1	How and to whom will the policy be distributed?	All employees via the intranet
5.2	If there are implementation requirements such as training please detail.	Training for Appointing Officers
5.3	What is the cost of implementation and how will this be funded	No funding required
<b>6.</b>	<b>Monitoring</b>	
6.2	How will this be monitored	Workforce Reports
6.3	Frequency of Monitoring	Quarterly

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## **SECTION A – POLICY**

### **1. Policy Statement, Aims and Objectives**

- 1.1** This policy aims to support Appointing Officers in providing a fair, consistent and effective approach to the recruitment of all employees and volunteers in accordance with employment law and best practice.
- 1.2** NHS Sheffield Clinical Commissioning Group (CCG) actively promotes equality of opportunity for all and welcomes applications from a wide range of individuals.
- 1.3** The application of this policy ensures that the organisation is fully compliant with the NHS Employment Check Standards and the Disclosure and Barring Service (DBS) codes of practice and undertakes to treat all applicants fairly.

### **2. Legislation and Guidance**

- 2.1** The following legislation and guidance has been taken into consideration in the development of this procedural document.
- Data Protection Act 1998
  - Equalities Act 2010
  - NHS Employment Check Standards
  - DBS Code of Practice

### **3. Scope**

- 3.1** This policy applies to those members of staff that are directly employed by NHS Sheffield Clinical Commissioning Group and for whom NHS Sheffield Clinical Commissioning Group has legal responsibility. Seconded staff are covered by the policy of their employing organisation. For those staff covered by a letter of authority / honorary contract or work experience, this policy is also applicable whilst undertaking duties on behalf of NHS Sheffield Clinical Commissioning Group or working on NHS Sheffield Clinical Commissioning Group premises and forms part of their arrangements with NHS Sheffield Clinical Commissioning Group. As part of good employment practice, agency workers are also required to abide by NHS Sheffield Clinical Commissioning Group policies and procedures, as appropriate, to ensure their health, safety and welfare whilst undertaking work for NHS Sheffield Clinical Commissioning Group.

### **4. Accountabilities and Responsibilities**

- 4.1** Policy Overall accountability for ensuring that there are systems and processes to effectively ensure compliance with this Policy lies with the Accountable Officer. Responsibility is delegated to the following:

<p><b>Chief Nurse</b></p>	<p>The chief Nurse has delegated authority for the following:</p> <ul style="list-style-type: none"> <li>• Maintaining an overview of the corporate ratification and governance process associated with the policy.</li> <li>• Ensuring that the policy is applied fairly, consistently and in a non-discriminatory manner.</li> </ul>
<p><b>Human Resources</b></p>	<ul style="list-style-type: none"> <li>• Leading the development, implementation and review of the policy.</li> <li>• Supporting managers and employees with queries relating to the policy and procedure.</li> <li>• Co-ordinate provision of training for all managers in dealing with the recruitment and selection process</li> <li>• Ensuring compliance with the policy.</li> <li>• Administration of recruitment processes including ensuring all pre-employment checks completed.</li> <li>• Ensuring all the required documentation is placed on file and meets audit requirements.</li> <li>• Collecting and reporting equality monitoring data.</li> <li>• Identifying potential inequalities and proposing action to address these.</li> </ul>
<p><b>Appointing Officers/ Line Managers</b></p>	<ul style="list-style-type: none"> <li>• Ensuring understanding and adherence to responsibilities in relation to the policy.</li> <li>• Attending appropriate training for Appointing Officers.</li> <li>• Ensuring that the Policy is applied fairly and consistently.</li> </ul>
<p><b>All Employees</b></p>	<ul style="list-style-type: none"> <li>• Ensuring understanding and adherence of responsibilities in relation to the policy.</li> <li>• Providing all relevant information and documentation required.</li> <li>• Ensuring that professional registration is maintained (where appropriate).</li> <li>• Advising the Appointing Officer/ Line Manager of any changes in circumstance including if charged with an offence or if status changes with regard to checks during employment.</li> </ul>

## 5. Dissemination, Training and Review

### 5.1 Dissemination

The effective implementation of this procedural document will support openness and transparency. NHS Sheffield Clinical Commissioning Group will:

- Ensure all employees and stakeholders have access to a copy of this procedural document via the organisation's website.
- Ensure employees are notified by email of new or updated procedural documents.

## **5.2 Training**

All employees will be offered training commensurate with their duties and responsibilities. Appointing Officers must have received appropriate training in relation to their responsibilities in the recruitment and selection of employees.

## **5.3 Review**

**5.3.1** As part of its development, this procedural document and its impact on staff, patients and the public has been reviewed in line with NHS Sheffield Clinical Commissioning Group's Equality Duties. The purpose of the assessment is to identify and if possible remove any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act.

**5.3.2** The procedural document will be reviewed every three years, and in accordance with the following on an as and when required basis:

- Legislatives changes
- Good practice guidelines
- Case Law
- Significant incidents reported
- New vulnerabilities identified
- Changes to organisational infrastructure
- Changes in practice

**5.3.3** Procedural document management will be performance monitored to ensure that procedural documents are in-date and relevant to the core business of the organisation. The results will be published in the regular Governance Sub Committee Reports.

## **SECTION B – PROCEDURE**

### **1. Identifying a Vacant Post**

- 1.1** When a vacancy arises the Appointing Officer/ Line Manager should consider the most appropriate way to cover the workload associated with the vacancy. Prior to drawing up a job description and person specification, consideration should be given to the existing staffing levels, skill mix and working patterns within the team and/or wider teams in order to identify potential redeployments.
- 1.2** Consideration should be given to the following:
- Can the work be eliminated?
  - Can the work be reabsorbed by utilising existing resources?
  - Are the duties and responsibilities the same as previously?
  - Is the time/ hours requirement the same?
  - Does the vacancy need to be filled on a permanent or a temporary basis?
  - Can the post be filled internally?
  - Are there any future service developments that might impact on the vacancy?

### **2. Job Description and Person Specification**

- 2.1** Having considered all the options and having established a requirement to recruit to a vacancy, a job description and person specification should be completed. Where the vacancy is to replace a post, the previous job description and person specification should be reviewed and revised where necessary. For a vacancy for a new post a full job description and person specification will be required.
- 2.2** The job description should summarise the role and responsibilities of the post in a concise and accurate way.
- 2.3** The person specification should define the qualifications, skills, experience and aptitudes that are required by a person to fulfil the role. The criteria must be categorised as essential (the minimum standard to perform the role adequately) or desirable (the standards which will enable the person to perform the job more effectively). The criteria must be measurable.
- 2.4** The job description and person specification should be prepared on the standard organisational template.

### **3. Job Evaluation**

- 3.1** Job descriptions and person specifications should be forwarded to Human Resources for job evaluation which will be undertaken in conjunction with Staff Side. In the majority of cases, where the vacancy is a replacement for a previous post, there will be no requirement to re-band the post. If the post is new or if it has significantly changed, a job evaluation will be undertaken in accordance with the Agenda for Change Job Evaluation process. For posts that are not subject to Agenda for Change terms and conditions, advice on job evaluation should be sought from Human Resources.

**3.2** In exceptional circumstances posts may be advertised subject to evaluation.

#### **4. Vacancy/ Establishment Control**

**4.1** The Vacancy/ Establishment Control Form must be completed by the Appointing Officer/ Line Manager and authorised in accordance with the organisations Delegation of Authority Procedure.

**4.2** The completed Vacancy/ Establishment Control Form should be forwarded to Human Resources with the job description, person specification, job advert and advertising details form.

#### **5. Advertising a Vacancy**

**5.1** Human Resources will place job adverts which will normally be advertised for a period of two weeks.

**5.2** In the event of jobs being at risk either locally or nationally, a clearing house scheme may be in place which would mean that suitable vacancies should be ring-fenced to employees who are at risk of redundancy. Advice will be given in these circumstances by Human Resources.

**5.3** External vacancies will normally be advertised via the NHS Jobs website with applications submitted electronically. In accordance with legislation, applicants will be offered an application form in an appropriate format if an electronic application is unsuitable for their individual requirements. Alternative methods of advertising should be discussed with Human Resources eg external media.

**5.4** Vacancies may be advertised internally within the organisation with only current employees eligible to apply. Internal job advertisements can be placed via NHS Jobs, e-mail system or communications newsletter.

**5.5** Applications will normally be requested electronically via NHS Jobs. However, alternative processes may be adopted such as requesting expressions of interest with curriculum vitae and covering letter. Advice should be sought from Human Resources.

#### **6. Shortlisting**

**6.1** Shortlisting should be completed via NHS Jobs (where used). A minimum of two shortlisting reviewers will be sent an email link following the closure of the vacancy. Where applications have not been via NHS Jobs, the shortlisting matrix will be used. The reasons for decisions not to shortlist should be clearly recorded on the shortlisting section of NHS Jobs or the shortlisting matrix. The information will be required as evidence if allegations of unfair treatment are made.

**6.2** Shortlisting must be undertaken by examination of applications against the person specification and must be applied consistently to all candidates on the basis of the information supplied in their applications. Where a large number of applicants satisfy the essential criteria, other desirable criteria will systematically be applied to reduce the number of candidates. All applicants who meet the essential criteria and have indicated on their application that they have a disability, will automatically be



shortlisted as part of the organisations Positive About Disabled People' (Two Ticks) accreditation.

- 6.3** The Appointing Officer/ Line Manager will not have access to any of the applicants personal information until after the shortlisting process has been concluded.

## **7. Interview Assessment/ Selection Process**

- 7.1** Interview panels will consist of a minimum of two people, at least one of whom must have undertaken Recruitment and Selection Training for Appointing Officers. For clinical posts, at least one panel member should be a clinician from the speciality to which the position relates. Any external assessors involved in the selection process will be required to abide by the organisations recruitment and selection processes.
- 7.2** Shortlisted applicants will be invited to interview with reasonable notice before the interview date. Where possible, the interview date should be included in the advert. The panel will take into consideration the timing of the dates of interview for any faith based dates.
- 7.3** Following shortlisting, the Interview Assessment Details Form should be completed by the Appointing Officer/ Line Manager in relation to the selection process including whether any other methods of assessment ie selection tests.
- 7.4** Selection tests are an excellent method of assessing a candidate's ability to perform the duties of the post, providing they are relevant, reliable, fair and unbiased. Examples include presentations, typing tests, in tray exercises, writing a document, tests in the use of applicable software, case studies or scenario exercises and group exercises. It may be necessary to make reasonable adjustments to a test to accommodate a candidate with a disability.
- 7.5** The Appointing Officer/ Line Manager will ensure that all panel members follow fair recruitment practices.
- 7.6** Where previously advised by Human Resources, Appointing Officers/ Line Managers are required to make reasonable adjustments that are required by candidates to take part in an interview so that they are not at a substantial disadvantage.
- 7.7** The Appointing Officer/ Line Manager will be responsible for co-ordinating arrangements for the interviews including room bookings, refreshments and facilitating any requests made by applicants with a disability.
- 7.8** Human Resources will issue invitations to interview for all shortlisted candidates and supply the interview panel with an interview schedule with contact details for the shortlisted candidates. An Interview Assessment Form and a Successful Candidate Appointment Form will also be provided.
- 7.6** Each interview panel member is responsible for recording their own assessment of each candidate by completing the Interview Assessment Form. Any additional papers should be attached. Applicants are legally entitled to view these documents and they can be used in Employment Tribunals.
- 7.7** Panel members should ask the same core questions of each candidate, using the Interview Assessment Form. These questions will be based on the criteria in the

person specification and can be weighted if appropriate.

## **8. Selection Decisions**

- 8.1** Selection decisions must be objective and should only be made on the basis of how closely the candidates meet the person specification and interview assessment criteria.
- 8.2** Once a decision has been made the recruitment pack with all related documentation should be returned to Human Resources. The appointing officer will be responsible for contacting candidates with the outcome and providing feedback.

## **9. Pre-Employment Checks**

- 9.1** Following the recruitment process, pre-employment checks will be obtained for the successful candidate. These must satisfy the requirements of the NHS Employers pre-employment check standards as follows:
- Verification of identity
  - Right to work
  - Registration and qualifications
  - Employment history and references
  - Disclosure and Barring Service
  - Occupational Health
- 9.2** All pre-employment checks should meet these requirements prior to the candidate receiving a formal offer letter confirming appointment. The CCG will withdraw any offer of employment to anyone who fails to meet these requirements.
- 9.3** Evidence of all pre-employment checks conducted will be stored on individual personal files with a record of the outcome entered and maintained with the Electronic Staff Record (ESR).
- 9.4** Temporary workers should only be obtained through recruitment agencies approved by the Government Procurement Service. These agencies are responsible for obtaining pre-employment checks on all workers in accordance with all the NHS Employment Check Standards.
- 9.5** The Appointing Officer/ Line Manager should not agree a start date with the successful candidate prior to all pre-employment checks being completed. The organisation will withdraw any offer of employment to a successful candidate who fails to meet these requirements.
- 9.6** Further information regarding the specific process for obtaining these checks and the process for follow up of those who fail to satisfy the checking arrangements is available in Appendix 1.

## **10. Alert Letters**

- 10.1** Alert letters are issued to notify NHS organisations and other about health professionals whose conduct could place patients or employees at serious risk.
- 10.2** Employees regulated by one of the following bodies are covered by this procedure

and may be subject to alert letters:

- General Medical Council
- General Dental Council
- Nursing and Midwifery Council
- General Chiropractic Council
- General Osteopathic Council
- Health Professions Council

**10.3** When alert letters are received they should be forwarded to Human Resources to ensure that they can be checked against records of applicants and candidates in the recruitment process and existing employees. Their names will be entered on a local alert list database against which any potential new employees or workers will be checked before an offer of employment is made.

**10.4** If an applicant is identified as being on the alert letter database, recruitment will be halted, relevant parties informed and appropriate action taken.

## **11. Starting Salary and Incremental Date**

**11.1** New employees from outside of the NHS should be appointed on the minimum salary point in the relevant band.

**11.2** In exceptional circumstances, the Appointing Officer/ Line Manager may wish to make an offer higher than the minimum of the salary band, taking into account previous equivalent experience outside of the NHS. The Appointing Officer/ Line Manager will need to consider to what extent the previous experience will be of relevance to their new post and make a clear rationale why a higher offer of salary is appropriate and this must be approved by the relevant Director.

**11.3** In considering the case for making a higher offer of salary, account should be taken of the other terms and conditions of service applicable to the post, for example:

- Any additional allowances attached to the post e.g. working outside normal hours, on call, recruitment and retention premia etc
- The Occupational Pension Scheme
- Annual leave and sick leave entitlements

**11.4** Salaries agreed must exist as a point on the pay band (for posts which are covered by agenda for change terms and conditions) and should never be higher than the maximum of the scale.

**11.5** When a candidate already working for the NHS is offered a job that is at the same pay band as their current role, they would move across on the same pay point. When a candidate already working for the NHS is offered a job that is a higher pay band, pay should be set at the minimum of the new pay band. However, if this would result in no increase either because the individual is receiving a bonus or recruitment or retention premium or because they are at the top of the band, the individual would go to the first pay point in the band which would result in an increase in pay.

**11.6** For newly appointed or promoted staff the incremental date will be the date they commence the new post.

## **12.0 Recruitment and Retention Premia**

- 12.1** The aim of a recruitment and retention premia is to ensure that the organisation remunerates all of its employees at a level at which recruitment and retention difficulties will not be encountered. Principles and definitions can be found in Appendix 2.

## **13. Induction**

- 13.1** All new employees must be fully inducted into the CCG in accordance with the Induction, Mandatory and Statutory Training Policy.

## **14. New Starter Documentation**

- 14.1** The Appointing Officer/ Line Manager is responsible for ensuring that all new starter documentation is completed by a new employee.

## **15 Employment Records**

- 15.1** Human Resources are responsible for coordinating all documentation and records from the recruitment process for the employee personal file.

- 15.2** Human Resources will produce a contract of employment for new starters to the organisation.

- 15.3** The Appointing Officer/ Line Manager should complete a Contract Variation Form if the appointed candidate is an existing employee.

## **16. Managing Personal Relationships**

- 16.1** Applicants will be required to declare on their application any personal/ work relationship issue as this may cause a conflict of interest. Further information is included in Appendix 6.

## **17. Secondary Employment**

- 17.1** Employees may not engage in secondary employment (paid or voluntary) which conflicts with their work with the organisation, or which is detrimental to employees work with the organisation. Employees wishing to engage in secondary employment/ voluntary work in addition to their primary post must refer to the working time regulations and declare their secondary employment to their Line Manager.

## **18. Volunteers**

The principles set out in this policy, with particular reference to fair and unbiased selection processes, pre-employment checks, induction and conflicts of interest will also apply to the recruitment of volunteers where applicable.

### 1. PRE-EMPLOYMENT CHECKS

#### 1.1. NHS Employment Check Standards

NHS Employers have published a series of standards that detail the legal and mandated employment checks that NHS organisations must undertake in relation to prospective employees including temporary, fixed term and voluntary workers.

#### 1.2. Verification of Identity

The identity of all prospective employees must be reliably verified and recorded before any appointment can be made. Verification of identity checks are designed to determine that the identity is genuine and relates to a real person and to establish that the individual is rightfully using that identity.

All applicants are required to provide at interview, evidence of identity. This must then be then photocopied by the appointing officer (or nominated deputy) certified and retained with all the recruitment documentation. They must provide original identity documents in either of the combinations below:

- Two forms of photographic personal identification and one document confirming their address
- One form of photographic personal identification and two documents confirming their address

In addition, evidence will also be obtained of the applicant's signature. This will be acquired through the completion of a signature verification form that must be countersigned by the appointing officer (or nominated deputy) and retained with all the recruitment documentation.

#### 1.3. Right to Work

The organisation has a responsibility to prevent illegal migrant working in the UK. An individual must produce documents to prove they are permitted to work in the UK and that their identity is genuine.

If an individual is not subject to immigration control, has no restrictions on their stay in the UK or is a UK citizen, then they will still be required to produce a document or a specified combination of documents prior to commencing employment.

Where the individual has limited leave to be in the UK the checks will be repeated by Human Resources at least 3 months before expiry, until they provide specified documents indicating that they can remain permanently in the UK or until they leave the employment of the organisation.

All documents provided by individuals must be checked following guidance from the Home Office. A certified copy of the documents is to be kept on the employee's personal file.

Certain documentation is accepted as proof of an individual's identity and this must be produced prior to commencement of employment.

### **1.3.1. Work permits/Certificates of Sponsorship – Tier 2**

If a prospective employee is not a British Citizen or a citizen of one of the EEA countries, they are likely to require a sponsorship certificate which will be applied for by the organisation to undertake employment. There are certain exceptions including:

- Swiss nationals
- A family member of an EEA or Swiss national who is in the UK exercising their treaty rights or a family member of an EEA or Swiss national who intends to join them in, or is travelling with them to, the UK
- A citizen of Gibraltar
- A Commonwealth citizen with permission to stay in the UK on the basis of UK ancestry.

If an Appointing Officer/ Line Manager has questions about the likelihood of their post being suitable for a Tier 2 sponsorship certificate they should contact Human Resources for further information.

Where successful applicants require a sponsorship certificate, the application process will be managed by Human Resources.

The organisation will need to demonstrate that the resident labour market has been tested appropriately by national advert for up to 4 weeks. This means that no EU/ EEA Nationals were suitable to fill the post.

The individual applicant/ employee is responsible for securing their leave to remain and entry clearance. They must also ensure they have appropriate documentation to support their leave to remain (passport stamps or identity card). Certified copies of these must be held on the employee's personal file for the duration of their employment.

The organisation will pay the sponsorship fee. The individual will be responsible for the payment for their leave to remain.

### **1.3.2. Refugees and Asylum Seekers**

A refugee has rights under the Geneva Convention to be treated no less favourably than citizens of the host nation. In the UK refugees have the right to work.

Since 2003 asylum seekers do not have the right to work in the UK. Only a very small number of asylum seekers will have the right to work and if so it will state 'employment permitted' on their Application Registration Card (ACR).

## **1.4. Employment History and References**

Before any appointment is made, it is essential to check the accuracy of a prospective employee's previous employment and/or training history. It is also necessary to receive assurance of an individual's qualifications, integrity and track record.

The Appointing Officer/ Line Manager should check the suitability of the supplied references at interview for all applicants and document and alternatives, if appropriate, on the preferred applicants candidate confirmation form. Human Resources will then contact the referees for the preferred candidate.

References should always be obtained in writing and will be requested using the organisations standard template, although it may be necessary to further clarify information with the referee verbally. Confirmation of employment and/ or training should always be obtained in writing. Electronic confirmation must come from a company email address (private email addresses such as Yahoo, Hotmail etc are not acceptable). Employers, including agencies providing staff to the NHS, will need to satisfy themselves that both the referee and the organisation are bona fide. This could include checking that the organisation exists (using the phone book, internet or business directories). All references should include the referee's name, job title and a mainline switchboard number.

References should be appropriate in order to provide the best possible evidence on the suitability of an individual for a position. References should cover at least the last three years of previous employment and/ or training history and they should include the applicant's current or most recent line manager/ employer or training provider. Where an individual has been with one employer for five years or more, one reference may be sufficient. Where a prospective employee has changed employment frequently within the last three years, a sufficient number of confirmations must be obtained to cover the continuous three years history.

For internal appointments, a reference should be sought from the applicant's current/ last line manager. Employers must assess whether any additional references are required to provide adequate assurances.

### **1.5. Registration and Qualifications**

The purpose of registration and qualification checks is to ensure that all prospective employees are recognised by the appropriate regulatory body and that they have the right qualifications to do their job.

### **1.6. Professional Registration**

Human Resources will confirm the individual is registered with the appropriate professional body via the professional bodies' website. Evidence of this is retained on the individual's personal file and documented on the Electronic Staff Record System (ESR).

Professionally registered employees are required to maintain their professional registration throughout their employment, where this is essential for the post they are employed. Further information is contained in Appendix 3.

### **1.7. Qualification Checks**

The organisation must ensure that all employees have the required qualifications to perform the role for which they are appointed. All applicants are required to provide at interview, evidence of any qualification that is required for the role. A copy must be taken by the Appointing Officer/ Line Manager (or nominated deputy) and retained with the recruitment documentation.

## **1.8. Occupational Health Check**

Occupational Health checks ensure that employees are physically and psychologically capable of undertaking their role, taking into account any current or previous illness. It is designed to identify anyone likely to be at excess risk of developing work-related diseases from hazardous agents present in the workplace and to ensure, as far as possible, that they do not represent a risk to others and that they will be doing work that is suitable and safe for them.

Occupational health checks should be carried out when an employee is first appointed to a position within the organisation or if they change positions, where this involves a significant change of duties.

Successful candidates are required to complete an occupational health pre-employment questionnaire including whether the candidate

- Is aware of any health conditions or disabilities that may impair their ability to undertake effectively the duties of the position which they have been offered.
- Has a health condition or disability which may affect their work and that may require special adjustments to the work or the work place.

The questionnaire must be submitted to the Occupational Health Department for assessment regarding fitness to work.

All checks must take into account the requirements of the Disability Discrimination Act 1995 (DDA) and Equality Act 2010 and reasonable adjustment must be made to ensure that people can work in the NHS regardless of physical impairment or learning disabilities. Occupational Health checks should only be made once a job offer has been made.

Results of prospective employees Occupational Health checks will be confidentially filed and stored in the Health Department.

Once the Occupational Health Department have reviewed all the information from the individual they will either issue a fit to work clearance certificate or provide a report detailing the applicant's suitability for the role and advising of any adjustments that would need to be made to the working environment in order to facilitate employment.

It may be necessary for new employees to attend the Occupational Health department during their first week of starting the new role in order to obtain any immunisation updates or eye testing.

## **1.9. Disclosure and Barring Service (DBS)**

Guidance on the procedure for dealing with a disclosure check and the recruitment of ex-offenders is contained in Appendix 4.

## **1.10. Recording of Checks**

Evidence of all pre-employment checks conducted will be stored on individual personal files with a record of the outcome entered and maintained by Human Resources on ESR.



## **1.11. Temporary/ Agency Workers**

Temporary workers should only be obtained through recruitment agencies approved by the Government Procurement Service. The recruitment agency is responsible for obtaining pre-employment checks on all workers in line with all the NHS Employment check standards.

## **2. Follow up for those who fail to satisfy the checking arrangements**

Individuals will not be able to commence employment with the organisation until satisfactory pre-employment checks have been received.

If unsatisfactory check(s) are received, the matter will be escalated to the a Appointing Officer/ Line Manager and the following processes will apply:

### **2.1. Right to Work and Identity Checks**

Failure by an applicant or employee to provide accurate information in regard to their eligibility to work in the UK or their identity checks will result in their immediate suspension from work without pay. The NHS Counter Fraud team and the Home Office will be informed and an investigation undertaken by the Appointing Officer/ Line Manager and Human Resources.

### **2.2. Employment History and Reference Checks**

In the event of unsatisfactory employment history or reference checks being received, the Appointing Officer/ Line Manager will be informed, enabling them to make a full review of the facts and circumstances and make a decision to recruit or withdraw the job offer.

### **2.3. Disclosure and Barring Service (DBS) Check**

In the event that a conviction or other information is contained on a disclosure, the appointing officer will be informed and with the support of Human Resources will make a decision, having considered all the relevant facts, as to whether it would be appropriate for the applicant to be recruited to the position. It may be necessary to meet with the individual to discuss this further as well as refer to other declarations the application may have made throughout the recruitment process, ie on the application form and at interview. Once all the facts and circumstances are determined, a decision must be made as to whether to recruit or withdraw the job offer. Please refer to Appendix 4.

### **2.4. Professional Registration and Qualification Checks**

In the event of unsatisfactory professional registration or qualification checks being received, the Appointing Officer/ Line Manager will be informed, enabling them to make a full review of the facts and circumstances and make a decision to recruit or withdraw the job offer. Please also refer to Appendix 3.

### **2.5. Occupational Health Check**

In the event of an unsuccessful occupational health check, the Appointing Officer/ Line Manager will be informed and with the support of Human Resources and Occupational Health will reassure themselves that all facts and options for reasonable adjustment on

the grounds of health have been considered, prior to any offer of employment being withdrawn.

The Appointing Officer/ Line Manager and Human Resources must confirm in writing the reasons for withdrawing the offer of employment and this will be kept on the recruitment file.

## RECRUITMENT AND RETENTION PREMIA

### 1. Definition

- 1.1. Recruitment and Retention Premia (RRP) is an additional payment to the basic pay of an individual post or specific group of posts.
- 1.2. Recruitment and Retention Premia may be paid in circumstances where market pressures would otherwise prevent the employer from being able to recruit and retain staff in sufficient numbers for the posts concerned at the normal salary for a job of that weight.
- 1.3. Recruitment and Retention Premia is a supplementary payment over and above the basic pay that the post holder receives by virtue of their position on their pay band, any high cost area supplements, or any payments for unsocial hours or on-call cover.
- 1.4. Recruitment and Retention Premia will apply to posts rather than to employees. Where an employee moves to a different post that does not attract a recruitment and retention premium, either within the same organisation or elsewhere in the NHS, their entitlement to any previous recruitment and retention premium will cease and pay protection will not apply.
- 1.5. Both long term and short term recruitment and retention premia will be expressed as cash lump sums and will be separately identifiable from basic pay, any high cost area supplement, and any other component of pay.
- 1.6. Any locally awarded recruitment and retention premium for a given post shall not normally exceed 30% of basic salary. It will be the responsibility of the organisation to ensure that any premium awarded locally do not normally result in payments in excess of this amount. In the event that, following review and subject to a 6 month notice period the recruitment and retention premia is withdrawn, pay protection arrangements will not apply.

### 2. Short Term Premia

- 2.1. Short term recruitment and retention premia will apply where the labour market conditions giving rise to recruitment and retention problems are expected to be short term and where the need for the premium is expected to disappear or reduce in the foreseeable future. Short term premia will normally be applied for a period of no more than two years.
- 2.2. Short term recruitment and retention premia:
  - May be awarded on a one off basis or for a fixed term
  - Will be regularly reviewed (not less than annually)
  - May be withdrawn, or have the value adjusted, subject to a notice period of six months
  - Will not be pensionable, or count for the purposes of overtime, unsocial hours payments or any other payments linked to basic pay

### **3. Long Term Premia**

3.1. Long term recruitment and retention premia will apply where the relevant labour market conditions are more deep rooted and the need for the premium is not expected to vary significantly in the foreseeable future.

3.2. Long term recruitment and retention premia:

- Will be awarded on a long term basis
- Will be regularly reviewed (not less than annually)
- May be awarded to new staff at a different value to that which applies to existing staff
- Will be pensionable and will count for the purposes of overtime, unsocial hours payments and any other payments linked to basic pay

### **4. Procedure**

4.1. A recruitment and retention premia may be awarded on either a short term or long term basis, determined by the principles outlined in the following paragraphs.

4.2. To ensure consistency in the application of payment of recruitment and retention premia the organisation will require approval by the Remuneration Committee before offering to an employee/candidate.

4.3. A record of all recruitment and retention premia being paid will be retained, and a review of all premia will take place at least annually.

4.4. The CCG may use premium in two ways, either through recruitment, or through a requirement to retain staff, based on market shortage or a specific skill set, both of these may be applied in a long or short term capacity.

4.5. Recruitment and retention premia will be considered in cases where it is proven that adjustments to non-pay benefits are unlikely to improve the situation and one or more of the following conditions apply:

- There are documented labour market shortages within a defined geographical area
- NHS employers locally have agreed jointly to pay supplements for designated posts and the organisation needs to remain competitive in the recruitment market for equivalent posts
- There is a competitive non NHS labour market where salary survey data indicates that enhancements to Agenda for Change evaluated pay rates would be required to attract and retain staff
- Where there is consistent data showing high patterns of turnover supported by exit interview data indicating a direct link to dissatisfaction with pay levels

4.6. If it is decided that the vacancy problem can be addressed most effectively only though payment of a recruitment and retention premium Remuneration Committee approval is required. The Remuneration Committee will consider whether the premium is short or long term.

- 4.7. Before consideration is given to payment of Recruitment and Retention premia to ensure retention of staff, management will ensure that non-pay benefits are sufficiently developed. Where possible local turnover rates should be compared with national rates. Regular analysis of exit interview data will be undertaken to assess how far pay is a factor in employee's decisions to leave the organisation.

## PROFESSIONAL REGISTRATION

### 1. Principles

- 1.1. In order to protect the public and ensure high standards of clinical practice it is a legal requirement that the organisation may only employ registered practitioners in qualified clinical positions.
- 1.2. Employees are responsible for maintaining their registration with their relevant professional body.
- 1.3. Individuals who are not directly employed by the organisation (eg Agency and Locum Workers) but who nevertheless are engaged in work that requires professional registration must also hold current registration. The organisation will ensure that there are processes in place to check the on-going registration of such workers.

### 2. Procedure

- 2.1. This policy must be read in conjunction with any checking professional registration procedures.

#### 2.2. Employees Responsibility

- 2.2.1. It is ultimately the responsibility of all employees who require professional registration to practice to ensure that they have the appropriate registration relevant to their employment/role. The employee must ensure that registration with their professional body remains current at all times and that they abide by their professional code of conduct.
- 2.2.2. Employees absent from the workplace, eg on secondment, career break, suspension, maternity or long term sick will still be required to maintain their professional registration.
- 2.2.3. It is the duty of the individual employee to organise and pay the registration fee within the requested time limit and in line with renewal dates. Registered Professionals going on holiday over the lapse period, or on long term sickness or away from the work place for other reasons e.g. secondment, must take action, in advance, to receive the appropriate cover. In exceptional circumstances it may not be possible to renew registration e.g. unforeseen illness within the timescale, for which the manager will use their discretion.
- 2.2.4. Employees/contractors must disclose to the organisation any conditions attached to their registration at the earliest available opportunity.
- 2.2.5. During the course of their employment employees must, on request by management or workforce service, provide evidence that their registration has been renewed in accordance with the procedures laid down.

- 2.2.6. All personal data, particularly name changes, must be communicated to both the line manager and the professional body to ensure accuracy of data. Failure to keep such details up to date will possibly leave the individual not receiving the appropriate reminder and thus the individual not being registered.
- 2.2.7. An individual in choosing not to register or allowing such registration to lapse would no longer be eligible to practice in that capacity and may be suspended from duty without pay as they are in breach of their contract. If after a maximum period of one month following expiry of registration the individual has failed to re-register, it will be assumed that the individual has broken their contract and their employment will automatically cease.
- 2.2.8. When employees take a career break, they remain an employee of the organisation. However, if the career break does not require them to maintain their professional registration, they will not be subject to the conditions within this policy in terms of failing to renew their registration. Once an individual employee returns to work all conditions/ responsibilities will apply.
- 2.2.9. Where a Professional holding an honorary contract with the organisation, chooses not to register or allows their registration to lapse, their honorary contract will be withdrawn.

### **2.3. Appointing Officer/ Line Manager Responsibility**

- 2.3.1. Where line managers engage agency workers they must use an agency from one of the agencies listed in the Government Procurement Service. It is part of the contract with the agency to ensure that their workforce is in a position to practice by having a current registration. Where employees are seconded into the organisation, their employer remains the organisation with whom they have a substantive contract. If employees are working within the organisation as part of a service level agreement, their employer remains the organisation with whom they have a substantive contract, and as such this organisation should be ensuring that their workforce's registration is current.
- 2.3.2. In all cases, as a point of good practice, line managers should check the registration of the agency worker described in the above paragraph on the appropriate website.
- 2.3.3. Line Managers who identify or who are informed of a lapsed registration must take immediate action. Immediate actions will include:
- Contacting the employee
  - Ensuring the employee is withdrawn from undertaking the duties of a qualified clinician or professional with immediate effect
  - Discussing options with the employee and Human Resources
  - Checking re-registration with the relevant regulatory body and receiving proof of the renewal and retaining evidence in the personal file
- 2.3.4. When considering action to be taken, Line Managers will take account of the following factors:
- Length of time since registration has lapsed

- Reasons put forward for non- renewal
- Whether the individual has knowingly continued to practice without registration and has failed to notify management
- Any previous occasions when the individual has allowed their registration to lapse
- Whether the individual has attempted to conceal the fact that their registration has lapsed

2.3.5. In consultation with Human Resources, the Line Manager should consider the following options:

- Allowing the individual to take annual leave or time owing until their registration is renewed within an agreed time frame
- Allowing the individual to take unpaid leave where no annual leave is available
- Suspension of the individual from duty without pay, invoking the disciplinary process
- Where feasible, the transfer of the individual member of staff to another area of work within the organisation that does not require registration

## **2.4. Human Resources Responsibility**

- 2.4.1. Human Resources will check current registrations of all new starters to ensure that it is valid for the purpose of the practitioner's employment.
- 2.4.2. Human Resources will ensure that the registration details are placed on the ESR system and will ensure the details are maintained.
- 2.4.3. Human Resources will check that all practitioners have renewed their registration and ensure that this is entered on the ESR system.
- 2.4.4. For those that who are due to renew their registration, Human Resources will contact the individual concerned, copying in the manager, informing them that their registration is due for renewal and that if it is not renewed by the renewal date they will not be eligible to practice in that capacity and may be suspended from duty without pay immediately as they are in breach of contract.
- 2.4.5. If after a maximum period of one month following the expiry of registration the individual has failed to notify Human Resources of their re-registration, there will be a final check after which it will be assumed that the individual has broken their contract and their employment will automatically cease. During this time there will obviously be discussions between Human Resources and the appropriate manager and every effort will be made to facilitate the member of staff to re-register within the timescales set out.



## DISCLOSURE OF CRIMINAL BACKGROUND AND RECRUITING EX-OFFENDERS

### 1. Principles

- 1.1. The organisation actively promotes equality of opportunity for all and welcomes applications from a wide range of candidates. It undertakes not to discriminate unfairly against any subject of a disclosure on the basis of conviction or other information received.
- 1.2. Disclosures are only requested after an assessment has indicated that it is proportionate and relevant to the post concerned. For those posts that require a disclosure the recruitment documentation will contain a statement indicating what level of disclosure will be required in the event of an individual being offered a position.
- 1.3. Human Resources will advise and guide the Appointing Officer/ Line Manager where a disclosure has been made.
- 1.4. The organisation undertakes to discuss any matters revealed in a disclosure with the person seeking employment before withdrawing a conditional offer of employment.
- 1.5. The organisation may conduct an interview to enable an open and measured discussion to take place regarding any offences or other matters that might be relevant to the position. Failure to reveal information that is directly relevant to the position sought could lead to the withdrawal of the offer of employment.
- 1.6. The organisation complies fully with the Disclosure and Barring Service (DBS) Code of Practice. Every individual who is subject to a disclosure will be made aware of this code of practice and a copy will be provided to all applicants.
- 1.7. Having a criminal record will not necessarily prohibit a potential employee from working with the organisation. This will depend on the nature of the position and the circumstances and background of the offence(s).
- 1.8. The organisation complies fully with its obligations under the Data Protection Act and other relevant legislation pertaining to the safe handling, use, storage, retention and disposal of disclosure information.
- 1.9. Access to disclosure information is strictly controlled and limited to those who are entitled to see it as part of their duties.
- 1.10. For record purposes only the organisation will keep the following information:
  - The name of the subject
  - The level of the disclosure required
  - The position for which the disclosure was required

- The unique reference number of the disclosure
  - Details of the recruitment decision taken
- 1.11. In accordance with section 124 of the Police Act 1997, disclosure information is only passed to those who are authorised to receive it in the course of their duties.
  - 1.12. Disclosure information is only used for the specific purposes for which it was requested and for which the applicant's full consent has been given.
  - 1.13. The organisation will comply with all recommendations from DBS on the correct use and safekeeping of the disclosure information.

## **2. Procedure**

- 2.1. Disclosure applications are processed by Human Resources using the DBS to assess applicant's suitability for positions of trust.
- 2.2. When recruiting for a vacancy, the Appointing Officer/ Line Manager needs to assess whether a DBS check is necessary and the level of disclosure is required. Advice from Human Resources should be sought as necessary.
- 2.3. Dependant on whether the role is eligible for a DBS disclosure, Human Resources will ensure appropriate inclusion in the application process.
- 2.4. The preferred candidate will be asked to complete a Self Declaration form in relation to any convictions they may hold as part of the pre-employment check process.
- 2.5. If the Self Declaration form and/ or the DBS Certificate contains information that may affect the appointment, Human Resources will discuss this with the Appointing Officer/ Line Manager and with the individual concerned where appropriate.
- 2.6. Where information contained on the Self Declaration form and/ or the DBS Certificate significantly impacts on a candidates ability to undertake the post for which they have been appointed, any offer of employment must be withdrawn.
- 2.7. The decision to withdraw an offer of employment must be confirmed both verbally and in writing to the candidate concerned.

## MANAGING PERSONAL RELATIONSHIPS AT WORK

### 1. Application

- 1.1. Job applicants will be required to declare on their application any personal relationships with employees of the organisation.
- 1.2. The aim is to protect all employees within the organisation in situations where a personal relationship exists, or develops, so that staff cannot be accused of a conflict of interest, bias or be the subject of allegations from other staff.
- 1.3. In the majority of situations where a line management relationship exists, the organisation will not support staff working together where they have a close personal relationship as described.

### 2. Personal Relationships

- 2.1. A personal relationship includes any relationship where a close family relationship exists for example, mother, father, daughter, son, sister, brother (and including step and in-laws) partner, ex-partner (including spouse or cohabitee), civil partner.
- 2.2. The scope of the term 'personal relationship' applies to prospective employees that have a relationship with a current member of the organisation's employees, or where a relationship starts during employment with the organisation.

### 3. Examples of Potential Conflicts of Interest/ Bias

- 3.1. Situations where a personal relationship may expose employees to conflict of interest or bias include but are not restricted to, the following:
  - Perceived or alleged breaches of probity
  - Unfair advantage/favouritism
  - Breach of confidence/confidentiality
  - Harassment or bullying
  - Employee relations issues
  - Any other issues perceived to be gained from the overlap of a personal and professional relationship

### 4. Personal Relationships between employees with no line management relationship

- 4.1. This policy does not automatically prevent employees or prospective employee who have a personal relationship (described in Section 2) from working together whilst employed by the organisation.
- 4.2. However, the existence of such a relationship must either be declared at the time of appointment/promotion or, if the relationship develops during their employment. Where there is a relationship this must be discussed with either the Line Manager

or if more appropriate with Human Resources. Such a declaration will be strictly confidential.

- 4.3. Employees may normally continue to work together in the same team or department where this is appropriate, providing there is no conflict of interest and/or no line management relationship.

**5. Personal relationship between staff with a line management relationship**

- 5.1. Where a personal relationship exists, a prospective employee will not be appointed into a post which results in a line management relationship.
- 5.2. Where a personal relationship is in existence or develops whilst working for the organisation, employees who are in a line management or supervisory relationship at work must not be involved in recruitment, selection, promotion, appraisal, pay or any other management activity or process involving the other employee.

## NHS Sheffield CCG Equality Impact Assessment

<b>Title of policy or service</b>	Recruitment and Selection Policy
<b>Name and role of officers completing the assessment</b>	HR Manager
<b>Date assessment completed</b>	January 2017

<b>1. Outline</b>	
<p><b>Give a brief summary of your policy or service</b></p> <ul style="list-style-type: none"> <li>• Aims</li> <li>• Objectives</li> <li>• Links to other policies, including partners, national or regional</li> </ul>	<p>This policy aims to demonstrate that the provision of effective recruitment and selection are recognised by NHS Sheffield Clinical Commissioning Group as an integral part of best employment practice. This policy aims to support Appointing Officers in providing a fair, consistent and effective approach to the recruitment of all employees in accordance with employment law and best practice. The application of this policy ensures that the organisation is fully compliant with the NHS Employment Check Standards and the Disclosure and Barring Service (DBS) codes of practice and undertakes to treat all applicants fairly. It is recognised that to achieve this, a high level of commitment at all levels within the organisation is required.</p>

## 2. Gathering of Information

This is the core of the analysis; what information do you have that indicates the policy or service might *impact on protected groups, with consideration of the General Equality Duty*.

	What key impact have you identified?			What action do you need to take to address these issues?	What difference will this make?
	Positive Impact	Neutral impact	Negative impact		
<b>Human rights</b>	✓				
<b>Age</b>	✓				
<b>Carers</b>	✓				
<b>Disability</b>	✓				
<b>Sex</b>	✓				
<b>Race</b>	✓				
<b>Religion or belief</b>	✓				
<b>Sexual orientation</b>	✓				
<b>Gender reassignment</b>	✓				
<b>Pregnancy and maternity</b>	✓				
<b>Marriage and civil partnership</b> (only eliminating discrimination)	✓				
<b>Other relevant group</b>					

Please provide details on the actions you need to take below.

<b>2. Action plan</b>				
<b>Issues identified</b>	<b>Actions required</b>	<b>How will you measure impact/progress</b>	<b>Timescale</b>	<b>Officer responsible</b>
None				

<b>3. Monitoring, Review and Publication</b>			
<b>When will the proposal be reviewed and by whom?</b>			
<b>Lead Officer</b>	<b>HR Manager</b>	<b>Review date:</b>	<b>January 2020</b>