²gether
Making life better

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NHS Foundation Trust **NHS**

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19th July 2019

Freedom of Information Request – Ref: FOI 075-1920

Thank you for your recent Freedom of Information request about the Trust's services with relation to patient ethnicities. Please find our response below.

1) The number of people seen by adult Mental Health Services in the latest year for which you have complete data, by ethnicity (specify which year please). If possible, please break this down further by gender and age.
Please see the attached supporting spreadsheet.

2) The number of people seen by adult Mental Health Services in the latest year for which you have complete data, by nationality. If possible, please break this down by gender and age.
Please see the attached supporting spreadsheet.

3) The number of people seen by adult Mental Health Services in the latest year for which you have complete data, by country of birth. If possible, please break this down by gender and age.
The Trust does not hold this information.

4) [If not provided an answers to Qs 1-3] the number of times Polish people used your Adult Mental Health Services in the latest year for which you have data? If possible, please break this down by gender and age.
The Trust does not hold this information.

5) The number of times a Polish interpreter was used within adult mental health services in the past year
The Trust does not routinely capture this information; however, we can confirm that in 2017/18 a Polish interpreter was used 208 times within the Trust. We are unable to confirm if this figure is representative of just adult services, or if it includes some children also.

6) The number of people for whom the Mental Health Act was used in the past year, broken down by Ethnicity, Nationality and/or Country of Birth
Please see the attached supporting spreadsheet.

7) The number of times the four most frequently used psychiatric diagnoses were used in the past year, broken down by Ethnicity, Nationality and/or Country of Birth
The Trust does not hold this information.

8) The number of people that received psychological therapies in the past year, broken down by Ethnicity, Nationality and/or Country of Birth
Please see the attached supporting spreadsheet.

9) Does your trust have a policy, programme or initiative that focuses on ethnicity/diversity/cultural competence/race inequality relating to:

a. The provision of adult mental health services? No.

b. Operational aspects of mental health services e.g. staffing / recruitment / support? Yes. Please see attached to this response the: Managing Diversity Policy, Promoting Dignity at Work Policy, and the Recruitment and Selection Policy.

If yes, please include the policy/policies in your response.*

10) What number of adult Polish people are in your catchment area?
The Trust does not hold this information.

11) What is the adult population of your catchment area?
The Trust does not hold this information.

Yours sincerely,

Francis Perrin

FRANCIS PERRIN
Trust Secretariat Support Officer
²gether NHS Foundation Trust

Report Title   FOI 075
Report Date Range   2018-19
Extract Date   17/07/2019
Data Source   2gnt41 outpatient_contact
Note
All data for 2018-19 financial year

1) The number of people seen by adult Mental Health Services in the latest year for which you have complete data, by ethnicity (specify which year please).
If possible, please break this down further by gender and age.

Row Labels	Under 18 Female	Male	Not specified	18 to 64 Female	Male	Not known	Not specified	Unknown	65 and over Female	Male	Grand Total
Any Other Group	1	1		17	14				3		36
Asian or Asian British				84	35						119
Asian or Asian British - Any other background	1	2	1	12	11				4	1	32
Asian or Asian British - Bangladeshi	5	4		4	8				1	1	23
Asian or Asian British - British	1			2	1				1		5
Asian or Asian British - Caribbean Asian				2							2
Asian or Asian British - East African Asian					1						1
Asian or Asian British - Indian	5	4		20	21				18	8	76
Asian or Asian British - Mixed Asian	1			2	4						7
Asian or Asian British - Other/Unspecified		1		1	2				1	1	6
Asian or Asian British - Pakistani	6	3		15	8				4	2	38
Asian or Asian British - Punjabi										1	1
Asian or Asian British - Sinhalese									1		1
Asian or Asian British - Sri Lanka		1		1	5					1	8
Black or Black British				51	27				1	2	81
Black or Black British - African	10	12		22	18				2		64
Black or Black British - Any other background	4	1		13	19					1	38
Black or Black British - British	1	1		3	3						8
Black or Black British - Caribbean	3	10		32	43				20	17	125
Black or Black British - Mixed									1		1
Black or Black British - Nigerian				1							1
Black or Black British - Other/Unspecified		1		1	3				1	2	8
Information not yet obtained				52	21				1	2	76
Mixed				91	45				2	3	141
Mixed - Any other mixed background	11	13		16	23				2		65
Mixed - Black and Asian	1										1
Mixed - Black and White	2			5	3						10
Mixed - Chinese and White					1						1
Mixed - Other/Unspecified		2		6	2				1		11
Mixed - White & Asian	20	20		43	52				12	6	153
Mixed - White & Black African	9	17		8	5						39
Mixed - White & Black Caribbean	21	34		42	22				1	1	121
Not Known	114	100		2518	1858		1	1	821	509	5922
Not Stated	55	73		598	492	2			70	41	1331
Other Ethnic Groups				23	10				2	1	36
Other Ethnic Groups - Any Other Group	2	2		11	13					1	29
Other Ethnic Groups - Arab		2			3						5
Other Ethnic Groups - Chinese	3	2		13	4				5	2	29
Other Ethnic Groups - Filipino					1						1
Other Ethnic Groups - Iranian		1		1	2				2		6
Other Ethnic Groups - Japanese					1						1
Other Ethnic Groups - Kurdish		1			2						3
Other Ethnic Groups - Latin American				2	1						3
Other Ethnic Groups - Malaysian				1							1
Other Ethnic Groups - Maur/SEyc/Mald/StHelen		1		2						2	5
Other Ethnic Groups - Moroccan					1						1
Other Ethnic Groups - North African					1						1
Other Ethnic Groups - Other Middle East	1	4			7				1		13
Other Ethnic Groups - South/Central American		1			2				1		4
Refused				1							1
White	7			4556	2451		3		353	190	7560
White - Albanian					1						1
White - All Republics of former USSR	2			6	2				1		11
White - Any other background	15	26		231	221			1	81	49	624
White - British	1755	1944	2	6611	5008		4		4432	3023	22779
White - English	12	12		328	271				448	303	1374
White - Greek				1	1				1		3
White - Greek Cypriot				2	1				1	1	5
White - Gypsy/Romany	1										1
White - Irish	4	6		22	22				39	35	128
White - Irish Traveller	1										1
White - Italian	2			2	2				15	13	34
White - Kosovan					1						1
White - Mixed White	3	2		4	4					1	14
White - Northern Irish				2	2				4	3	11
White - Other European	9	13		22	24				25	7	100
White - Other Republics of former Yugoslavia				2	3						5
White - Other/Unspecified	7	8		53	30				11	5	114
White - Polish	18	18		30	29				7	4	106
White - Scottish				5	4				17	12	38
White - Traveller	2			2	1						5
White - Turkish	1										1
White - Turkish Cypriot									1		1
White - Welsh		2		10	10				21	11	54
(blank)				97	63				43	27	230
Grand Total	2116	2345	3	15703	10946	2	8	2	6478	4289	41892

2) The number of people seen by adult Mental Health Services in the latest year for which you have complete data, by nationality. If possible, please break this down by gender and age.

Count of patient_num	Column Labels										Grand Total
	Under 18			18 to 64					65 and over		
Row Labels	Female	Male	Not specif	Female	Male	Not know	Not specif	Unknown	Female	Male	
Afghanistan		5			5						10
Albania					1						1
Anguilla									1		1
Australia	1			1	1				1	1	5
Austria				1					1		2
Bangladesh		2		3	1				1		7
Barbados										1	1
Brazil					1						1
British	4			1320	731	2	1		121	59	2238
British Indian Ocean Territory				4	1						5
Bulgaria				3					1		4
Cameroon				1							1
Canada				1	2						3
China	1			5					1	1	8
Congo		1									1
Congo, The Democratic Republic Of The					1						1
Cuba				1							1
Cyprus				1							1
Czech Republic				2	1						3
Ecuador					1						1
English	3			3015	1654		2		220	122	5016
Fiji				1						1	2
France				2	1				3	3	9
Germany									12	1	13
Ghana					1						1
Gibraltar									1		1
Greece				1					2	1	4
Honduras					1						1
Hong Kong	1										1
Hungary		2		3	4						9
Iceland				1							1
India	1	2		1	3				5	3	15
Indonesia				1							1
Iran, Islamic Republic Of				1					2		3
Iraq					1						1
Ireland				6	7				16	13	42
Irish				23	23				2		48
Italy				3	2				14	8	27
Jamaica	1	1			2				4	4	12
Kenya				2	1						3
Latvia	1	1		2	3				1		8
Lebanon		1									1
Lithuania		1		2	2				1		6
Malawi					1						1
Malta									1	1	2
Mauritania		1									1
Mauritius				2							2
Morocco					1						1
Nepal		1									1
Netherlands				2	2				3	2	9
New Zealand									1		1
Nigeria				1							1
Norway									1		1
Other	1			667	332		1		66	37	1104
Pakistan		2		2					2		6
Philippines				1							1
Poland	3	4		19	16				4	2	48
Portugal		2		4	6				4	1	17
Romania	1			3	4						8
Russian Federation		1									1
Saint Helena									1		1
Scottish				31	27				4	3	65
Singapore				1							1
Slovakia	1				3						4
Somalia					2						2
South Africa	1	3		1	3				1	3	12
Spain				2					3	2	7
Sri Lanka				1	3				1	1	6
Sweden				1	1				1		3
Switzerland									2		2
Tanzania, United Republic Of	1										1
Thailand				2							2
Trinidad And Tobago									1		1
Turkey					2						2
Uganda					1						1
Ukraine					1						1
United Arab Emirates										1	1
United Kingdom	466	592	1	3006	2448				2933	2060	11506
United States		1		3	3				3	1	11
Welsh				113	61				10	7	191
Zimbabwe					1					1	2
(blank)	1629	1722	2	7434	5577		4	2	3026	1949	21345
Grand Total	2116	2345	3	15703	10946	2	8	2	6478	4289	41892

6) The number of people for whom the Mental Health Act was used in the past year, broken down by Ethnicity, Nationality and/or Country of Birth

Note: a patient will be counted multiple times if they have different sections within the year

By Ethnicity

Row Labels	Section 17	Section 17	Section 2	Section 3	Section 37	Section 37	Section 4	Section 41	Section 42	Section 47	Section 48	Section 50	Section 50	Section 7	Grand Total
Any Other Group			4												4
Asian or Asian British - Any other background	1		2	1									1	1	6
Asian or Asian British - Bangladeshi	1	1		1											3
Asian or Asian British - British					1										1
Asian or Asian British - Indian	1		3	2											6
Asian or Asian British - Mixed Asian					1										1
Asian or Asian British - Pakistani			1		1				1						3
Asian or Asian British - Sri Lanka			1												1
Black or Black British - African	2	1	2	4	1										10
Black or Black British - Any other background			1		1										2
Black or Black British - British			1												1
Black or Black British - Caribbean	3	1	8	10	1	3		1	2					1	30
Black or Black British - Other/Unspecified	1			1											2
Mixed - Any other mixed background			5	2											7
Mixed - Black and White			1	2											3
Mixed - White & Asian	1		2	1								1			5
Mixed - White & Black African	1		1	2											4
Mixed - White & Black Caribbean	1	1	2	4					1			1			10
Not Known (Unable to Request)	1		6	3								1			11
Not Stated (Client Refused)			5	4											9
Not Stated (Client unable to Choose)			1												1
Other Ethnic Groups - Any Other Group	1			1											2
Other Ethnic Groups - Chinese			1											1	2
Other Ethnic Groups - Maur/SEyc/Mald/StHelen			1												1
Other Ethnic Groups - Other Middle East			1	1											2
White - Albanian			1												1
White - All Republics of former USSR	1			1											2
White - Any other background	10	2	15	22					1			2			52
White - British	69	16	393	388	8	9	1	4	7	3	2	50	19	9	978
White - English	5	1	33	40	1					1		3	2		86
White - Irish			4	3											7
White - Italian			1	1											2
White - Other European			8					1				1			10
White - Other/Unspecified			5	3								1			9
White - Polish	2		3	6	1										12
White - Scottish			1												1
White - Turkish Cypriot			1	1											2
White - Welsh			2												2
Grand Total	**101**	**23**	**515**	**505**	**11**	**17**	**2**	**5**	**12**	**4**	**2**	**60**	**22**	**12**	**1291**

By Nationality

Row Labels	Section 17	Section 17	Section 2	Section 3	Section 37	Section 37	Section 4	Section 41	Section 42	Section 47	Section 48	Section 50	Section 50	Section 7	Grand Total
Afghanistan			1	1											2
Albania			1												1
Bangladesh				1											1
British Indian Ocean Territory				1											1
Bulgaria			1	1											2
Canada				1											1
Congo, The Democratic Republic Of The			1	1											2
Cyprus				1											1
Ireland			3	4											7
Italy			2	1								1			4
Jamaica				1		1									2
Kenya	1	1		1											3
Latvia	1			1											2
Lithuania			1												1
Mauritius			1												1
Netherlands	1	1		1											3
Nigeria			1	1											2
Poland	3	1	4	7	1										16
Portugal			1												1
South Africa			2	2											4
Sri Lanka			2												2
United Kingdom	66	12	251	292	8	9		3	5	3	2	37	11	4	703
United States			2	1											3
Zimbabwe			1	1											2
(blank)	29	8	240	185	2	7	2	2	7	1		22	11	8	524
Grand Total	**101**	**23**	**515**	**505**	**11**	**17**	**2**	**5**	**12**	**4**	**2**	**60**	**22**	**12**	**1291**

8) The number of people that received psychological therapies in the past year, broken down by Ethnicity, Nationality and/or Country of Birth
Both complex/community therapy and IAPT therapy

By Ethnicity   **By Nationality**

Note: this does not include any activity from the Herefordshire Complex Psychological Intervention services as the team is embeded within the recovery team.
Teams included: Gloucestershire IAPT, Gloucestershire Complex Psychological Intervention services, Herefordshire IAPT

Row Labels	Number of Patients
Any Other Group	17
Asian or Asian British	119
Asian or Asian British - Any other background	7
Asian or Asian British - Bangladeshi	1
Asian or Asian British - British	3
Asian or Asian British - Caribbean Asian	2
Asian or Asian British - Indian	13
Asian or Asian British - Mixed Asian	2
Asian or Asian British - Other/Unspecified	1
Asian or Asian British - Pakistani	11
Asian or Asian British - Sri Lanka	1
Black or Black British	81
Black or Black British - African	7
Black or Black British - Any other background	4
Black or Black British - British	2
Black or Black British - Caribbean	20
Black or Black British - Other/Unspecified	2
Information not yet obtained	54
Mixed	134
Mixed - Any other mixed background	10
Mixed - Black and White	4
Mixed - Chinese and White	1
Mixed - Other/Unspecified	2
Mixed - White & Asian	28
Mixed - White & Black African	5
Mixed - White & Black Caribbean	26
Not Known	448
Not Known (Not Requested)	1065
Not Known (Unable to Request)	1292
Not Stated	122
Not Stated (Client Refused)	140
Not Stated (Client unable to Choose)	11
Not Stated (Not Requested)	527
Other Ethnic Groups	34
Other Ethnic Groups - Any Other Group	7
Other Ethnic Groups - Arab	2
Other Ethnic Groups - Chinese	3
Other Ethnic Groups - Iranian	1
Other Ethnic Groups - Latin American	2
Other Ethnic Groups - North African	1
White	7287
White - All Republics of former USSR	3
White - Any other background	160
White - British	4881
White - English	234
White - Greek	1
White - Irish	21
White - Italian	1
White - Mixed White	2
White - Northern Irish	1
White - Other European	9
White - Other Republics of former Yugoslavia	2
White - Other/Unspecified	41
White - Polish	13
White - Scottish	4
White - Welsh	12
(blank)	220
White - Traveller	2
Grand Total	17106

Row Labels	Number of Patients
Australia	1
Brazil	1
British	2129
Cameroon	1
Canada	1
China	1
Cyprus	1
Czech Republic	2
English	4837
Fiji	1
France	1
Honduras	1
Hungary	1
India	1
Iran, Islamic Republic Of	1
Ireland	4
Irish	46
Italy	2
Kenya	1
Latvia	1
Malawi	1
Other	917
Pakistan	2
Philippines	1
Poland	9
Portugal	4
Romania	1
Scottish	62
Slovakia	2
South Africa	2
Spain	1
Sri Lanka	2
United Kingdom	1771
Welsh	186
(blank)	7106
Lithuania	1
Sweden	1
British Indian Ocean Territory	1
United States	1
Ecuador	1
Grand Total	17106

MANAGING DIVERSITY POLICY

Version:	4
Consultation:	JNCC Workforce OD Committee
Ratified by:	Director of Organisational Development Notification to Delivery Committee
Date ratified:	7th October 2015
Name of originator/author:	Carol Sparks
Date issued:	October 2015
Review date:	October 2018
Scope	All Trust Employees

Version History

Version	Date	Reason for Change
3	2011	
4	2015	Revised Trust template and updated content

Table of Contents

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1.   Policy Statement

1.1   This policy summarises the aims and intentions of the Trust and describes the value that it places on diversity in the delivery of our services and the support for our staff. It serves to demonstrate that diversity is central to each individual, an integral part of the management of staff, and delivery of services.

2.   Introduction and Context

2.1   This policy has been updated in line with and is compliant with the Equality Act 2010. Therefore the principles which underpin this policy are:
- to build a workforce that is valued and where its diversity reflects the communities it serves, enabling the delivery of the quality healthcare
- to develop and implement fair and non-discriminatory systems for recruiting, developing and promoting people irrespective of protected characteristics, trade union membership or political affiliation
- to enable every employee in the Trust to achieve his or her potential in an environment characterised by dignity and mutual respect
- to support individual diversity and enable diversity to be viewed positively, to recognise that everyone is different, valuing the unique contribution that individual experience, knowledge and skills can make
- to continue to build and develop a working environment which respects individuals' responsibilities, their wish to balance work and personal life with the need to provide inclusive and accessible services
- to promote a culture where all staff value and respect the diversity of those who use and have contact with the services provided by the Trust
- to deliver socially inclusive services, reducing artificial or perceived barriers to access
- providing services which are responsive to the different and diverse needs of the community it serves.

3.   Purpose

3.1   This policy sets out a framework for the Trust to develop and maintain a culture which enhances the contribution from all employees to deliver responsive and quality services. It supports the Trust's aim to be an 'employer of choice'.

3.2   This policy summarises and set out the Trust's responsibilities and commitments in respect of current statutory requirements, national NHS initiatives, and Trust activities.

4.   Scope

4.1   This policy applies to all staff including those employed on temporary or bank contracts.

5.   Duties

5.1   Chair and Trust Board will:
- ensure that diversity is integrated into all Trust business, in both service delivery and in treatment of staff.

5.2   The Chief Executive will:
- ensure that the Trust applies the principles of managing diversity to all its operations and demonstrate a commitment to managing diversity
- ensure that the commitment from the Trust to managing diversity is communicated to all employees of the Trust
- lead by example, developing and promoting a values based organisational culture that is supportive of the benefits of managing diversity.

5.3   The Director of Organisational Development will:
- ensure that Board members are trained appropriately in managing diversity
- ensure areas identified from diversity action plans which require improvement are addressed
- ensure that all human resources policies, practices and procedures are consistent with legislative requirements and best practice relating to workplace diversity
- ensure that access to all training and development programmes delivered by the Trust are is compliant with this policy and equality and diversity legislation
- ensure that training and development programmes have diversity appropriately integrated into the content.

5.4   The Director of Organisational Development in collaboration with the Director of Integration and Engagement will:
- ensure that staff have access to appropriate equality and diversity training that meets both individual and service needs, and can be tailored to meet specific service requirements.

5.5   Responsibility for the development and review of this document lies with the Director of Organisational Development. This responsibility may be delegated to a subordinate. The policy requires ratification by the Joint Negotiating and Consultative Committee (JNCC) and will be reviewed as determined by changes in legislation or Department of Health guidance or every three years. The review date may be extended where the policy does not require change on the due date.

5.6   The Workforce and Organisational Development Committee will:
- oversee the work undertaken to meet legislative requirements relating to equality and diversity, assure itself that employment strategies, policies and procedures are progressive and meet best practice, ensure that there are Trust processes e.g. equality impact assessments available for use to inform and influence service development and delivery
- recommend action and monitor progress towards national or local equality and diversity objectives.

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5.7   Managers are responsible for:
- ensuring that this policy is communicated to all existing staff, and to new staff on their commencement
- promoting a professional and positive work environment, and in doing so ensure employees' rights to pursue a career with dignity
- raising awareness of diversity and the principles of equality of opportunity, acting as a role model for others, and developing personal skills in order to handle issues relating to discrimination and harassment
- directly working with individuals to prevent harassment and discrimination in their work area, and ensuring that any issues arising are managed in accordance with the Trust's procedure for 'Promoting Dignity at Work'
- ensuring that their staff know how to and can contact a 'Dignity at Work Officer' in the event that they experience bullying or harassment or become aware of bullying and harassment in the workplace
- ensuring that the development and delivery of services appropriately includes the views of service users and carers and that equality impact assessments are carried out as appropriate.

5.8   All employees are responsible for:
- maintaining a professional working environment, treating colleagues, volunteers, service users and carers with respect
- complying with and promoting Trust policies and procedures with regard to managing diversity, and appropriately using Trust policies and procedures to raise any concerns related to diversity
- being aware of their responsibilities and reporting inappropriate behaviour and raising any incidents of bullying and harassment to an appropriate manager.

5.9   HR Managers are responsible for providing advice and guidance to managers and individual members of staff in the application of this policy, and for signposting managers and staff to the Trust's Dignity at Work Policy and Procedure and other forms for support as necessary.

6.   Definitions[1]

6.1   Disability – a disabled person is described in the Equality Act 2010 as one who has a physical or mental impairment which has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.

6.2   Diversity - is about recognising, valuing and taking account of people's different backgrounds, knowledge, skills, and experiences, and encouraging and using those differences to create a productive and effective workforce.

6.3   Ethnicity – a strict definition of an ethnic group is a group regarded as a distinct community by virtue of certain essential characteristics – a shared history which distinguishes it from other groups and a cultural tradition of its own. However, it has come to have a broader meaning and the expression 'ethnic monitoring' is used in reference to groups defined by colour, race or national origin as well.

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[1] ACAS – Delivering equality and diversity September 2010
Managing Diversity Policy 2015

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6.4   Gender - the word 'gender' is often used in place of the word 'sex' in equality issues. 'Gender' does not appear in legislation (except for 'gender re-assignment' – see below) but 'sex discrimination' and 'gender discrimination' are generally interchangeable.

6.5   Gender Reassignment - is a personal, social, and sometimes medical, process by which a person's gender presentation (the way they appear to others) is changed. Not all transsexual people undergo medical supervision to change their gender. People who decide to live in the gender opposite to that assigned at birth, but do not undergo any medical procedures, are protected from discrimination under the Equality Act 2010.

6.6   Harassment is behaviour which is unwelcome or unacceptable. Where such behaviour results in the creation of a stressful or intimidating environment for the victim, this amounts to harassment. It can consist of verbal abuse, racist jokes, insensitive comments, leering, physical contact, unwanted sexual advances, ridicule or isolation.

6.7   Protected characteristics - a protected characteristic is a group which is protected from discrimination under equality legislation. The Equality Act 2010 covers nine protected characteristics: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

6.8   Sexual orientation – is whether a person is attracted to people of their own sex, the opposite sex or both sexes. Assumptions and perceptions of a person's sexual orientation are also covered by law.

6.9   Transsexual is an adjective used to describe people who have such a powerful sense of discomfort with the gender of their body and subsequent social role – a condition called gender dysphoria – that they undertake a personal, social, and sometimes medical, transition to live in the gender identity of their personal conviction.

6.10   Victimisation - if a person has made or is making an accusation of discrimination in good faith, it is unlawful to discriminate against them for having done so, or because they intend to do so or it is suspected that they intend to do so.

Other

6.11   Statutory requirements are the legal requirements to which the Trust has to adhere and are as set out in relevant Acts. These set the framework for employers and therefore outline the minimum standards for the Trust. To not meet the statutory requirements leaves the Trust at risk of prosecution.

6.12   Codes of Practice describe how the Equality and Human Rights Commission expect the statutory requirements to be implemented in the workplace and provide guidance to a range of employers. These are also used to 'benchmark' the actions of an employer.

MINDFUL
EMPLOYER

7. Benefits of having a Diversity Policy

7.1 The Trust recognises that building a culture which values and respects difference will bring significant benefits to the Trust and to staff:

- Services will be developed which reflect the views and differing needs of service users and carers
- Services will increasingly be socially inclusive
- Artificial barriers or perceptions of barriers to the delivery of services will be removed or reduced.
- The Trust will be able to improve its communication and engagement with the community it services and improve its response to their needs
- The Trust will be able to actively seek out opportunities for developing service user and carer forums, ensuring that our service users and carers are informed about, included in, are consulted on and can influence the delivery of our services.
- The environment for those individuals who access services and those who support those who access services will be improved as the Trust responds to feedback
- The Trust will be compliant with legislation and meet employment 'best practice'
- It will facilitate the creation of a flexible workforce, and enhance the continued development of the workforce
- The ability of the Trust to recruit individuals with the right skills to deliver high quality services will be increased
- Staff attendance can be improved as sickness absence reduces
- The performance of staff can be improved as performance issues are reduced
- Employment practices will be developed to be socially inclusive
- It will facilitate the identification of new ideas from individuals utilising their diverse background, and lead to the consideration and implementation of different approaches both for the delivery of services and employment practices
- The working environment for staff will be improved
- Key skills and experience of individuals will be retained and developed
- The work life balance of staff will be improved
- It will promote and support individuals to reach their full potential.

7.2 The Trust's values influence how we work as an organisation. Our name indicates how we plan to work – together: with our Governors, our members, our services users and carers, our staff, partners and our commissioners. Our core values help us challenge one another and are consistent with the principles of managing diversity. Our values are:

Seeing from a service user perspective
Excelling and improving
Responsive
Valuing and respectful
Inclusive, open and honest
Can Do
Efficient, effective, economic and equitable

8. Commitments

8.1 The Trust is committed to being involved in a range of external initiatives which support the principles outlined in this document. This includes the MINDFUL EMPLOYER initiative which is designed and led by employers, aims to increase awareness of mental ill health and provides information and support for employers in the recruitment and retention of staff. MINDFUL EMPLOYER® is a Registered Trade Mark of Devon Partnership NHS Trust. The Trust is a signatory to the Mindful Employer Charter.

8.2 The Trust actively promotes social inclusion and leads on social inclusion within Gloucestershire through working with a range of public, voluntary and community organisations all of whom are committed to deliver on an agreed action plan.

8.3 The Trust is committed to delivering its vision for a patient centred, non-discriminatory care pathway model. The Trust will actively engage with staff, stakeholders, service users and carers to achieve this.

8.4 The Trust is committed to ensuring that all staff have access to diversity training and will continue to embed this training into the organisation to ensure staff have the competencies and knowledge to deliver our services.

8.5 The involvement of service users and carers in the recruitment and selection of Trust staff will be supported and encouraged across the organisation.

8.6 Pathways into work will be developed for people who may otherwise face barriers to employment. These barriers may arise because people have one or more protected characteristic or may have experienced mental ill health or have a learning disability. This approach forms part of the Trust's aim to be an employer of choice which is in keeping with the Trust's commitment to social inclusion.

8.7 Trust is a user of the 'Positive about Disabled People' disability symbol. This means the Trust is committed to employing disabled people and will:
- Interview all applicants with a disability who meet the minimum criteria for a job vacancy and consider them on their abilities
- Make every effort when employees become disabled to support them to retain employment with the Trust
- Take action to ensure all employees develop appropriate awareness to make our commitments work.

9. Process for Monitoring Compliance

9.1 The profile of the workforce will be analysed annually and published through the HR Equalities Report. The report will be presented to the Workforce and Organisational Development Committee and the Executive Committee or other committees as deemed appropriate. When ratified the report will be published on the Trust website. This report will provide a profile of the Trust's workforce using as a minimum the statutory equality indicators and will offer recommendations to address any specific gaps or areas of concern which are identified. Where necessary these recommendations can trigger a review of this policy. In addition the policy will be

reviewed after 3 years or earlier if there are changes to legislation which has an impact upon the content.

9.2 The Trust will annually monitor staff responses to the annual Staff Attitude Survey (or any other staff survey) which includes a number of diversity indicators, and this will be reported to relevant Trust committees with a supporting action to address issues identified.

10. Equality Impact Assessment

10.1 This policy has been equality impact assessed in accordance with the Trust's local arrangements for this process which is compliant with the requirements of the Equality Act 2010.

MINDFUL EMPLOYER

Appendix A - Associated documents

Adoption Leave and Pay Policy and Procedure

Career Breaks Policy and Procedure

'Equality Schemes' and action plans

Flexible Working Procedure and Guidelines

Job Share Policy and Procedure

Paternity Leave Policy

Pre and Post Employment Checks (Safer Recruitment) Policy and Procedural Guidelines

Pre and Post Employment Guidelines

Promoting Dignity at Work Policy, Procedure and Guidelines

Procedure for the Recruitment of Unpaid Volunteers

Recruitment and Selection Policy

Retirement and Long Service Awards Guidelines and Procedure

Service Users and Carers Involvement in Recruitment Policy and Procedure

Special Leave Policy and Procedure

Time off for Civic and Public Duties Policy and Procedure

This list is indicative only

Promoting Dignity at Work
Policy, Procedure & Guidelines

Version:	6.1
Consultation:	JNCC
Ratified by:	JNCC Notification to Delivery Committee
Date ratified:	21st January 2016
Name of originator/author:	Nick Grubb, Assistant HR Director
Date issued:	21st January 2016
Review date:	20th January 2019
Audience	All staff and service users

Version	Date	Reason for Change
5	July 2012	Updated to include reference to incidents being recorded on Datix
6	July 2015	Review and update policy
7	August 2016	Additional references to support for unwelcome behaviour outside work.

Table of Contents

1. Policy statement

1.1 The Trust is committed to treating all staff fairly, equitably and with respect. The Trust's Promoting Dignity at Work Policy, Procedure & Guidelines, has been revised to take account of new legislation, best practice and lessons learned from issues that have arisen since the original policy was adopted in 2002.

2. Introduction

2.1 The Trust recognises that harassment and bullying behaviours create an intimidating and unpleasant atmosphere at work, which can impact on the wellbeing of staff and on service delivery. The Trust is committed to a working environment where individuals are able to conduct their duties without interference from bullying or harassment. All staff should feel able to report incidents of harassment in the knowledge that complaints will be dealt with promptly, sensitively and in confidence.

All forms of bullying and harassment are unacceptable and will not be tolerated by the Trust. This procedure applies to staff at all levels, regardless of their status.

3. Purpose

3.1 This procedure provides individuals or groups with a mechanism to raise and be supported to address issues of, or related to, harassment and bullying at work. It also enables managers and the Trust as the employer to take positive action and set acceptable standards in the workplace.

4. Scope

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

4.2 Where someone employed by another organisation makes an allegation of harassment against an employee of the Trust, this policy and procedure will apply.

4.3 If a Trust employee makes an allegation of harassment against an employee of another organisation, the issues will be raised with the other organisation and there may be circumstances where it is appropriate to jointly agree the policy and procedure to be used to address allegations. If this is the case this will be agreed jointly between respective employing organisations.

4.4 Where harassment occurs by a service user to a staff member or another service user there may be occasions where due to current mental state this is not challenged immediately. Information relating to the behaviour will be documented and when clinically indicated, the individual should be challenged about their harassment. The victim should be offered an explanation as to why the behaviour was not challenged at the time. If harassment is witnessed by others there should be an explicit statement to the witnesses from the location's manager that the Trust does not tolerate harassment and that steps will be taken to address the issue with the perpetrator. All such incidents should be recorded in RiO and Datix. Further advice on dealing with this kind of behaviour can be obtained from the trust's Local Security management Specialist.

4.5 If a service user or member of the public, such as a visiting relative, is subject to harassment then the line manager should take appropriate actions based on the principles outlined in this policy.

4.6   The Trust also recognises that some members of staff may be victims of domestic abuse. Whilst this is not strictly a Dignity at Work issue, it does constitute a form of harassment and the Trust would of course wish to support staff who unfortunately find themselves in this situation. The Trust recognises the impact this behaviour can have on an individual's health and wellbeing. Colleagues can access support from the Staff Counselling service, access through Working Well

4.7   Advice and guidance is also available from the Trust's Local Security Management Specialist for staff who may be the subject of stalking, harassment or coercive control.

5.   Context

5.1   This policy and procedure supports the Trust in meeting its duties and responsibilities as an employer to protect employees from discrimination and harassment and is compliant with the Equality Act 2010.

5.2   The policy also supports the Trust's Staff Charter **(Appendix A)** which states that colleagues can expect:

- *An environment free from discrimination and harassment, my contribution is valued and I am protected from bullying or violence.*

The Staff Charter also states that the Trust expects from the employee:

- *To value differences and individuality, while showing respect to colleagues, service users, carer sand volunteers for their contribution*

5.3   The policy also reflects the rights of employees highlighted in chapter 4a of the NHS constitution.

5.4   Breach of contract claims may also be made against employers if they fail to comply with their obligation of mutual trust and confidence, or fail to meet their duty of care under Health and Safety Legislation. Additionally harassment can be a crime under the Criminal Justice and Public Order Act 1994 and the Protection from Harassment Act 1997.

6.   Roles and Responsibilities

6.1   Everyone has a role to play in ensuring their behaviour reflects the Trust's values. All members of staff are responsible for supporting this policy to ensure the working environment is free from bullying, harassment, victimisation and discrimination.

6.1.1 Managers

Managers are responsible for:

- setting and maintaining appropriate workplace standards.
- ensuring the working environment is free from bullying, harassment, discrimination and victimisation and that all staff are treated equally, fairly and with respect.
- challenging unacceptable behaviour. Managers should of course also be mindful of how their own behaviour and actions are perceived, no matter how well intentioned.

- taking complaints of unacceptable behaviour seriously, dealing with them promptly and appropriately, seeking to resolve issues at the earliest possible stage.
- supporting members of staff who may be experiencing inappropriate behaviour, providing them with the time to discuss issues with Dignity at Work Officers, trade union representatives, HR and any other support services available to them in order to seek resolution.
- ensuring that the complainant is not victimised for raising matters.

6.1.2 Employees

Employees are equally responsible for behaving in a manner consistent with the Trust's values. Employees are expected:

- to treat each other with dignity and respect
- not to bully or harass other members of staff or collude with others to bully, harass, victimise or discriminate against.
- to have a responsibility to report unacceptable behaviour through appropriate channels.
- to seek to resolve issues at the earliest possible stage

6.1.3 Human Resources

The Trust lead for this policy will be the Assistant HR Director- Engagement.

Members of the HR team will provide advice, guidance and support with the application of this policy.

6.1.4 Trade unions and staff associations (Staff side)

Staff side colleagues will work in partnership with trust management to eliminate all forms of bullying and harassment at work and can play an important role in resolving issues at the earliest stage.

Staff side may advise, accompany and/or represent their members at any formal meeting outlined in this policy. Alternatively, if the employee is not a member of a trade union or staff association they may be accompanied by a colleague who must be an employee of the trust.

6.1.5 Dignity at Work Officers

The Dignity at Work Officer is someone who has the skills, understanding and empathy that makes them approachable to other staff. They are knowledgeable about the Dignity at Work policy and supporting procedures. This is an unpaid role, carried out in addition to their normal duties. Their role is to provide support and guidance to any member of staff who feels they are the recipient of bullying or harassment at work. The Dignity at Work officer provides unbiased and confidential independent advice regarding the options available and to try to help the individual see how to resolve the situation.

7. Speak in Confidence

7.1 Speak in Confidence is a web based email system enabling a member of staff to have a confidential dialogue with a manager of their choice (selected from a list of participating managers). The manager will seek to assist the member of staff to resolve the issue with sound advice and guidance. Speak in Confidence can provide a similar function to that of the Dignity at Work officer.

8. Definitions

8.1 **Harassment** is defined by the Equality Act 2010 as 'unwanted conduct related to a relevant protected characteristic, which has the purpose or effect of violating and individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual'.

The relevant protected characteristics are age, disability, gender, gender reassignment, race, religion or belief and sexual orientation.

Employees can raise concerns regarding behaviour they find offensive even if they are not the recipient of the offensive behaviour.

8.2 **Bullying** is characterised as offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power through means that undermine, humiliate, denigrate or injure the recipient.

8.3 **Examples of inappropriate behaviour**

Examples of inappropriate behaviour could include:

- Threatening behaviour, both verbal and physical
- Spreading malicious rumours or making malicious allegations
- Undervaluing a colleague's contribution, placing unreasonable demands on and/or over-monitoring a colleagues performance
- Unfair treatment
- Overbearing supervision or other misuse of power or position
- Making unfounded threats about job security
- Excluding colleagues by talking solely to third parties to isolate another
- Unwelcome sexual advances
- Persistent criticism
- Ridiculing or demeaning a person, team or group
- Unwanted physical contact

This list is not exhaustive.

Behaviour that is viewed as bullying or harassing can emanate from misunderstandings or lack of awareness or could be deliberate and malicious. Either way, this behaviour left unchecked or mishandled may result in poor morale, loss of respect and goodwill, poor performance, reduced productivity, absenteeism, resignations and reputational damage.it is therefore in the interests of everyone that we promote and maintain a healthy, safe and fair working environment.

9.   Firm but fair

9.1   It is important that we recognise the difference between firm, fair management and behaviour that is bullying or harassing in nature. It is important that managers and supervisors can carry out their duties without the threat of malicious or vexatious complaints. It is important to remember that line managers and supervisors have a responsibility to ensure staff perform to an acceptable standard and it is entirely reasonable to expect a manager or supervisor to monitor the behaviour and performance of their staff in an appropriate and justifiable manner.

9.2   Although procedures can sometimes be difficult for the staff involved, carrying out these actions in themselves do not constitute bullying or harassment. The difference lies in the way the manager or supervisor carries out these duties and misuse or abuse of these behaviours may constitute bullying or harassment.

9.3   It is recognised that differing perceptions sometimes make it difficult to for individuals to differentiate between firm, fair management and bullying and harassment.

10.   What course of action?

10.1   It is always the objective to resolve complaints about inappropriate or unacceptable behaviour at the lowest and most informal level.

10.2   Often people are not aware that their behaviour is unwelcome and in informal discussion can lead to greater insight and understanding leading to agreement that the behaviour will cease. The employee who is the recipient of this behaviour may choose to approach the person themselves to discuss the behaviour. However it is accepted that some people may find this approach difficult so an informal resolution could be achieved through dialogue with a manager, trade union representative or HR. In addition the Trust has a number of Dignity at Work officers, the Staff Counselling service, Working Well and the Speak in Confidence system to provide advice and support.

11.   Informal Stage

11.1   At this stage there are a number of options that can be explored by a member of staff who feel they have been the subject of bullying or harassment by a colleague, manager or supervisor.

11.2   The employee who is the recipient of this behaviour may choose to approach the person themselves to discuss the behaviour. However before taking any action, the individual may wish to seek advice from a Dignity at Work officer who will be able to advise on a range of options. Contact details are available on 2getherNet, the Trust's intranet site.

11.3   It is accepted that some people may find approaching the person in question difficult In addition to the Dignity at Work officers, there are other means of support available such as their manager, representatives of their trade union or staff association, HR, the Staff Counselling service, Working Well and the Speak in Confidence system to provide advice and support.

11.4   If the unwanted behaviour persists or if the individual wishes to take the matter further, they should raise the issue with their manager. If however their manager is the alleged harasser, they should speak to another manager or an HR manager

11.5   At this stage, the appropriate manager will try to informally resolve the issues using a range of options including speaking directly to the alleged harasser. It may prove beneficial for the manager to bring the parties together for a facilitated conversation. The manager will establish the facts of the issue and keep a written record of the meeting. If the complaint is against another manager or someone from a different department HR should be contacted.

12.   Facilitated Conversations

12.1   A facilitated conversation may take place at an early informal stage of resolution. The purpose of such a meeting is to address concerns raised with the relevant members of staff and to understand the situation from the perspective of those involved. The meeting will also explore the impact of the concerns on those involved and where appropriate, upon the service. The intended outcome would be a realistic solution accepted by all parties.

12.2   The facilitating manager will meet with the involved parties separately to explain the purpose of the meeting. The facilitating manager, supported by an HR manager will then bring the parties together giving each person in turn their opportunity to explain their concerns to ascertain the facts and to discuss ways of resolving the issue. The facilitating manager will promote a shared resolution and ensure all parties understand the standards of behaviour and performance that are expected of them. The manager will then set out their expectations in writing to each party.

12.3   It is expected that a facilitated meeting will have taken place before any formal investigation takes place. All parties are expected to take part unless there are exceptional circumstances for not doing so. Refusal to take part may prevent an informal resolution and may result in the manager implementing an alternative resolution.

13.   Mediation

13.1   It is accepted that there are occasions when individuals may not be able to resolve things themselves. The Trust's Mediation Scheme is one other method of supporting all parties with a structured approach to assist with finding a resolution.

13.2   Full details of how mediation works can be found at **Appendix B**. Briefly it is an informal means of resolving differences and difficulties in working relationships. Through the Trust's trained mediators, the process aims to support individuals who feel they are being harassed or bullied to resolve issues with the alleged perpetrator at an early stage. It is a confidential voluntary process co-ordinated through HR.

13.3   Individuals who believe mediation may be an appropriate process should contact a member of the HR team or a Dignity at Work officer who will assess if mediation is appropriate. Following this assessment the HR manager or DAW officer will ask the alleged harasser whether or not they are willing to participate in the process. The process will only continue if all parties agree to participate fully. Both parties must formally sign up to the process and can jointly sign up to any agreements reached. **NOTE: Care should be taken not to represent facilitated meetings or other local attempts at resolution as mediation.**

14.   Formal Procedure

14.1   Where the informal procedure has been exhausted or the member of staff does not agree to try to resolve the issues informally, the individual should make a formal written complaint to their manager (or second line manager if their manager is the alleged harasser).

14.2   If a member of staff submits a formal complaint without first having attempted to resolve matters informally including taking part in a facilitated meeting, the manager receiving the complaint may suggest supporting them to try an informal resolution. If the complainant is clear they do not want to do this, the manager will consider whether the complaint will be formally investigated. In some circumstances the individual may request that the complaint be investigated formally. The manager will give consideration to whether there are sufficient grounds to instigate a formal investigation.

14.3   In certain circumstances, the Trust may take a view that allegations made are so serious that a formal investigation will be carried out whether or not the complainant wishes, as part of the Trust's duty of care to its entire staff.

14.4   The written complaint should contain the following details:

- Clear and specific allegation against the named person(s)
- Where possible, dates, times and witnesses to any incidents
- Relevant documentary evidence
- Details of any informal action taken to resolve the issues.

14.5   Any formal investigation will be carried out in accordance with the principles of the Trust's Disciplinary Policy.

14.6   It is recognised the need to investigate and resolve cases of bullying and harassment in a timely manner to minimise potential distress to all concerned parties. However by their very nature, cases such as this can be complicated and should be handled thoroughly with great sensitivity so that full consideration is given to the issues.

14.7   Upon completion, the investigation report will be presented to the commissioning manager making recommendations on what actions should be taken including:

- No further action as there is no evidence to substantiate the allegations
- Taking informal action such as appropriate training
- Proceeding to a full disciplinary hearing as the investigation has established evidence of possible misconduct

14.8   Where a full disciplinary hearing has been recommended it will be convened in accordance with the Trust's Disciplinary policy.

14.9   If the investigation does not lead to a full disciplinary hearing, the commissioning manager can consider releasing the report:

- In its entirety
- As a summary with individualised witness statements as appendices
- As a summary without individualise witness statements
- As a summary with anonymised witness statements

14.10 The commissioning manager may decide that the report will not be released at all. In this case the manager should explain and document the reasons for not doing so to all parties.

15. Appeal against the outcome

15.1 If a member of staff is not satisfied with the actions confirmed to be taken following the bullying and harassment investigation, they can appeal in writing to the Director of Organisational Development in accordance with the Trust's Generic Appeals Procedure.

16. Ownership and Consultation

16.1 Responsibility for the development and review of this document lies with the Director of Organisational Development. This responsibility may be delegated to a subordinate.

17. Ratification details

17.1 This document will be ratified by the Joint Negotiating and Consultative Committee.

17.2 The Director of Organisational Development will be responsible for ratifying this policy and its related procedures.

18. Release details

18.1 This document will be made available to all staff and managers via the Trust's policy section on the intranet.

18.2 The ratification and release of this document will be highlighted to managers and all staff via the trust's intranet.

19. Review arrangements

19.1 The policy, procedure and guidelines will be reviewed as determined by changes in:
- Legislation
- Department of health guidelines
- Local Trust needs and case work experience
- Or every three years

20. Process for Monitoring and Compliance

20.1 To ensure compliance of this guidance a review of the Promoting Dignity at Work Policy will be undertaken every three years, commissioned by the Director of HR and Organisational Development.

20.2 The review will cover the following criteria:

- The process for raising concerns which will be the number of cases raised with Dignity at Work Officers, Speak in Confidence, Datix and via Human Resources the number of cases requesting Mediation.

- The process followed once a concern has been raised which will be the number of cases referred to Mediation, managed through facilitated meetings, or which are subject to a formal investigation.

- Cases will be referenced by the protected characteristics as defined in the Equality Act 2010 where this information is known.

- Trends will be identified where possible and any actions needed to address concerns arising from the trends will be described.

- A comparison of the number of Dignity at Work cases raised with the results of the Annual NHS Staff Survey and the quarterly Staff Friends and Family Test.

Data is collated by the Human Resources Department and presented to the Trust Board as part of the Annual Equalities Report. The report will include indicators to highlight issues arising and recommendations will be made to address any specific gaps or areas of concern which are identified.

The development of this policy has therefore adopted a single "inclusive" approach to bullying and harassment and takes account of the Trust's previous policies in respect of racial harassment and its monitoring arrangements.

This procedure has been 'equality impact assessed' in accordance with the Trust's local arrangements for this process which is compliant with the requirements of the Equality Act 2010.

This policy will be reviewed after 3 years or earlier in the event that there are changes to legislation which impacts on the procedure.

References

The Trust has to adhere to statutory requirements as a minimum standard and has interpreted these, together with any related guidance in order to meet best practice, including:

The Equality Act 2010

ACAS Bullying & Harassment at Work/Guide for Managers and Employers (April 2009)

Associated Documents

This policy operates in conjunction with other Trust Policies, including:
Dignity at Work Leaflet
Managing Diversity Policy
Grievance Procedure
Disciplinary Procedure
Managing Performance and Capability Procedure
Whistle-blowing Policy
Advice and Guidance to Staff who Suspect that they are the subject of Harassment, Stalking or Coercive Control

This list is not exhaustive.

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STAFF CHARTER

Our Trust is committed to providing a safe working environment where staff feel valued and respected, developing an inclusive workforce where staff can access opportunities, understand their rights and responsibilities and can contribute to the success of our services by working together.

The Staff Charter has been developed with staff and staff side representatives to reflect our values and the rights, pledges and aims of the NHS Constitution.

What I can expect from the Trust	Our Values	What the Trust expects of me
A rewarding job which makes a difference to service users, carers and communities	**S**eeing from a service user's perspective	To improve services for service users, carers and communities based on their perspectives
Access to the right training and development to help me excel at work and the opportunity to improve	**E**xcelling and improving	To seek and take up opportunities and enable others to seek innovative ways to make a difference
To be mindful of the choices available to me which support my wishes to balance work and my life choices	**R**esponsive	To be flexible and adaptable to delivering services in new ways which are responsive to need
An environment free from discrimination and harassment, my contribution is valued and I am protected from bullying or violence	**V**aluing and respectful	To value differences and individuality, showing respect to colleagues, service users, carers and volunteers for their contribution
To be included when making decisions which affect me or service users and carers	**I**nclusive, open and honest	To contribute to workplace discussions in a constructive way and give honest feedback
The support to enable me to raise issues or concerns and encouragement to think positively	**C**an do	To address and report issues promptly, to find solutions and problem solve
The resources to work effectively and efficiently, maintaining my health wellbeing and safety, with the right information to know if I am doing a good job	**E**fficient, effective, economic and equitable	To maximise opportunities for team working, utilise resources, recognise and promote health and safety working creatively to improve access to services

MEDIATION SCHEME

1.   INTRODUCTION

1.1   This procedure has been developed to support the implementation of the Trust's Promoting Dignity at Work Policy and Procedure.

1.2   The Trust is committed to support employees resolve differences and difficulties in relationships with their colleagues at the earliest and most effective stage. It can be evidenced that if individuals are supported to resolve difficulties it can avoid their escalation. Mediation is a process that is designed to fulfil this commitment.

2.   DEFINITION

2.1   Mediation is a process which brings together people in the presence of an impartial third party, who facilitate people to air their differences and to come to a resolution. The disputants, not the mediator, decide on the terms of any resolution. The mediator does not offer advice or solutions.

3.   PRINCIPLES

3.1   The key principles that the mediation process is based on are as follows:
- The process is voluntary
- Any agreements have to be to the satisfaction of the parties concerned
- The parties agree a resolution is needed
- It is a confidential process
- The mediator will have been formally trained and be neutral and impartial
- The parties are committed to allocate the necessary time and effort to prepare for the mediation and engage actively in the process to identify and action any agreed resolution/s
- Mediation does not restrict the parties' options to invoke other measures
- The parties must have the authority to implement their agreed resolution/s
- The parties have agreed the choice of mediator/s.

3.2   Issues appropriate for mediation

There are situations where mediation would be more effective than others. Issues which may be appropriate for mediation are as follows:
- Interpersonal conflicts between people who are working together
- Conflicts between groups within a team
- Conflicts between teams
- Issues which are deemed to be appropriate in relation to discrimination and harassment.

The Trust would not undertake to mediate in cases where there is:
- A risk to a patient, employee or to the Trust
- A policy is being challenged

- A potential for an allegation of clinical misconduct or gross misconduct to be made.
- It is assessed that the parties are vexatious or seeking revenge
- Pressure is being applied
- The situation cannot be changed.

It is accepted that these may only become evident during the mediation itself and in these circumstances the mediation will be stopped by the mediator.

3.3   The process of mediation

The process of mediation is outlined below:
- The mediator will introduce themselves first and will then ask everyone else to introduce themselves.
- The mediator will ask you to agree to some ground rules as to how to conduct the meeting e.g. allowing each person to speak without interruption.
- The mediator will then give everyone the chance to describe how they see things now and to state what resolutions they are hoping for.
- The mediator assists everyone to deal with issues one by one, sometimes as a whole group, sometimes in smaller meetings.
- During the meeting the mediator will keep a note of what issues have been resolved and what issues still need to be dealt with. Any notes will be destroyed.
- If any individual feels uncomfortable at any time, an adjournment can be organised or the individuals may choose to leave on a temporary or permanent basis.
- When everyone is happy that all the issues they want to raise have been discussed and all the resolutions that are possible have been reached, the mediator will suggest closing the mediation.
- The mediation will encourage individuals to record the outcome as a way of demonstrating their commitment to any action agreed.
- Individuals involved in mediation will be offered the opportunity to have a friend, or representative at the mediation meeting. The supporter may only attend if their presence is agreed by both parties prior to the mediation. Their role will be to :
  - give people the confidence to speak for themselves wherever possible, this therefore means that the supporter will not be able to speak in the mediation
  - help them to find the words to say what it is that is worrying them
  - be a support when they feel emotional and to suggest breaks at points where you feel they would most benefit
  - provide an honest view (in private) on how the process is going and how they can best present their case.

3.4   Procedure for requesting mediation

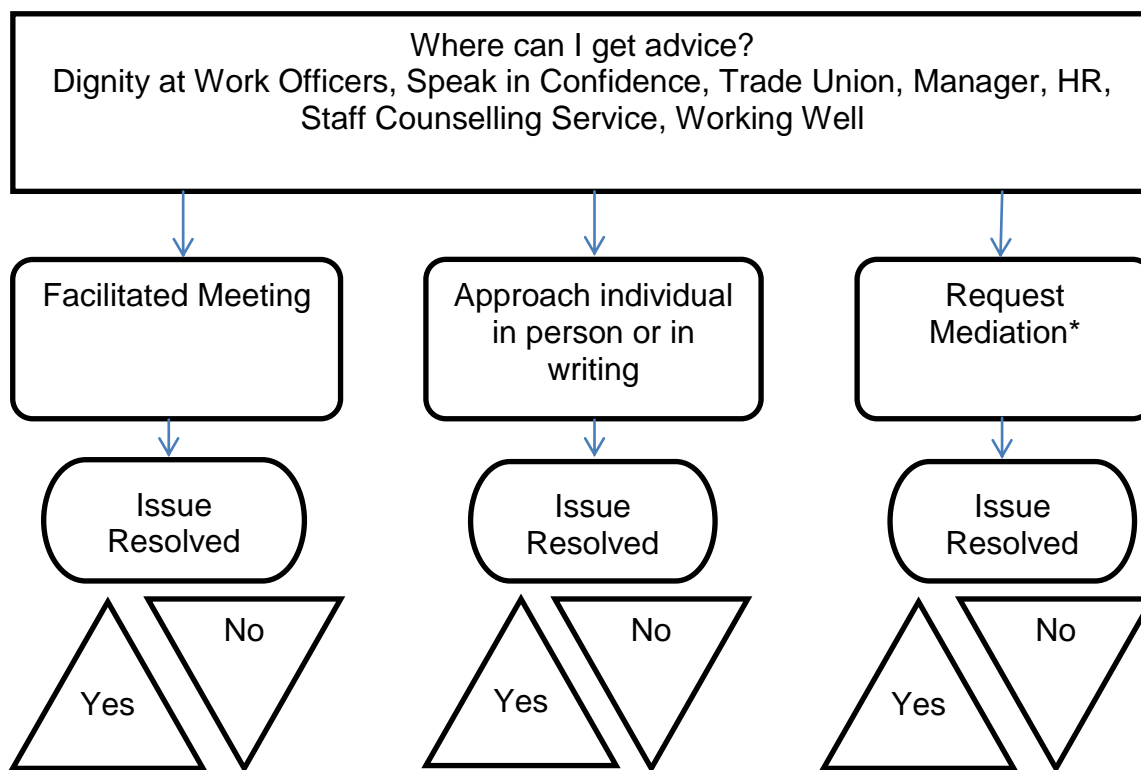Set out in this section are the key stages to be followed:
- Individuals who believe mediation may be an appropriate process to resolve difficulties between individuals or teams should contact a member of the human resources team.
- It will then be assessed by the HR team member if this issue or the circumstances described are appropriate for mediation.
- If it is, the HR Advisor will contact the individuals involved and explain the principles and process of mediation and ascertain if they wish to proceed. Further details will be sent to them to help inform their decision.
- If they both / all decide to proceed the HR Advisor will forward a mediation request form and the suggested mediator with their profile. If the choice of mediator is not agreed then an alternative will be selected.
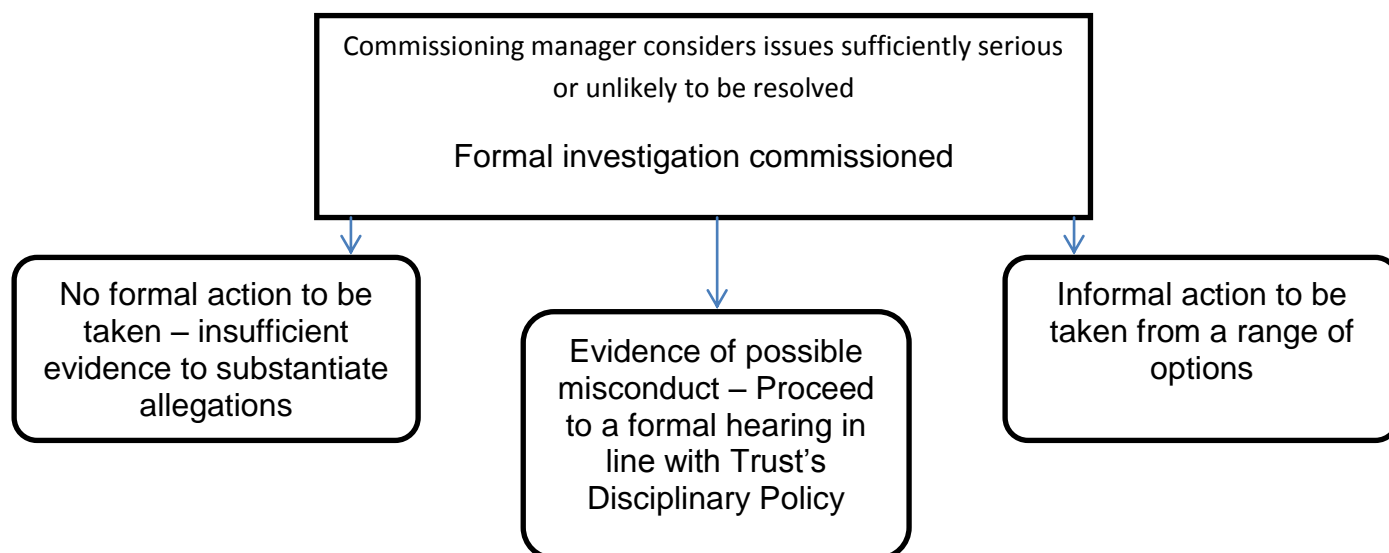- The mediator will make the arrangements for the mediation.

4.   MONITORING

4.1   The Trust will keep anonymised records of all cases in order to identify trends as part of a routine Human Resources report to the Trust Board. Records will reflect the protected characteristics as defined in the Equality Act 201 together with the theme or reason for the mediation.

Dignity at Work – Routes to Resolution

Informal Process

Where can I get advice?
Dignity at Work Officers, Speak in Confidence, Trade Union, Manager, HR, Staff Counselling Service, Working Well

Facilitated Meeting	Approach individual in person or in writing	Request Mediation*

Issue Resolved	Issue Resolved	Issue Resolved

Yes / No   Yes / No   Yes / No

If Informal route exhausted without resolution, consider formal process

Commissioning manager considers issues sufficiently serious or unlikely to be resolved
Formal investigation commissioned

No formal action to be taken – insufficient evidence to substantiate allegations	Evidence of possible misconduct – Proceed to a formal hearing in line with Trust's Disciplinary Policy	Informal action to be taken from a range of options

HR manager to advise on appropriateness of mediation

Recruitment and Selection Policy

Version:	8
Purpose:	This policy will be used to ensure that robust recruitment processes are in place across the Trust
Consultation:	November 2018
Approved by:	JNCC
Date approved:	January 2019
Author:	Helen Esfandiarinia
Date issued:	28 January 2019
Review date:	28 January 2022
Audience:	All Trust employees and applicants
Dissemination:	**Internal**: Publication to the staff intranet, inclusion in staff newsletter and Team Talk briefing **External: (where applicable)**
Impact assessments:	This policy has been equality impact assessed using the Trust's agreed process, and the assessment has not identified any significant adverse impact on people with one or more protected characteristic.

Version History

Version	Date	Reason for Change
7	January 2016	Centralised Recruitment Process
8	November 2018	Update to support rotational recruitment opportunities with Gloucestershire Care Services and Gloucestershire Hospitals Foundation Trust

PART 1

Summary

This page summarises the key points of this policy. The full policy should be read to ensure that the requirements are complied with.

The recruitment and selection of staff with the qualities, skills and abilities to perform their jobs effectively is a key element in providing safe, high quality health care and is essential to the Trust's success.

In order to achieve this a robust, fair, effective and consistent approach to the recruitment and selection process must be adopted. Staff involved in recruitment must ensure appropriate employment legislation, Agenda for Change Terms and Conditions, NHS Employers standards, Trust policies and procedures and the safeguarding of children and vulnerable adults is adhered to.

This policy therefore provides a clear framework to support the recruitment of the most appropriate candidate for each vacancy to help ensure the highest level of service is provided to patients and covers all elements of the recruitment process. A flowchart is included at appendix 1.

The policy incorporates and adheres to all statutory legal requirements and the Trust will strive to ensure it meets best practice at all points of the recruitment process.

Table of Contents

PART 2

1. Introduction

1.1. This policy lays down the mandatory steps that must be followed to enable the Trust to appoint the best person to fill their vacancies and to safeguard the interests of the Trust.

2. Purpose

2.1. The purpose of the policy is to explain the roles and responsibilities of all parties who are responsible for undertaking recruitment and explain the importance of each step which needs to be completed.

2.2. The policy also explains the internal and external context in which the Trust operates and sets out a framework to ensure that transparent, open, fair and safe recruitment and selection processes take place.

2.3. In addition to the mandatory steps contained within this policy, the Trust provides associated full and comprehensive best practice guidelines on all aspects of the recruitment process. When recruiting to a post recruiting managers are advised to also refer to the Trust's associated guidelines that will contain the most up to date guidance on employment law, Department of Health Policy and national NHS guidance.

3. Scope

3.1. This policy covers all appointments made by 2gether NHS Foundation Trust with the following exceptions:

- Chief Executive
- Non-Executive Directors
- Directors
- Medical Consultants

3.2. Appointments to the above listed positions are covered by NHS Employers national guidance.

4. Duties

4.1. It is the duty of all parties involved in the recruitment process to ensure that this policy is adhered to at all times. This will ensure that there is a robust, fair, effective and consistent approach to recruitment Trustwide.

5. Equal Opportunities

5.1. Equality, diversity and human rights legislation aims to promote the fair and equal treatment of people in the employment process.

5.2. Therefore in order to avoid litigation it is important that the Trust's practices and policies conform to legislation and embed the principles of equal opportunities. The

Trust is committed to equal opportunities as set out in the Equality and Diversity Policy.

5.3. No applicant or employee should receive less favourable treatment on the grounds of any of the 9 protected characteristics with the Equality Act 2010; sex, marriage and civil partnership, sexual orientation, race, religion or belief, disability, pregnancy and maternity, age, gender reassignment. Additionally no applicant or employee should be disadvantaged by conditions or requirements which cannot be shown to be relevant to job performance.

6. Reviewing the Vacancy

6.1. When a post becomes vacant it should not be filled automatically. A workforce planning review should be conducted to consider alternative ways of meeting service needs that may not necessarily require the post holder to be replaced in the same way. The HR Department is able to offer help and advice. The recruiting manager should ensure that the following factors are taken into account before deciding to advertise the vacancy:

- Does the post need to be replaced?
- Are any of the duties no longer required?
- Could the duties be re-allocated as part of a skills mix review?
- Could a part-time post cover the duties?
- Does the job content need to be changed?
- Is a higher or lower level post more appropriate.
- Is the post appropriate for an apprentice?

7. Temporary Cover Arrangements

7.1. There may be occasions where it is necessary to obtain temporary or locum cover for short periods, to 'fill the gap' whilst the recruitment process is underway, or to meet an unexpected rise in workload or to cover sickness absence. Before attempting to obtain such cover, managers must check that funding is available and seek the relevant approval.

7.2. Managers should note that as a general rule, a temporary vacancy of more than 12 weeks MUST be advertised. If in doubt, the manager should contact the HR Department. However even if the post is not advertised the necessary pre-employment checks must still be undertaken.

7.3. Managers considering covering a post on a temporary basis with an existing employee may need to refer to, and adhere to, the relevant sections of the Agenda for Change Terms and Conditions Handbook, if it constitutes 'temporary movement to a higher band'.

7.4. Advice should be sought from the HR Department as necessary.

8. Job Descriptions

8.1. The job description sets out the main duties to be undertaken by the jobholder. It is the recruiting manager's responsibility to ensure that there are the necessary job descriptions for all posts in that area. Job descriptions should be updated as required, especially when recruiting to an existing post. If the post holder works with children/young people/vulnerable adults, their specific responsibilities for safeguarding the welfare of these groups need to be stated.

8.2. Newly created job descriptions need to go through the job evaluation process before the recruitment process commences. When changes are made to an existing job description and/or person specification advice must be taken initially from a HR Manager to ensure the changes do not affect the banding of the post; it may be necessary for an amended job description to go through the job evaluation process and time should be factored in to allow for this. Copies of job descriptions are held on employees' personal files.

8.3. There is a template job description and person specification available on the intranet along with some generic job descriptions. HR Managers can provide advice in relation to completing these.

8.4. When recruiting to an existing post the manager must ensure that alterations are made, and considered from a job evaluation perspective, before approval to recruit has been sought and the post is advertised.

8.5. It is important to review a job description prior to the recruitment process as any changes made to it once a candidate has been appointed may result in a formal process being required.

9.   **Person Specification**

9.1. The person specification is part of the job description document and sets out the skills, knowledge, personal qualities and other requirements, which are needed for the post holder to perform the duties.

9.2. The person specification is used to draw up the criteria against which applicants will be assessed at the shortlisting and interviewing stages. Therefore recruiting managers should ensure that the criteria for selection are clearly defined, relevant, justifiable and assessable. There should not be unnecessary requirements about age, qualifications, length or nature of experience specified. No reference should be made to personal circumstances such as marital status or domestic arrangements.

9.3. The person specification should cover the criteria below. It is important to ensure that the criteria are under the right heading. For example, experience of doing a task is quite different from having knowledge, i.e. having knowledge of how to undertake a presentation as opposed to having experience in presenting.

  Qualifications – what should the post holder have attained?

  When specifying particular qualifications recruiting managers should also state 'or equivalent' where this is possible. It is recognised that for specific roles this will not, and should not, be possible, for example RMNs.

For guidance on what may be an equivalent qualification please refer to the 'Qualifications and Curriculum Authority' website on www.qca.org.uk. For further advice please contact the HR Department.

Experience – what type, level and extent of previous work or other experience should the post holder have?

To avoid discrimination claims on the grounds of age recruiting managers are recommended not to specify a number of years of experience, unless it can be clearly demonstrated that there is a genuine need to do so. Recruiting managers are advised to break down the experience required into the skills, abilities or knowledge that the post holder is required to have.

E.g. instead of '2 years' experience of working in a managerial capacity' the following could be specified 'demonstrated experience of working in a managerial capacity'.

Knowledge – What particular knowledge should the post holder have? What is the range and depth of knowledge that the post holder should possess?

E.g. working knowledge of clinical governance.

Skills and Abilities – e.g. presentation skills; ability to prioritise workload effectively; ability to undertake breakaway and PBM / PMVA (which will be essential in some areas of work).

Other Qualities – e.g. car driver and access to own vehicle, and a valid UK driving licence OR able to meet the travel requirements for the post.

When stating that an essential requirement for the post holder is for a 'car driver' or the 'ability to meet the travel requirements for the post' this must be a specific requirement for the post. Only put 'car driver' if it has been assessed and it can be demonstrated that the post can only be undertaken by a car driver.

10. Vacancy Approval

10.1. All requests for advertisement must be made on the 'Vacancy Details for Advertising' form, supported by the appropriate approval. The HR Department can confirm what approval is required for specific posts.

10.2. All posts will need evidence of sign off by the relevant Management Accountant for that team in line with establishment controls. No vacancy will be advertised or recruited to until evidence of this has been provided to the HR Recruitment Team.

10.3. Once the approved Vacancy Details for Advertising Form has been received by the HR Recruitment Team a check will be undertaken to establish if there are any employees are 'at risk' (and therefore needing alternative employment) and who may be suitable for the post. If there are no suitable applicants from those who are 'at risk', the post will be advertised. If a suitable applicant is identified the appropriate HR Manager will liaise with the recruiting manager about the next stage in the 'at risk' process.

11. Advertising

11.1. As a minimum requirement **ALL** posts will be advertised internally via NHS Jobs (www.jobs.nhs.uk); the link to NHS Jobs is also available on the intranet.

11.2. The possible exceptions to this could be where:

- there are individuals 'at risk' who may be redeployed;
- the post is a temporary cover arrangement lasting for less than 12 weeks.

11.3. The HR Team should be contacted should it be deemed to be necessary for specific posts to be advertised in external publications.

11.4. The advertisement is the first stage in the pre-selection process and it should be drafted and placed to:

- attract the most suitable pool of applicants;
- create a favourable impression of the Trust;
- be based on the criteria in the person specification;
- cover the main purpose stated in the job description;
- give candidates advance notice of the interview dates.

11.5. Advertisements must not state or imply that the job is open only to applicants depending on sex, race, age, sexual orientation, disability, marriage and civil partnership status, pregnancy and maternity, religion or belief or any gender reassignment status unless there are exceptional circumstances. If it is felt it is necessary to state this, a HR Manager must be contacted for advice.

12. Recruitment Pack

12.1. In all circumstances a job description and person specification must form part of the information that is submitted when advertising a post. Posts will not be advertised without this.

12.2. In addition to this the recruiting manager may wish to include some further supporting information which will help to attract suitable applicants and encourage them to apply. This will also provide a more comprehensive overview of the role, department / team and Trust. Any additional information provided should be comprehensive, accurate and up-to-date and presented in a professional manner.

12.3. Examples of the additional information that could be provided are:

- a profile of the department;
- appropriate service profiles;
- general information on the Trust and its services;
- schemes for 'hard to recruit to' posts.

12.4. This information must be provided by the recruiting manager in an electronic word document format for the website at the same time as the rest of the recruitment paperwork.

13. Shortlisting

13.1. The manager should shortlist as soon as possible after the closing date to avoid losing good applicants. Recruiting managers need to be aware that all vacancies close at midnight on the closing date; therefore the job file will not be processed by the Human Resources Recruitment Team until the next working day.

13.2. Shortlisting is done online via NHS Jobs. The personal details section of the application form (Part A) cannot be viewed by the shortlisting panel. Candidates will be identified by a unique reference number. Shortlisting should be undertaken as a panel exercise. If it is not practical for the whole panel to meet at least 2 members MUST be involved. Instructions on shortlisting will be sent to recruiting managers.

13.3. Recruiting managers can access guidance and support from the HR Department. For the shortlisting process to be objective consistency is vital. Any candidate not meeting the essential requirements should not be shortlisted. It is recommended to shortlist no more than 6 candidates per post available unless the field is exceptional.

13.4. If having shortlisted against the essential criteria on the person specification there are too many applicants to interview the applications should then be measured against the desirable criteria. If one candidate is shortlisted without an essential qualification on the basis that they have equivalent experience, then all other candidates in the same position must be shortlisted.

13.5. It is good practice to complete a shortlisting form to evidence the decision-making process. This will then be referred to if any challenges are raised by any of the applicants for the post.

13.6. If an applicant declares a criminal conviction on an application form recruiting managers should not consider this information in the shortlisting process. This should be dealt with at interview and advice should always be sought from the HR Department.

13.7. The following points should be noted when shortlisting:

13.7.1. Candidates who are not shortlisted have the right to know why not and recruiting managers should provide this feedback if requested to do so.

13.7.2. For both internal and external applicants it is the recruiting manager's responsibility to provide feedback if requested. Recruiting managers need to be aware that the candidate may feel that there are grounds to bring a claim of discrimination. The shortlisting panel must therefore be able to justify their decision (also refer to section 13.5).

13.7.3. Applicants who apply under the Disability Confident Scheme should be shortlisted if the minimum (essential) criteria on the person specification are met. This is in accordance with the Disability Confident Scheme (previously 'Two Ticks Disability Award').

13.7.4. When shortlisting on NHS Jobs if the applicant requires an interview under this scheme a tick will be placed in the column that displays the below symbol. Recruiting managers will be advised of this by the Human Resources Recruitment Team at the appropriate time.

13.7.5. The Equality Act (2010) gives rights to individuals who have a disability and provides protection against discrimination on the grounds of disability.

13.7.6. The Trust is under a legal obligation to fully consider making reasonable adjustments to working practices, equipment and premises to ensure a disabled person is not put at substantial disadvantage due to their disability. This should be borne in mind throughout this procedure. Such adjustments could include:

- making adjustment to premises;
- allocating some of the disabled person's duties to another person with Access to Work support;
- altering hours of work;
- specific training;
- modifying instructions or reference manuals;
- providing a reader or interpreter;
- providing supervision;
- agreeing to a different place of work;
- acquiring or modifying equipment;
- transferring the person to fill an existing vacancy;
- allowing employees to access reasonable medical support and appointments in accordance with the appropriate Trust policy.

13.7.7. A failure, without justification, to comply with the duty may amount to an act of discrimination. The Equality Act allows financial and other costs to be taken into account, together with the extent of the employer's financial resources when considering whether it would be reasonable to require the employer to make any adjustments. The manager should also consider suggestions made by the prospective employee with a disability.

13.7.8. At all times further advice and support should be sought from the HR Department and Working Well.

14. Interviewing and Assessment Methods

14.1. An interview is the most commonly used method of selection. It enables recruiting managers to assess the extent to which the candidate meets the requirements of the job and gives the candidate an opportunity to obtain further information.

14.2. Recruiting managers should also consider additional assessment methods in order to further explore the suitability of candidates for the post. Examples of this are:

- IT skills tests;
- discussion groups with relevant stakeholders;
- presentations;
- scenario / role play exercises.

14.3. **Preparing for interview – main considerations:**

14.3.1. The number of panel members should be kept as small as possible – 4 or less with a minimum of 2 is recommended except where national guidelines are laid down for the constitution of an interview panel, e.g. Advisory Appointments Committee (AAC) for medical staff. Further guidance is available from the HR Department.

14.3.2. There should be a Chair to ensure that the interview plan is followed and that candidates are fairly assessed. The Chair of the Panel must have been trained in Recruitment and Selection or have previous experience on interview panels. The Chair will usually be the line manager of the post and should be more senior than the post being recruited to. If further guidance is required this should be sought from the HR Department. It is also good practice to have Experts by Experience on the panel for appropriate posts. The Social Inclusion Department should be contacted for further information.

14.3.3. Questions should be constructed to cover the areas specified on the job description and person specification. This takes time and should not be left until immediately prior to the interviews on the day. Candidates should be asked the same questions so that a fair assessment can take place however it is also appropriate to sensitively address any areas of possible concern that have arisen from the information provided on the application form. Examples of this are:

- any gaps in the employment history;
- if convictions or cautions have been declared;
- if reasons for leaving previous roles have not been declared or give cause for concern;
- if the candidate has frequently moved between different roles and employers.

14.3.4. The interview should also include values-based questions, examples of these questions are available on the intranet.

14.3.5. Panel members must liaise prior to the interview day to allocate roles, discuss the job applications and supporting documentation, agree the structure of the interview, the interview questions and who will ask what.

14.3.6. Appropriate rooms and resources should be booked in advance.

14.3.7. Consideration should be given to the timing of the interviews so that candidates are allowed sufficient time, but time is not wasted by long gaps between interviews.

14.3.8. All panel members should complete an assessment form for each candidate. It is therefore important to allow a short interval between interviews to complete the interview notes and assessment forms whilst the interview is still fresh in mind. A copy of this is available on the intranet.

14.3.9. Further advice on any element of the recruitment process can be sought from the HR Department.

14.4. **Invitation to interview:**

14.4.1. When inviting candidates to interview it is good practice to state all of the interview arrangements, e.g. the length of time the process is likely to take and if the process includes other selection methods. Candidates should also be advised of parking arrangements and reporting details upon arrival.

14.4.2. Candidates will also be asked to bring original photographic identification (ID) to the interview as proof of identity. The type of ID seen and its details must be noted on the interview assessment form. This is imperative as the successful candidate will be asked to bring the same form of ID with them to the pre-employment meeting for verification purposes.

14.5. **Interview preparation for the day:**

14.5.1. Ensure that copies of the application forms, job description, person specification, interview assessment forms, and all other relevant documents are available for each panel member.

14.5.2. Check through the application forms, especially for any areas of concern (see section 14.3.3 above). Ensure one panel member is responsible for asking relevant questions and obtaining a satisfactory explanation from the candidate. If necessary additional referees can be requested to cover those periods of time.

14.5.3. For candidates who have declared a criminal conviction or caution during the application process, it is appropriate for the panel to ask appropriate questions about this. If the candidate refuses to discuss this it can be clarified through the DBS disclosure process if the candidate is successful.

14.5.4. Managers must also ensure that the referee details provided on the application form meet the Trust's requirements and where not discuss this with the candidate at interview so alternative referees can be provided.

14.5.5. Arrange for a member of staff to receive candidates, show them to the waiting area and provide refreshments as appropriate.

14.6. **Language competency:**

14.6.1. Employers have a responsibility to ensure staff have the required level of linguistic skills to undertake their role effectively and deliver safe care to patients. The Immigration Act 2016 creates a duty for employers to ensure that all public sector staff working in customer-facing roles speak English to an appropriate standard.

14.6.2. Individual regulatory bodies have also set professional standards and those registered with that body must be able to evidence that these standards are met.

14.6.3. If recruiting managers have any concerns about this advice should be sought from the HR Department prior to any recruitment decision being reached.

14.7. **Assessing candidates suitability:**

14.7.1. Following the interview process the recruiting manager must, with discussion with the other interview panel members, decide who is the preferred candidate

for the post. Prior to this discussion taking place all panel members should complete an interview assessment form for each candidate. The discussions should consider and take into account the scoring from the interview assessment forms and the outcomes of any other selection method used. The interview panel must be able to fairly and objectively justify this decision if challenged at any point by unsuccessful candidates.

14.7.2. If the preferred candidate has provided details of an offence / conviction / caution please contact the HR Department to discuss it. The offence may or may not have any bearing on their ability to carry out the duties of the post and this can only be established via the Trust's DBS risk assessment process.

14.7.3. Any information declared by a candidate in relation to offences / convictions / cautions must not influence who is deemed to be the most suitable candidate(s) for the post.

15. Interview Feedback and Notes

15.1. When informing candidates of the outcome recruiting managers should be prepared to give constructive feedback on interview performance. It is important that any interview notes and papers are filed together with all other relevant papers, on the job or vacancy file. The notes should be returned with the relevant job reference number to the HR Recruitment Team who will retain them for 6 months.

16. Conditional Offer

16.1. When the decision about who to appoint has been made, it is important that the successful candidate is contacted personally, on the same day if possible, and a verbal conditional offer of employment made. The candidate should also be advised that a conditional offer letter will be sent to them and this will set out the next steps in the recruitment process.

16.2. The verbal offer must be made subject to satisfactory outcomes of the standard pre-employment checks (as advised by NHS Employers) as follows:

- a minimum of 3 years of continuous employment history/ training and reference checks;
- a disclosure certificate by the Disclosure and Barring Service (DBS) – if applicable;
- Working Well (Occupational Health) Clearance;
- verification of the starting salary by a member of the HR Team;
- eligibility to live and work in the UK;
- verification of identity (including verification of their home address);
- verification of qualifications and professional registration (if applicable).

16.3. It is important that the recruiting manager making the job offer has the knowledge and authority to make a verbal conditional offer.

16.4. For posts on Agenda for Change Terms and Conditions of Employment, starting salaries must be determined in accordance with the Trust's Starting Salaries Policy,

and any requirement to recruit to above the bottom of the band must be authorised prior to confirming this with the preferred candidate.

16.5. Unsuccessful candidates should also be verbally notified as soon as possible by the recruiting manager.

16.6. Once the verbal offer of appointment has been accepted managers must complete Part 1 of the 'New starter/preferred candidate form' which is available on the intranet and forward it to the HR Recruitment Team in order for the conditional offer letter to be sent.

17. Pre-employment Checks

17.1. The range of pre-employment checks which the Trust is required to undertake are in accordance with the NHS Employment Checks Standard and are further detailed on the NHS Employers website. The Trust also has to meet legislative obligations (for example right to work checks).

17.2. These checks are undertaken centrally by the HR Department, who will ensure that satisfactory clearance is received before any unconditional offer of employment is made.

17.3. Preferred candidates will be unable to commence employment in the post until full clearance has been received. The HR Department will centrally record the outcome of these checks on the Electronic Staff Record (ESR).

17.4. To obtain the necessary information to process the required checks the preferred candidate will be required to attend a pre-employment meeting with a member of the HR Department. These meetings will take place at Rikenel, Gloucester, or a suitable base in Hereford. Candidates are advised of this in the conditional offer letter.

17.5. If genuine problems are encountered with getting to either of these bases these will be addressed on a case-by-case basis.

17.6. The specific requirements for completing all of these checks have not been included within this policy as they are subject to change. At all times, however, the Trust adjusts these processes to ensure that the standards set out by NHS Employers and legislative requirements are met. The HR Department will update the paperwork that is sent to candidates and recruiting managers accordingly.

18. Overseas Applicants and Applicants Who Have Spent Time Abroad

18.1. The Trust will follow NHS Employers guidance with regards to ensuring all applicants have the appropriate documentary evidence to satisfy all pre-employment checks. If the applicant is unable to provide sufficient documentary evidence of time spent abroad the Trust will have to consider what additional assurances may be gained. If the Trust is unable to gain sufficient assurances to satisfy the standard of pre-employment checks, the Trust may have to consider withdrawing the conditional offer of employment.

18.2. The Trust will allow extra time where necessary in the recruitment process when requesting and completing employment checks for overseas applicants particularly

where references are required to be translated however this needs to be balanced against service needs.

19. DBS Checks

19.1. The criminal record and barring checks are designed to help prevent unsuitable people from entering the NHS workforce and gaining access to vulnerable groups. A criminal record check relates to the data held about an individual's criminal history.

19.2. Where the post is eligible for a DBS check the preferred candidate will also be asked to complete a Model Declaration Form A. This is used for obtaining relevant information on positions which are exempt under the Rehabilitation of Offender Act about spent and unspent convictions and cautions (including reprimands and final warnings).

19.3. For posts that are not eligible for a DBS check the preferred candidate will be asked to complete a Model Declaration Form B. This is used for obtaining information about unspent cautions and convictions.

19.4. Criminal records are held in the country or jurisdiction where the offence or alleged offence occurred, therefore when recruiting from overseas, or where an applicant discloses that they have spent a continuous or cumulative period of 6 months or more living or working overseas, or when an overseas address has been included in the 5 year address history provided as part of the DBS check application, a request for a police check or a 'certificate of good character' from that country will be requested.

19.5. Where an applicant has declared that that they have been serving overseas in the military for a period of 6 months or more in the past 5 years, a request will be submitted for an extract from their military record.

19.6. Information included as part of a disclosure certificate has no term of validity and it only provides information in relation to what is known about the individual up to the point of its issue. Therefore, the Trust will accept a previously issued DBS check where individuals have subscribed to the DBS Update Service, this will also apply to bank workers which will require a DBS check. If a bank worker applies for a substantive post with the Trust they will be required to undertake a DBS check unless they have registered with the Update Service. The Update Service can only be used if the following criteria are satisfied:

- the preferred candidate can provide the original DBS certificate; and
- the level of DBS check completed for the Update Service is at the correct level for the post; and
- the preferred candidate gives permission for this information to be accessed.

If above criteria cannot be satisfied a new DBS check must be undertaken.

19.7. When a preferred candidate has been previously employed by Gloucestershire Care Services or Gloucestershire Hospitals NHS Foundation Trust a new DBS check will not normally be required when:

- that employment with the other Trust has been continuous up until the start date with the Trust; and
- the DBS check was undertaken by the other Trust at the correct level and within a 3 year period; and
- the preferred candidate is able to produce the original DBS certificate.

19.8. If there are any issues identified such as cautions and convictions via the recruitment process and subsequent DBS check, these will be fully assessed and considered via the Trust's DBS risk assessment process. Any decision made to not progress the recruitment of a candidate as a result of this will be confirmed with the candidate.

19.9. **DBS for existing staff changing jobs within the Trust**

19.9.1. A new DBS check is not normally required where an existing member of staff has been continuously employed by the 2gether NHS Foundation Trust, Gloucestershire Hospitals NHS Foundation Trust or Gloucestershire Care Services and the criteria in section 19.6 above are met.

19.9.2. The requirement for a new DBS check is triggered where:

- the employee has never had a DBS check before and is now moving to a position that requires a DBS check;
- the employee has not had a DBS check within the last 3 years of employment that has been carried out by either the 2gether NHS Foundation Trust, Gloucestershire Hospitals NHS Foundation Trust or Gloucestershire Care Services;
- the new position significantly changes the employee's role, responsibilities, or level of contact with vulnerable groups, i.e. involvement in a regulated activity which requires a different level of check, or a check against one or both barred lists;
- employees who are registered with the DBS Update Service but are not able to satisfy the criteria set out in section 19.6 above.

19.9.3. All employees have a contractual obligation to disclose any criminal convictions, cautions, reprimands and warnings that are subsequently acquired during their employment. The disclosure should be made in confidence so that the Trust can consider the effect of the offence against the position held; the DBS risk assessment process will be used to consider and assess this initially. Existing staff may be subject to disciplinary action and possible dismissal if they knowingly fail to disclose relevant information in relation to their criminal record or barred list status. An annual declaration process is also in place via the Trust's appraisal process.

19.10. **Doctors in training**

19.10.1. Doctors on educationally-approved rotational training are regarded as being in continuous employment during the full term of their training and are therefore required to have a DBS check, as a minimum, once every 3 years rather than each time they change rotation. The medical staffing officer must seek written assurances from the host/previous employer that appropriate clearances have been obtained within the last 3 years. Where it is highly likely that the individual

will be working in regulated activity with both children and adults at an early stage in their training programme, it is strongly recommended that the initial DBS check includes checks are made against both barred lists.

19.11. **Temporary workers supplied by an agency or bank staff who do not have a substantive contract with the 2gether NHS Foundation Trust**

19.11.1.   Temporary workers supplied by an agency or bank who do not have a substantive contract with the 2gether NHS Foundation Trust are required to undertake a DBS check at least once a year. The Trust is required to assure itself that appropriate DBS checks have been obtained within the last 12 months by seeking and evidencing assurances from the agency.

19.11.2.   All temporary workers engaged by the Staff Bank must have a new DBS on registration with the bank.

19.11.3.   Temporary workers should be encouraged to join the DBS Update Service and this can then be used as part of the annual check on the basis that the criteria set out in section 19.6 are met.

19.11.4.   If a DBS certificate is presented by an agency worker that shows cautions or convictions a DBS risk assessment will be completed by the appropriate manager for sign off by the relevant Service Director and Senior HR Manager/ Deputy HR Director.

19.11.5.   All temporary workers are expected to disclose any cautions / convictions / offences to the Trust in a timely manner to enable this to be considered and appropriate action taken.

19.12. **Payment for DBS checks**

19.12.1.   Where a DBS check is required for new employees, and existing staff changing roles within the Trust, the cost of this will be borne by the employee. This includes the admin fee that is charged by the provider. The figures are not included in the policy as they are subject to change however the HR Department will be able to confirm these.

19.12.2.   As indicated in section 19.9.1 bank workers will need to have DBS checks completed on an annual basis unless the Update Service is used. Bank workers will pick up the cost of this annual DBS check.

19.12.3.   Employees will have the option to pay this over a 1, 3 or 6 month period and it will be deducted directly from salaries.

19.12.4.   The only exceptions to this are for existing employees who have been moved to a different role as a result of a management of change process or as a result of ill health. If employees change roles as a result of a disciplinary sanction or performance measures and a new DBS check is required the employee would need to pay for this in the same way as outlined above.

20.   Eligibility to Live and Work in the UK

20.1. There are 3 steps that the Trust must work through to confirm a prospective employee has the right to work in the UK:

- request right to work documents;
- validate the documents in the presence of the holder;
- copy, making a record of the date of the check, and securely store copied documents.

20.2. The Trust must assess the eligibility of an individual's right to work in the UK by verifying:

- the specified documentation from lists A and/or B from the Home Office 'right to work checks';
- the Trust must validate documentation from all prospective employees to ensure they are eligible to reside and work in the UK.

20.3. The Trust has to comply with strict legislation to try to prevent illegal working. The Trust must also ensure that it does not discriminate by assuming any overseas worker is in the UK illegally. The HR Department will carefully check any identification documents during the pre-employment checking process.

21. Identity Checks (including verification of address)

21.1. Identity checks are designed to determine that the information given by a candidate is genuine, it relates to a real person and establishes that they own and are rightfully using that identity.

21.2. Verifying a candidate's identity is the most fundamental of all employment checks and robust completion of this minimises the risk of employing or engaging someone inappropriately.

21.3. The Trust, as guided by NHS Employers, uses a range of methods, including requesting relevant original documentation to confirm a candidate's identity and to verify the home address.

22. Working Well (Occupational Health) Clearance

22.1. The Trust has a duty of care to its employees to ensure that safety is maintained during the course of carrying out the specific duties of the post.

22.2. Assessments provide an opportunity for the recruiting manager to understand if there are any health conditions or disability that may require reasonable adjustments to either the workplace or to the duties of the post.

22.3. The Trust needs to ensure that it meets its obligations under the Equality Act 2010 and so no conditional offer of employment should be withdrawn based on this information without prior consultation with the HR Department.

23. Verification of Qualifications and Professional Registration (where required)

23.1. These checks ensure that preferred candidates are qualified and competent to perform in specific posts.

23.2. For specific roles professional registration with a regulated body will also be required, checked and confirmed as part of the pre-employment checks process.

23.3. Verifying both qualifications and professional registration help the Trust to ensure that high standards of care / delivery of services are maintained.

23.4. In certain circumstances, and for specific posts where a qualification and /or registration is imminent however outstanding at the point that the other pre-employment checks have been completed, the preferred candidate may be able to start with the Trust in a non-qualified and / or non-registered post. In these situations the unconditional offer letter and contract of employment will specify the timescales for these elements to be confirmed and evidenced and the possible consequences of this not being confirmed. Recruiting managers have a responsibility in these situations to ensure that employees are working at the appropriate level during this period.

24.   References

24.1. Referees must be in writing and cover:

24.1.1.   References will be obtained by the HR Team and should cover a minimum of the past 3 years employment and/or training or education.

24.1.2.   The current / most recent employment, from a line manager or someone in a position of responsibility who can comment on candidate's suitability for the post. Where an individual has been with 1 employer for 3 years or more 1 reference may be sufficient. Candidates who are applying for posts working with children / young people / vulnerable adults and are not currently working in these categories may be required to submit details of a further referee. This further referee must be from the last employer where their employment was working with children / young people / vulnerable adults.

24.1.3.   If a prospective employee has been self-employed during the past 3 years, evidence should be requested from a body such as HM Revenue and Customs, banks, accountants, solicitors, etc., to confirm the individual's involvement in the business and that it was terminated satisfactorily.

24.1.4.   If a prospective employee has worked overseas for a single spell of three months or more, or a cumulative total of six months or more, efforts should be made to obtain a reference from an overseas employer or academic institution, OR proof of residence of the time spent overseas, OR a reference from an overseas agency, e.g. the Foreign and Commonwealth Office, missions, British Council, etc.

24.1.5.   If a prospective employee has been in full-time education during the past 3 years, a reference should be obtained from the relevant academic institution.

24.1.6.   If a prospective employee has served in the Armed Forces or Civil Service during the past 3 years, a reference should be obtained from the relevant service or department.

24.1.7.   Personal references such as friends and relatives are not acceptable.

24.1.8.   At interview it is important to explore any gaps in employment history with the candidate and ensure that an adequate explanation is received.

24.2. **Receipt of written references**

24.2.1.   References are requested by the HR Department for preferred candidates only and when received they will be emailed to the recruiting manager for approval.

24.2.2.   If the reference questions the suitability of the candidate then advice should be obtained from the HR Department as to how to proceed. Where certain straightforward facts seem to be different, such as qualifications and employment record, then these can easily be checked again.

24.2.3.   Where the issue is less straightforward, the organisation must carefully re-assess the ability of the candidate to meet the job requirements in question, and contact the referee to seek clarification and further information. In these circumstances please discuss any concerns with the HR Department or a HR Manager.

24.2.4.   Once read and approved or rejected the manager should delete any references received and not retain a copy as these will be held of the candidate's personal file.

25.   **Pre-employment Checks for Existing Employees Changing Posts within the Trust**

25.1. Existing employees who are changing roles within the Trust are also subject to pre-employment checks in order to meet with required standards. At the point that the HR Recruitment Team are advised of this, via the New Starter / Preferred Candidate Form, a check will be undertaken to understand what is needed. The employee will be advised accordingly.

25.2. These checks will also apply to employees who are seconded within the Trust and for bank workers who are subsequently appointed into posts, either on a fixed-term or permanent basis.

26.   **Pre-engagement Checks for Temporary Workers, including Bank Workers engaged directly by the Trust and Agency Workers**

26.1.1.   The Trust has to be assured that all temporary workers have had the relevant recruitment checks completed prior to being engaged by the Trust.

26.1.2.   Bank workers engaged directly by the Trust will be subject to all of the recruitment checks that are set out above and these must be completed prior to any work being undertaken by the bank worker. Due to the ad-hoc nature of the work it may be necessary for some of these checks to be completed at regular

intervals thereafter, for example, an annual DBS check as set out in section 19.9 above. This will be managed by the Staff Bank Office and the HR Department.

26.1.3.   Where there is a requirement for a post to be temporarily covered by an external agency worker the Staff Bank Bookings team must be contacted to ensure that the agency are on the appropriate framework and that any recruitment checks are completed in line with NHS Employers Standards.

26.1.4.   Staff Bank Coordinators who book the shifts will request to see evidence of the appropriate recruitment checks undertaken by the Agency, including Right to Work in the UK, photographic identity and if required for the post evidence that a DBS has been carried out at the correct level that showed no cautions or convictions.

27.   Withdrawal of Conditional Offer

27.1.   The Trust reserves the right to withdraw a conditional offer of employment in the following circumstances:

- in the event that a candidate knowingly withholds information or provides false or misleading information;
- the Trust and / or the candidate is not able to fully satisfy all of the required pre-employment checks in line with Trust policy and NHS Employers guidelines within a timely manner.

28.   Unconditional Offer and Agreeing the Start Date

28.1.   Once the HR Recruitment Team have received all the necessary clearances the line manager will be contacted to agree a start date. For new employees with the Trust start dates must align with the Trust's Corporate Induction Programme.

28.2.   Once a date has been agreed the HR Recruitment Team will send out an unconditional offer of employment letter, and a contract of employment.

28.3.   The contract will set out the terms under which the person has agreed to work. In order to avoid any misinterpretation or confusion over the terms of the contract, managers should ensure that any references to such terms in recruitment documentation (job descriptions, advertisements, etc.) are accurate and consistent.

29.   Setting up the Personal File

29.1.   As soon as the candidate has accepted the conditional offer of employment the HR Recruitment Team will set up a personal file. Once the candidate's recruitment process has been completed the personal file needs to be collected from the HR Department by the recruiting manager and documentation relevant to the employee's terms and conditions, performance, personal circumstances, etc., should be added to the file throughout their employment with the Trust.

29.2.   The contents of a personal file are subject to audit. For guidance on what should be held on a personal file please refer to a HR Manager and the relevant Trust policy.

30. Corporate and Local Induction

30.1. It is the line manager's responsibility to ensure that the new employee settles in quickly. A well prepared and comprehensive workplace local induction programme will ease the employee's transition into the department and become familiar with the role, the people, the surroundings, the organisation and how it operates.

30.2. It is the Trust's policy that an employee's start date coincides with the Trust's Corporate Induction Programme which currently runs on a fortnightly basis.

31. Probation Period

31.1. As part of the recruitment process the Trust requires all new employees recruited to the Trust to undertake a period of probation to demonstrate suitability for their role. It allows both the line manager and the employee to take into account the individual's overall capability, skills, performance and general conduct in relation to the job in question and assess objectively if they meet the requirements.

31.2. The probation period is for a period of 6 months, in some specific circumstances this may be extended following advice from the HR Department. The Trust's Probation Period Policy provides specific guidance.

32. Declaring a Relationship with a Trust Governor

32.1. Candidates for any staff appointment shall, when making an application, disclose in writing to the Trust whether they are related to a Trust governor. Failure to disclose such a relationship may disqualify a candidate and, if appointed, may render them liable to dismissal.

33. Involving Children and Young People in Recruitment

33.1. The recruiting manager and participation worker should agree the level and extent of involvement from young people on a post-by-post basis. Consideration should be given to term times and school hours which will affect the availability and therefore extent of involvement from young people.

33.2. Wherever possible the recruitment process should be flexible to allow involvement of young people.

33.3. Children and young people from all age groups may be involved in developing job descriptions and person specifications for posts within CYPS. There are a number of methods which enable children and young people to express their views in a friendly and relaxed way and contribute to the recruitment process. Members of the CYPS management team should work with the participation worker to facilitate this involvement.

33.4. In addition young people should be involved in the recruitment and selection process by way of a separate interview panel consisting of 3–4 panel members or by 1–2 young people joining the adult panel.

33.5. Based on limited availability and the agreed involvement of young people the recruiting manager may wish to consider alternative forms of participation such as discussion groups.

33.6. Information regarding all decisions to include or exclude young people from a recruitment process should be sent to the CYPS / CAMHS Service Manager's Personal Assistant who will maintain a record of involvement.

33.7. The recruiting manager and participation worker should agree the percentage weighting and scoring format for the agreed selection process. A maximum of 25% weighting will be applied to scores fed back from young people. In this case the correct weighting can be achieved by ensuring that young people undertake one quarter of the total number of interview questions / discussion topics within the recruitment process.

33.8. The recruiting manager / chair of the professional panel will have the ultimate responsibility for deciding the preferred candidate.

33.9. Young people involved in the selection day will be entitled to receive a gift voucher on completion of the recruitment process to the value £25 as per the standard Service User and Carer attendance fee. The participation worker will arrange which vouchers the young people would like to receive in exchange for the standard attendance fee. The participation worker should claim for the cost of the gift vouchers via the Service User and Carer Attendance Fee Claim form.

33.10. Young people involved in recruitment and selection should be provided with a certificate of participation on completion of the process in recognition of their valued input and achievement.

PART 3

34. Process for Monitoring Compliance

34.1. Responsibility for the development and review of this document lies with the Director of Organisational Development. This responsibility may be delegated. The procedure requires ratification by the Joint Negotiating and Consultative Committee (JNCC), the Director of Organisational Development and notification to the appropriate Board Committee.

34.2. The policy will be reviewed as determined by changes in:

- legislation;
- Department of Health Guidance;
- NHS Employers Guidance;
- local Trust needs;
- or every 3 years.

34.3. There shall normally be no variation to this policy except by joint agreement through the Trust JNCC. Exceptionally the Trust will reserve the right to make changes outside of the normal review and consultation process where there are legislative imperatives outside of the control of the Trust. All such changes will be reported to the JNCC.

34.4. During the lifetime of the document, it will be subject to audit to ensure that (a) the policy and procedure continues to meet service need and (b) that management of recruitment is compliant with the policy and procedure. The audit will be commissioned by the Director of Organisational Development and will involve a selection of a sample of records/documents to be checked against relevant criteria from the policy.

34.5. The outcomes of this audit (this may be in the form of exception reporting) will be presented in report format to the People Committee that will be responsible for the development and monitoring of any identified actions within the scope of the audit. It is suggested that an audit report show contain the following:

- scope;
- period covered;
- findings;
- recommendations/action plans.

35. Training

35.1. Training is provided to recruiting managers to enable them to recruit effectively and in line with the Trust's Recruitment and Selection Policy and values-based recruitment. This can be provided as part of related training or as stand-alone training and on request via the HR Department.

35.2. Equality and Diversity training is available to all staff to enable them to understand the diverse cultural and social differences of applicants and the value that diversity can bring to the workplace and the care that is provided to service users.

36.   Associated Documents

36.1. This policy must be used in conjunction with the other Trust policies associated with the recruitment process. These include:

- Recruitment Starting Salaries
- Relocation Expenses Policy
- Corporate and Local Induction Policy
- Working Flexibly Policy
- Additional Employment Policy
- Secondment Arrangements
- Management of Change Procedure
- Retirement and Long Service Awards Policy
- Grievance Procedure
- The Equality Act 2010.

Appendix 1

RECRUITMENT PROCESS FLOW CHART

The following flow chart shows the full recruitment process and responsibilities throughout. At all stages of the recruitment process the NHS Jobs PEC Dashboard will be updated by the Recruitment Team. If this is not possible for any reason advise the HR Officer – Recruitment Lead in a timely manner.
The recruiting manager should maintain contact with the applicant during all stages of the recruitment process.

VDFA	Vacancy Details for Advertising	**RT**	Recruitment Team
ESR	Electronic Staff Record	**RM**	Recruiting Manager
At Risk	Employees who need alternative employment to be sought	**IAT**	Inter Authority Transfer
RI	Recruitment Inbox	**WA**	Workforce Administrator
LM	Line Manager	**HRM**	HR Manager

	Action taken by Recruitment Team		Action taken by RM/ LM		Action taken by candidate

	Action taken by Workforce Administrator

Line Manager/Recruiting Manager (LM/ RM) reviews the requirements of the role, skill mix needed and if there are any options other than recruitment

↓

RM fully completes Vacancy Details for Advertising form and the appropriate approval forms, and arranges:
- The advert
- Up to date job description and person specification (on the correct template)
- Vacancy Details for Advertising form, including **shortlisting date** and **interview date**.
RM organises shortlisting arrangements with the other panel members.

(NB: at least 2 members of the interview panel must be involved in the shortlisting process and at least 1 of the panel must have been on the recruitment and selection training or previous experience sitting on interview panels)

↓

Ensure VDFA is signed off by their Management Accountant, then approved by relevant Service Director/Exec Director & via any other channels as appropriate for the post and sent to Recruitment Inbox with all documentation
2gnft.recruitment@nhs.net

↓

Approved VDFA and supporting documents received and dated by Recruitment Team
(NB: if VDFA is not fully completed or authorised or if the most up to date form is not received, the form will not be accepted by the Recruitment Team and will be returned to the RM to fully complete)

Recruitment Team and HR Manager – Vacancy checked for suitability for staff who may be

'At Risk' prior to advertising within 1 working day.

If person at risk is identified the RM will be informed.

Position created/identified on ESR and advert placed on NHS Jobs by Recruitment Team within 3 working days

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At closing date vacancy closes on NHS Jobs – all vacancies close at midnight on the vacancy closing date

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Recruitment Team emails RM by midday the day following closing date, to request shortlisting to be carried out online through NHS Jobs
(NB: personal details section of application forms will not be seen until shortlisting has been completed on NHS Jobs)

↓

Following the panel shortlisting RM will contact the Recruitment Team to confirm shortlisting has been completed. This should be done within 2 working days of shortlisting

↓

Recruitment Team emails RM the personal details section of the application form of the shortlisted candidates in preparation for the interviews.

↓

Recruiting Manager sends an ***invitation to interview via NHS Jobs (template also available on the intranet [here](#)*)** to all shortlisted candidates advising them of the date and venue for interview and the need to bring photo ID to the interview.
Along with Invitation to Interview please send '[DBS Model Declaration Form A](#)' and ask to be completed and bring to interview with them.

All candidates will be instructed to contact the RM to confirm their attendance at interview.

↓

Interview conducted

Candidate brings photo ID as proof of identity to the interview and completed DBS Model Declaration form A.
The type of ID and reference number of ID seen is recorded on interview assessment form/new starter/preferred candidate form by the panel member/ID Checker

Panel decide on preferred candidate(s)
Please note that no agreement should be made regarding salary, either verbally or in writing, prior to the starting salary above minimum request being approved.

RM makes verbal offer of employment **subject to:**
  1. **starting salary being verified HR Workforce Admin**
  2. **satisfactory outcomes of all necessary pre-employment checks**
  3. advises candidates their references will now be obtained

RM completes part 1 only of '[New Starter/preferred candidate and employment checks form](#)' along with the completed 'DBS Model Declaration Form A' within 1 working day of interview being conducted and forwards to Recruitment Inbox–
2gnft.recruitment@nhs.net

Please note if RM would like candidate to start above the bottom of the band they will need to complete a [starting salary above minimum request form](#) and forward this to 2gnft.hr-admin@nhs.net – this applies to staff who are already working within the NHS and joining 2gether Trust from another Trust

RM notifies unsuccessful candidates

↓

Recruitment Team sends conditional offer letter to preferred candidate along with all other relevant forms for that candidate to bring completed forms/details to pre-employment checks meeting.
Recruitment Team forwards 'New Starter and Employment Checks form' to HR Admin, once conditional offer letter has been sent.

The conditional letter will advise the preferred candidate that they must attend a pre-employment meeting with the WA, and the necessary documentation to bring to the meeting (NB: candidates are advised that this appointment should be attended within 7 days from the date of the letter, and if not done the offer of employment may be withdrawn)

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RM to complete 'Request for Starting Salary Above Minimum'.

RM to send Request for Starting Salary Above Minimum to 2gnft.HR-Admin@nhs.net

↓

IAT initiated by WA to verify previous NHS Service (if required)

↓

Workforce Admin (WA) to send 'Request for Starting Salary above Minimum' back to Recruiting Manager with decision

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Recruitment Team request references within 2 working days via NHS Jobs and ensure all references are received. (NB: when the references are received they will be printed and placed in the appropriate section of the candidate's personal file and forwarded by email to the RM for approval if not signed off on NHS Jobs).

Recruitment Team create a Personal File which contains:
- Application form
- Job description and person specification
- Offer letters
- Confirmation of all pre-employment checks completed
- Evidence of professional registration
- References which cover the past 3 years in accordance with NHS employers guidance
- Copies of relevant qualifications
- Copy of photo ID seen
- Completed New Starter Form
- DBS Declaration for New Starters Form

The file will also contain a personal file checklist which will be the first page of the file

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WA download applicant from NHS Jobs

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Preferred candidate contacts WA to arrange a pre-employment meeting, if this does not occur within 7 working days please escalate to HR Officer – Recruitment Lead for advice

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WA to update NHS Jobs PEC Dashboard when pre-employment appointment has been made

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Pre-employment meeting conducted by WA.

All necessary information obtained, verified and photo is taken for smart card purposes by

WA during pre-employment check meeting with candidate. Follow all boxes on the form for completion. WA also collect all additional forms.
If any concerns please escalate to HR Officer – Recruitment Lead for further advice.

WA to return completed 'New starter/preferred candidate and employment checks form' to Recruitment Team

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DBS Certificates containing no cautions/convictions recorded are viewable by Recruitment Team through the e-DBS system. At this point the certificate is checked against the DBS Declaration Model form A and the candidate's application. Any discrepancies will be raised with the recruiting manager.

If any convictions show up on the DBS certificate HR will ask the applicant to present their original certificate to a member of the recruitment team who will complete a risk assessment and will forward this to the line manager for their completion and consideration. This will then be signed off by the service director and lastly by the HR Assistant Director/Senior HR Manager.

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Recruitment Team sends references to RM/LM for their approval.

RM/LM must email back their approval of references prior to Recruitment Team sending out offer of employment

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For new employees to the Trust
Corporate Induction booked for successful candidate(s) by Recruitment Team, liaising with the Training and Development Department. Training and Development team will book training for new starter, including Breakaway & BLS. Training Department will communicate this to new starter and Cc the RM in to the email to make them aware.

The RiO team will contact the RM to find out what training is required and the IT Team will request details from RM relating to new starter's access and equipment requirements.

For all candidates going through recruitment process
Once file has been signed off the Recruitment Team sends unconditional offer letter to preferred candidate(s) confirming commencement date and Trust induction arrangements and confirms start date with manager.

Recruitment Team prepare contract of employment for new starters to the Trust. HRM sign contract on behalf of Trust. Contract of employment goes out with final offer letter to new starter ahead of induction.

↓

RM is responsible for ensuring arrangements are in place for a local Induction.

Any additional mandatory training that is required must be booked by the recruiting manager. Details of this should be communicated to the successful applicant prior to their start date with the trust.

The new employee must attend Corporate Induction as their first day of work with the Trust.

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Successful candidate sends written acceptance of the unconditional offer of employment and contract of employment.

↓

Once unconditional offer letter has been sent to candidate, Recruitment Team sends Pre-Employment Checks and New Starter Form back to WA to register new starter.

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WA ensures that all records are completed and ensure all correct payroll details are set up and inputted onto ESR including:

- Full name and address matches ID seen at pre-employment meeting
- Equality Data – disability, ethnic origin, religious belief, sexual orientation, gender, gesidency status
- Previous employment
- Professional registration/ qualifications
- Permit to work, proof of earnings (payslip)
- DBS
- Occupational health clearance
- WTR
- Mandatory NHS employment checks- which include all the ID information gained at pre-employment meeting to be entered on ESR.

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The new starter should attend Corporate Induction on their first day of employment. If the new starter fails to attend on their first day, the training department must contact the LM. If the training department is unable to contact the LM or the new starter the LM needs to escalate this to the HR Manager within 24 hours.