

ANNEX U: WORKFORCE GUIDANCE

- 1 The following Workforce appendix will be implemented when a World Health Organisation (**WHO**) **Phase 5 or UK level 1** of a Flu Pandemic or other, is notified by the Department of Health (DoH) , WHO or any other appropriate trigger level identified by DoH NHS England or the Trust.

The aim is to enable the trust to maintain adequate service levels during the pandemic. (Please refer to Appendix A: World Health Organisation Pandemic Alert Protocol and UK Alert Levels).

This overrides all other Trust workforce policies during a declared pandemic, including, but are not limited to:

- Carers and Special Leave
- Recruitment and Selection
- Sickness and Attendance
- Capability
- Annual Leave

The aim is to have an emergency procedure in place for workforce planning in the event of a pandemic to ensure staffs are supported and there is sufficient staff available to respond to the pandemic and to manage the effects of staff sickness due to the outbreak.

- 2 Service Directors are responsible for the implementation of this appendix as part of their Service Business Continuity Plans in the event of influenza or other Pandemic being declared.

All staff are expected to follow reasonable management instructions and their normal or other duties, in the event of a pandemic.

3. The Trust may request staff to periodically attend emergency planning training. During a pandemic, any staff who are re-deployed to other areas, will be trained in any skills required to work safely and competently. Other training may be suspended to allow staff to focus on essential service delivery

- 4 A pandemic may affect staff in several ways, for example some staff :

- may themselves become infected, which is likely to lead to an unprecedented level of sickness absence during a pandemic
- may have fears of being infected while at work and, in particular, of passing on the infection to their families and friends
- may experience increased levels of stress
- with caring responsibilities may be adversely affected by external measures, such as closure of schools and, in other cases; staff may be caring for partners or other dependents, such as older relatives.

5. Recruiting staff will be critical and will need to be completed in short timescales.

At the appropriate trigger point of the pandemic the Trust will contact staff that have recently retired and encourage them to return to the workforce on a short-term basis.

Non-medical staff will be appointed on Agenda for Change terms and conditions and will, wherever possible, work to a previously banded job description. If it is a new post, it will be given an interim band pending a banding decision.

Medical and Dental staff will be appointed on medical and dental terms and will work to one of the standard job descriptions/plans for the role they fulfil.

The time scales in obtaining a Disclosure & Barring Service (DBS) clearance and the receipt of references may be delayed in the event of a pandemic as other organisations involved in issuing these may themselves be affected. The Trust will seek to fast-track DBS clearance. Risk assessments should be undertaken which may allow staff to start work ahead of receiving a DBS in some circumstances.

Anyone registered with our Bank who has had a DBS clearance in the last 12-months will not need another one if they apply for a post within the Trust. DBS disclosures received in the previous 12 months will also be portable for internal candidates to posts to assist in the pandemic staffing cover.

6. Services will undertake a review of normal and acceptable minimum staffing levels of core and critical functions and services when a pandemic is anticipated and the possible corresponding reduced staff availability. This review should include any changes to working practices that might be required to ensure that as much work can be completed safely with reduced staffing levels. Business continuity planning will be carried out to ensure the Trust is aware of the potential effects of reduced staffing levels on services provided and can therefore plan service provision accordingly.

7. The Trust will work to identify alternative sources of staff to cover gaps in the service due to sickness and other absence during a pandemic and this will commence at the appropriate trigger point. This will include the following:

- retired staff
- re deployment of staff from less critical services into those most critical, including into other trusts/providers;
- volunteers;
- independent providers;
- private hospitals (routine procedures are likely to be cancelled);
- bank workers;
- agency workers;
- Healthcare students (educational establishments are likely to be closed or clinical placements not available).

The Trust will also work with other NHS organisations, STPs and Local Authorities as it may be possible and necessary due to the social care/clinical needs of patients/clients to have some movement of staff across these organisations

The Trust and the local authorities in STP patches will work closely together on this subject and as part of this will map out a process of which patients/clients have joint care and who could have their care package consolidated during a pandemic. This would happen at the appropriate trigger point.

8. During the pandemic there may be pressures on GP surgeries. If this becomes clear the Trust will contact staff to inform them of alternatives to producing medical certificates. These may be reviewed during the pandemic.

Normal staff sickness reporting arrangements will apply, and payroll notification should be completed in ESR. If the sickness is pandemic related, this must be noted/ recorded as directed in staff communications relating to the pandemic.

There will also be up to date information available to staff via communications e mails and on the Trust website about the flu pandemic and what action they should take.

9. Details on the workforce will be collected by managers in preparation for the need to redeploy staff during a pandemic at the appropriate trigger point (section 21 – Skills and personal information audit). It is possible that power supplies will be affected during a pandemic and therefore, normal IT systems may not be available for varying periods of time. Therefore, the information obtained from the completed Appendix B forms should be available in hard copy.

Data maintained will include the following:

- Contact details including home and mobile phone numbers (in addition staff should be asked to ensure this data is up to date in their ESR record);
- Mobility including distance to travel;
- Skills including transferable skills;
- Refresher training needs;
- Hours available to work;
- Whether they are a carer for children/have eldercare requirements (to assist with planning because their childcare or elder care provider may also be affected).

10. The Trust will deploy staff as the need arises. This could be to a different role, function, or locality and all such requests should not be unreasonably refused due to the unprecedented nature of the crisis. Staff who are redeployed will only be moved to a role which they can competently and safely undertake and will be trained as required.

Staff may also be asked to work different hours including working outside their normal working hours and /or working increased hours. If staff work above their full time hours or are required to work evenings, nights, weekends and/or general public holidays they will be paid or given time of in lieu in line with their terms and conditions.

All staff may be requested to temporarily change their job function and/or level they work in the Trust. Office based staff working in non-clinical areas not in direct support of the pandemic may be requested to work in such areas.

Staff may be expected to work in other localities to their normal one due to staff shortage in some areas. If staff have to travel further due to this change they will be reimbursed in line with their terms and conditions.

To meet the operational needs of the service during the pandemic, annual leave may be cancelled for part or all of the duration of the pandemic and a hold put on all new leave requests.

If a pandemic continues for some time, and annual leave is cancelled, there will be large numbers of staff trying to take annual leave in a short period of time following the pandemic and in such circumstances the Trust would consider carry forward arrangements eg up to 10 days holiday entitlement (pro rata for part time staff) carried to the following annual leave year.

Staff who do not normally work on public holidays may be requested to do so and in this event, the payment and time off in lieu would be in line with their terms and conditions of employment.

Alterations to work patterns may be required for the duration of the pandemic. There will be no change to the contract of employment and normal working hours will resume at the end of the crisis. The end of the crisis will be determined by the Department of Health or other lead body.

11. Those staff at a high risk of complications due to their own health conditions will be risk assessed by their manager to ensure that they are not at undue risk whilst working in direct patient care in line with public health advice. Redeployment will be considered.

At the appropriate trigger point staff will be invited to declare if they believe they are at increased risk of infection or complications of infection. For example DOH guidance states that the following groups of people are within the high risk categories in the event of a Flu pandemic:

- People aged over 6 months and under 65 years of age in current seasonal flu vaccine clinical at risk groups;
- All pregnant women;
- Household contacts of people with compromised immune systems e.g. people in regular close contact with patients on treatment for cancer;
- People aged 65 and over in the current seasonal flu vaccine clinical at risk groups.

This may be updated at any time and different criteria will be applicable for different pandemics.

12. There will be the need for some flexibility when implementing some HR/ employment related policies during the pandemic whilst other will be used widely e.g. Carers and Special Leave as Schools, nurseries, nursing homes and other support agencies may be affected and have to close and the Trust will aim to be flexible and allow time off for staff whose dependents' normal care arrangements break down.

Staff may be requested to take annual leave and/ or unpaid leave. Managers may provide the opportunity for staff to make up the time at a later date or where certain roles allow, permit staff to work from home. If unsure, managers should seek advice from the HR and IM teams and the Trust will aim to ensure fairness in its responses.

13. Regular staff communications will be sent out during any pandemic by a range of means including by email and staff briefings.

14. Staff should communicate any concerns to their manager or an appropriate manager involved in the planning of the Trust's response to the emergency. There will also be up to date information available to staff on the Trust website about the pandemic and what action they should take.
15. The Trust will use the latest guidance on when staff can return to work after they are first symptomatic with a pandemic illness. However, they must first speak to their manager who will ask a series of questions to ascertain and check the staff member's fitness to work
16. The Occupational Health (OH) teams will support managers and staff during a pandemic as required.
17. Staff must follow infection control guidelines at all times to protect themselves, patients and colleagues. . This will be published via email briefings, face-to-face briefings, and the staff intranet site.
18. If a member of staff arrives at work and is displaying signs of illness or becomes ill with symptoms while at work they should be sent home immediately.
19. Staff may be affected by increased pressure or stress at work and home, including illness of family members as a result of the pandemic, and support is available from managers, HR colleagues, union representatives and the Staff Counselling Services. Additional support may also be available and advertised/ communicated to staff during a pandemic.
20. This appendix will stay in effect whilst the pandemic alert level is at the appropriate trigger point. After it is declared that the crisis is over there will be a period of recovery which may include filling vacancies, the taking annual leave and undertaking outstanding training and development activities. If required we will undertake a review of how the Trust/ NHS dealt with the crisis and lessons to be learnt for the future. It is also important to remember there may be more than one wave of a pandemic spread some weeks or months apart, therefore, the Trust will stay alert for another wave coming and so many of the systems in place must be maintained.

21. SKILLS AND PERSONAL INFORMATION AUDIT

In the event of a pandemic, the health service will be at the forefront of the response at a time when its own staff and resources will be reduced. In order to maximise the Trust's ability to provide services for patients/clients with and without the illness during a potential pandemic, it will be important to know about our staff and what skills they may have.

This questionnaire has been designed to ensure that we have an up to date record of your skills, qualifications and other relevant information. Part of the Trust's pandemic planning process is to see how we may need to help you during a pandemic, for example with transport to get to work, help with caring responsibilities; as well as understanding how your skills might be put to the best use during the pandemic. All information will be strictly confidential and held in accordance with GDPR Legislation, both locally and if required centrally including in ESR where applicable.

You may also have been asked about your role during a pandemic as part of the wider pandemic planning process looking at how services may operate during a pandemic.

If you have an administration or office based post, you may have been asked to think about the skills and training you have or could obtain and how best these could be used to assist the Trust during a pandemic. For example, you may have a recent clinical background, but have moved into a management role. Managing information during the pandemic will be also be essential, so if your usual role involves collecting and providing information, you may be asked to join the Operational Group which will co-ordinate the Trust's response during the pandemic.

When requested to do so please complete and return the form to your line manager

22. All staff will undertake a risk assessment with their manager at the outset of a pandemic to ensure they are safe and supported in the workplace.

FITNESS TO RETURN TO WORK AFTER A SICKNESS ABSENCE WITH PANDEMIC INFLUENZA

Managers' check list:

Template based on Flu Pandemic, a revised template will be issued in the event of other pandemic outbreaks

FITNESS TO RETURN TO WORK AFTER A SICKNESS ABSENCE WITH PANDEMIC INFLUENZA

Employees are recommended by Health Protection Agency to **remain off work for seven calendar days** following onset of pandemic flu. Employees must be **well enough** to return to work.

Employees who have a suppressed immune system may be infectious for longer and should be nine days since onset of flu *and* free from respiratory symptoms for at least 48 hours.

Question	Yes/No
Did the illness that you have recovered from consist of fever 38°C or more plus cough/severe shortness of breath/sore throat/muscle ache	
How many days is it since you started with the illness?	
Do you have any residual symptoms? Fever above 38°C, cough/shortness of breath, sore throat, runny nose, muscle ache, conjunctivitis, watery diarrhoea, severe unexplained chest problems, headache	
Do you feel fit to return to work?	

I confirm that I am now ready to return to work following pandemic influenza and that I have no medical reasons not to return to work.

Employee Signature:

Date

Employee Name:

Manager signature

Manager Name

Place of work

Contact Tel. No:

When complete this form is to be **filed in the Personal File** of the employee

Line managers should ensure that sickness absence from pandemic influenza is recorded, and any additional processes put in place by their Trust on the reporting and monitoring of pandemic influenza followed.