

RECRUITMENT, SELECTION & RETENTION

NGH-PO-033

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POLICY

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Version Control Summary

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POLICY

SUMMARY

This policy gives instruction on the procedures to be followed for:

- Recruitment and Selection – including Vacancy Control (Appendix 1)
- Criminal Records Check (Appendix 2)
- Verification of Professional Registration (Appendix 3)
- Exit Interviews (Appendix 4)

Other policies that can be referred to are:

- Appraisal Policy (NGH-PO-863)
- Disciplinary Policy (NGH-PO-028)
- Internal Secondment Policy (NGH-PO-699)
- Job Banding Policy (NGH-PO-878)
- Organisational Change Policy (NGH-PO-088)
- Probationary Period Policy (NGH-PO-908)
- Supporting and Managing Workforce Sickness Absence Policy (NGH-PO-031)

POLICY

1. INTRODUCTION

Northampton General Hospital has a duty to meet its responsibilities in providing the highest possible standard of health care to patients. Northampton General Hospital NHS Trust recognises the importance of its staff in delivering the care and services to its patients. It is committed to promoting a strategic and professional approach to all aspects of its recruitment processes to enable the Trust to attract and appoint high calibre staff with the necessary skills and attributes to fulfil its strategic aims. The Trust will adhere to high standards of recruitment practice in accordance with the requirements of the NHS Employment Check Standards which include Criminal Records Check Procedure, Verification of Professional Registration Procedure in line with the Trust's policies for safeguarding children and adults.

The Trust is committed to retaining a skilled, competent and motivated workforce. Northampton General Hospital NHS Trust endeavours to retain the services of its staff and to promote career and succession planning to retain skilled and experienced staff within the service. Issues concerning how to retain and motivate staff, and the increasing demands for high-level skills and greater flexibility in the workplace are becoming more and more significant. Keeping accurate records of ex-employees is important to obtain reliable statistical evidence and percentage turnover figures as a basis for analysing retention.

The policy will be applied fairly and consistently to all employees regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation, whether working full or part-time or whether employed under a permanent, temporary or fixed-term contract.

The NHS Constitution Staff Rights and Pledges ensure the NHS Commits to provide all staff with clear roles and responsibilities and rewarding jobs for teams and individuals that make a difference to patients, their families and carers and communities. In addition the Staff Responsibilities, within the Constitution, expect staff to have a duty to be honest and truthful in applying for a job and carrying out that job.

Through its Vision and Values, supported by its Strategies, the Trust is committed to providing the very best care for all its patients and in order to achieve this we will respect and support staff by providing them with reasonable development, advice and other support as appropriate and treating them fairly. In return all staff are expected to strive for excellence, to reflect, learn and improve what they do and put patient safety above all else.

In addition we have a commitment to improving the health and wellbeing of individuals and this is reflected through our Health and Wellbeing Strategy. Through this policy we will endeavour to support staff to protect and enhance their own physical and mental health and wellbeing.

2. PURPOSE

The purpose of this policy, together with the associated procedures, is to provide a framework which promotes a professional approach and the highest possible standards

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throughout the recruitment and selection process and to ensure a proactive and lawful approach to equality and diversity issues within the process.

3. SCOPE

This policy will apply in any situation where recruitment takes place to fill a vacant post. In the case of secondments reference must be made to the Trust's Internal Secondment Policy.

All employees involved at any stage of the recruitment and selection of staff should be aware of and adhere to the contents of this policy and its associated procedures. Any external consultants, recruitment agencies or external experts who assist in the recruitment process must act in accordance with this policy. The Appointing Officer is responsible for providing such external parties with this policy prior to their involvement in the recruitment process.

The Recruitment and Selection Policy will not apply in the following circumstances:

- Assisting in the identification of suitable alternative employment for a Trust employee who is designated 'at risk' of redundancy (see Organisational Change Policy).
- Identifying a post for a Trust employee who, through ill health, can no longer carry out the main duties of their current post (see Supporting and Managing Workforce Sickness Absence Policy).

4. COMPLIANCE STATEMENTS

Equality & Diversity

This document has been designed to support the Trust's effort to promote Equality, Diversity and Human Rights in the work place in line with the Trust's Equality and Human Rights Strategy. It has also been analysed to ensure that as part of the Public Sector Equality Duty the Trust has demonstrated that it has given 'due regard' to its equality duty and that, as far as is practicable, this document is free from having a potential discriminatory or adverse/negative impact on people or groups of people who have relevant protected characteristics, as defined in the Equality Act of 2010.

NHS Constitution

The contents of this document incorporates the NHS Constitution and sets out the rights, to which, where applicable, patients, public and staff are entitled, and pledges which the NHS is committed to achieve, together with the responsibilities which, where applicable, public, patients and staff owe to one another. The foundation of this document is based on the Principals and Values of the NHS along with the Vision and Values of Northampton General Hospital NHS Trust.

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5. DEFINITIONS

Appointing Officer	A member of staff with the delegated authority to recruit and/or be involved in the recruitment process.
DBS	Disclosure and Barring Service.

6. ROLES & RESPONSIBILITIES

ROLES	RESPONSIBILITIES
Chief Executive and the Trust Board	Are responsible for ensuring there is a policy in place.
Director of Workforce & Transformation	Is responsible for developing the policy and ensuring the provision of training and support.
Appointing Officers	<p>All Appointing Officers who have the authority to recruit and/or are involved in the recruitment process should be trained in recruitment and selection procedures. In particular, guidance should be given on the protected characteristics of the Equality Act 2010.</p> <p>Standards should also be adhered to on the checks required on potential staff prior to offer of appointment, especially in relation to posts that have substantial access to vulnerable patients.</p>
HR Service Centre (HRSC) / Medical Staffing Team (MST)	<p>The Head of HR Services is responsible for ensuring that, in line with their responsibilities within the Recruitment and Selection Procedures, the Trust's centralised recruitment service which supports the process offer an efficient service to Appointing Officers. Any wording that does not comply with equalities guidelines will be taken out of the Job Description, Person Specification, or advert by the HRSC/MST.</p> <p>The HRSC/MST are responsible for placing adverts within the agreed timescales, arranging for applications to be available for short listing, inviting to interview and gaining all clearances prior to the start date in line with the NHS Employment Check Standards.</p>
HR Business Partners / Advisors	The role of the HR Business Partner/Advisor is to support the Appointing Officer where necessary and ensure that the Recruitment and Selection Procedures are followed, to provide support and advice on all aspects of equal opportunities and to ensure that all appropriate documentation relating to recruitment and selection is completed in a timely fashion.
Workforce Information	Are responsible for producing reports in relation to professional registration.

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<p>All Trust Employees</p>	<p>Have a responsibility to:</p> <ul style="list-style-type: none"> • Support the Trust to achieve its Vision • Act at all times in accordance with the Trust values • Follow duties and expectations of staff as detailed in the NHS Constitution – Staff Responsibilities.
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7. SUBSTANTIVE CONTENT

7.1 Recruitment and Selection Procedure - including Vacancy Control
 The Recruitment and Selection Procedure provides a full explanation of all stages of the process and is accompanied by template forms which are available from the intranet. Appointing Officers must follow these procedures. This procedure outlines the key aspects of the recruitment and selection process that must be complied with (see Appendix 1).

7.2 Job Descriptions
 Every post, without exception, must have a written job description listing the main duties and responsibilities. Any existing job description for a particular post must be reviewed by the Appointing Officer and if necessary, amended to take into account any changes in the role. All Job Descriptions submitted must be on the Trust template, available from the HR section of the intranet.

7.3 Person Specification
 Each post must have a person specification, setting out the abilities, skills, experience and qualifications required by the post holder. Any person specification which already exists for a particular post must be reviewed, taking full account of the job description and submitted on the Trust template, which is available from the HR section of the intranet. The person specification will be checked by the HRSC/MST and if further amendments are required, these will be discussed with the Appointing Officer.

7.4 Job Banding
 All new posts or posts that have changed significantly in responsibility and duties must be banded prior to being advertised and further information regarding this can be found in the Trust’s Job Banding Policy.

7.5 KSF Post Outline
 The Trust now uses the nationally recognised simplified KSF post outlines for each pay band. This means that there are only 12 post outlines, one post outline per band. The simplified version looks at the 6 core dimensions:

1. Communication
2. Personal & People Development
3. Health, safety and Security
4. Service Improvement
5. Quality
6. Equality and Diversity

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As a result of using only the core dimensions, it is recognised that all staff within the same pay band, regardless of where they work, will have the same level of responsibilities and qualities and the job description should be reviewed in conjunction with this. All post outlines are available on the Trust intranet.

7.6 Criminal Records Check

It is mandatory for the Trust to carry out DBS checks for eligible new staff in line with the Department of Health's Standards for Better Health, NHS Employment Check Standards and in line with the Trust's procedure for Criminal Records Check (Appendix 2).

7.7 Verification of Professional Registration

The Verification of Professional Registration Procedure (Appendix 3) is to provide clear guidance to the Trust's expected standards and procedures which are in place to ensure that all professional registrations are appropriately checked, both upon commencement of employment and on an on-going basis throughout employment.

7.8 Redeployment

Redeployment will apply in the following circumstances:

- Organisational change
- Capability due to ill health

The Trust will make every reasonable effort to retain employees by identifying suitable redeployment opportunities for the individual. For further information on the process to follow refer to Organisational Change Policy or the Supporting and Managing Workforce Sickness Absence Policy.

7.9 Exit Interviews

All employees who change jobs or leave Northampton General Hospital should complete an exit questionnaire and be offered an exit interview with their line manager (Appendix 4). Reasons for leaving will be monitored via ESR and quarterly reports produced. This will ascertain reason for leaving and identify any trends or issues that can be investigated. This will support the Trust in the retention of staff.

8 IMPLEMENTATION & TRAINING

This policy is applicable with immediate effect within the Trust, from the date that it is published on the intranet. The Governance Department will ensure that any previous versions are removed. The Head of HR Services, will conduct Appointing Officers Training, supported by information on the intranet and awareness raising sessions upon the release of a new or updated policy or upon an identification of need through the monitoring of the process within individual directorates. HR Business Partners/Advisors will support managers when using the policy. Human Resources will make Trust staff aware of this version of the policy through the HR Bulletin.

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9. MONITORING & REVIEW

Minimum policy requirement to be monitored	Process for monitoring	Responsible individual/ group/ committee	Frequency of monitoring	Responsible individual/ group/ committee for review of results	Responsible individual/ group/ committee for development of action plan	Responsible individual/ group/ committee for monitoring of action plan
Employment checks are completed in accordance with the NHS Employment Check Standards	Complete new starter checklist and update ESR	HRSC/MST Assistant	Daily	HRSC/MST Leader	HRSC/MST Leader	Head of HR Services
	Staff not started until new starter checklist complete	HRSC/MST Assistant	Daily			
	Any anomalies reported to determine if further action required.	HRSC/MST Assistant	Daily			
Assurance gained from NHS Framework that agencies adhere to national framework	Updated lists sought yearly from NHS Framework	Head of HR Services/Head of Nursing Informatics	Annually	Head of HR Services/Head of Nursing Informatics	Head of HR Services/Head of Nursing Informatics	Deputy Director of Nursing/Head of Resourcing & Employee Services
Assurance gained from agencies that they comply to NHS	Copy of a selection of personal files obtained from agencies as	Head of HR Services/Head of Nursing	Six monthly	Head of HR Services/Head of Nursing	Head of HR Services/Head of Nursing	Deputy Director of Nursing/Head

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Employment Check Standards.	verification of adhering to standards. Any anomalies reported to Director of Workforce and Transformation and NHS GPS Framework	Informatics		Informatics	Informatics	of Resourcing & Employee Services
Locum Doctors	Verification of NHS Employment Check Standards for each Locum supplied	HR Locum Centre Assistant	Daily	HR Locum Centre Team Leader	HR Locum Centre Team Leader	Head of HR Services
Monitoring of NHS Employment Check Standards throughout recruitment process	Works sheets produced reporting to managers what employment checks are outstanding.	HRSC/MST Leader	Weekly	HRSC/MST Leader	HRSC/MST Leader	Head of HR Services
Exit Interview Procedure	ESR reports to ascertain reason for leaving	HRSC/MST Leader	Quarterly	HR Advisor	HR Business Partner	Head of Resourcing & Employment Services
Internal Audit Monitoring	Audit Reports	Internal Audit	Annually	Head of HR Services	Head of HR Services	Head of Resourcing & Employment Services

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10. REFERENCES & ASSOCIATED DOCUMENTATION

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APPENDICES

Appendix 1 - Recruitment & Selection Procedure (including Vacancy Control)

Appendix 2 - Criminal Records and Barring Checks Procedure

Appendix 3 - Verification of Professional Registration Procedure

Appendix 4 - Exit Interview Procedure

Appendix 1 - Recruitment & Selection Procedure (including Vacancy Control)

Recruitment & Selection Procedure (including Vacancy Control)

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1 INTRODUCTION

This procedure provides a full explanation of all stages of the recruitment process and accompanied by template forms which are available from the intranet. Appointing Officers must follow these procedures. This procedure outlines the key aspects of the recruitment and selection process that must be complied with.

2 VACANCY

Prior to any post being advertised, Appointing Officers should give full consideration to the requirements of the post in its present form, responsibilities, hours and check that the job description and person specification is up to date, this includes ensuring that it is in the most recent Trust templates, which can be located in the HR pages of the intranet. Any variation to the establishment of the department should be raised at this stage with the Finance Department. Any change which may affect the band of a vacant post or any new posts in the Trust must be submitted for banding to the HR Department as per the Trust's Job Banding Policy. It is the responsibility of the Appointing Officer to ensure that any change to establishment and/or band is within the department budget.

If the post is to be advertised as a secondment opportunity then the Trust's Secondment Policy must be referred to.

Appointing Officers must complete the [Recruitment Authorisation Form](#) and ensure that the post has been submitted to the Vacancy Control Panel (VCP) for authorisation to recruit (Appendix A). All relevant documentation which includes advert, [job description](#), [person specification](#), details of leaver and all arrangements for the interview process including panel members, recruitment and VCP authorisation (Appendix 5) must be forwarded to the HRSC/MST.

Consideration must be given at this stage to the [recruitment timeline](#) for advertising, shortlisting and interviews. Adverts should be given a two week publication time. Shortlisting dates should be incorporated into the schedule and should be made within 5 days of the closing date. Interviews should take place 2 weeks after shortlisting to enable the HR Service Centre (HRSC)/Medical Staffing Team (MST) to inform candidates and give clear notification of interview, which should not be less than 8 working days.

The HRSC/MST will not process an advertisement without the completed Recruitment Authorisation/VCP authorisation and attached documentation. Incomplete forms will be returned to the manager and may result in the recruitment process being delayed.

All vacancies will be advertised on NHS Jobs. This may be internally when certain restrictions are appropriate e.g. restructures or ring fencing, which should be discussed with a HR Business Partner/Advisor.

The HRSC/MST will ensure that via NHS Jobs that the local Job Centre is informed of vacancies in order to comply with Job Centre Plus and the requirements of the Positive about Disabled People Standard.

Posts advertised will be available to potential job share applicants as part of the Trust's

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flexible approach to recruitment and retention.

If there are specific reasons why the post cannot be offered for job share this must be discussed with a HR Business Partner/Advisor prior to the submission of the Recruitment Authorisation Form.

3 SHORTLISTING

Appointing Officers will need to access NHS Jobs when the post has closed and commence shortlisting on line using the [Shortlisting Guide](#) and the NGH standard scorecard.

Late applications will not be accepted unless there are exceptional circumstances. Acceptance of late applications can hinder the recruitment process. Extensions of closing dates or late applications should be discussed with the Head of HR Services.

Shortlisting should be agreed between the Appointing Officer and other members of the interview panel. This will also include any external assessor who has been invited to be part of the selection process.

A panel member may not withdraw from the process without good reason and only with the consent of the Appointing Officer. Changes in the shortlisting/interview panel may result in inconsistencies of selection and is potentially unfair to applicants.

Shortlisting must be based on the information contained in the Application Form and/or curriculum vitae, using the person specification as the assessment criteria. This must be consistently applied to all applicants.

In line with the requirement of the Positive about Disabled People Standard (Two Ticks' Symbol), any disabled candidate who meets the essential criteria stated in the person specification must be shortlisted. Applicants who want to be considered under the guaranteed interview scheme will have a 2 tick symbol against their application form on NHS jobs.

Members of the interview panel must ensure that reasons for not shortlisting candidates are recorded on the standard scorecard, as feedback may be required to be given by the Appointing Officer. This information is important in case of any challenge by a candidate on bias or discrimination.

If a significant or unexpected delay occurs in the shortlisting or any other stage in the recruitment process, the Head of HR Services must be informed who will advise appropriate action regarding applicants.

4 INTERVIEWS

The interview panel must be the same as the shortlisting panel and should have decided on a date and time for interviews to be held on completion of the Recruitment Authorisation Form. The interview date will be advertised with the job advert.

The date for interview should be two weeks after the completed shortlisting date as any

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further delay may cause a number of applicants to lose interest or be offered employment elsewhere.

The interview panel should be made up of no less than 2 people, including the Appointing Officer and preferably all members of the panel should have undergone recruitment and selection training.

The HR Business Partners/Advisors or Head of HR Services may be contacted for advice prior to all interviews and must be consulted over any legal questions e.g. disability.

Arrangements for the venue and facilities for interviews and presentations, where appropriate, will be the responsibility of the Appointing Officer.

The HRSC/MST via NHS Jobs will be responsible for:

- Contacting all shortlisted applicants via NHS jobs with details of date, venue and time for interview and any presentation requirements if indicated on the Interview Schedule.
- Requesting details of any special requirements in the case of disability.

All candidates will be asked to confirm their attendance at interview via NHS Jobs. The interview pack will be available to Appointing Officers via their NHS Jobs account. A copy must be printed prior to interview which will include an interview schedule, job description, person specification and the application forms of shortlisted candidates.

Interview questions must relate to the requirements and circumstances of the job. Candidates should not be asked questions, which could be seen directly or indirectly as discriminatory.

While efforts should be made to ask broadly the same types of questions to each candidate in order to ensure that each is given a fair opportunity to demonstrate their skills and knowledge, supplementary questions should be used to probe for further information or clarification where answers are incomplete or ambiguous.

Interviewers should establish that candidates have fully understood the job requirements especially where the job involves unsociable and irregular hours, or travel.

If a potentially successful candidate has a disability that would require reasonable adaptations/adjustment to enable him/her to do the job, the Trust has an obligation to consider such adjustments. Interview notes regarding these must be clear.

Should an issue arise regarding selection of a final candidate, advice should be sought from the designated HR Business Partner/Advisor prior to making a final decision. The panel has the right to suspend the process whilst seeking this advice.

Interviewers must keep adequate and appropriate notes of the interview including reasons for selection and non-selection, using the [Assessment Marking Form](#) any amendments need to be initialled for verification. Candidates are entitled to ask to view

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such notes under the Data Protection Act (1998).

All Assessment Marking Forms and notes of the interview together with successful candidate information must be scanned to the HRSC/MST immediately after the selection process. The unsuccessful candidate information will be kept on the recruitment file for 12 months.

A hard copy Assessment Marking Forms must be kept for 12 months by the Appointing Officer which will allow resolution of any disputes that may arise and will provide reference for feedback.

Assessments and Presentations

Selection/psychometric tests and assessment centres may be used in addition to the interview to assist in the assessment of the candidate's ability to perform the job.

The reliability and validity of tests, including the fact that they are not discriminatory, must be established in advance with the Head of HR Services or HR Business Partners/Advisors and should be applied consistently and equally to all candidates.

Selection tests must only be carried out or used by individuals who are properly accredited or have proven experience.

Suitable arrangements should be made for candidates with disabilities to undertake the test where necessary.

Candidates may be asked to deliver a presentation or report to the interview panel as an additional aid to selection. This should only be included as part of the selection process where either the panel need to explore in depth the knowledge of candidates on a given subject/s, or where delivery of information/verbal communication in this way is required and included in the person specification. The subject must be relevant to the post.

Candidates will be advised of the criteria assessed by selection tests or presentations in the invite to interview letter via NHS jobs.

Full documentation and details of results must be kept for each candidate and will be held, with the application form, references and any other relevant information, with the job file for a minimum of 12 months. These files are used for any disputes and for equality recording and monitoring.

The selection decision must be based on individual assessment against the selection criteria in the person specification and, where appropriate, additional selection tests/methods where carried out.

5 OFFER OF EMPLOYMENT

The Appointing Officer should advise the successful candidate and request the HRSC/MST to confirm the offer of employment in writing by completing the [Successful Candidate Form](#). This should be signed by the Appointing Officer and scanned to the HRSC/MST with the Assessment Marking Forms for all candidates.

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The offer of employment will be conditional and subject to satisfactory NHS Employment checks being obtained.

The successful candidate will receive a conditional offer which will stipulate that employment can only be confirmed when satisfactory clearances are received subject to NHS Employment Check Standards being met. The conditional offer will also detail any probationary periods applicable to the role in accordance with the Trust's Probationary Period Policy any associated costs that the candidate will be required to pay for Disclosure and Barring Check. The successful candidates are requested to make a HR appointment with the HRSC/MST to secure all the documents to satisfy all clearance checks.

The HRSC/MST will confirm to the Appointing Officer that clearances have been obtained in line with NHS Employment Check Standards. The Appointing Officer will agree a start date with the candidate and send confirmation of the date via e mail to the HRSC/MST.

Once a start date has been agreed and confirmed the HRSC/MST will issue a new starter pack to the employee which includes details of the Trust induction. The line manager will also receive a confirmation of new starter pack which details start date and other relevant information for e.g. Local Induction Checklist.

6 NHS Employment Check Standards

All successful candidates are required to attend a HR Appointment to determine that they meet the preconditions of employment and to supply all relevant documentation to meet these standards.

These standards apply to the appointment of all permanent staff, staff on fixed-term contracts , volunteers, students, trainees, contractors, highly mobile staff, temporary workers (including locum doctors), bank staff, and other workers supplied by an agency. Trusts appointing agency staff, contractor or other external bodies to provide NHS services will need to ensure that their providers are also in compliance with these standards.

The Appointing Officer must make it clear to all prospective employees that any conditional offer of appointment is subject to satisfactory employment checks being obtained and that information submitted will be verified. It should also be made clear that any offer of appointment may be withdrawn if, at any time, it becomes apparent that the applicant has either knowingly withheld information, or has provided misleading or false information. Appointing Officers must contact their allocated HR Business Partner/Advisor if they wish to withdraw an offer of employment if satisfactory checks have not been obtained.

Employment History and Reference Checks

The purpose of an employment history and reference check is to obtain information about an applicant's employment and/or training history in order to ascertain whether or not they are suitable for a particular position. Northampton General Hospital have a duty

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of care to patients and staff to ensure that all reasonable checks are undertaken to identify any reason that, if known, would result in an individual not being employed or appointed.

Employment history and reference checks should be obtained when an individual is being considered for employment (paid or unpaid i.e. volunteer work) and should only be pursued to confirm a recruitment decision. Information should not be used for the purpose of short-listing or selection.

Applicants are required to provide their full employment and/or training history, including an explanation of any gaps between periods of employment or training when completing the Application Form. One of the references must be from their current or latest employer.

The applicant's permission must be obtained on offer of employment to approach their current employer for a reference.

To obtain references the initial request is made via NHS Jobs by the HRSC/MST when the Successful Candidate Form is received. All requests for references via NHS Jobs are accompanied by a job description and person specification.

[It is the Appointing Officer's responsibility to ensure that they log on to NHS Jobs on a daily basis to check if references have been received.](#) If the references have not been received in a timely fashion it is the responsibility of the Appointing Officer to chase any that may be outstanding.

New and Existing NHS Employees

The Appointing Officer must validate a minimum of three years continuous employment and/or training including details of any gaps in service. The number of references may differ for each successful candidate, depending on how many episodes of employment/training they may have had. Where an individual has been with one employer for three years or more one reference is sufficient. Where a successful candidate has changed employment frequently within the last three years, a sufficient number of references must be obtained to cover the continuous three years history. At least one of the references must be from their last or current employer.

Appointing Officers must assess whether any additional references are required. Where a gap in employment history or training has been identified the Appointing Officer must request that the applicant provides further details.

For reference requests for existing or ex-employees the Trust also have a duty under the Data Protection Act (1998) to ensure that when providing personal data within a reference, that this information is true, accurate, fair and can be justified. Any statement made in a reference which is untrue is likely to bring with it a claim for libel. It is imperative that only factual information is released within a reference and guidance must be taken from the Providing an Employment Reference Guide within the HR section of the intranet.

Employers, particularly those outside the NHS, are increasingly taking a cautious approach when giving references and will only provide basic factual information to

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confirm periods of an individual's employment and position held while avoiding answering subjective questions on skills and personal qualities. It is therefore crucial for the Trust to use all the appropriate selection tools available to us as part of the recruitment process, such as the application process, assessments/psychometric tests, and face to face interviews in order to assess an applicant's suitability for a particular role. Employers should refrain from responding to or asking for comments in relation to whether or not a former employee would be suitable for the role they are applying for, or whether the referee would re-employ them, as this is subjective and may bear no reflection on whether or not the individual is suitable for the new role they are applying for.

Doctors in Training

Doctors on rotational training programmes are considered as being in continuous employment throughout the full period of their training. Employers should use their discretion when deciding the frequency and number of references required when seeking ongoing assurances of conduct for doctors during their period of training. Obtaining additional references should always be proportionate to risk. Appointing Officers may find it useful to obtain information from their most recent Record of In-Training Assessment (RITA) or Annual Review of Competence Progression (ARCP).

Internal Applicants

When a successful candidate is already employed by the Trust or Trust Bank all effort should be made to ensure any risk is minimised. One reference must be requested from the individual's recent line manager.

Other Types of Reference Confirmation

Depending on the individual's circumstances, other types of references may also be required if the successful candidate has:

- Not worked or been in full time education within the last three years preceding the application. In such cases, in addition to asking for a personal statement from the applicant they will also be required to provide two personal references from persons of some standing in their community who have known them for at least three years.
- Persons of some standing may include a GP, lawyer, MP or minister of religion, etc. The personal reference should clearly state the referee's name, job title, company, address, and length of time the individual has been known to them.
- Been in full-time education in the last three years. In this case, a reference should be obtained from the relevant school, college or university.
- Served in the Armed Forces or Civil Service during the previous three years. In this case, a reference should be obtained from the relevant service or department
- Been self-employed. Evidence should be obtained (for example, from HM Revenue & Customs, bankers, accountants, solicitors, client references etc.) to

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confirm dates of employment, and any other information such as confirmation that the individual's business was properly conducted and the applicant's involvement in the business was terminated satisfactorily. In addition, it is recommended that one personal reference from a person of some standing in their community should also be sought.

Overseas Employment or Training

The successful candidate will need to give a reasonable account of any significant periods of time spent overseas (for the purpose of this procedure this should be where they have spent a continuous period of three months or more).

The following documentation may be requested to seek additional assurance of time spent overseas:

- Proof of overseas residency, such as a document from a landlord
- Overseas employer references or academic references/certificates proof of itinerary
- Confirmation of travel from UK departments and agencies overseas for example, FCO missions, British Council, Non-Government organisations and agencies.

Confirmation of dates should be cross-referenced with passports where possible (it should be noted, that some countries no longer stamp passports), work permits and other relevant documentation.

Where an applicant has not been able to provide sufficient documentary evidence of time spent abroad, the Trust will need to consider what additional assurances may be gained at interview, or through evidence of other relevant training and experience in the UK. However, it should be recognised that it might not be possible to employ the individual where the required checks cannot be undertaken, or sufficient assurances cannot be obtained.

Right to Work Checks

The Immigration, Asylum and Nationality Act 2006 (amended 2016) provides employers with a statutory excuse against a civil penalty where they can clearly demonstrate that they have carried out all the necessary checks to mitigate any risks of employing illegal workers.

Northampton General Hospital are at risk of facing a civil penalty if the Trust are found to be employing an illegal worker and a correct right to work check has not been carried out. A civil penalty can be anything up to £20,000 per illegal worker. Criminal sanctions may also apply where the employer is found to have knowingly appointed or continues to employ an individual who does not have a right to work in the UK.

There are three steps that the Trust must follow to confirm a prospective employee has the right to work in the EU:

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- Request right to work documents
- Validate the documents
- Copy and securely store documents.

The Trust must assess the eligibility of an individual's right to work in the UK by verifying specified documentation. Documentation must be validated from all prospective employees to ensure they are eligible to reside and work in the UK and also to meet the requirements of anti-discrimination legislation. All documents must be valid (except for UK passports which may be accepted when expired), current and original. Documents downloaded from the internet must not be accepted.

If an illegal migrant is employed because they supplied fraudulent documents that could not have been detected, the Trust can establish a statutory excuse ('the excuse') against payment of a civil penalty if we are able to show that we have followed due process in accordance with the regulations.

Certificate of Sponsorship (CoS)

If the Trust wishes to recruit foreign nationals from outside the UK/EEA, or wish to extend the employment of an individual with a work permit when their visa expires, the Trust must apply for and issue a Certificate of Sponsorship (CoS) to migrants they wish to employ.

Sponsorship licence system or work permits

The Trust is a registered Sponsorship licence user. The sponsorship licence is renewed by the home office every 4 years and allows the Trust to apply for Certificates of Sponsorship (CoS).

To maintain this licence the Trust must meet certain duties for record keeping, reporting, compliance and co-operation with the Home Office and is audited regularly.

Criminal Records Check

Criminal Records Checks are designed to help prevent unsuitable people from entering Northampton General Hospital and gaining access to vulnerable groups. A criminal record check relates to the data held about an individual's criminal history.

All successful candidates will be asked to complete a [Self Declaration Form](#) and will be required (if applicable) to have Disclosure and Barring clearance dependant on the type of post in accordance with the Trust's Criminal Records Check Procedure (Appendix 2). The Appointing Officer will be responsible for indicating on the Recruitment Authorisation Form whether the post requires a Disclosure and Barring check.

Professional Registration

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The HRSC/MST will be responsible for ensuring that the successful candidate is registered with the relevant governing body for the position applied for via the online checking process. Once the successful candidate becomes an employee the registrations must be checked in line with the Verification of Professional Registration Procedure and the relevant registration body.

Qualifications

Qualifications requested are in line with the person specification and must be relevant to the post, especially for clinical and professional positions in line with the NHS Employment Check.

Occupational Health

The Occupational Health Questionnaire must be completed by successful candidates via the online system which will be assessed in line with occupational health guidelines by the Trust's Occupational Health Department. The appointing officer must complete online risk assessment form via the link supplied by the HRSC/MST in the pre interview email.

Identity Checks

The HRSC/MST will be responsible for ensuring that successful candidates provide acceptable documents containing their photograph, such as a passport or UK driving licence, and acceptable documents providing their current address.

The identity checks are designed to:

- Determine that the identity is genuine and relates to a real person
- Establish that the individual owns and is rightfully using that identity.

Original documents allow you to check an employee's:

- Full name – forenames and last name
- Signature
- Date of birth
- Full permanent address.

Fit and Proper Persons Test for Director's and Non-Executive Director's

The Health and Social Care Act 2008 (Regulated activities) Regulations 2014 (the 2014 Regulations) places a duty on the Trust not to appoint a person or allow a person to continue to be an executive director or equivalent or a non-executive director (NED) under given circumstances.

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The test involves the Trust carrying out all NHS Employment Check Standards checks, searching the insolvency and bankruptcy register and searching the disqualified directors register to confirm that persons who are appointed to the role of a director or non-executive director in an NHS trust are:

- Of good character (they can be relied upon to do the right thing under all circumstances)
- Have the appropriate qualifications
- Are competent and skilled (including that they show a caring and compassionate nature and appropriate aptitude)
- Have the relevant experience and ability (including an appropriate level of physical and mental health, taking account of any reasonable adjustments)
- Exhibit appropriate personal behaviour and business practices.

In addition, people appointed to these roles must not have been responsible for or known, contributed to or facilitated any serious misconduct or mismanagement in carrying on a regulated activity.

Persons prevented from holding the office and for whom there is no discretion includes those who are:

- An undischarged bankrupt
- Subject of a bankruptcy restrictions order
- Included in the adult or children's barred list
- Responsible, privy to, contributed or facilitated any serious misconduct or mismanagement in the course of carrying out regulated activity.

Failure to satisfy the NHS Employment Checks Standards

Failure to satisfy any of the NHS Employment Check Standards may result in the withdrawal of the offer of employment. The HRSC/MST will notify the Appointing Officer who in conjunction with the HR Business Partner/Advisor will determine the relevant outcome.

7 RECRUITMENT OF MEDICAL AND DENTAL STAFF

All new medical and dental staff appointments, including locums of three months or more, will need to be recruited within the requirements as set out in these Recruitment and Selection Procedures and will be carried out by the Medical Staffing Department.

Consultants

It should be noted that separate and specialised procedures are laid down by NHS national guidelines for the selection and appointment of certain senior medical staff (DH, 2005). The appointment of consultant medical staff will be carried out in accordance with the NHS (Appointment of Consultants) regulations (2004). Locum consultants can only be employed for an initial period of 6 months with a possible extension to 12 months. Advice must be sought from the Medical Staffing Customer Relations and Service Manager.

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Doctors in Training

Currently the recruitment of doctors in training is co-ordinated by East Midlands Deanery. This process consists of advertising, shortlisting, interviewing, offers of positions and the gathering of references.

Within current arrangements the responsibility for Northampton General Hospital is to adhere to the NHS Employment Check Standards.

8 INFORMATION FOR APPLICANTS

An information pack for interested applicants will be agreed between the Appointing Officer and the HRSC/MST. Standard information includes:

- Job Description
- Person Specification
- Information about the Trust.

Any amendments to the information pack or inclusion of additional information must be discussed with the HRSC/MST.

9 INFORMATION REQUIRED FROM APPLICANTS

The standard NHS Jobs Application Form or relevant CV will need to be completed by every applicant.

For internal posts, Northampton General Hospital staff will be required to complete the NHS Jobs Application Form and adhere to the recruitment process as outlined in this document.

The Trust is required to undertake monitoring of equal opportunities and every applicant will be requested to complete the Equal Opportunities Monitoring Form via NHS Jobs. This is required for monitoring the fair and consistent application of Trust procedures.

10 RECRUITMENT VIA AGENCIES

Framework Agencies

If staff are recruited to the Trust either on a temporary or a permanent basis via an agency then the Trust will require the agency to undertake the same pre-employment checks described above.

To ensure that all appropriate employment checks are carried out by providers the Trust endeavours to use agencies listed on NHSI approved frameworks. Please refer to the GOV.UK website for the latest list.

Agencies are audited by the relevant framework providers. The Trust is a member of the

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Trent LNR Agency Project with representation on both the Resource Category Group and the Resource Sourcing Group.

The Trust is compliant in the use of agency staff through the Framework Agreements to ensure the necessary employment checks are undertaken for all agency staff in accordance with the NHS Employment Check Standards.

Non Framework Agencies

Guidance must be sought where there is a need to use agencies that are not governed by the Framework from the Head of HR Services or the designated HR Business Partner/Advisor.

To use agencies outside of the NHSI approved framework, agreement must be obtained from the appropriate Director and assessed against the Department of Health Guidelines. Once an agency has been procured it must be agreed within the contract to undertake the pre-employment checks specified by the NHS Employment Check Standards. Monitoring of this standard is part of contract monitoring within the Trust.

11 RECRUITMENT FLOWCHART

Please see Appendix B

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Appendix A

Vacancy Control Guidelines – Updated 20th December 2018 v0.9

Background

Given the current financial pressure we are experiencing and the requirement to reduce our deficit we have taken the decision to reintroduce vacancy control.

Scope

Recruitment into any vacancies and overtime at enhanced rates will require sign off by the Vacancy Control Panel (VCP). This process will cover all substantive staffing and temporary staffing across all disciplines. The scope will include: permanent staff, secondments, bank, agency, NHS locum doctors (all grades), additional hours and fixed term. Retrospective authorisation will be sought for any temporary cover currently in process prior to the effective date of this document.

Short term sickness cover or short cover based on an urgent clinical need agreed at DM level i.e. 1 or 2 days up to a maximum of 7 days does not require a VC authorisation.

VCP Members

Deborah Needham (Chair), Phil Bradley (Deputy Chair), NGH Executive Directors on a rolling basis.

Quorum

The minimum quorum of the group is the Chair (or Deputy Chair) plus one further executive; a designated deputy may be acceptable in exceptional circumstances at the discretion of the Chair.

Process

Stage 1: Vacancy Details

- Managers should complete the VCP form
- All fields on the form are mandatory.
- Any change in budget such as skill mix changes, must have separate financial approval if there is over £10k difference in funding.
- All associated documents must be submitted by email with the approval forms.
- Please ensure it has been clearly marked whether a leavers form was completed or not required.
- The VCP form should then be forwarded by the requester to the Divisional Finance Manager (FM) and the Divisional Manager/Divisional Director (DM/DD) via email for sign off.

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Stage 2: Divisional and Finance Approval

- The VCP form must be **physically signed** by the DM/DD.
- The Divisional FM must confirm the budget is in place and sign the form to that effect.
- The order in which the form is approved by the DM/DD and Divisional FM may be determined within the division. This should be discussed and mutually agreed by the DM/DD and Divisional FM.
- Once the VCP form has been approved by both the DD/DM and Divisional FM it should then be forwarded to VCP@NGH.NHS.UK
- **The VCP form must have evidence of both the approval by the Divisional FM and the DD/DM before it is emailed to VCP. The printing of a name alone is not sufficient.**
- The only exception to this is if the Divisional FM is unable to approve that the budget is available for the vacancy but the DD/DM requests the VCP form to be passed to the panel anyway for clinical reasons. If this is the case it should be clearly illustrated in the email to VCP.

Stage 3: Authorisation

- The details of the VCP form will be recorded on the VCP spreadsheet by the PMO.
- The VCP form will then be forwarded to the Chief Operating Officer and the Director of Finance, or further executive if neither is available.
- VCP forms will be approved/rejected/conditions added by the Director of Finance and Chief Operating Officer via email.

Stage 4: Outcome/Conditions

- VCP authorisation number logged with outcome will be communicated back to recruiting manager for onward progressing though the recruitment process. At this point recruitment should commence.
- Approval number created and assigned to all recruiting documentation (substantive and temporary) with any conditions applied.
- All temporary and substantive recruitment will be required to have a valid VCP number.

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VACANCY CONTROL PANEL FORM	VCP Reference Number:
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STAGE 1 : Vacancy Details

Requester name		Requester position title	
Date of request		Contact details : extension	
Post title		Band/Salary	
Department		Directorate	
Hours of duty		Is this a new post?	Yes / No
Leavers name (if applicable)		Date left/leaving	
Leavers Form Completed	Yes/No/NA	<i>Please Note: This VCP request will not progress without the appropriate action marked. If N/A please provide a reason below:</i>	
Renewal of VCP?	Yes / No	If yes, previous VCP reference number	
Will this post be	Agency / Bank / Substantive / Secondment / Fixed term / NHS locum / Other		
Comments: (Please state reason for recruitment and any other applicable information)			

The order in which the form is approved by the DD/DM and Divisional FM should be decided within the division

STAGE 2 : Divisional and Finance Approval

Divisional Manager/Divisional Director	Print Name:	Divisional Finance Manager	Print Name:
	Signature:		Signature:
	Date:		Date:

Once the VCP has approval from both the DM/DD and the Divisional FM it should be sent to VCP@NGH.NHS.UK

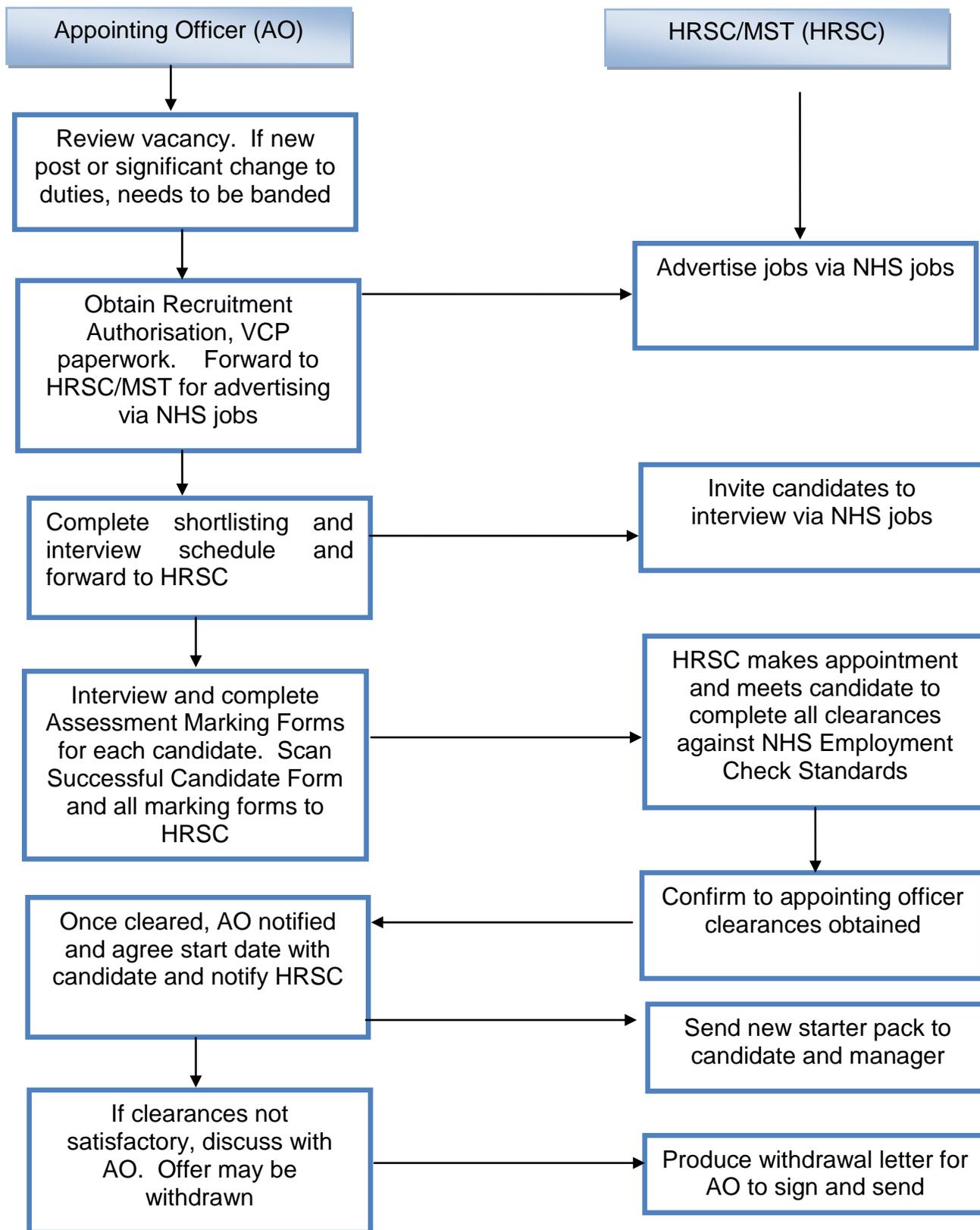
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STAGE 3: Authorisation					
Chief Operating Officer		Date:	Director of Finance		Date:

STAGE 4: Outcome/Conditions

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Recruitment and Selection Procedures Flow Chart



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Appendix 2 – Criminal Records and Barring Checks Procedure

Criminal Record and Barring Checks Procedure

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1 INTRODUCTION

This document sets out the Trust's procedure on the recruitment of staff with criminal convictions, the use of Disclosure and Barring checks and the related procedures including the storage and use of information on criminal convictions which have been disclosed by the Disclosure and Barring Service (DBS).

This procedure should be read in conjunction with the Trust's Recruitment and Selection Procedure.

This procedure applies to all staff groups and also includes arrangements for agency workers and contractors who are not directly employed by the Trust.

2 BACKGROUND

Disclosure and Barring Checks (DBS)

It is mandatory for the Trust to carry out DBS checks for eligible new staff in line with the Department of Health's Standards for Better Health and the NHS Employment Check Standards.

It should not normally be necessary to carry out repeat DBS checks on staff already in post. A check on an existing employee may be required if they have never had a DBS Check, move from a post that does not require a check to a position that requires a check, or to a position requiring a higher level of check.

It is not a legal requirement to obtain periodic or respective checks on existing staff who remain in the same role for the period of employment.

A criminal conviction should not automatically bar an applicant from an appointment but should be viewed in the context of all relevant circumstances.

3 TYPES OF DBS CHECKS AND ELIGIBILITY

Standard DBS check

The Trust require a standard check for any work or activity which is listed under the Rehabilitation of Offenders Act 1974 (Exceptions) order 1975 as being concerned with providing a health service and where the individual carrying out that role has access to patients in the course of their normal duties.

A standard check includes all spent (old) and unspent (current) convictions, cautions, reprimands and final warnings that are held on the Police National Computer (PNC) and are not protected by the DBS filtering rules. It may also include any relevant convictions in Scotland and Northern Ireland.

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Enhanced DBS check without barred list information

To be eligible to request an enhanced check, the position must be included in the Exceptions Order as being exempt from the Rehabilitation of Offenders Act. In addition, the activities being carried out by the individual in that position must also be listed under **work with adults** and/or **work with children** as outlined by the Police Act 1997 (Criminal Records) (Amendment) Regulations 2013.

The enhanced check will provide the same information as a standard check. It will also include any other relevant information that is held by the police which a chief officer reasonably believes should be disclosed and considered by the employer.

Enhanced check with barred list information

Barred list information is not routinely provided in an enhanced check. To be eligible to request information held against the adults and/or children's barred lists, the position or activities must be listed under the definition of **regulated activity** in the Safeguarding Vulnerable Groups Act 2006 (as amended by Protection of Freedoms Act in 2012).

An individual is committing a criminal offence if they try to engage, or are engaged in any form of regulated activity with the group(s) they are barred from working or volunteering with. It is also unlawful for employers to knowingly allow an individual to engage in a regulated activity with the group(s) from which they are barred from working or volunteering with.

This level of check will include the same information as the enhanced disclosure. It will also outline whether the person is barred from carrying out certain activities with children or adults, or both as may be relevant to the position being appointed to.

DBS Update Service

This service enables the portability of previously issued disclosure certificates where individuals are changing jobs or volunteering activities and are continuing to work with the same workforce (for example, children, adults or both children and adults).

4 RECRUITMENT PROCESS

Recruitment Authorisation Form

The Recruitment Authorisation Form, completed by the Appointing Officer must indicate if a DBS check is required.

Application Form

All applicants are required to complete an Application Form via NHS Jobs, which refers to Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.

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Self-Declaration Form

It is a requirement that a successful candidate complete a self-declaration form.

This will ensure that the successful candidate has a greater understanding about the type of information that will be requested about them and considered as part of the recruitment process. It also gives successful candidates an opportunity to identify any additional information or evidence that they may wish to be considered in support of their application. There are two model declaration forms A and B. Model declaration form A is for posts that are identified as being exempt from the Exceptions Order of the Rehabilitation of Offenders Act. Model declaration form B is used for posts that do not require a standard or enhanced disclosure.

5 PROCEDURE FOR DISCLOSURE AND BARRING CHECKS

Clearance Process

The successful candidate will complete an online disclosure as part of the clearance process and the HRSC/MST will verify the documents and process once the HR appointment has been completed.

The HRSC/MST will receive an online notification that the DBS is clear or that we are required to see the Disclosure Certificate that has been sent to the applicant.

Assessing Criminal Record Information

If the check is clear ESR is updated and the clearance process will proceed subject to all other pre-employment checks (references, occupational health etc.). See flowchart at Appendix A.

If the Disclosure Certificate is not clear and the online system indicates that we need to see the certificate the HRSC/MST will request the original from the successful candidate. The HRSC/MST will submit a copy to the HR Business Partner/Advisor who will inform the relevant line manager. A meeting will be arranged to discuss and gather the following information:

- The Application Form to check whether signed and if any convictions declared.
- The Self Declaration Form to check whether any convictions declared.
- To establish if the applicant/employee asked at interview stage and whether any convictions declared?

It is important to remember that the presence of a criminal record is not an automatic bar to employment and prior to making any decisions about the course of action the following facts must be obtained from the applicant and taken into account by the Appointing Officer with advice from the HR Business Partner/Advisor:

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- Seriousness of offence
- The age at which it was committed
- Its relevance to the post in question (regulated activity)
- Whether the applicant has a pattern of offending behaviour
- Whether the applicant circumstances have changed since the offending behaviour or other relevant matters
- The circumstances surrounding the offence and the explanation(s) offered by the successful applicant
- What convictions, if any, were declared on the Self Declaration Form/Application Form.

Successful candidates not yet commenced in post

A meeting must be convened between the Appointing Officer, HR Business Partner/Advisor and the successful candidate to discuss the information provided in the Disclosure Certificate. The Appointing Officer at this stage must decide whether the offence and the information provided by the applicant is sufficiently acceptable to confirm employment. If acceptable to the Appointing Officer the offer of employment will be confirmed. If unacceptable the conditional offer of employment will be withdrawn.

The Appointing Officer will discuss the findings with the HR Business Partner/Advisor to decide the appropriate action to be taken, prior to informing the newly appointed applicant.

Employees newly commenced in post

A meeting must be convened immediately with Appointing Officer, HR Business Partner/Advisor and the newly appointed employee to discuss the information provided. The Appointing Officer at this stage must decide whether the offence and the information provided by the employee is sufficiently acceptable for continued employment. If unacceptable the newly appointed employee may be dismissed in accordance with the Trust's Probationary Period Policy.

The Appointing Officer will discuss the findings with the HR Business Partner/Advisor to decide the appropriate action to be taken, prior to informing the newly appointed employee..

9 EXISTING EMPLOYEES

A new DBS check is not normally required where an existing member of staff has previously had a DBS check (or CRB check if prior to 10 September 2012) and is moving internally to a new job where the roles and responsibilities do not require a different level of check. The requirement for a new DBS check is triggered where:

- The individual has never had a criminal record check before and is moving to a position that now requires them to have a check

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- The new position significantly changes the individual'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.

Line Managers should make it clear to all staff that they 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. Volunteers and temporary workers should also be required to make a similar disclosure.

Existing staff may be subject to disciplinary action and possible dismissal, in accordance with the Trust's Disciplinary Policy if they fail to disclose relevant information in relation to their criminal record or barred list status.

It is a criminal offence to knowingly allow an individual to continue to engage in a regulated activity when they are barred from that activity. It is also a criminal offence for that individual to apply for, or to engage in, regulated activity when they are barred from undertaking that activity.

All employees of the Trust have an obligation to inform the Trust of any convictions obtained whilst in employment.

10 BANK WORKERS

All bank workers recruited by the Trust to either clinical or administrative roles will have an enhanced DBS check prior to commencement of employment owing to the nature of the work and the possibility of being placed in a post that may have access or contact with vulnerable people.

11 STUDENTS AND TRAINEES

DBS checks apply to all students who, as part of their professional qualification, are required to carry out a clinical placement and where they will undertake regulated activity. DBS checks may be requested by a higher education institution (HEI) as part of its admissions procedure, where a clinical training placement has been arranged and the applicant has been provisionally accepted. Many students will be required to move frequently to new placements during the course of their training programme. They will be required to have a DBS check at the start of their training course, as opposed to each and every time they move to a new placement, and a new check undertaken when they take up their first employment at Northampton General Hospital. It is highly likely that students will have contact with both children and adults and therefore checks against both barred lists should be undertaken from the outset to ensure that they are not required to have duplicate checks.

Northampton General Hospital should seek written assurance that the HEI has carried out an appropriate check at the correct level. Where this assurance

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cannot be provided, the Trust should request a new check. Where there is a delay in obtaining a DBS check, students may take up their placement providing appropriate safeguards are put in place to supervise that individual until appropriate clearances have been given.

12 WORK EXPERIENCE/PLACEMENTS

A minimum age limit for checks has been set in the Protection of Freedoms Act 2012. This means that the Trust must not apply for a DBS check for individuals under the age of 16.

Students who are on work experience placements and are engaging in an activity with vulnerable groups will not be required to have a DBS check on the basis that the roles they are undertaking will involve them observing or carrying out minor duties under the full supervision of someone who is in regulated activity.

13 VOLUNTEERS

The Trust requires any volunteer to undertake a DBS check. The definition of a 'volunteer' is outlined within the Police Act 1997 (Criminal Records) Regulations 2002 as: "A person engaged in an activity which involves spending time, unpaid (except for travel and other approved out-of-pocket expenses), doing something which aims to benefit some third party other than or in addition to a close relative."

For the purpose of a DBS check, it is deemed that 'unpaid' means not in receipt of any payment (for example, remuneration, allowance, financial benefit, payment in kind, or other means of support) in relation to the activity. The applicant must therefore not:

- Receive payment for activities (except for travel and other approved out-of-pocket expenses)
- Be on a placement/work experience
- Be on a course that requires them to do this job role
- Be in a trainee position that will lead to a full-time role/qualification

14 DOCTORS IN TRAINING

Doctors on educationally approved rotational training are regarded as being in continuous employment during the full term of their training and are required to have a DBS check, as a minimum, once every three years rather than each time they change rotation. Northampton General Hospital must seek written assurances from the host/previous employer that appropriate clearances have been obtained within the last three years.

15 AGENCY WORKERS, LOCUMS AND CONTRACTORS

The NHS Employment Check Standards are also embedded within the National Agency Framework Agreement for agencies and contractors. This means that

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agencies and contractors on a Framework Agreement have to give assurances that adequate pre-employment processes are in place as part of the auditing and monitoring of those organisations.

The responsibility for assuring pre-employment checks are undertaken lies with Northampton General Hospital. The Trust appointing staff from an agency, or other external body to provide NHS services will need to ensure that these providers are in full compliance with the Employment Check Standards as part of their routine monitoring and auditing of those contracts.

Requirements should cascade from contract to sub-contract. Any contract with an employment agency should include:

- Details of the level and type of the checks required for different posts
- A statement to the effect that the agency:
 - Will not receive payment for their services unless they provide staff that have been adequately screened
 - Will be liable for financial penalties if it is discovered that staff have not been adequately screened
 - A statement to inform the agency that the contracting authority (the employing organisation) retains the right to audit their screening process at any time
 - A statement which outlines that the agency must inform the contracting authority (the employing organisation) if the contractor is no longer registered/employed by them, is undergoing disciplinary procedures, or is charged or arrested of a crime.

What is the Definition of a Contractor

For the purpose of this procedure and the NHS Employment Check Standards, contractors are defined as individuals who are not employees of an NHS organisation but who have a direct or indirect contractual relationship to provide NHS services to the Trust. Contractors may therefore be engaged to work within an NHS organisation through a third party organisation.

17 STAFF RECRUITED FROM ABROAD

When staff are recruited from abroad necessary police checks, in line with that country's justice system, are obtained. It is also a requirement that a DBS check is also requested as reasonably practicable.

LEGAL DUTIES TO REFER TO THE DBS

The Trust has a legal duty to refer if a person is engaged or volunteer in a regulated activity. This includes where the worker has been supplied by a personnel supplier for example, an agency or third party contractor.

If the Trust does not make a referral when the legal duty conditions are met it may be subject to a fine of up to £5,000.

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When to refer

The Trust must make a referral to the DBS when the following two conditions are met.

Condition 1

The Trust has withdrawn permission for a person to work or volunteer in regulated activity with children and/or adults, or you move the person to another area of work that isn't regulated activity.

Condition 2

The Trust believes that the person has:

Engaged in relevant conduct (i.e. has harmed a child and/or an adult through their action/inaction)

Satisfied the harm test (i.e. poses a risk of harm to children and/or adults)

Received a caution or conviction for a relevant offence (either with or without the right to make representations) and therefore is subject to an automatic bar from engaging in a regulated activity.

To submit a referral or for further advice you must contact your HR Business Partner/Advisor.

18 RETENTION AND DISPOSAL OF DBS DISCLOSURES AND INFORMATION

Please see Appendix B

APPENDICES

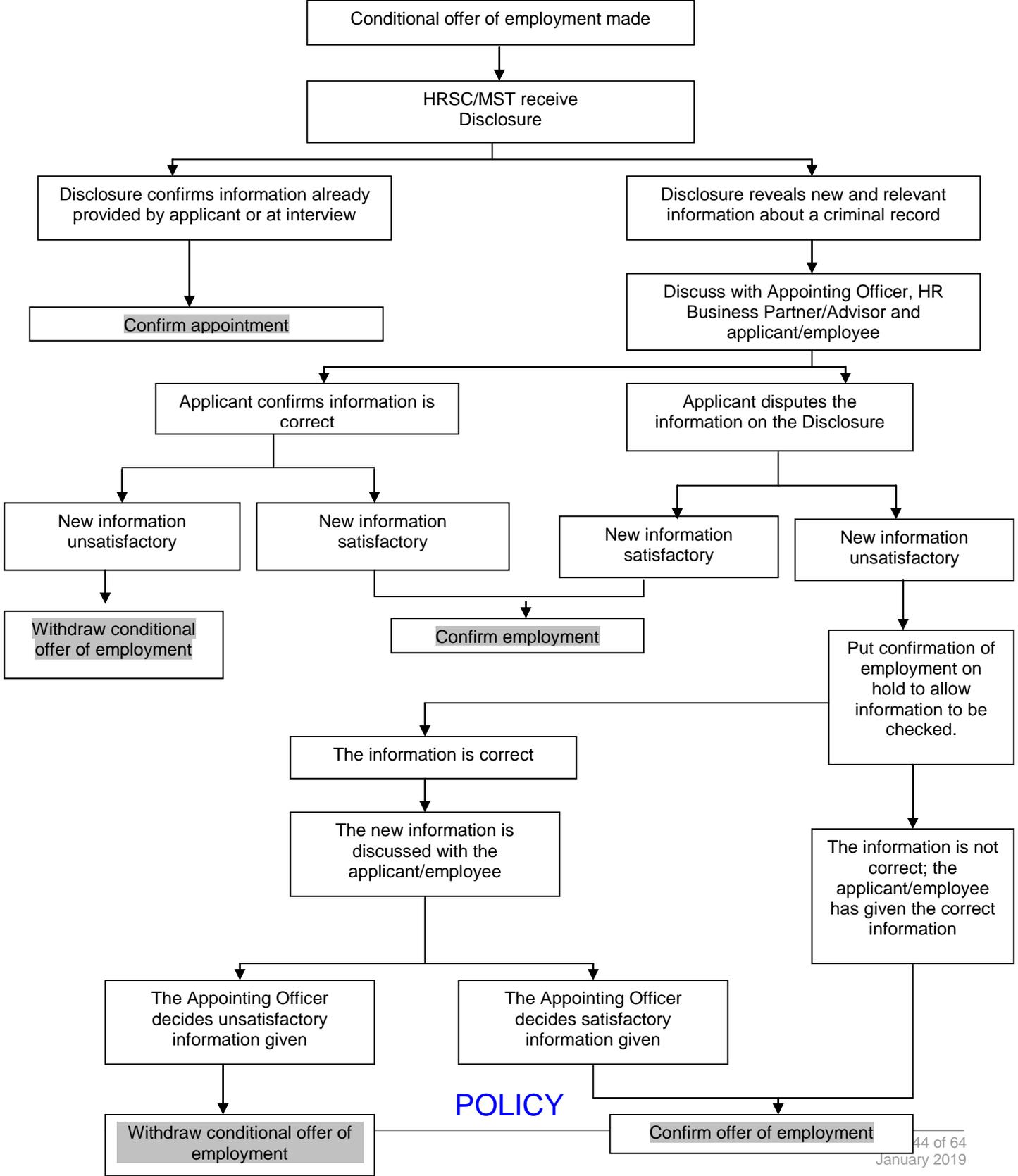
Appendix A Disclosure and Barring Procedures Flow Chart

Appendix B Statement on the Secure Storage, Handling, Use, Retention and Disposal of DBS Disclosures and Disclosure Information

POLICY

Appendix A

Disclosure and Barring Procedures Flow Chart



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Appendix B

Statement on the Secure Storage, Handling, Use, Retention and Disposal of DBS Disclosures and Disclosure Information

General Principles

The Trust's procedures are in line with the DBS Code of Practice (Home Office, 2009) regarding the correct handling, use, storage retention and disposal of Disclosures and disclosure information. Along with the Data Protection Act and other relevant legislation determined for the safe handling, use, storage retention and disposal of disclosure information.

Storage and Access

Disclosure information is never kept on an applicant's personal file. This information will be retained separately and securely, in lockable, non-portable, storage containers within the Human Resources Department with access strictly controlled and limited to those who are entitled to see it as part of their duties.

Handling

Disclosure information is only passed to those who are authorised to receive it. We recognise that is a criminal offence to pass this information to anyone who is not entitled to receive it.

Usage

Disclosure information is only used for the specific purpose for which it was requested and for which the applicant's full consent has been given.

Retention

Once a recruitment decision has been made disclosure information should not be retained any longer than necessary. This is generally for a period of up to six months, to allow for the consideration and resolution of any disputes or complaints. In exceptional circumstances it may be necessary to keep disclosure information for longer than six months and we will consult the necessary bodies. Throughout this period the usual conditions regarding safe storage and strictly controlled access will be maintained.

Disposal

When the retention period has elapsed the Trust will ensure that any disclosure information is destroyed confidentiality, together with any photocopies or other images of the Disclosure or any information contained within. A record of the date of issue of the Disclosure, the name of the subject, date of birth for identification purposes, the type of disclosure requested, the position for which the Disclosure was requested, the unique reference number of the Disclosure and the details of the recruitment decision taken will be retained within the Human Resources Department.

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Appendix 3 – Verification of Professional Registration Procedure

**Verification of
Professional
Registration Procedure
for
Nurses and Midwives
Health Professionals
Pharmacists
Medical and Dental Staff**

POLICY

1 INTRODUCTION

The purpose of this document is to provide clear guidance as to the Trust's expected standards and procedures to ensure that all professional registrations are appropriately checked, both upon commencement of employment and on an on-going basis throughout employment.

It is the individual employee's responsibility to ensure that their registration remains current. The Trust will ensure that it has systems in place to check the registration status of staff prior to and during their employment and to identify any lapsed registrations and take appropriate action.

2 PROFESSIONS WITHIN NORTHAMPTON GENERAL HOSPITAL TRUST

Detailed below is a list of clinical staff groups within the Trust are required to hold current professional registration with a regulatory body:

- Nursing and Midwifery Council
 - Qualified Nursing and Midwives

- Health and Care Professions Council
 - Arts therapists
 - Biomedical Scientists
 - Chiropodists / podiatrists
 - Clinical scientists
 - Dietitians
 - Hearing Aid Dispensers
 - Occupational Therapists
 - Operating Department Practitioners
 - Orthoptists
 - Paramedics
 - Physiotherapists
 - Practitioner Psychologists
 - Prosthetists / Orthotists
 - Radiographers
 - Social workers in England
 - Speech and Language Therapists.

- General Pharmaceutical Council
 - Pharmacists
 - Pharmacy Technicians

- General Medical Council/General Dental Council
 - Doctors
 - Dentist
 - Clinical Dental Technician
 - Dental Hygienist
 - Dental Nurse
 - Dental Technician / Dental Therapist

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- o Orthodontic Therapist.

3 ON APPOINTMENT

The HRSC/MST/Medical Staffing Team are responsible for ensuring that applicants to the Trust from the above professions have the necessary current professional registration for the position they have applied for.

The successful candidates will be asked to bring with them evidence of registration to the HRSC/MST appointment. The HRSC/MST/ will confirm current registration, expiry date and the appropriate category via the relevant online checking service detailed below:

Staff Group	Regulatory Body
Nursing and Midwifery	Nursing & Midwifery Council www.nmc-uk.org
Health and Care Professions: <ul style="list-style-type: none"> • Arts therapists • Biomedical Scientists • Chiropodists / podiatrists • Clinical scientists • Dietitians • Hearing Aid Dispensers • Occupational Therapists • Operating Department Practitioners • Orthoptists • Paramedics • Physiotherapists • Practitioner Psychologists • Prosthetists / Orthotists • Radiographers • Social workers in England • Speech and Language Therapists. 	Health & Care Professions Council www.hpc-uk.org
Pharmacists and Pharmacy Technicians	General Pharmaceutical Council www.pharmacyregulation.org
Medical & Dental Staff <ul style="list-style-type: none"> • Doctors • Dentist • Clinical Dental Technician • Dental Hygienist • Dental Nurse • Dental Technician • Dental Therapist • Orthodontic Therapist. 	General Medical Council www.gmc-uk.org General Dental Council www.gdc-uk.org

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4 ONGOING MONITORING OF EXISTING EMPLOYEES

Nursing & Midwifery Council Registration

Workforce Information

The NMC data base has a direct feed into ESR and NMC registration numbers and expiry dates are updated on ESR on a daily basis. It is the responsibility of Workforce Information to produce monthly reports from ESR to identify registrations due to expire and then notify the appropriate Ward Manager in advance of the NMC registration expiry.

Line Manager Responsibilities

NMC details are also recorded on MAPS HealthRoster and updated regularly from ESR. MAPS HealthRoster will validate electronically a warning on the ward or department roster and line managers should monitor this.

As a preventative measure, MAPS will show the warning for all duties associated to a Nurse or Midwife with a pending NMC renewal (from the point of expiry) and line managers should not roster a Nurse or Midwife into these duties post the NMC expiry date.

As rosters are produced a minimum of six weeks in advance, MAPS will also provide pending NMC expiry warnings a minimum of six weeks in advance to alert the line manager, it then remains the responsibility of the line manager and the individual to ensure the Nurse/Midwife does not work as a registered Nurse/Midwife after the registration has lapsed. Please refer to the section on Failure to Renew Registration with the NMC for further information.

Please note: It is best practice to update rosters and re-validate them on a regular basis. When a roster is revalidated, if the NMC registration has been renewed, the warnings will disappear and the member of staff can be assigned the duty as a Nurse/Midwife.

Failure to Renew Registration with the NMC

The individual should not continue working in their professional capacity if their registration has expired. Where evidence of renewal cannot be confirmed the member of staff will be suspended from the Trust without pay, unless there is an available unqualified position that they can be transferred into until such time as the Trust has been able to confirm that their registration has been renewed. In these circumstances the member of staff will have their pay adjusted to the band of the unqualified role that they have been temporarily transferred into.

Consideration should be given to enable individuals to take annual leave during suspension, if requested.

POLICY

An HR Business Partner will need to be informed if a manager is to suspend an individual. Further details regarding suspension can be found in the Trust's Disciplinary Policy.

General Medical Council/General Dental Council (Dentists) Registration

Workforce Information

The GMC registration data base feeds directly into ESR on a daily basis monitoring the renewals of GMC Registration

On the 1st of each month a report will be run from the ESR System and sent to the Head of Medical Staffing Customer Relations and Service Manager. The report identifies all medical and dental staff whose limited or full registrations are due to expire and any registrations that have failed to be registered.

Medical Staffing Department Responsibilities

The Medical Staffing Department will check the GMC or GDC website to verify registration renewal and print the Confirmation of Registration document. The revised expiry date will be input onto the ESR System and confirmation of registration will be placed on the personal file.

Failure to Renew Registration with the GMC/GDC

If registration has not been renewed the Medical Staffing Department will inform the HR Business Partner. The Clinical Director/Medical Director or Deanery will be notified if any problems are identified.

The individual should not continue working in their professional capacity if their registration has expired. Where evidence of renewal cannot be confirmed the member of staff will be excluded from the Trust without pay, unless there is an available unqualified position that they can be transferred into until such time as the Trust has been able to confirm that their registration has been renewed. In these circumstances the member of staff will have their pay adjusted to the band of the unqualified role that they have been temporarily transferred into.

Consideration should be given to enable individuals to take annual leave during exclusion, if requested.

An HR Business Partner will need to be informed if a manager is to suspend an individual. Further details regarding suspension can be found in the Trust's Disciplinary Policy.

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**General Dental Council (Dental Nurses, Technicians and Therapists)
/General Pharmaceutical Council/Health & Care Professions Council**

Workforce Information

Prior to the expiry date of the professional registration year a report will be run from ESR System which identifies all staff within the relevant profession whose registration is due to expire during the following month and sent to the relevant line manager

Line Manager Responsibilities

The line manager will check the relevant registration with staff and confirm that it has been updated via the online registration checking service. A copy of the registration will be placed on the personal file and the updated information will be forwarded to Workforce Information to update ESR.

Failure to Renew Registration with the GDC/GPC/HPC

The individual should not continue working in their professional capacity if their registration has expired. Where evidence of renewal cannot be confirmed the member of staff will be suspended from the Trust without pay, unless there is an available unqualified position that they can be transferred into until such time as the Trust has been able to confirm that their registration has been renewed. In these circumstances the member of staff will have their pay adjusted to the band of the unqualified role that they have been temporarily transferred into.

Consideration should be given to enable individuals to take annual leave during suspension, if requested.

An HR Business Partner will need to be informed if a manager is to suspend an individual. Further details regarding suspension can be found in the Trust's Disciplinary Policy.

POLICY

Appendix 4 – Exit Interview Procedure

EXIT INTERVIEW PROCEDURE

POLICY

1 INTRODUCTION

The aim of an effective procedure for leavers and internal transfers is to understand the employee's experience of working at Northampton General Hospital NHS Trust and ascertain their reason for leaving. The information compiled from the exit interviews will enable the Trust to analyse common reasons for leaving and aid the development of effective recruitment and retention strategies.

It is important that a planned and consistent approach be applied to the leaving and internal transfer process. This process is to be co-ordinated and implemented by the employee's manager and will be supported and monitored by the HR Business Partners/Advisors and be applied to all staff.

2 PROCEDURE

For a full summary of the Exit Interview Procedure can be found on the flowchart at Appendix A.

When an employee tenders their resignation the line manager must send a Confirmation of Resignation Letter (Appendix B) to the employee, along with an Exit Questionnaire (Appendix C)

In the letter the employee must be offered an interview with their Line Manager. A leaver can request for an independent manager to undertake the exit interview. This will give the employee the opportunity to discuss their working life at Northampton General Hospital and provide the Trust with the potential opportunity to resolve any outstanding issues before the individual ends their employment.

The Employee should complete the Exit Questionnaire and return this, confidentially, directly to HRSC/MST.

To assist managers with carrying out an Exit Interview, please refer to the attached guidance notes on 'How to Conduct an Exit Interview' at Appendix D. A record of the interview should be recorded on the Exit Interview Form (see Appendix E). A copy should be forwarded to the area of work's designated HR Business Partners/Advisor for information and a copy kept on the leaver's personal file.

A leavers checklist is provided (see Appendix F) to ensure that all relevant items are returned to the Trust. This should be kept on the employee's personal file.

This procedure must be followed for all leavers including internal transfers, with the exception of staff who have been dismissed.

POLICY

3 REPORTING

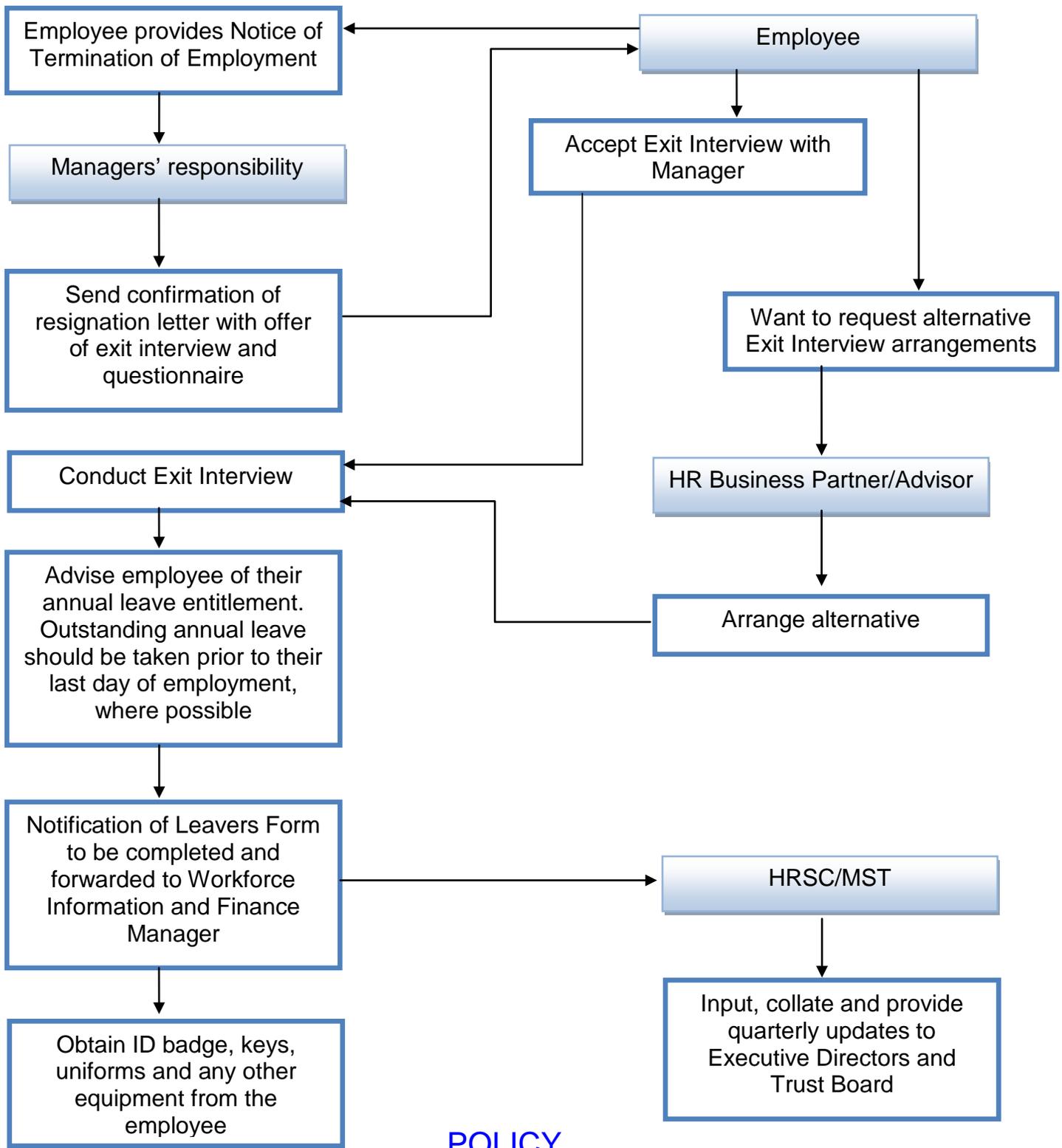
The Workforce Information Team will produce a quarterly report detailing the results of the exit questionnaires and identify any trends and areas for development.

APPENDICES

- Appendix A Exit Interview Process
- Appendix B Resignation Response letter
- Appendix C Exit Questionnaire
- Appendix D How to conduct an exit interview
- Appendix E Exit Interview Form
- Appendix F Leavers Checklist

POLICY

Appendix A
Exit Interview Process



POLICY

Appendix B

Our ref: <Directorate/Department Name>
Cliftonville
<date> Northampton
NN1 5BD

To be opened by addressee only

<Employee Name> Direct Dial: (01604) <tel number>
<Employee Address> Email: <name>@ngh.nhs.uk

Dear >

Thank you for your letter received on <date> informing me of your resignation. I can confirm that your last working day will be <date> and your contract will end on <date>.

You will be entitled to payment for <x> days out-standing annual leave, which will be paid in your final salary. <OR> Unfortunately, you have overtaken your annual leave entitlement by <x> days and this will be deducted from your final salary.

You are also reminded to return any Trust property such as: ID badges, Car Park Permit, uniforms, accommodation keys, bleeps, pagers, laptops, mobile phones and personal organisers on or before your last working day, to <name>.

I have enclosed an exit interview questionnaire, which I would be grateful if you would complete and return directly to the HRSC/MST. I would like have an exit interview with you to discuss how you have found your time at Northampton General Hospital and within this department and I have arranged this for:

- Date
- Time
- Venue

If you have any concerns or queries regarding the exit interview or questionnaire please contact myself or your HR Business Partner/HR Advisor.

May I take this opportunity to thank you for your hard work and commitment during your employment with the Trust and wish you every success for the future.

Yours sincerely

<Line Manager Name>

<Job Title>

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Appendix C

Exit Questionnaire

Name:	Job Title:	Hours of Work:	Start Date:
<p>Please indicate below the reason why you are leaving your current position?</p>			
Promotion	Career Development	Temporary Contract	Lack of Job Security
Location	Retirement	Childcare	Ill Health
Working Pattern	Training and Development Opportunities	Workload	Carers' Responsibilities
Pay Benefits	Lack of Job Satisfaction	Issues with Colleagues	Issues with Manager
Organisational Change	Personal Reasons	Location	Other

Please add any additional comments you may wish to make below:

Please highlight which category best fits your answer to the following questions.

I have been able to voice my opinions and influence change in my area of work?

Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
----------------	-------	---------------------------	----------	-------------------

I have always been involved in decisions that affect me in my area of work?

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Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
My Line Manager has always welcomed ideas that I have put forward?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
People can speak their minds about how things are in the organisation?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
Communication is good and I knew what was happening in the organisation?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
Adequate facilities and flexibility exists to fit work around my family life?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
The organisation has encouraged me to learn and develop?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
I have regularly discussed my objectives and performance with my Line Manager?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
I have encountered no violence or aggression in the course of my work?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
My duties were clearly defined?				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree

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I received sufficient training to do my job?					
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	
I felt that my work was appropriate for my grade?					
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	
I felt that the quantity of work was manageable?					
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	
The morale in the department was always good?					
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	
My Supervisor/Line Manager was a good role model?					
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	
I would consider returning to employment with the Trust?					
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	
How likely are you to recommend NGH to friends and family if they needed care or treatment?					
Extremely Likely	Likely	Neither Likely or Unlikely	Unlikely	Extremely Unlikely	Don't know

POLICY

What is the main reason for the answer you have chosen?

How likely are you to recommend NGH to friends and family as a place to work?

Extremely Likely	Likely	Neither Likely or Unlikely	Unlikely	Extremely Unlikely	Don't Know
------------------	--------	----------------------------	----------	--------------------	------------

What is the main reason for the answer you have chosen?

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Appendix D

How to Conduct an Exit Interview

1. What is an Exit Interview?

An Exit Interview is a valuable source of information to help managers review their operation and can also reinforce efforts to provide worthwhile conditions and satisfying work. It is a source of contribution to organisational development.

2. When should an Exit Interview be carried out?

The interview should be carried out as soon as the employees' intention to leave is known and they have been given their Exit Questionnaire Form.

3. Who should conduct the Interview?

The Line Manager, alternative manager or a member from the Human Resources Department or a combination of these staff can be present for an exit interview. The person carrying out the Exit Interview needs to be objective in evaluating what they hear. The leaver may be emotional, angry, frustrated or sees this as an opportunity to express personal opinions.

4. What issues do I need to explore?

If the leaver has been employed for a short period of time, then the issue of the recruitment and selection process should be explored. Was the job oversold, undersold, was the interview thorough enough to ensure the competence of the candidate for the expectations of the post holder? It is also important to look at the induction and job training - was the new member integrated within the department well or did the post holder feel alienated or a failure for a long period of time?

The content of the job, was the job too over demanding causing stress or frustration that was failed to be recognised or dealt with appropriately?

Leavers may indicate that they became bored with the job, this may be due to the leaver naturally growing out of their job. However this could highlight a need to re-structure the job to be more interesting, if this is not possible then possibly regrading and recruit from a different level.

Is the employee leaving due to the hours worked? Could more flexible working hours be offered for this post in line with Trust policies?

POLICY

It may be necessary to investigate any personal or professional reasons why the employee has chosen to leave, e.g. morale, relationships with managers or colleagues, bullying and harassment or disagreements about policy or methods.

It is important to establish and record that the individual is leaving entirely of their own free will and have not been treated unjustly in any way.

Ask for details of their new job and why it is more attractive than current job.

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Appendix E

Exit Interview Form

Should further investigation be required, remind employee of the need to investigate requesting that their name be given as the specific source of information. If permission is not granted, the matter will still need to be investigated but the employee's identity will be protected.

Name	Job Title	Department	Start Date	Date of Leaving	Length of Service
Points of concern noted by employee in relation to the guidance on what issues to explore.					
Comments from interviewer / points to be actioned.					

Interviewer's signature: _____

Date: _____

Print name: _____

Employee's signature: _____
(Employee's signature as a true record of the interview held)

Date: _____

Print name: _____

Copy of form placed on personal file and copied to HR Business Partner/Advisor on:

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Appendix F

Leavers Checklist

To be completed by the Manager and placed on the leavers personal file*

Employee Name:.....

Department:.....

Leaving Date:.....

Checklist (if applicable)	Date	Signature
Resignation letter received		
Confirmation of Resignation Letter and Exit Questionnaire given to employee		
Notification of Leaver Form submitted to Workforce Information & Finance		
Office key returned		
Locker key returned		
Uniform returned		
ID badge returned		
Car parking permit returned		
Handover performed		
Switchboard informed		
Accommodation informed		
IT Informed to cancel passwords		
Mobile Phone/Bleep returned		
Personal Organisers/Laptops returned		
Lease Car returned		

* Leavers files must be retained by the Trust in line with the Corporate Documentation Management (Information Lifecycle) Policy.

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