

PANDEMIC FLU HUMAN RESOURCES PROCEDURES

Under Review

Policy Extant Agreed vie Area Partnership Forum (APF) Review March 2019

Version Control	Date	
Implementation Date	On outbreak and implemented by SMT	
Last Review Date	N/a	
Next Formal Review Date	1 July 2010	
Approval Record	Date	
LPF	25 th June 2009	
Staff Governance Committee	21 st July 2009	

NHS SHETLAND PANDEMIC FLU – HR PROCEDURES INDEX

		PAGE
1	FOREWORD	3
2	INTRODUCTION	3
3	REDEPLOYMENT	5
4	RECRUITMENT	6
5	PAYMENT OF SALARIES	6
6	SPECIAL AND CARER LEAVE	7
7	FLEXIBLE WORKING	7
8	SICKNESS LEAVE	8
9	ANNUAL AND OTHER LEAVE	8
10	DISCIPLINE, GRIEVANCE ETC	9
11	WORKING TIME REGULATIONS	10
12	STAFF WHO REFUSE TO WORK	10
13	SUPPORT FOR STAFF	10

NHS SHETLAND PANDEMIC FLU HR PROCEDURES

1 FOREWORD

This document has been developed in line with the Pandemic Flu, Scottish Guidance on Health Workforce, published by the Scottish Government in 2008.

This document should be read in conjunction with NHS Shetland's Pandemic Influenza Plan which can be found on the intranet at

http://9.200.150.6/healthcare/shetlandwide/publichealth/documents/Shetland-flu-plan-version4[1]1march09.doc
and the appropriate Sector/Directorate Business
Continuity Plan which are available from the relevant Head of Department/Director.
Business Continuity / Contingency Plans are found on the Intranet.

It must be appreciated that the provisions of this policy will only be implemented during an outbreak of Pandemic Flu or in emergency situations at which time it will supersede all other staff management /HR policies and will not set a precedent for any other time. Local Partnership Forum will be advised by email when this procedure is being implemented via cascade from the Employee Director/Director of Human Resources and Support Services or appropriate deputy and a communication cascade will be undertaken from there.

This policy is developed in the context of a duty to provide service to the population of Shetland, whilst maintaining the health and safety of staff. General experience suggests that staff respond well during major incidents and NHS Shetland will encourage a culture of reasonableness and negotiation, coupled with an expectation that staff will act responsibly.

The Human Resources Services Manager and the Employee Director, acting jointly, will provide any advice or guidance required in respect of the items covered in this policy.

2 INTRODUCTION

The main purpose of this policy it to maintain our duty of care to our patients whilst maintaining the Health and Safety of Staff. It recognises that the impact of a pandemic will be significant and that our current working arrangements may be insufficient.

Statistics show that the UK is likely to experience Pandemic Flu in the coming years and this has prompted the development of this policy.

It also recognises the provisions contained within this document may be applied selectively in order to meet the problems raised by Pandemic Flu.

Demands on NHS Shetland during a pandemic may be significant. There will be increased demand for high dependency care and stringent infection control measures. Demands on community services will be significant with many people falling ill and being treated at home. Front line staff will have to deal with concerns from patients who are denied their usual services, additional support may also be required to assist those who are coping with bereavement.

Across all services, there will be a need to work differently and with different people. Some staff will have to be deployed into front line services and there is likely to be an increased use of support staff into other roles.

(a) Invoking the policy

The Chief Executive, or a deputy will invoke this policy.

(b) Pre-implementation

It is recognised that, prior to full Pandemic Flu status being declared, certain functions may already be required to work beyond that which is normal e.g. Public Health, Corporate Services, Human Resources etc. In such circumstances, elements of this Procedure will apply at this stage.

Any further guidance on this can be obtained from the Human Resources Services Manager and the Employee Director, or their deputies, acting jointly.

(c) Communication process once the policy has been invoked

The communication process will be as outlined in NHS Shetland's Pandemic Influenza Plan – see link reference on previous page.

(d) Duty to comply

There is a presumption that employees will, wherever possible, attend for work as normal during Pandemic Flu. This Procedure does not ask employees to work outwith their core competencies – staff are trained and skilled to appropriate levels and already work in situations involving contagious infections. While they are at work, all employees are expected to continue to carry out reasonable instructions and observe departmental/NHS Shetland rules and regulations, including any local dress/uniform codes or policies.

(e) Miscellaneous provisions – Alterations of Work Patterns

Overtime Payments

In exceptional circumstances staff may be asked to work excess hours. In these circumstances staff will receive overtime payments as per their terms and conditions of employment. For staff whose terms and conditions do not allow for excess hours payments a variation order will be sought to allow payment.

More than normal staffing levels may be expected on any nominated Public Holiday and any employee requested to work will receive payment at the relevant enhanced rate.

3 REDEPLOYMENT

Staff will continue to report for work as normal during a pandemic. Any changes to base/ward/work area will be managed by local managers/heads of department. In the event of Pandemic Flu some functions may cease for a period of time. This will release staff that can then be redeployed into different critical roles. Employees may, because of an extreme shortage of staff in some areas, be asked to undertake work that is significantly different from the job for which they are employed e.g. a secretary being asked to work in Medical Records. Similarly, employees from one location may be asked to conduct the duties for which they are employed at another location e.g. a nurse being asked to move from Community to Hospital or vice versa etc.

Similarly, employees may be asked to redeploy to another NHS organisation, either locally or elsewhere in Scotland, which is experiencing staff shortages. This will only be in exceptional circumstances and will be with the consent of the individual in negotiation.

In addition to the redeployment of staff across the NHS, there may be circumstances where employees may be asked to work as part of a non-NHS organisation e.g. child protection issues where an employee may be asked to work as part of the Social Work Team, or vice versa, e.g. home care staff working in the nursing team.

Work will be undertaken at local level to compile a database of employees who are skilled in areas other than that in which they are currently working e.g. trained nurses currently working in a non-nursing role and these employees may be asked to redeploy to other areas. It must be stressed, however, that any employee who moves to a redeployed post **must** meet all the normal requirements for the post e.g. professional registration, Disclosure Scotland checks etc and must be competent to undertake the duties of the post. Staff **will not** be expected to undertake roles for which they are not competent but there is an expectation that staff will respond positively by learning new skills.

Short-term redeployment may play a vital role in fulfilling service requirements and contributing to patient care and the willingness of staff to agree temporary reassignment/relocation, when necessary, will permit this. Requests to redeploy will be explained to employees by their manager who will also indicate how much their agreement is appreciated and how it supports the aims of delivering safe patient care.

Clearly there would be no financial detriment suffered by employees who undertake redeployed duties under such circumstances i.e. they would continue to receive, as a minimum, their normal rate of pay and allowances and any additional travel costs at normal reimbursement levels. Adequate training and induction will be provided to equip staff for the role that they are assigned to.

4 RECRUITMENT

During an Pandemic Flu there may be a need to recruit (temporarily) additional staff to cover increased demand and these staff could be from a variety of sources e.g. bank, retirees, employees from other NHS organisations both within and outwith Shetland, nursing, medical or other clinical students, volunteers etc. In these situations, managers **must** continue to observe the normal recruitment requirements for each post e.g. professional registration, Disclosure Scotland checks etc., until such a time as they are formally advised by the Director of Human Resources or their deputy of any change to these requirements e.g. in the event of Disclosure Scotland being unable to carry out this function and the Scottish Government issuing guidelines.

All temporary staff will be required to attend an induction, which will include Health and Safety and Manual Handling ensuring that the Board complies with its legal obligations.

The one overriding requirement which will not, however, be relaxed is the need for the incumbent of any position being competent to carry out the duties of the post.

It will only be essential recruitment that meets clinical needs that would be carried out at this time all other recruitment would cease and HR staff will pick up other appropriate duties to ensure the delivery of patient centred care.

5 PAYMENT OF SALARIES

NHS Shetland recognises that the need to continue the payment of salaries during Pandemic Flu must be given priority and has a three tier contingency plan to ensure that salaries continue to be paid.

First tier - cease non-essential activities as identified at the time.

Second tier - switch to paying last months pay only. It is likely that this would be

required on parts of the payroll in any event due to feeder data

disruption.

Third tier - invoke national contingency arrangements and pay average net

pay. This is currently in place and is tested at regular intervals across NHS Scotland. (This is a system of last resort requiring substantial work to recover the position and is not designed to run

beyond a single pay period, although it would be technically

possible to do so.)

The agreement of Chief Executive/Director of Finance or other Director as appropriate is required to invoke appropriate levels of contingency and will also require substantial assistance by way of resource to recover the position. The department will also need to be supported by robust communications.

In terms of staffing resource:

- staff engaged in non priority areas would cease this work to support the essentials
- other Finance staff could be seconded in to assist with essential work
- assistance from payroll colleagues elsewhere would be explored

Managers will be notified accordingly in the event of the Payroll plan being activated.

6 SPECIAL AND CARER LEAVE

It is appreciated that many of our staff will have special or carer's responsibilities, which may be increased during a pandemic. If an employee has difficulty attending for duty they should contact their manager to discuss alternative work arrangements. Under these circumstances managers are encouraged to provide a compassionate response to such requests for time off. They might also wish to discuss the possibility of the employee working some of their contracted hours and getting some special leave to cover problem times – see flexible working below.

At all times the needs of the service will have to be balanced with the needs of the individual.

7 FLEXIBLE WORKING

The planning assumptions indicate that Pandemic Flu will result in an increased workload coupled with a potential reduction in available staff. It will be essential therefore that we increase the capacity of our workforce by asking staff to work additional hours and/or to work differently. An outbreak may affect the ability of many employees availability to attend work during their normal hours and therefore there will have to be some consideration to agreeing a short term change in their working arrangements e.g. an employee may not be able to work their normal hours because of a change in domestic commitments resulting from the pandemic, but may be able to work their hours at a different time.

An example of this might be someone who normally works 08:30 - 17:00 who has child care commitments as a result of school/nursery closure and their child is unaffected, could, perhaps, work mid afternoons and evenings, night shift, or undertake work on Saturdays or Sundays.

In cases where flexibility is not possible a combination of annual leave and unpaid leave can be considered.

8 SICKNESS LEAVE

It is recognised that during an Pandemic Flu there may be a particularly high instance of staff reporting sick at a time when there is a much increased strain on the GP system. To relieve pressure on GP's surgeries, the Chief Executive will extend the provision for

submitting self-certificates up to 14 days, a medical certificate will require for absence which exceeds 14 days.

Employees will, however, be expected to follow the normal absence reporting procedures in respect of verbally advising their manager/department that they are unable to attend work and managers are expected to continue to record sickness absence. A specific code is now in place for recording such sickness: **SF** Periods of absence as a consequence of flu will be excluded from the trigger points within the Promoting Attendance Policy.

During pandemic Flu, managers must be vigilant to the health of employees within their Team/department and ensure that any employee, who is demonstrating symptoms of ill health, has had exposure through contact with an infected person, has an existing health problem or who is pregnant etc., obtains the appropriate medical advice. Employees who believe that they fall into any of these categories should inform their line manager immediately in order that they can make the necessary arrangements for redeployment.

Similarly, managers should advise any employee demonstrating symptoms of ill health to remain at home and not pass their infection to work colleagues and patients.

Managers must ensure that all employees who have been off sick are fit to return to work by means of a return to work discussion, either face to face, or by telephone. A decision will be made on whether an appointment with Occupational Health is needed before the individual can return to workplace.

Where NHS Shetland requests that an employee remains at home under these circumstances they will continue to receive their normal pay and allowances.

9 ANNUAL AND OTHER LEAVE

Annual Leave

During a pandemic we need to maximise the availability of staff, therefore it is important that Operational Managers put in place robust and consistent plans for annual leave and do not rely on shortfalls in staffing being covered by Bank staff as it is anticipated that Bank staff will need to provide cover for a higher than normal sickness level. It is anticipated that there may be times when annual leave may be reduced to accommodate increased activity, managers should keep their staff well informed about the arrangements for annual leave authorisation. Continuing to provide essential operational services may result in requests for annual leave to be postponed/cancelled. Any cancellation or request for leave will be at the discretion of the local manager but will be monitored at directorate level and reported to HR who collate and report to Local Partnership Forum. However, it is recognised that during a Pandemic time away from work is essential for health and morale and to allow staff to recuperate from the intense pressure of the Pandemic.

Where staff have already pre-booked holidays they should be allowed to take them.

In the event of leave being postponed/cancelled it is anticipated that there will be large numbers of staff requesting annual leave once the Pandemic Flu is over and managers will have to plan appropriately to ensure appropriate leave is granted whilst ensuring the delivery of service needs.

Study leave

All normal study leave and training will be postponed until the Pandemic Flu is over and where normal service has resumed. However, staff may be requested to attend training that is particularly relevant for those staff that is re-deployed to other areas.

Compassionate leave

NHS Shetland makes provision for compassionate leave for staff who are bereaved and staff are reminded to apply for compassionate leave in the normal way during this time.

Emergency leave

Work life balance also makes provision for urgent unanticipated domestic problems. All requests will be dealt with individually and subject to the contingencies of the service. See Section 7.

10 DISCIPLINE, GRIEVANCE ETC

During a Pandemic Flu which results in a significant reduction in available staff, there may be a requirement to work to longer time-scales in matters relating to discipline and grievance and it is likely that cases may need to be suspended until the pandemic is over.

Managers must, however, appreciate that employees may be under additional stress during emergency situations and that they must act in a supportive manner.

Nevertheless, it must be emphasised that patient safety and the maintenance of professional standards must remain paramount during the pandemic.

In addition, managers must, more than ever, consider all the available alternatives before suspending an employee pending investigation – move to another area or limited duties etc – as this must be "on pay" and could be for a significant length of time. Suspension should only, therefore, take place where it is considered that the individual's continued presence at work would be likely to put patients or the organisation at risk. The Snr HR Advisors will be involved at all times in consultation around potential suspensions to challenge appropriately that there is no other alternative and to ensure consistency across Directorates.

Local Partnership Forum will be kept up to date on this issue via the Employee Director/Director of Human Resources and Support Services or appropriate deputy.

11 WORKING TIME REGULATIONS

While it is unlikely that the government will suspend the Working Time Regulations (WTR), their application may need to be reviewed during a pandemic, although the legislation allows the limit of 48 hours per week to be averaged over a 17-week period. We will endeavour to ensure that staff receive sufficient rest periods during a pandemic in order to protect staff health and well-being and to safeguard patient safety. Employees should have a minimum rest period of 11hours in each 24-hour period.

The current legislation also notes that the night work limits (including the limit for special hazards), rights to rest periods and rest breaks under the WTR do not apply where the worker's activities are affected by:

- (i) an occurrence due to unusual and unforeseeable circumstances, beyond the control of the worker's employer;
- (ii) exceptional events, the consequences of which could not have been avoided despite the exercise of all due care by the worker's employer.

12 STAFF WHO REFUSE TO WORK

Where staff are nervous about attending work, every attempt should be made to try and encourage them to attend by giving them all available information about pandemic flu and the risk to infection. It is expected that all staff who are fit and well attend for work as normal. Where staff refuse to come into work with no reasonable grounds, this will be treated as unpaid unauthorised absence. The matter will then be investigated under the Disciplinary Policy when the pandemic is over.

13 SUPPORT FOR STAFF

Staff will continue to have access to Occupational Health and counselling services during this period (Please note that this may be on a restricted basis as the occupational health nursing team may be deployed to front line patient care).

Staff will be supported in as many ways as possible in order to allow them to attend work.