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GIG Felindre
Velindre NHS Trust

Ref: WF28

Recruitment of Locum Doctors Policy

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Contents	Page	
1	Policy Statement	3
2	Purpose	3
3	Scope	3
4	Aims and Objectives	3
5	Roles and Responsibilities	3
6	Approval of Locum & Agency Doctors	4
	6.1 Ad Hoc Locum	4
	6.2 Long Term Locum	4
	6.3 Procedure for Seeking Locum Staff	4
	6.4 Agency Doctors	5
	6.5 Performance/Reporting	6
	6.6 Rates of Pay (Pay Cap) & Escalation to the Board	6
	6.7 Pre-Employment Checks	7
	6.8 Travel & Accommodation	8
	6.9 Induction	8
	6.10 Use of Medical Equipment	9
	6.11 Assessment of Locum Doctors	10
	6.12 Seeking Locums Outside Working Hours	10
7	Equality	12
8	Training	12
9	Resources	12
10	Implementation	12
11	Policy Conformance / Non Compliance	12
12	Distribution	12
13	Review	12
14	Further Information	12

Appendices

APPENDIX 1	-	Criteria for Appointment	11
APPENDIX 2	-	Applicant Declaration Form	12
APPENDIX 3	-	DBS Risk Assessment	16
APPENDIX 4	-	Additional Duty Claim Form	19
APPENDIX 5	-	Short Assessment Form	20
APPENDIX 6	-	Full Assessment Form	21
APPENDIX 7	-	Assessment Guidelines	23
APPENDIX 8	-	Contact number out of hours locum agency	23
APPENDIX 9	-	Welsh Government Cap rates	24

Introduction

1. Policy Statement

- 1.1 A Locum doctor is one who covers the temporary absence of a substantively employed doctor or who is temporarily covering a vacancy of an established post.

Ad hoc locum provided by substantive staff on an additional shift by shift basis or by individuals secured on ad hoc terms of engagement. The terminology used to describe the type of ad hoc cover referred to above varies to include:

- Additional Duty Hours
- Internal Locum Cover
- Internal Medical Bank
- Ad Hoc Locum Cover

It is important to ensure that the same care is taken when making a locum appointment as with substantive appointments in accordance with the standards and guidelines of the Code of Practice in the Appointment and Employment of HCHS Locum Doctors.

2. Purpose

To provide guidelines and to set standard for the appointment and assessment of locum doctors in order to safeguard the quality of patient care.

3. Scope

The provisions outlined in this policy will apply to all locum doctor appointments within the Trust regardless of the length of their duration.

4. Aims and Objectives

A locum doctor may be needed to cover one or a combination of the following circumstances:-

- Vacant post;
- Sick leave;
- Maternity leave/ Paternity leave/Adoption leave;
- Compassionate / Special leave;
- Annual / Study leave;
- Consultant Sabbaticals.

5. Roles and Responsibilities

- 5.1 In all instances where locum doctors are appointed, a number of pre employment checks must be made to satisfy the Trust as far as reasonably possible, that the locum doctor is suitably experienced and qualified to fulfil the locum post, before they are permitted to take up any duties within the Trust. Appropriate pre employment checks must be carried out via the Medical Staffing Department or Consultant/Manager on Call if out of hours before the doctor can undertake any duties.

6. Approval of Locum and Agency Doctors

6.1 Approval of Ad-Hoc Locum Cover Requests

In instances where short term locum cover of sick leave is required for overnight or weekend on-call commitments, the Medical Staffing Department will automatically look for on-call cover as soon as the substantive post holder has reported sick, confirmed his/her on-call duties, and the Clinical Director (or nominee) has authorised the appointment of a locum.

See section 6.2 Procedure for Seeking Locum Cover outside Working Hours

6.2 Approval of Long Term Locum Cover Requests

Junior Medical Staff:

For longer periods of locum requirements, it will be necessary for the appropriate Clinical Director to discuss the need for provision of locum cover with the Medical Staffing Department. This discussion will ascertain whether it is appropriate to obtain locum cover, whether or not this may be achieved via advertisement and establish the necessary criteria required to fulfil the post, which may include amending the job description and person specification.

Consultant Medical Staff

In instances where a locum is required for a newly established Consultant post, the appropriate Clinical Director must confirm funding is available for a locum to be appointed ahead of the permanent appointment.

Where it is decided that cover is required for specific elements of a Consultant post (e.g. on-call shifts), cover may be provided by consultant colleagues from within the department and remunerated as agreed prospectively by the Clinical Director and Medical Director.

There may also be occasions where cover can be provided by consultants or other suitably trained doctors from outside of the Trust (for instance, from neighbouring UHBs). Appropriate pre employment checks must be carried out via the appropriate Workforce Department before the doctor can undertake any duties on behalf of the Trust. Similarly, remuneration for these duties must be made as agreed prospectively by the Clinical Director /Medical Director / Service Director.

6.3 Procedure for Seeking Locum Cover

Locum cover arrangements are made by either the Medical Staffing Department or Clinical Director unless short term locum requirements are realised outside the working hours of the Medical Staffing department (See section 6.12 of this document).

The criteria for appointment of locum grades of staff are set out in **Appendix 1**.

For all locum requirements that fall within office hours, the Workforce Department will follow the procedures:-

6.3.1 Long Term Locums

Application for advertised posts will be made through the Shared Services Recruitment process. All submitted applications will be shortlisted against the person specification as normal. Interview in respect of junior medical career grade locum staff will be conducted by a minimum of two consultants in the specialty, including the appropriate supervising consultant or Clinical Director and accompanied by a representative of the Workforce Department.

6.3.2 Short Term Locums

For short term locum requirements (from one day up to four weeks), the Workforce Officer / Clinical Director will:-

- I. Contact all medical staff within the relevant department / specialty, if appropriate, to ascertain whether any other staff within the area can work part or all the additional duties. Appropriate remuneration will be discussed and agreed;
- II. The Workforce Department/Medical Staffing Team retains a bank of short term locum doctors who have undergone the appropriate checks to work within the Trust. The doctors are contacted by the Workforce Officer on a random basis, whilst ensuring that the doctor has the necessary skills and competencies to fulfill the locum duties;
- III. Only when the above procedures have been exhausted will the Workforce Officer contact the Clinical Director for authorisation to approach appropriate Locum Agencies; and
- IV. In instances where potential locums are not already known to the department in which the locum will be working, the appropriate Clinical Director or supervising consultant should examine the Curriculum Vitae and references to satisfy themselves that the potential locum is suitably qualified /skilled to fulfill the locum requirement.

6.4 Approval of Agency Doctors

Long Term Contracts

- 6.4.1 If the Clinical Director has requested an Agency search, emails are to be sent by the Medical Staffing Officer to NHS Framework Approved Medical Staffing Agencies with details of the post being recruited to, including whether the post is Clinical or Medical Oncology, how many sessions per week and for how long and also whether there is a requirement for on-call.
- 6.4.2 If an appropriate candidate is found, their CV should be sent to the Clinical Director and SST Lead for approval prior to submitting a business case to the Velindre Cancer Centre Scrutiny Panel and the appropriate regulatory checks confirmed with the Agency.

6.4.3 Once approved in principle as 2. above, a Business Case will be submitted to the Scrutiny Panel by the Clinical Director indicating the requirement for a locum post, the cost per hour and the length of time required. Details of the effect on the service if not approved should be clearly documented.

6.4.3. Further to Scrutiny Panel approval the Agency can be contacted and arrangements for an interview can be made.

6.4.4 Agency Locum posts should be reviewed with the Clinical Director/SST Lead one month from the point of commencement and then every three months (Appendix 5 &6)

Ad hoc Agency Shift Cover

6.4.5 If the Clinical Director has requested an Agency search for any ad hoc shifts which require medical cover, the Medical Staffing should contact NHS Framework Approved Medical Staffing Agencies with details of the shifts to be covered, including whether the post is Clinical or Medical Oncology and whether there is a requirement for on-call.

6.4.6 If an appropriate candidate is found, their CV should be sent to the Clinical Director and SST Lead for approval.

6.4.7 If approved in principle as 2. above, then Medical Staffing team should contact the Agency to confirm regulatory checks and once clear, shifts are to be offered to the Locum.

6.4.8 Once shift is completed the Medic will request authorisation of their Work Sheet and these are then submitted to the Agency for invoicing.

6.5 Performance/ Reporting

All Locum or Agency Shifts will be recorded on the Locum Shift Database held centrally by the Medical Staffing team which will inform a monthly report to the Workforce & OD Committee of all Locum or Agency shifts covered.

6.6 Rates of Pay for Agency/Locum workers

A price cap will be applied for all Medical and Dental Agency/Locum worked from 1st November 2017. The caps are set out in **Appendix 9** and are the maximum payments allowed.

The price cap is a maximum rate to be paid and not to be seen as a target rate. No individual should be paid at rates higher than the cap unless agreed at Board level and only on the grounds of patient safety.

Where unsocial hours are paid to Agency staff these are subject to the capped rate set out in **Appendix 9**.

The unsocial hour's rate is paid for shifts commencing 7pm to 7 am or for any shift at the weekend. Should any shift span core and unsocial hours, then as long as more than 50% of the shift is undertaken in OOH the worked will receive unsocial payment for the hours falling within the out of hours period only.

Escalation to Board:

The Clinical Director will prepare a business case for Board which will include:

- 1.1 The rates of pay proposed & any cost pressure that will arise from the appointment;
- 1.2 The length of the proposed contract;
- 1.3 The reason for utilising an Agency Doctor i.e. failed recruitment;
- 1.4 The risks to patient services.

Payment

The Clinical Director or nominated deputy will authorise invoices that correlate to the entries on the Locum Shift Database which will be made available to the Finance Department.

Locum appointments made via Locum Agencies will be paid via the usual invoicing procedures.

In instances where locums are enrolled and paid via the Trust payroll, all employment should be paid as is the case for substantive staff i.e. via the monthly payroll.

For "ad hoc" locums who do not hold a substantive post in the Trust and for locums of less than two weeks consecutive duration a Medical Staff Claim for Additional Duty Hour Payments form (Appendix IV) should be completed for the hours worked, this will be authorised by the Clinical Director nominated deputy once checked against the Locum Shift Database. Payments will be made via the monthly payroll.

Doctors currently employed substantively in the Trust who perform additional locum duties will also be obliged to complete a Medical Staff Claim for Additional Duty Hour Payments form which will be authorised by the Clinical Director or nominated deputy, once checked against the Locum Shift Database it will be processed and paid in addition to their basic monthly pay. Payment will usually be made in the month following the locum duty assuming the claim is submitted promptly and it is possible to obtain the necessary signatures/authorisation prior to payroll deadlines.

6.7 Pre-employment Checks

In all instances where locum doctors are appointed, a number of checks must be made to satisfy the Trust as far as reasonably possible, that the locum doctor is suitably experienced and qualified to fulfil the locum post, before they are permitted to take up any duties within the Trust.

Such checks must be made irrespective of whether the locum doctor is employed on a short-term or long-term basis, although in instances where agency doctors are recruited, some of the checks may be made by the locum agency themselves as long as the agency is known by the Trust and has confirmed its compliance with the standards and guidelines of the Code of Practice in the Appointment and Employment of HCHS Locum Doctors.

Prior to a locum taking up any duties within the Trust, the following checks must be made:

- 6.7.1 Proof of identity of the doctor, will be done via the checking of the individual's original birth certificate and passport. The checking of the doctor's passport will also enable the Trust to confirm that a Doctor has appropriate visa / residency status.
- 6.7.2 Appropriate registration with the General Medical Council (GMC) taking care to ensure that any doctors with limited registration are covered to work in the applicable area. It should also be established that no GMC proceedings are pending against the doctor and that he has not been suspended.
- 6.7.3 Checking of original medical qualifications and any appropriate higher qualifications.
- 6.7.4 Satisfactory documentary evidence of pre-employment health assessment by an Occupational Health Department, to include up-to-date certification of appropriate immunisations. (In the case of Agency Locums, it is advised also that immunisation reports supplied by the Agency are also approved by the Trust's Occupational Health Departments).
- 6.7.5 Where appropriate, seek to ensure that the locum confirms that they will not breach the controls on hours as set out in the New Deal on Junior Doctors' Hours or the Working Time Regulations.
- 6.7.6 Ensure that references are appropriate and satisfactory. In all cases where doctors are not known to the Trust, two satisfactory references must be obtained, one of which must be the current/most recent employer before confirmation of the locum can be made. Care should be taken to investigate the reason for any gaps in the CV or failure to obtain a reference from the most recent employer.

- 6.7.7 Where a locum doctor will have access to children or vulnerable adults, they must be asked to complete an appropriate Disclosure and Barring Service (DBS) Disclosure Check. If the locum doctor is required to take up post prior to this check being completed, it is the responsibility of the Medical Director / Clinical Director, to ensure that they are properly supervised at all times until the disclosure check results are known.

Where an agency locum is used the nominated administrator or member of the medical team, should ask the agency to confirm the doctor's unique DBS Reference number and confirm the date the disclosure was carried out and that the disclosure was satisfactory, in accordance with the Trust's Policy for Disclosure of a Criminal Background.

- 6.7.8 Ensure that, where necessary, the locum is a current member of a medical defence organisation.

- 6.7.9 With the exception of agency locums Risk Assessment forms are completed (**Appendix 3**).

6.8 Travel and Accommodation

The cap on hourly rates (Please see **Appendix 9**) will include the worker's pay and all other elements such as travel and accommodation costs. Agency workers will not be entitled to any additional payments for travel to and from work base or accommodation costs. If travel is necessary between sites to fulfil the requirements of the role then these will be reimbursed subject to VCC NHS Trust arrangements.

6.9 Induction for Locums and Agency Staff

As with substantive employees, it is important that locums receive induction but that it is appropriate to the length of the doctor's appointment in the Trust. This may be done via local departmental familiarisation or a broader organisational induction.

In instances where short term junior doctor locums are appointed for overnight or weekend on-call work, the locum should be advised of the name of a fellow junior doctor on-call who they can meet at the start of their shift. This doctor will then be responsible for providing basic familiarisation (e.g. department layout, canteen facilities etc) and providing advice relating to procedures and duties to be performed throughout the course of the duty period.

A Trust induction sheet for junior doctors will contain all the key numbers / information which should enable a locum who is unfamiliar with the hospital to take emergency action.

For longer term junior doctor locums, an induction should be provided and a fellow junior doctor in the team should be nominated as a "buddy" so that they

can provide basic familiarisation of the department hospital and day to day work activities.

6.10 Use of Medical Equipment

In line with the Provision and Use of Work Equipment Regulations 1998, locums must not use medical equipment for which they have not received adequate training, if such use may entail risk to patients or others.

6.11 Assessment of Locum Doctors

It is important to assess the performance of all locum and agency doctors employed to work within the Trust. This will ensure that standards of performance are continually monitored and, most importantly, pinpoint any individuals or occasions where standards are not met.

In this respect a form should be completed in respect of all doctors who perform locum duties in the Trust and who are not already employed substantively in the department. For locums who are employed for less than two weeks duration a shortened assessment form should be completed which will enable the supervising consultant to confirm whether they feel the locum has fulfilled the basic requirements of the post (Appendix 5). If for any reason the locum has not met these basic requirements, the supervising Consultant should complete the more detailed assessment form to ensure that his concerns are fully documented (**Appendix 6 & 7**).

The more detailed assessment form should be completed in respect of all locums employed for longer than two weeks and for any locums who fail to meet the basic requirements of the post.

The appropriate assessment form should be completed by the supervising consultant immediately following the period worked.

In the event of unsatisfactory performance of a junior doctor in an educationally approved locum post of at least three months duration a report should be sent to the Postgraduate Dean by the supervising consultant.

The supervising consultant is responsible for identifying the unsatisfactory performance of a locum and should provide advice to the doctor where appropriate, regarding any further training they feel that the doctor should receive before undertaking any further locum work.

Where a significant or serious performance and or conduct concern come to light during a period of locum employment, the supervising consultant will discuss the matter with the Medical Director, in the first instance. Following this discussion a decision will be made regarding whether the issue is sufficiently serious to warrant reporting it to the Locum Agency and / or the GMC. In such instances it will be the responsibility of the Medical Director to contact the agency / GMC to report the matter. Should a concern come to light after the locum doctor has left the Trust, the process described above will also be followed.

6.12 Procedure for Seeking Locum Cover Outside Working Hours

The Clinical Director should ensure that arrangements are in place whereby up to date contact information on current medical staff is available and accessible to the senior members of the on-call team.

When a doctor phones to advise the most senior doctor on site in the specialty, that he/she is unable to attend for their out of hours duty, due to e.g. sickness, the consultant on call should make an assessment of the staff available within the specialty and attempt to arrange appropriate cover for the rest of the rota period from within existing resources. Staff must remain on duty where this is appropriate. Where junior staff are requested to undertake additional duty, they will receive the appropriate extra remuneration and time off in lieu.

If a consultant decides that “internal” arrangements are not feasible and having regard for the significant cost likely to be incurred the Consultant and Senior Manger on call is permitted to contact a locum agency, with a view to finding a short term locum. Contact number for the locum agency to be found at Appendix 8.

If the agency is able to offer a doctor for the locum post the CV should be faxed / emailed through to the Trust and the consultant will be responsible for confirming the appointment and advise the Workforce department.

When the locum period is completed the senior member of staff on duty will be responsible for countersigning the Agency’s time sheet.

If all attempts at finding a replacement doctor fails, the Consultant on-call must decide how best to manage the service and give due consideration as to whether admissions are able to continue.

6.13 Out of Hours Locum Agency

MEDACS
0800 442210

7. Equality

7.1 The Trust is committed to ensuring that, as far as is reasonably practicable, the way it provides services to the public and the way it treats its Employees reflects their individual needs and does not discriminate against individuals or groups.

7.2 The Trust has undertaken an Equality Impact Assessment and received feedback on this policy and the way it operates. The Trust wanted to know of any possible or actual impact that this procedure may have on any groups in respect of gender (including maternity and pregnancy as well as marriage or civil partnership issues) race, disability, sexual orientation, Welsh language, religion or belief, transgender, age or other protected characteristics.

7.3 The assessment found that there was no impact to the equality groups mentioned. Where appropriate the Trust will make plans for the necessary actions required to minimise any stated impact to ensure that it meets its responsibilities under the equalities and human rights legislation.

8. Training

8.1 Whilst there are no formal training programmes in place to ensure implementation of this policy, each Medical Director, Divisional Director, Clinical Director must ensure that clinical staff are made aware of the policy provisions and that they are adhered to at all times.

9. Resources

9.1 The implementation, performance monitoring and management arrangements associated with this policy are required to ensure budgetary control is maintained.

10 Implementation

10.1 This policy will be maintained by the Medical Staffing team.

10.2 Please refer to the responsibilities section for further information in relation to the responsibilities in connection with this policy.

11 Policy Conformance / Non Compliance

If any Trust employee fails to comply with this policy, the matter may be dealt with in accordance with the Trusts Disciplinary Policy. The action taken will depend on the individual circumstances and will be in accordance with the appropriate disciplinary procedures. Under some circumstances failure to follow this policy could be considered to be gross misconduct.

12 Distribution

The policy will be available via the Trust Intranet Site, from the Medical Staffing Team and Workforce & OD Department. Where staff do not have access to the intranet their line manager must ensure that they have access to a copy of this policy.

13 Review

The Medical Staffing Department in conjunction with Workforce & OD Department will review the operation of the policy as necessary and at least every 3 years.

14 Further Information

Further information and support is available from the Medical Staffing Department based at Velindre Cancer Centre on ext. 6284 or ext. 6630.

Appendix I

CRITERIA FOR APPOINTMENT TO THE VARIOUS LOCUM GRADES

The following are the minimum standards as laid down in the NHSE document 'Code of Practice - the Appointment and Employment of Locum Doctors'. Any variations to these standards must be authorised by the appropriate Clinical Director.

<p>Consultant: Full registration with the General Medical Council / General Dental Council</p> <p>On the Specialist Register in an appropriate specialty</p> <p>Possess the knowledge, skills and competencies, attributes and experience to undertake unsupervised independent clinical practice</p>

<p>Associate Specialist: Full registration with the General Medical Council</p> <p>Minimum of four years in the Specialist Registrar or Staff Grade</p> <p>Two years in the relevant specialty</p>

<p>Staff Grade: Full registration with the General Medical Council</p> <p>Minimum of three years in the SHO or higher grade</p> <p>Appropriate experience in the relevant specialty</p>

<p>Clinical Assistant: Full registration with the General Medical Council</p> <p>Relevant experience in the specialty</p>

<p>ST1: Completion of FP1/FP2 attachments (or equivalent) plus relevant experience from within the specialty.</p> <p>ST2: Completion of the necessary ST experience, possession of the minimum College requirements for entry to the grade</p> <p>ST3: Completion of the necessary ST experience; possession of the minimum College requirements for entry to the grade</p> <p>ST4: Completion of the necessary ST experience; possession of the minimum College requirements for entry to the grade</p>

Appendix 2

Applicant Declaration Form

Please ensure that you complete this form as truthfully and accurately as possible, giving all the required information, and return it with your application form.

1. Are you currently bound over or have you ever been convicted of any offence by a Court or court-martial in the United Kingdom or in any other country?

Note: You do not need to tell us about parking offences.

NO YES

If **YES**, please include details of the order binding you over and /or the nature of the offence, the penalty, sentence or order of the Court, and the date and place of the Court hearing.

2. Have you ever received a police caution, reprimand or final warning?

NO YES

If **YES**, please include details of the caution, reprimand or final warning, including the date and reason administered.

3. Have you been charged with any offence in the United Kingdom or in any other country that has not yet been disposed of?

Please note: you must inform us immediately if you are charged with any offence in the United Kingdom or in any other country after you complete this form and before taking up any position offered to you. You do not need to tell us if you are charged with a parking offence.

NO YES

If **YES**, please include details of the nature of the offence with which you are charged, date on which you were charged, and details of any on-going proceedings by a prosecuting body.

4. Are you aware of any current police investigations in the United Kingdom or in any other country following allegations made against you?

NO YES

If **YES**, please include details of the nature of the allegations made against you, and if known to you, any action to be taken against you by the police.

5. Are you aware of any current NHS Counter Fraud and Security Management Service investigation following allegations made against you?

NO YES

If **YES**, please include details of the nature of the allegations made against you, and if known to you, any action to be taken against you by the NHS CFMS.

6. Have you ever been investigated by the Police, CFSMS or any other Investigatory Body resulting in a caution, conviction or dismissal from your employment? (Investigatory bodies include Local Authorities, Customs and Excise, Immigration, Passport Agency, Inland Revenue, Department of Trade and Industry, Department of Work and Pensions, Security Agencies, Financial Services Authority, Banks and Building Societies, General, Life Insurance Companies – this list is not exhaustive, and you must declare any investigation conducted by an Investigatory Body).

NO YES

If **YES**, please include details of the nature of the allegations made against you, and if known to you, any action to be taken against you by the Investigatory Body.

7. Have you ever dismissed by reason of misconduct from any employment, office or other position previously held by you?

NO YES

If **YES**, please include details of the employment, office or position held, the date that you were dismissed and the nature of allegations of misconduct made against you.

8. Have you ever been disqualified from the practice of a profession, or required to practise subject to specified limitations following fitness to practise proceedings, by a regulatory or licensing body in the United Kingdom or any other country?

NO

YES

If **YES**, please include details of the nature of the disqualification, limitation or restriction, the date, and the name and address of the licensing or regulatory body concerned.

9. Are you currently the subject of any investigation or fitness to practise proceedings by any licensing or regulatory body in the United Kingdom or in any other country?

NO

YES

If **YES**, please include details of the reason given for the investigation and/or proceedings undertaken, the date, details of any limitation or restriction to which you are currently subject, and the name and address of the licensing or regulatory body concerned.

10. Are you subject to any other prohibition, limitation, or restriction that means we are unable to consider you for the position for which you are applying?

NO

YES

If **YES**, please include details of the nature of the prohibition, restriction, or limitation, when and by whom it was made.

If you have answered "**YES**" to **any** of the questions above and need more room to answer, please use this space to provide details. Please include **clearly** the number(s) of the question that you are answering.

DECLARATION

I confirm that the information that I have provided in this Declaration Form is correct and complete.

PRINT SURNAME _____ INITIALS _____

SIGNATURE DATE

Note: if you wish to withdraw your consent at any time after completing this Declaration From, please contact the **Workforce Department on tel 029 20316944**

Appendix 3

DBS Risk Assessment

**DISCLOSURE AND BARRING SERVICE DISCLOSURE CHECK – NEW EMPLOYEES
RISK ASSESSMENT FORM**

Department/Division:	
Employee's Name:	
Employee's Job Title:	
Employment start date:	
Level of DBS required:	
Date DBS requested:	

Please consider and respond to the questions below and sign and date the form.

For the Employee

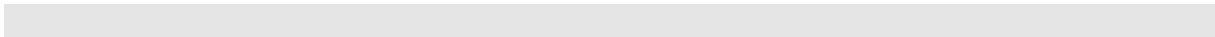
Do you have any criminal convictions / bind overs / cautions/ reprimands etc. that you would be required to declare to the organisation.

If yes please detail these below

Have you had a previous DBS check with an NHS organisation?

If yes please detail the NHS Organisation, Date of completion, Level of completion.

Please detail when you last saw Occupational Health and which Occupational Health Department you saw?



DECLARATION BY EMPLOYEE

I confirm that I understand the implications of commencing work prior to clearance being received, and the possibility that disciplinary action may result if it is subsequently discovered that I did not disclose any material facts relating to my employment.

Signed: _____

Employees name: _____

Date: _____

This form should be retained on the employee's personnel file.

For the Employer

As the appointing / assessing manager, you are required to assess whether it is appropriate for the above named individual to commence work prior to the Trust receiving clearance from the Criminal Records Bureau.

Does the job involve regular unsupervised contact with children or vulnerable adults, and require the post holder to undertake regulated activity? If yes please briefly detail this activity.

Will the individual work be required to work alone during the period that the organisation is awaiting the necessary pre-employment checks?

Please detail any control factors that will be implemented to minimise the risk of this employee commencing employment without the necessary pre-employment checks

Please outline the implications of delaying the individual in commencing employment.

DECLARATION BY THE APPOINTING / ASSESSING MANAGER
Please delete the relevant option below

I have considered the questions outlined above, and **I am NOT satisfied** that it is safe to allow the above named individual to commence work before the Disclosure clearance is received.

OR

I have considered the questions outlined above and confirm that **I AM satisfied** that it is safe to allow the above named individual to commence work before the Disclosure clearance is received, subject to the following safety measures being in place (if appropriate) :

I confirm that I have notified all relevant managers that the individual is still subject to clearance, and of the need to ensure the above measures are implemented.

Signed: _____

Manager's name: _____

Date: _____

DECLARATION BY DIVISIONAL DIRECTOR/DEPUTY DIRECTOR

I confirm that I am in agreement with the content of this document.

Signed: _____

Director/Deputy Director name: _____

Date: _____



APPENDIX 4

Medical Staff Claim for Additional Duty Hour Payments on a Locum Basis

SURNAME		FORENAMES	
ADDRESS			STAFF NUMBER
GRADE			

BANK DETAILS	
ADDRESS	
SORT CODE	

DETAILS OF CLAIM						
Date worked	Start time	Finish time	No. of hours claimed	Covering absence of	Reason for absence	Department and Hospital

Total ADHs Claimed: _____

I confirm that I have performed the above duties outside my regular contractual commitment. I confirm that in undertaking the Locum I have not worked above the limit on hours worked by Junior Medical Staff as laid down in the Terms & Conditions of Service of Hospital Medical and Dental Staff.

Signature of Claimant: _____ Date: _____

Signature of Authorising Consultant: _____ Date: _____

Authorised by Medical Personnel/HR: _____ Date: _____

Financial Code:																			
------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

For Payroll Use Only:

Period paid: _____

APPENDIX 5

SHORT ASSESSMENT FORM FOR LOCUM APPOINTMENTS

This form should be completed by a Supervising Consultant in respect of any Doctor performing locum duties in the Trust for up to two weeks', and who is not already employed in the department. In instances where the performance of a locum has fallen short of the basic standards required of such a post holder, the Supervising Consultant should complete the Full Assessment Form for Locum Appointments in order to provide a detailed account of how the locum has not met these standards.

Name of Locum	
Grade of Locum	
Specialty worked	
Dates of locum employment	

The Doctor's performance in the above mentioned locum post has been: - {please tick}

GOOD	
AVERAGE	
BELOW AVERAGE	

{NB - Please complete Full Assessment Form for Locum Appointments if you consider the locum's performance to have been below average}

**Would you re-employ this Doctor in this Trust again? (Please circle)
YES / NO**

Comments.....
.....
.....

Should the matter be referred to the Locum Agency? YES / NO

Should the matter be referred to the GMC? YES / NO

Signature of Supervising Consultant.....

Name of Supervising Consultant in Capitals

Date of Signing.....

APPENDIX 6

FULL ASSESSMENT FORM FOR LOCUM APPOINTMENTS

This form should be completed by a Supervising Consultant in respect of any doctor performing locum duties in the Trust for longer than two weeks' and who is not employed in the Department and where the performance of a short-term locum has fallen short of the basic standards required of such a post holder. Where the locum employed is of Consultant level, this form should be completed by the Medical Director or other nominated Consultant as appropriate.

Name of Locum	
Grade of Locum	
Specialty worked	
Dates of locum employment	

The Doctor's performance in the above mentioned locum post has been: - (Please tick as appropriate)

	Above average	Average	Below average	Poor
Clinical skills				
Knowledge				
Attitude				
Relationships				
Personal qualities				

(See below for assessment guidelines)

Would you re-employ this Doctor in this Trust again? (Please circle)

YES / NO

Comments.....

If No:-

Should the matter be referred to the Locum Agency? YES / NO

Should the matter be referred to the GMC? YES / NO

Signature of Supervising Consultant/Medical Director	Name of Supervising Consultant / Medical Director (in capitals)	Date of signing

Statement by Locum Doctor

I have seen the above assessment and I agree / disagree with its contents

Signed..... **Date**.....

(If you disagree with this assessment, please forward a signed statement to the Workforce Department)

Appendix 7

ASSESSMENT GUIDELINES

To be graded 'average' or 'above average', the locum's performance must be consistent with that of doctors in substantive appointments at the grade.

CLINICAL SKILLS	History taking Physical examinations Investigations and diagnosis Judgement and patient management Practical skill
KNOWLEDGE	Basic science Clinical
ATTITUDES	Reliability Leadership and initiative Administration Time-keeping
RELATIONSHIPS	Colleagues Patients Other staff Communication skills
PERSONAL QUALITIES	Appearance Integrity Manners

Appendix 8

OUT OF HOURS LOCUM AGENCY

**MEDACS
0800 442210**

Appendix 9

WHC/2017/042

Applicable from 1st November 2017

Addressing the impact of Agency & Locum Deployment in Wales

CAP RATES

This is the maximum that can be paid without Board approval: rates should be negotiated below the amounts shown below.

Grade	Shift Type/Capped Rates	
	Core	Unsocial
Foundation Year 1	£32.54	£39.31
Foundation Year 2	£40.36	£48.76
Registrar (SP1-2)/ Medical Training	£45.76	£55.30
Registrar (SP3+)	£57.05	£68.94
Dental Core Training	£56.15	£67.94
Speciality Doctor/Staff Grade	£66.43	£88.57
Associate Specialist	£82.21	£109.62
Consultant	£97.22	£129.62