



**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL  
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	<u>20 June 2022</u>
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	126 – Work/Life Balance – Flexible Working Policy
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce & OD (Organisational Development)
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Lisa Gostling, Director of Workforce & OD (Organisational Development)

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA**

**SBAR REPORT**

**Sefyllfa / Situation**

In line with Hywel Dda University Health Board's (HDdUHB's) written control documentation process, the People, Organisational Development & Culture Committee (PODCC) is asked to approve the following revised policy document:

- 126 Work/Life Balance – Flexible Working Policy

The report provides the required assurance that the Written Control Documentation (WCD) Policy (policy number 190) has been adhered to in the development of the above-mentioned written control document and therefore the documents is in line with legislation/regulations, available evidence base and can be implemented within the Health Board.

**Cefndir / Background**

It is imperative that HDdUHB has up to date and accurate written control documentation in order to comply with relevant legislation and to minimise any associated risks.

**126 Work/Life Balance – Flexible Working Policy**

The Policy has been updated following some revisions to Section 33 of the NHS terms and conditions of service handbook, which took effect on 13 September 2021 in England and Wales. Whilst the revisions to the Handbook did not require any specific change to the Policy, we have taken the opportunity to make some minor changes to add clarity to the Policy so that it is explicit that staff are not limited to the number/frequency of applications and that requesting flexible working is a day one employment right.

Other changes made to the Policy include replacing references to the Grievance Policy at pages 8,12 and 14 with the Respect & Resolution Policy which supersedes it.

The revisions have been shared with the Local Partnership Forums, the Local Negotiating Committee (LNC) and Staff Partnership Forum (SPF).

The Work/Life Balance – Flexible Working Policy will undergo a full review later in 2022 in line with any implementation plan agreed by the Health Board's Hybrid Working Task and Finish Group – Back to Better for Hywel Dda.

### Asesiad / Assessment

The revised policy has been reviewed in line with changes made to Section 33 of the NHS Terms and Conditions of Service Handbook.

A screening Equality Impact Assessment (EqIA) has not been undertaken due to the minor changes made. The former EIA remains valid.

Following approval, the Policy will be uploaded to the intranet site and will replace the existing version.

### Argymhelliad / Recommendation

The People, Organisational Development & Culture Committee is requested to:

- receive an assurance that 126 – Work/Life Balance – Flexible Working Policy has been reviewed in line with Policy 190.
- Approve the Work/Life Balance – Flexible Working Policy for publication.

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.13 Approve workforce and organisational development policies and plans within the scope of the Committee.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7. Staff and Resources 7.1 Workforce
Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Putting people at the heart of everything we do 2. Working together to be the best we can be 6. Sustainable use of resources

Amcanion Cynllunio Planning Objectives	1F HR Offer (induction, policies, employee relations, access to training )
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report</a>	5. Offer a diverse range of employment opportunities which support people to fulfill their potential 10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termau: Glossary of Terms:	Included within the policy.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	Local Partnership Forums LNC Staff Partnership Forum

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable.
Gweithlu: Workforce:	This policy applies to all staff.
Risg: Risk:	The presence of written control documentation on the intranet, outside of the Policies, Procedures and other Written Control Documentation intranet webpage, may result in staff accessing documents which are out of date, no longer relevant, or contradicting current guidance.

<b>Cyfreithiol: Legal:</b>	It is essential that the UHB has up to date policies and procedures in place which comply with legislation as a minimum standard.
<b>Enw Da: Reputational:</b>	Failure to manage issues effectively under the policy framework may lead to formal complaints which may have a reputational impact.
<b>Gyfrinachedd: Privacy:</b>	Not applicable.
<b>Cydraddoldeb: Equality:</b>	A full equality impact assessment has not been undertaken due to the minor changes made. A full review of the <a href="#">Pp</a> olicy and EIA will be undertaken later in the year.

# Work/Life Balance Flexible Working Policy

## Policy information

Policy number: 124

Classification:  
Employment

Supersedes:  
126

Local Safety Standard for Invasive Procedures (LOCSSIP) reference:  
*not applicable*

National Safety Standards for Invasive Procedures (NatSSIPs) standards:  
*not applicable*

Version number:  
6.0

Date of Equality Impact Assessment:  
*Detail date of EqIA*

## Approval information

Approved by:  
PODCC

Date of approval:  
*Enter approval date*

Date made active:  
*Enter date made active (completion by policy team)*

Review date:  
*Enter review date (normally three years from approval date)*

Summary of document:

To outline the range of flexible working options available to staff within the organisation and the process by which staff may request flexible working.

Scope:

All employees of the Heath Board.

To be read in conjunction with:

[995 - Respect and Resolution Policy \(opens in new tab\)](#)

[131 - Flexi-Time Policy and Procedure \(opens in new tab\)](#)

[573 - All Wales Organisational Change Policy \(opens in new tab\)](#)

[768 - Managing Attendance at Work All Wales Policy \(opens in new tab\)](#)

[128 - Maternity, Adoption and Paternity Leave Policy and Procedure \(opens in new tab\)](#)

[122 - All Wales Special Leave Policy \(opens in new tab\)](#)

Patient information:

N/A

Owning group:

Workforce and Organisational Development Committee

*Date signed off by owning group*

Executive Director job title:

*Lisa Gostling – Director of Workforce and OD*

Reviews and updates:

*1.0 – New Police*

*2.0 – Revised*

*3.0 – Revised – only minor changes*

*4.0 – 3 yearly review*

*5.0 – Appendix 3C – updated sentence – The Data Protection Act/General Data Protection Regulations (2016) or any subsequent legislation to the same effect.*

*6.0 – Revised*

Keywords

Flexible Working, Flexibility, Work Life Balance

Glossary of terms

*PAT* - Portable Appliance Testing

LHB – Local Health Board

H&S – Health and Safety

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## Introduction

We recognise that staff have different needs at different stages of their working lives. Flexibility in employment makes it possible for employees to make choices about how and when they wish to work, taking in to account the needs of the service. Flexibility in employment is a key factor in demonstrating our commitment to fair and equal treatment inside the workplace and in attracting the highest calibre of applicants to work for the organisation.

The Hywel Dda University Health Board (Health Board) is committed to implementing the policy in a way which meets the equality and diversity needs of staff as defined in the Equality Act 2010. It is the responsibility of managers and staff to ensure that they implement this policy/procedure in a manner that meets the needs of people from these groups. It is always best to check with individual staff what their needs are, but needs may include providing information in an accessible format, considering mobility issues, being aware of sensitive/cultural issues as defined by the Equality Act 2010 or any subsequent amendments or future legislation.

## Policy statement

Hywel Dda University Health Board is committed to achieving the highest standards of health care services. This can be achieved through a highly trained, skilled and motivated workforce. The provision of flexible forms of working plays an important part in making it possible to attract and retain the best possible staff.

## Scope

This policy covers all staff employed by Hywel Dda University Health Board.

## Aim

The aim of this document is to:

- Confirm the commitment of Hywel Dda University Health Board to maximising the opportunities to recruit, retain and motivate staff by making available a range of flexible forms of working. The document also describes models of flexible working and the process by which staff may request flexible working.

## Objectives

The aim of this document will be achieved by the following objectives:

- To improve the efficiency of the departments whilst giving flexibility to employees to request flexible working.

## General Principles

- Employees will be able to apply for any form of flexible working from day one of employment.
- Employees can make more than one flexible working request per year and can do so regardless of the reasons for them.
- Employees shall be treated equally and fairly when having requests considered for flexible working within the constraints of the exigencies of the service.
- Each request for flexible working will be considered individually and will be assessed on its own merits by the appropriate line manager.



- In considering the request, managers will take into account the impact on other employees within that work area before a decision is made.
- Approved flexible working requests will be reviewed regularly to ensure the needs of the service are still being met.
- Contractual changes to terms and conditions of service can only be agreed following careful consideration of the implications and a proper understanding of the employee's circumstances.
- Employees working flexibly will not be treated less favourably in relation to access to training or promotional opportunities.

## Models of Flexible Working

There are a number of different ways in which people can work flexibly but essentially, these fall into three categories which relate to:

- The number of hours which are worked;
- The times in which the work is undertaken;
- The place at which the work is undertaken (e.g home).

The following sections provide examples of the types of flexible working that may be requested by Health Board employees. The list is not meant to be exhaustive, and not all of the examples will necessarily be appropriate in all locations and/or circumstances. Implementation will be through local agreement between employees and managers.

## Part Time Working

A method or model of working which involves undertaking paid work activity for a period less than full-time. Salary, pension, holiday and other benefits are pro-rata.

Overtime rates will be payable only when the employee has worked beyond the normal full time contractual hours for the position.

## Term Time Working

As part of a permanent contract of employment, employees are given the opportunity not to work during school holidays. Salary and annual leave are pro rata based on hours worked and averaged out over a 12 month period with annual leave being taken during the school holiday period.

## Temporary Reduction in Hours (Voluntary Reduced Working Time)

An opportunity to reduce the number of hours worked. This is normally undertaken for an agreed period of time, usually for no longer than a year. At the end of the period the individual may return to their substantive hours if he/she so wishes. Salary, pension, holiday and other benefits are pro rata during this time.

## Flexitime

A scheme of working which allows employees to choose the time they begin and finish work around a set core time during each working day. This provides an opportunity for employees to exercise

discretion over their working hours, subject to the exigencies of the service the employee must work designated core hours and complete an agreed number of hours over an agreed period, usually a month.

## Job Sharing

Sharing the responsibilities, duties and benefits of a single full-time post usually between two individuals. The combined salary and conditions of service are equivalent to that of a single full-time post and are divided in accordance with the number of hours worked by each job-sharer. The principle of job sharing usually reflects an integrated pattern of working, where some of the work may be shared and other tasks distributed evenly to each sharer.

## Homeworking

The capacity to work from home for short, long or permanent periods of time and to receive remuneration in line with those who attend the workplace. It may consist of the occasional day at home to coincide with a domestic requirement, or a regular arrangement of several days a week.

## Work Breaks

An opportunity to leave the workplace for a specific period of time (usually between one and five years) and to return to the same or a similar position in the organisation at the end of that period.

## Annualised Hours

Annualised hours systems provide a way of organising working time by contracting with staff to work an agreed number of hours per year rather than a standard number each week. The actual number of hours worked by a member of staff during the week will then be “flexed” to match workload requirements. As well as hours being varied week to week, they may also be varied seasonally and/or according to fluctuation of service demands. Annualised hours are used to match attendance of staff to the periods when they are most needed.

## Compressed Hours

A method of allowing employees to work their total number of agreed hours over fewer working days. Often a five day working week is compressed into four days or a 10 day fortnight into nine days. Annual leave needs to be calculated in hours and should include all bank holidays.

There are specific schemes for people nearing retirement including the following:-

**Wind Down:** as an alternative to retiring, staff can opt to wind down by working fewer days or hours in their working week;

**Step Down:** staff who do not want to leave work altogether, but who would like to give up the pressure and move into a less demanding, lower band (paid) post that still makes use of their skills and experience;

**Retire and Return to the NHS:** staff who opt to retire and take all their pension benefits and return to NHS employment. Options available include registering for the staff bank by taking retirement, then opting to work on an “as and when” basis, giving an opportunity to pick and choose the hours worked;

**Draw Down:** This is only open to members of the 2008 section of the NHS Pension Scheme. Draw down allows members to take part of their pension benefits whilst continuing in NHS employment.

**Staff nearing retirement who intend to apply for any of the above options are advised to contact the Pensions Department for advice on how options may affect their pension benefits.**

The above list is not intended to be exhaustive and other flexible models of working which may be a combination of one or more of the above may be agreed.

## Application Process

Where an employee wishes to apply for flexible working, they should discuss their requirements with their manager prior to completing the relevant application form and submitting it to their manager.

The manager must meet with the applicant within 28 days of receipt of the application, to discuss the request. Their manager may need more than one meeting with them, depending on the nature of their request. The employee may be accompanied by their representative at these meetings if they wish. If the request is refused, the reasons will be explained to them in person and confirmed in writing.

If the employee believes the request has been unreasonably refused, or if they do not get a response in writing from their manager within a reasonable or agreed period of time they may take their request to the next level of manager. Managers must ensure that a decision is made within the shortest possible time.

Where the employee remains dissatisfied, they should pursue the All Wales Respect and Resolution Policy.

All approved flexible working requests will be reviewed regularly to ensure the needs of the service are being met.

## Responsibilities

### Chief Executive

The Chief Executive holds overall responsibility for the effective management of organisational policies.

### Director of Workforce & OD

The Director of Workforce & OD is responsible for ensuring that robust processes and procedures are in place to enable the efficient and equitable application of this policy.

### Assistant Director of Workforce and OD

The Assistant Director of Workforce and OD has responsibility for ensuring that the application of this policy is monitored and audited and that reports on the application of the policy are provided regularly (at least annually) to the Workforce & OD Sub Committee.

### Managers

If an employee approaches their manager with a request to work flexibly, the manager must:

- Discuss the initial request with them and ensure they complete an application form. If they wish to proceed.
- Consult with relevant colleagues, including other team members who may be affected, their own manager, Workforce and Organisational Development Department, etc on the implications of the proposed change.
- Consider how best to accommodate the request without impairing service standards
- Consult Workforce and Organisational Development Department where there is a proposed change to the terms of the existing contract or to pay and benefits.
- Agree with the employee a date by which they will have considered the request, taking account of its complexity as well as urgency. A meeting should take place as soon as practicably possible and within a period of 28 days following the receipt of the written request. The meeting will provide the opportunity to explore the desired work pattern and to discuss how best it might be accommodated. It will also provide an opportunity to consider other alternative working patterns should there be problems in accommodating the desired work pattern.
- Consider if pay and benefits need to be adjusted on a pro-rata basis to changes in the hours worked and the effects of the proposed change fully explained and agreed with the employee.
- The application of flexible forms of working should not result in the Health Board incurring additional costs
- Inform the employee of their decision in respect of the application and confirm this in writing. A decision should be conveyed to the employee within fourteen days after the date of the meeting.
- Inform the employee that approved flexible working requests will be regularly reviewed in line with the needs of the service.
- Ensure that Workforce and Organisational Development Department are notified of the decision and that any agreed changes are properly documented with a copy and change of circumstance form completed and kept in the employee's personal file.
- Each request must be judged on its merits and prevailing circumstances. Managers should bear in mind the need to be responsive to individual requirements whilst taking into account the overall needs of the team and the service.

## **Employees**

### **Role of the Workforce and Organisational Development Department**

The Workforce and Organisational Development Department will provide advice and guidance on the development and implementation of flexible forms of working. The department will also monitor flexible employment practices across the Health Board to quantify the extent to which flexible forms of working are operating and to ensure that the general principles of this policy are being met.

### **Monitoring and Reviewing**

All Schemes will be monitored and reviewed, at regular intervals, for impact on the delivery of service and the impact on staff.

Appendix 1 – Application for Flexible Working

(To be used for all applications for flexible working with the exception of Home Working and Work Break)

Please ensure that in order to help the HB to consider your request, you provide as much information as you can about your desired working pattern. When completing sections 3 & 4, think about what effect your change in working pattern will have both on the work that you do and on your colleagues.

Once you have completed the form, you should immediately forward it to your line manager (keep a copy for your own records).

If the request is granted, there will be regular reviews of the flexible working arrangements agreed to ensure that the needs of the service are being met.

1. Personal Details	
Last Name:	First Name:
Department:	Position:
Contracted Hours:	

I would like to apply to work a flexible working pattern that is different to my current working pattern.

2a. Describe your current working pattern (days/hours/times worked):
2b. Describe the working pattern you would like to work in the future (days/hours/times worked):

<b>2c. I would like this working pattern to commence from:</b>

<b>3. Impact of the new working pattern</b> I think this change in my working pattern will affect my employer and colleagues as follows:
<b>4. Accommodating the new working pattern</b> I think the effect on my employer and colleagues can be dealt with as follows:

<b>Signature:</b> .....	<b>Date:</b> .....



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*Cut this slip off and return it to your employee in order to confirm your receipt of their application.*

<b>Employer's Confirmation of Receipt</b> (to be completed and returned to the employee)	
<b>Dear:</b>	.....
<p>I confirm that I received your request to change your work pattern on: ..... I shall be arranging a meeting to discuss your application within 28 days following this date. In the meantime you might want to consider whether you would like a fellow colleague or TU representative to accompany you at the meeting.</p>	
<b>From:</b>	.....

## Appendix 2 – Job Sharing Principles and Procedure

Job Sharing will apply equally to all employees who wish to reduce their working hours.

Job sharing will also be available to prospective employees (i.e. the job will be advertised as being suitable for job sharing).

### 1. General Principles

No job may be shared by more than two employees, both of whom must be suitably qualified in terms of skills and experience to undertake the range of tasks and responsibilities necessary to carry out the post.

Full consideration will be given to all posts being job shared. Although the operation of a job share may not always be appropriate, posts should not be excluded from consideration on the basis of status and level.

Where requests are made to convert a post to a job share, any decisions to reject the application to job share must be objectively justified and confirmed in writing. The employee will have the right to appeal against the decision through the All Wales Respect and Resolution Policy.

Where a post is recognised as being appropriate for job sharing, the duties and functions must remain unchanged. If changes are required at a later date, they will be agreed with the job sharers.

The working arrangements and responsibilities for a particular job shall be determined by the appropriate line manager in consultation with the job sharers.

A job description and written statement of main terms and particulars of employment will be made available to each sharer.

Pay will be calculated by reference to the band for the post and paid on a pro-rata basis in relation to the number of hours worked. All other benefits including any increments, allowances and any other payments to which the post is eligible will be determined on an individual and pro-rata basis.

Job sharers will be given equal access to training and development opportunities and this will be effectively monitored.

### 2. Applications for Job Sharing

#### 2.1 External

Prospective external job applicants will be made aware of the job share potential for each externally advertised post. Such information will be included in all advertisements and job details.

#### 2.2 Internal

Employees wishing to job share must submit their request in writing to their line manager or alternatively they may wish to apply for job shares as posts become vacant and are advertised as being suitable.

### 3. Sharing Arrangements

A post may be shared by two persons on a split-day or split-week basis, giving each employee a pro-rata share of the full-time hours of the post on either a morning or afternoon basis or two/three days a week.



Other sharing arrangements may be permitted but they must be subject to approval by the appropriate line manager. Prior to recommending the filling of a post by two job sharers, the manager must ensure that agreement has been reached with the sharers on the hours/pattern to be worked and the division of tasks to be undertaken to meet the full-time requirements of the post.

#### **4. Written Statement of Main Terms and Conditions of Employment**

Each partner to a job share will have an individual written statement of main terms and conditions of employment. The job description issued will be that prepared for the established post, with an addendum to reflect agreements reached concerning any agreed division of the full duties and responsibilities of the post.

#### **5. Replacement of a Job Sharer**

In the event of one job sharer ceasing to continue in the job sharing partnership, the hours of work previously undertaken by the sharer may be offered to the remaining job sharer. If the remaining job sharer does not wish to work the hours demanded by the post, the remaining job share will be advertised. If a job sharer cannot be recruited within a reasonable period of time (which should not be less than two months from the last day of service of the previous job sharer), alternative arrangements for covering the duties of the post will be considered. This may include the redeployment of the remaining sharer to a suitable alternative post on the grade and conditions of service applying to their shared appointment.

#### **6. Terms and Conditions of Service**

##### **6.1 Hours of Duty**

The normal hours of duty of a job sharer will be a pro-rata share of the hours of the post, as directed by the appropriate line manager.

##### **6.2 Arrangements for Continuity**

Where continuity is determined by the line manager as an essential requirement of the post, both employees will be required to overlap their hours of work or arrange to meet at a specific work time during the week.

##### **6.3 Pay**

The salary and any other remuneration will be calculated on a pro-rata basis in accordance with the band and number of hours worked. Individuals who job share may, depending on length of service and experience, be placed on different incremental points.

##### **6.4 Annual Leave**

The annual leave entitlement of job sharers will be a pro-rata share of the full time entitlement.

##### **6.5 Public Holidays**

Bank holidays and extra statutory days should be shared on a pro-rata basis according to the hours worked by each job sharer.

##### **6.6 Leave for Other Purposes**

Special leave will be granted on a pro-rata basis to the full-time entitlement.

### **6.7 Sick Pay and Leave**

Job sharers will be entitled to sick pay and leave on a pro-rata basis to full-time entitlement.

### **6.8 Maternity/Paternity Leave**

Job sharers will be entitled to maternity/paternity leave on a pro rata basis to full-time entitlement.

### **6.9 Superannuation**

Job sharers are entitled to join the NHS Pension Scheme. Payments and benefits will be calculated on a pro rata basis.

### **6.10 Allowances**

In the case of any other allowances, for example, subsistence allowances or travelling expenses, job sharers will be covered by the conditions which apply to full-time employees.

## **7. Training and Development**

Job sharers will receive equal access to training opportunities . Every effort should be made to align training courses with the days on which the sharer is at work or alternatively to give time off in lieu where this is not possible.

## **8. All Wales Respect and Resolution Policy**

Any grievance relating to the interpretation and application of these conditions will be dealt with through the All Wales Respect and Resolution Policy.

## **9. Monitoring and Reviewing**

The job sharing arrangements will be subject to regular review by the appropriate line manager and job sharing partners. This will provide opportunities to re-assess job priorities and changing responsibilities. The effectiveness of the policy will be reviewed annually. The level of job share 'take up' within the organisation will be monitored including the number of requests and refusals.

## Appendix 3A – Home Working Principles and Procedure

Homeworkers are defined as employees who, for a defined part, or all of their contractual hours, are based at home for the purpose of carrying out their work with the agreement of their Health Board and are designated as 'homeworkers'.

Where an employee wishes to work from home on an ad hoc, occasional and informal basis, this may be agreed between the employee and their line manager without reference to the formal application process.

### 1. General Principles

Every employee may request homeworking arrangements through their appropriate line manager.

All applicants for homeworking must complete the homeworking application form, which is set out in Appendix 3b of this document.

All homeworkers will be required to sign the homeworking agreement which is set out in Appendix 3c of this document

### 2. Particular Considerations

#### 2.1 Work and Caring Commitments

Homeworkers must separate domestic and work activities and commitments as far as is practicably possible. Individuals with caring responsibilities will be required to produce a written statement outlining the care arrangements for the dependant person in the Homeworking Agreement. The line manager must be informed as soon as practicably possible of any changes to caring arrangements, which have implications for the work being undertaken from home.

#### 2.2 Health and Safety Risk Assessment

Every applicant who makes a formal application for homeworking must agree to a health and safety risk assessment being carried out to identify any adjustments or equipment that may be necessary to carry out the work in a safe environment. Further information can be found by logging onto <http://www.hse.gov.uk> (opens in new tab)

#### 2.3 Equipment

The Health Board will provide the equipment needed to carry out the work. This may include IT equipment, an additional telephone line and a desk, chair or cabinet where required. All equipment supplied by the Health Board will have to undergo portable appliance testing (PAT) testing.

#### 2.4 Timescales

It may take a number of months to establish the homeworking arrangements. This period of time will however, allow for the application to be approved and for any computer equipment and furniture to be ordered and delivered.

## **2.5 Terms and Conditions of Service**

Homeworkers will receive the same terms and conditions of service as staff who carry out the same or similar work inside the workplace.

## **2.6 Hours of Work**

The applicant must agree the precise number of hours to be worked from home with their line manager before any homeworking arrangements commence. The times when the work will be undertaken need not be fixed provided all work is completed in accordance with any prescribed timescales. The employee should be available by telephone should there be the need to check or clarify issues relating to their work. Homeworkers must be available to attend the workplace if required.

## **2.7 Confidentiality**

Homeworkers must ensure the security and safekeeping of any confidential information they are required to work with in the home. Such information must not be accessible to family or visitors of the homeworker.

## **2.8 Terminating the Homeworking Agreement**

Either party may terminate the agreement by giving three months notice in writing. Both parties may agree a shorter period of notice. Where homeworking arrangements are terminated, the line manager is responsible for making arrangements for the employee to resume their work activities within the workplace.

## **2.9 Monitoring and Review**

The number of homeworkers will be monitored and the provisions of this policy will be subject to regular joint review between management and employee representatives to ensure that it offers effective and fair provision for homeworking.

Appendix 3B – Homeworking Application Form

Home working Application Form

Date of application\_\_\_\_\_

1. Personal Information

Last Name :	First name(s)
Department:	Home telephone number:
Position:	Work telephone number:
Contracted Hours:	

2. Request

Please list below reasons for your request to work from home:

How many hours do you wish to work at home? (it is not expected you will work more than half your contracted hours at home)

What daily hours would you expect to work from home? e.g 9am to 5pm

How would you ensure confidentiality of work related information if you were to work from home?

### **3. If accepted**

When could you take up your home working duties?

What equipment would you require?

### **4. Declaration**

All home working arrangements will be reviewed every .....

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

## Appendix 3C – Homeworking Arrangements

This document has been set up to enable staff to work from home either as part of their Contract or on a temporary basis.

A full risk assessment will have to be carried out on your home office premises before the commencement of any homeworking. All equipment supplied by the Health Board must have passed a portable appliance testing (PAT). The line manager must ensure this is carried out before homeworking commences. Your Departmental Line Manager will arrange this in liaison with the LHB H&S Representative.

You will need to supply a complete certificate (including policy details) of your home contents insurance to ensure official property is adequately insured whilst within the home.

**Both parties agree to give three months notice to terminate the agreement and facilitate a return to the workplace.**

All homeworking arrangements will be reviewed every \_\_\_\_ months

### 1. Personal Information.

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ HDUHB site: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Work Telephone No: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_

(to be contacted on in hours of homeworking )

Please attach the following to this agreement:

- A copy of your home insurance to show you are covered for business use.
- A letter from your Local Council to prove whether there are any Council implications for the change of resident dwelling.
- A letter from your Mortgage Company to clarify whether they are aware of homeworking.

### 3. Office Equipment to be installed

Please tick the relevant boxes to identify office equipment, which needs to be installed within the home environment.

Office Chair ☐ Office Desk ☐ Phone Line ☐

Laptop Computer ☐ Desktop Printer ☐ Filing Cabinet ☐

Other (please specify) \_\_\_\_\_

I agree to return all property supplied to me by LHB on termination of this agreement in good condition.

Sign .....Date.....

Applicant must agree to be bound by Information Governance & The Data Protection Act/ General Data Protection Regulations (2016) or any subsequent legislation to the same effect. Any official documentation taken home must be locked / stored in secure environment such as filing cabinet or briefcase, when not in use.

**Applicant also agrees to complete work to prescribed time scales and be available by telephone during working hours to assist colleagues and management.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



**Managers Comments**

I support this application and will ensure a PAT test & Risk Assessment are completed **BEFORE** homeworking can commence.

Signature of Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Please print name in block capitals: \_\_\_\_\_

A Copy of this form must be given to the employee and a copy retained on personal file. A change of circumstance form which should be completed and sent to the Salaries and Wages Department

## **Appendix 4A – Work Break Principles and Procedure (Also Refers to the All Wales Work Break Policy)**

A work break is defined as an opportunity to leave the workplace for a specific period of time (usually between one and five years) and to return to the same or a similar position inside the organisation at the end of that period.

The scheme will apply to all employees who have completed, a minimum of one year's continuous service with the organisation prior to the break.

### **1. General Principles**

Every applicant must state the reasons for wishing to take a work break which may include care of dependants, study or other personal circumstances. A 'dependant' may include any person who is dependant upon the employee for care or financial support and does not pre-suppose any family or blood relationship.

The decision to approve a work break rests with the applicant's line manager in consultation with the appropriate Workforce and OD Department.

If an application for a work break is refused, the employee will be informed in person of the reasons for its rejection. The decision will be confirmed in writing. The employee may appeal against the decision.

### **2. Length of Work Break**

A work break shall not be less than three months or more than five years and shall not include maternity or any other period of paid leave. Any request from an employee who wishes to return to work at an earlier date than agreed will be considered, taking into account the needs of the service and the need to be fair and equitable in the treatment of any employee providing temporary cover.

### **3. Main Terms and Conditions of Employment**

#### **3.1 Contract of Employment**

When an employee is granted a work break the effect will be to continue the contract of employment between the employee and the organisation for an agreed period of time. At the end of the period, the employee will resume their employment in their former post or a suitable alternative.

#### **3.2 Continuity of Service**

A period of absence on a work break shall not be regarded as a break in service although the period of the break will not itself count as reckonable service (Periods of paid employment during the break will count as reckonable service).

#### **3.3 Annual Leave**

Any annual leave entitlement should be taken before the work break commences. Where, due to the needs of the service it is not possible to take annual leave before the break, payment will be made in lieu.

On returning to work annual leave entitlement will be calculated according to the number of years service accrued at the commencement of the break plus any periods of paid employment during the break. In the year of return annual leave entitlement will apply on a pro rata basis depending on the number of full months remaining in the leave year.

### **3.4 Superannuation**

Employees who have been granted a work break do not have to pay pension contributions during this period, their pension record will be closed down the day before their work break commences. Advice should be sought from the Pensions Department by the employee regarding the implications for their pension benefits.

### **3.5 Loans & Salary Sacrifice**

Employees in the process of repaying Salary Sacrifice, a loan for car purchased or other advances/reimbursements will be expected to have repaid the loan in full at or before the commencement of the work break.

### **3.6 Effective Dates**

The date of commencement and the end of the work break will be dates agreed between the employee and their line manager.

## **4. Procedure**

An employee wishing to take a work break must apply in writing by completing the application form within this policy (see Appendix 2b) to the appropriate line manager, not less than twelve weeks before they wish to start a work break. The application must give some indication of the expected duration of the break, though this will not be binding and will be subject to annual review.

A decision to accept an application will be formally notified to the employee including the main points of agreement relating to the particular work break.

## **5. Responsibilities of the Employee**

The employee will be required to undertake work for a maximum number of 15 days in each calendar year of the break. The purpose of this will be to ensure that the employee acquires, maintains or updates skills and knowledge that will facilitate their return to work. The period of work will be agreed between the employee and their line manager.

The employee will be required to meet with their line manager on an annual basis. The purpose of

The meeting will be to review the work break and confirm that the employee intends to return to the workplace at the agreed date. This will also provide an opportunity to consider any changes to circumstances on the part of the employer and employee. Any changes to the original terms of the work break must be agreed by both parties.

The employee must not undertake any other paid employment during the work break except that required pursuant to the scheme or with the express consent of the organisation.

The employee must notify the line manager of any change of address within four weeks of that change. The employee must also advise their line manager of any changes that may arise that have implications for their returning to the workplace on the agreed date.

The employee must provide three months' notice in writing of their intention to return to work on the agreed date. This will help to ensure that arrangements are in place in time for the employee to resume their employment on the agreed date.

## **6. Responsibilities of the Health Board**

The Health Board will guarantee the employee a post at the same or equivalent band and level and with appropriate conditions of service. Wherever practicably possible the Health Board will endeavour to ensure that the employee returns to their former post.

The Health Board will consult with the employee if, at any time during the course of the break, organisation changes occur which have implications for their post.

The Health Board may provide up to a maximum of 15 days paid employment in each calendar year of the work break to ensure that skills and knowledge required for the employee's future employment are acquired, updated or maintained.

Pay will be determined according to the employee's salary point at the commencement of the work break including any uplifts or increments that would have applied had the employee continued to receive pay for the period in question.

The Health Board will ensure that appropriate communication channels are established to ensure that regular contact is maintained with employees on work breaks. The appropriate line manager will be responsible for arranging to meet with the employee on an annual basis.

The Health Board will ensure that relevant information, journals and/or publications are sent to the employee to help ensure that they remain in touch with the Health Board and to update them on issues arising within the organisation.

## **7. Termination of the Agreement**

The Health Board may terminate the work break if any of the conditions of this agreement are breached. This would include the employee:

- working for another employer without the consent of the Health Board;
- not maintaining contact as agreed or;
- not being able to return to work on the agreed date because of a change in their personal circumstances.

## **8. Monitoring and Review**

The scheme will be monitored to provide the following information:

- the numbers of those wishing to participate in or currently on a work break;
- the reasons for wishing to take a work break;

- feedback from users and managers on the effectiveness of work breaks and the Health Board's scheme in particular.

Appendix 4B – Work Break Application Form

Work Break Application	
Date of application: _____	
1. Personal Information	
Last Name :	First name(s):
Department:	Home telephone number:
Position:	Work telephone number:
NHS start date:	Contracted Hours:
2. Request	
Please list below reasons for requesting a work break:	
Please indicate how long you wish to apply for a work break for:	
3. If accepted	
When do you expect to start your work break? For what length of time do you wish to take your work break for? (3 months to 5 years)	
How will you ensure you are available to undertake work for up to 15 days a year?	
How will you ensure you meet with your line manager to discuss and review arrangements?	

To the best of my knowledge all the information I have given is correct and complete.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Approved/Not Approved (delete as appropriate)

Signature of Manager: \_\_\_\_\_ Date: \_\_\_\_\_

A copy of this form must be given to the employee and a copy retained on personal file. A change of circumstance form which should be completed and sent to the Payroll and Pensions Department

## Appendix 5 – Annualised Hours Principles

Annualised hours systems provide a way of organising working time by contracting with staff to work an agreed number of hours per year rather than a standard number each week. The actual number of hours worked by a member of staff during the week will then be “flexed” to match workload requirements. As well as hours being varied week to week, they may also be varied seasonally and/or according to fluctuation of service demands. Annualised hours are used to match attendance of staff to the periods when they are most needed by services.

### 1. Principles

Annualised Hours schemes will be the product of partnership working with employee and representative groups inside the Health Board;

The introduction of Annualised Hours will not have any detrimental effect on those participating or service delivery;

All Annualised Hours Schemes will be subject to regular review and monitoring

All Annualised Hours Schemes must be fully compliant with prevailing legal requirements and in particular, working time regulations;

Any implications for changes to employment terms must be fully explained and confirmed in writing to individual employees.

### 2. Terms and Conditions

**2.1** An employee who is absent from work for sickness reasons will be 'credited' with the average number of hours worked for each day of absence.

**2.2** Employees must arrange their working time by agreement with their manager to ensure that they fulfil their contracted hours in each month/year, according to the needs of the service.

**2.3** Employees will receive one twelfth of the annual salary each month regardless of hours worked.

**2.4** Employees and managers must ensure that employees have at least one rest day each week and are not in breach of the Working Time Regulations.

**2.5** Employees must record hours, leave and absence and submit a time sheet on a monthly basis. Where contracted hours have not been fulfilled an appropriate deduction to salary will be made.

**2.6** On termination, salary will be adjusted to reflect hours worked.





**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL  
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	20 June 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	002 – Underpayments and Overpayments of Salary Policy 124 – Retirement Policy
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce & OD (Organisational Development)
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Lisa Gostling, Director of Workforce & OD (Organisational Development)

**Pwrpas yr Adroddiad (dewiswch fel yn addas)  
Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

In line with Hywel Dda University Health Board's (HDdUHB's) written control documentation process, the People, Organisational Development & Culture Committee (PODCC) is asked to approve the following revised policy documents:

- 002 - Underpayments and Overpayments of Salary Policy (Appendix 1)
- 124 - Retirement Policy (Appendix 2)

The report provides the required assurance that the Written Control Documentation (WCD) Policy (policy number 190) has been adhered to in the development of the above-mentioned written control documents and therefore that the documents are in line with legislation/regulations, available evidence base and can be implemented within the Health Board.

**Cefndir / Background**

It is imperative that HDdUHB has up to date and accurate written control documentation in order to comply with relevant legislation and to minimise any associated risks.

**002 – Underpayments and Overpayments of Salary Policy**

The policy has been reviewed locally by a Task & Finish Group which included colleagues from Finance, Payroll and Counter Fraud, together with operational management leads and Trade Union (TU) representatives. It has also been shared with the Local Partnership Forums, the Local Negotiating Committee (LNC) and Staff Partnership Forum (SPF) and consultation with all staff via our global messaging system.

**124 – Retirement Policy**

The policy has been reviewed locally by a Task & Finish Group which included colleagues from Finance, Payroll and Pensions together with operational management leads and TU

representatives. It has also been shared with the Local Partnership Forums, the LNC and the SPF and consultation with all staff via our global messaging system.

A separate discussion to clarify application of the Retirement Policy also took place following SPF with one of the trade union representatives before progressing to this Committee for approval.

### Asesiad / Assessment

The revised policies have been reviewed with the involvement of key stakeholders including a bespoke Task & Finish Group, Finance and other colleagues as appropriate.

A screening Equality Impact Assessment (EqIA) has also been undertaken (Appendix 3 and 4).

Following approval, the policy will be uploaded to the intranet site and will replace existing versions.

### Argymhelliad / Recommendation

The People, Organisational Development & Culture Committee is requested to:

- receive an assurance that the Underpayments and Overpayments of Salary Policy (002) and the Retirement Policy (124).have been reviewed in line with Policy 190.
- approve the Underpayments and Overpayments of Salary Policy (002) and the Retirement Policy (124).

### **Amcanion: (rhaid cwblhau)**

#### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.13 Approve workforce and organisational development policies and plans within the scope of the Committee.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7. Staff and Resources 7.1 Workforce
Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Putting people at the heart of everything we do 2. Working together to be the best we can be 6. Sustainable use of resources

Amcanion Cynllunio Planning Objectives	1F HR Offer (induction, policies, employee relations, access to training )
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report</a>	5. Offer a diverse range of employment opportunities which support people to fulfill their potential 10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	
Rhestr Termiau: Glossary of Terms:	Included within each policy.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	Respective Policy Task & Finish Group Local Partnership Forums Staff Partnership Forum All staff via global message

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	002 – Poor financial control on overpayments can lead to debt recovery procedures being instigated/reporting losses.
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable.
Gweithlu: Workforce:	These policies apply to all staff.
Risg: Risk:	The presence of written control documentation on the intranet, outside of the Policies, Procedures and other Written Control Documentation intranet webpage, may result in staff accessing documents which are out of date, no longer relevant, or contradicting current guidance.

<b>Cyfreithiol: Legal:</b>	It is essential that the UHB has up to date policies and procedures in place which comply with legislation as a minimum standard.
<b>Enw Da: Reputational:</b>	Failure to manage issues effectively under either policy framework may lead to formal complaints which may have a reputational impact.
<b>Gyfrinachedd: Privacy:</b>	Not applicable.
<b>Cydraddoldeb: Equality:</b>	A full equality impact assessment has been undertaken for each separate policy. (Appendix 3 and 4)

# Retirement Policy

## DRAFT FOR CONSULTATION

### Policy information

Policy number: 124

Classification:  
Employment

Supersedes:  
N/A

Local Safety Standard for Invasive Procedures (LOCSSIP) reference:  
N/A

National Safety Standards for Invasive Procedures (NatSSIPs) standards:  
N/A

Version number:  
9.0

Date of Equality Impact Assessment:  
*Detail date of EqIA*

### Approval information

Approved by:  
PODCC

Date of approval:  
*Enter approval date*

Date made active:  
*Enter date made active (completion by policy team)*

Review date:  
*Enter review date (normally three years from approval date)*

#### Summary of Document:

This Policy sets out the process to be followed when employees approach retirement. It also sets out the arrangements by which staff may be facilitated to apply to retire early subject to meeting certain criteria along with the arrangements for staff who wish to request to retire and then return to work.

#### Scope:

This Policy applies to all employees working in Hywel Dda University Health Board and sets out the process to be followed when approaching retirement, including the process involved in claiming and receiving pension benefits.

#### To be read in conjunction with:

N/A

#### Patient information:

N/A

#### Owning group:

Workforce and Organisational Development Committee

*Date signed off by owning group*

#### Executive Director job title:

*Lisa Gostling – Director of Workforce and OD*

#### Reviews and updates:

*Provide version overview*

#### Keywords

Retirement

#### Glossary of terms

*Provide a glossary of terms and abbreviations*

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## Introduction

Hywel Dda University Health Board (the UHB) aims to help employees in understanding the options which are available to them in relation to retirement.

## Policy Statement

The UHB is committed to developing and maintaining arrangements which make it a great place to work and learn. We recognise that the valuable knowledge, skills and experience of our workforce are fundamental to our success and want to ensure that all staff are supported to continue working for as long as they are capable, skilled and motivated to do so.

## Scope

This Policy applies to all employees working in the UHB and sets out the process to be followed when approaching retirement, including the process involved in claiming and receiving pension benefits.

## Aim

The aim of this Policy is to highlight the ways in which employees can retire from employment and the process involved.

## Objectives

The aim of this Policy will be achieved by having a standardised approach to ensure a smooth transition from employment to retirement.

## NHS Pensions- Retirement Guide

This guide provides staff with important information and answers questions about claiming and receiving NHS pension benefits:

[NHS Pensions - Retirement Guide \(nhsbsa.nhs.uk\)](https://nhsbsa.nhs.uk)

## Flexible Retirement

There are a number of ways an employee may retire. Flexible retirement helps staff to change the nature or pattern of their work in the lead-up to retirement:

[Flexible retirement | NHS Employers](#)

## Retire and Return Scheme

This Procedure outlines the principles and process to be followed where employees are approaching retirement and considering making an application to retire and return to the same role.

This scheme applies where employees request a return to **their current post** following retirement, however there are specific rules in relation to some categories of staff:



## Exceptions and Exclusions

- Speciality Doctors employed on a 2008 contract may only return on the new 2021 contract as the 2008 contract has been phased out.
- Returning Consultants may be offered a locum contract for a maximum period of one year as an alternative to returning to their substantive role without the requirement for a recruitment exercise to be undertaken. In such circumstances, the Locum Consultant will be paid on the MC83 'retired Consultant' pay scale (which is the same as the maximum on the substantive basic salary scale) with one SPA.
- There is no provision for an Associate Specialist to retire and return to the same post as it has been phased out.
- This Procedure does **not** apply where the employee wishes to retire and return to a **different post**. In such instances, they will need to apply for the post in open competition as per the recruitment process and be offered the role. They may then resign from their current post, citing retirement as the reason for leaving.

## Principles

- We will treat employees fairly when considering their applications to retire and return regardless of any protected characteristics, i.e. age, disability, gender or sexual orientation, gender identity, race, religion or belief (including absence of belief), marriage and civil partnership, pregnancy and maternity / paternity, or intersectionality between and across different groups as required by the Equality Act 2010.
- Applications are welcome from all staff irrespective of pay band, contracted hours, length of service or role.
- The UHB recognises the need to retain a skilled and flexible workforce and our retire and return process is key to enabling employees approaching retirement to consider a range of flexible options.
- Due consideration will be given to all applications as part of the UHB wider Retention Strategy, however the UHB is under no obligation to approve a request to retire and return from an employee whereby they access their NHS Pension and return to employment.
- Applications should be considered on the basis of mutual benefit to both the UHB and individual and must not negatively impact on the employee's career. Applications should be scrutinised on their own merits and not used as an opportunity to redesign services without following due process.
- All applications should be considered favourably unless there is a clear business reason not to agree a request. Such business reasons must be imminent or due to take place within 12 months from the date of application.
- All applications will be considered as open-ended re-engagements, unless the employee makes a request for a fixed term engagement or there is a clear business reason which may enable a compromise to be reached which would enable the application to be approved for a specified period rather than declined.
- Employees **will** be required to use all their annual leave prior to the agreed date of retirement as any outstanding annual leave would otherwise extend membership for pension purposes.
- Applications to retire and return will be considered on submission of the completed Application Form (See Appendix 1).

- Where an application is declined, the employee should be provided with sufficient details to understand the business reasons for this. Applications may only be declined on the basis of one or more of the following reasons:
  - Inability to re-organise work amongst existing staff;
  - Inability to fill the vacated hours;
  - Insufficiency of work during the proposed periods of work;
  - Planned structural changes.

## Desktop Appeal

Where the employee remains dissatisfied with the decision, they may submit an appeal to the next appropriate level of manager within five working days of receiving the written outcome of their application. The appeal must set out the grounds of appeal and include any information relevant to the consideration of the appeal. The employee may wish to discuss their documentation with their Trade Union representative prior to submission to the Appeal Officer.

The Appeal Officer will then undertake a desktop paper exercise to consider all documentation relevant to the issue and notify the employee of the outcome of the appeal within a further five working days. This decision will be final.

## Principles on Re-Engagement

- Adherence to the relevant NHS Pension Scheme arrangements is essential when considering an application and to ensure compliance with any break between an employee's retirement date and any return to work.
- Employees will be required to take a break of at least 14 days (excluding any paid annual leave) from the date of retirement to the date of re-engagement.
- Under the NHS Pension rules, employees will not be able to work more than 16 hours per week for 4 weeks and one day following the date of retirement.
- Any previous reckonable service will not be taken into account for NHS Redundancy purposes, i.e. any future NHS Redundancy payment would be only based on post-retirement service. Similarly the 14 day break would additionally impact on any future pay protection provisions. Any protection provisions would only be based on the post retirement service.
- Normally, employees will retain their incremental date, although this will be deferred by the number of days break.
- Annual leave will be calculated on the basis of total NHS service once verified.
- Sickness benefits will be calculated on the basis of total NHS service where the break in service is less than 12 months.
- Employees will be given a new ESR Individual Number (the old ESR number will be valid for pension purposes only).
- Employees will need to advise the Payroll Department if they wish to continue with voluntary deductions from salary e.g. Union Fees, WHSA etc
- Retired members of the 1995 section cannot re-join the NHS Pension scheme, however if they meet certain conditions, they will be automatically enrolled in the alternative pension scheme. All other employees will be auto enrolled into a qualifying pension scheme on re-engagement unless they opt out.

- Returning Consultants will need to agree a new job plan. This will usually be for no more than 10 sessions pro rata and will normally specify the split, e.g. 9:1, 8:2, 7:3, depending on the job plan.
- Where a DBS check is required for the post and the post holder has not previously had one undertaken or it was undertaken more than 3 years ago, a new check will need to be completed prior to re-engagement.
- No employee will be required to undertake a pre-employment assessment in order to return to work where the break in service is less than 3 months.

## Further Reading

### a) General Information

- [NHS PENSION retire and return option FAQ](#)
- [Pension contributions and tax relief | NHS Employers](#)
- [NHS Retirement Fellowship \(nhsrf.org.uk\)](#)



Flexible Retirement  
Minimum Standards

### b) COVID-19 Specific Information

[COVID-19 guidance on support for retired members | NHSBSA](#)  
[NHS Pension Scheme: continued suspension of abatement and the 16-hour rule until 31 October 2022 | NHS Employers](#)

## Equality Impact Assessments

This scheme has been impact assessed in accordance with our Equality Impact Policy and Procedure. (<https://hduhb.nhs.wales/about-us/governance-arrangements/policies-and-written-control-documents/policies/equality-impact-policy-and-procedure/>)

This scheme has been impact assessed in accordance with the Welsh Language Standards 2018.

## Scheme Review

The UHB reviews its policy framework regularly in order to maintain compliance with legislation and good practice. This is undertaken, as agreed with our recognised Trade Unions.

This Policy will be reviewed every three years, or sooner as required.

## Responsibilities

### Director of Workforce & OD

The Director of Workforce & OD is responsible for ensuring that robust processes and procedures are in place to enable the efficient and equitable application of this policy.

**Assistant Director of Workforce and OD**

The Assistant Director of Workforce and OD has responsibility for ensuring that the application of this policy is monitored and audited and that reports on the application of the policy are provided regularly (at least annually) to the Workforce & OD Sub Committee.

**Managers**

Managers have responsibility for ensuring that they operate this policy in an open, equitable and transparent manner and that proper consideration is given to every request made under the policy. Managers should ensure that staff who retire are formally written to and thanked for their service on behalf of the UHB.

# Application to Retire and Return to Current Role – AfC staff only

N.B. Applications need to be submitted at least 5 months in advance of proposed retirement date

Employee obtains pensions advice and applies to access pension noting that abatement rules may apply if accessing the 1995 section

Employee completes application form and arranges to meet with the Service Delivery Manager (or equivalent) to discuss retire and return to the same role, pay band and point.

Noting that it will be 16 hours per week for 4 weeks and 1 day

Manager approves the application and informs the employee within 5 days

Manager proposes an alternative arrangement based on business needs and outlines right of appeal

Manager declines application and informs employee, outlining the right of appeal.

Employee appeals

Desktop Appeal arranged within 5 days

Appeal Officer notifies employee and Manager of outcome of appeal.

Application declined. Process ends

Employee agrees alternative proposal

1. Manager signs R&R Form and completes termination form [Termination Form Aug 2018.doc \(sharepoint.com\)](#) and new starter form [Commencement-Form-April-2021.doc \(sharepoint.com\)](#) – reason for leaving is retirement.
2. Manager sends all three forms to [NWSSP.PayrollH DUHB@wales.nhs.uk](mailto:NWSSP.PayrollH DUHB@wales.nhs.uk) and [NWSSP.Pensions.H DUHB@wales.nhs.uk](mailto:NWSSP.Pensions.H DUHB@wales.nhs.uk) within 5 days of meeting
3. Individual completes pension applications form (insert link) and submits to pensions ([NWSSP.Pensions.H DUHB@wales.nhs.uk](mailto:NWSSP.Pensions.H DUHB@wales.nhs.uk))
4. Manager confirms to Payroll 4 weeks before start date if any changes to commencement form (N.B. if no changes – Manager still confirms position to Payroll)
5. Recruitment issues new contract

# Application to Retire and Return to Current Role – Medical and Dental Only

N.B. Applications need to be submitted at least 5 months in advance of proposed retirement date

Employee obtains pensions advice and applies to access pension noting that abatement rules may apply if accessing the 1995 section

Employee completes application form and arranges to meet with their Service Delivery Manager (or equivalent) to discuss retire and return.

Noting that it will be 16 hours per week for 4 weeks and 1 day

Manager approves the application and informs the employee within 5 days. New job plan to be completed.

Manager proposes an alternative arrangement based on business needs and outlines right of appeal

Manager declines application and informs employee, outlining the right of appeal.

Employee appeals

Desktop Appeal arranged within 5 days

Appeal Officer notifies employee and Manager of outcome of appeal.

Application declined. Process ends

Employee agrees alternative proposal. New job plan to be completed.

1. Manager signs form and completes termination form [Termination Form Aug 2018.doc \(sharepoint.com\)](#) and new starter form [Commencement-Form-April-2021.doc \(sharepoint.com\)](#) – reason for leaving is retirement. New job plan completed.
2. Manager sends all three forms to Medical Workforce ([Linsey.Jones3@wales.nhs.uk](mailto:Linsey.Jones3@wales.nhs.uk)) within 5 days of meeting.
3. Individual completes pension applications form (insert link) and submits to pensions ([NWSSP.Pensions.HDUHB@wales.nhs.uk](mailto:NWSSP.Pensions.HDUHB@wales.nhs.uk))
4. Medical Workforce issues new contract.

## Appendix 1 - Retire and Return to Current Role Application Form

### Part 1 - Employee Request

I have read and understand the rules and procedures of the Retire and Return Scheme and make the following request under the terms of that Scheme.

Employee name:	
Staff number:	
Email address:	
Department:	
Band / Grade:	
Current hours/sessions worked per week:	

I am formally notifying you of my wish to retire on ..... and, having accessed my NHS Pension, I wish to apply to return to my current role on the following basis:-

1. Proposed date of return
2. Proposed hours for first four weeks and one day
3. Proposed hours thereafter

*Please provide any further details to assist in the consideration of your application:*

#### Employee Declaration:

- I have read and accept the Retire and Return Scheme rules applicable to my application.
- I understand that the UHB is under no obligation to approve my request to retire and return to my current role.

Employee signature:	
Date:	

### Part 2 - Manager Decision

(N.B Manager must be Band 8 or above)

*Please select one of the below options:*

- a. I support the application to return as outlined above by the employee.
- b. I do not support the application as stated but would agree to the application being approved on the following basis.

1. Proposed date of return

2. Proposed hours for first four weeks and one day

3. Proposed hours thereafter

Rationale:

- c. I do not support the application.

*Please select one or more of the reasons outlined below and provide your rationale:*

- Inability to re-organise work amongst existing staff;
- Inability to fill the vacated hours;
- Insufficiency of work during the proposed periods of work;
- Planned structural changes.

Rationale:

Manager name (please print):

Manager signature:

Manager job title:

Date:



## SUMMARY EQUALITY IMPACT ASSESSMENT – 124 - Retirement Policy

<b>Organisation:</b>	Hywel Dda University Health Board
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<b>Proposal Sponsored by:</b>	<b>Name:</b>	Heather Hinkin
	<b>Title:</b>	Head of Workforce
	<b>Department:</b>	Workforce & Organisational Development

<b>Policy Title:</b>	Retirement Policy
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<b>Brief Aims and Objectives of Policy:</b>	<p>The aim of this policy is to highlight the ways in which staff can retire from employment and the process involved. The policy is designed to ensure that staff are offered the opportunity of requesting to continue to work past 'notional' retirement age. It also sets out the arrangements by which staff may be facilitated to apply to retire early subject to meeting certain criteria.</p> <p>The aim of this Policy will be achieved by having a standardised approach to ensure a smooth transition from employment to retirement and has been reviewed to assist with the retention of staff with a broad range of skills, knowledge and experience.</p>
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<b>Was the decision</b>	<b>Yes</b>	<b>No</b> ✓
-------------------------	------------	-------------

reached to proceed to full Equality Impact Assessment?	
If no, are there any issues to be addressed?	Yes ✓
	No
	<p>Policy has a direct impact on those staff of pensionable age. HR will monitor for impact (direct and indirect) and take action accordingly to alleviate any adverse impact.</p> <p>Age - There could potentially be a negative impact on young workers in respect of succession planning and promotion prospects if the older workforce is retained. Equally, the concept of 'enforced retirement' can have negative connotations when decisions are based purely on the grounds of age.</p> <p>Age – Workforce will monitor the application of the revised policy to ensure that applications are considered fairly and that staff in the relevant group are not disadvantaged through the decision-making process compared with applications received to reduce hours under the Flexible Working Policy.</p> <p>The various pension schemes also provide for different treatment depending on which scheme rules apply.</p> <p>Each request will be dealt with on an individual basis and the application of a desktop appeal should enable concerns to be addressed in terms of the decision-making process applied at the material time.</p>

<b>Is the Policy Lawful?</b>	<b>Yes</b>	
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<b>Will the Policy be adopted?</b>	<b>Yes</b>	
	<b>If no, please record the reason and any further action required:</b>	

<b>Are monitoring arrangements in place?</b>	<b>Yes</b>	Workforce analyse data arising from applications on an annual basis. Any complaints received will be dealt with on a case by case basis.

<b>Who is the Lead Officer?</b>	<b>Name:</b>	Lisa Gostling Approved by People, Organisational Development & Culture Committee
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	<b>Title:</b>	Director of Workforce & Organisational Development
	<b>Department:</b>	Workforce & Organisational Development
<b>Review Date of Policy:</b>	Three yearly or sooner if required	

<b>Signature of all parties:</b>	<b>Name</b>	<b>Title</b>	<b>Signature</b>
	Heather Hinkin	Head of Workforce	H Hinkin 7/6/2022
	Alan Winter	Senior Diversity & Inclusion Officer	8/6/2022
<b>Please Note: An Action Plan should be attached to this Outcome Report prior to signature</b>			

## SUMMARY EQUALITY IMPACT ASSESSMENT – 002 - Underpayments and Overpayments of Salary Policy

<b>Organisation:</b>	Hywel Dda University Health Board
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<b>Proposal Sponsored by:</b>	<b>Name:</b>	Lisa Hughes
	<b>Title:</b>	Assistant Head of Workforce Carmarthenshire
	<b>Department:</b>	Workforce & Organisational Development

<b>Policy Title:</b>	Underpayments and Overpayments of Salary Policy
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<b>Brief Aims and Objectives of Policy:</b>	<p>The aim of the policy is to recover all overpayments made and to outline how underpayments are managed.</p> <p>The aim of the policy will be achieved by having a standardised process to ensure the consistent management of salary overpayment and underpayments.</p>
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<b>Was the decision reached to proceed to full Equality Impact Assessment?</b>	<b>Yes</b>	<b>No</b> ✓

If no, are there any issues to be addressed?	Yes ✓	No
	<p>Policy has potentially a greater impact on some than others. HR will monitor for impact and take action accordingly to alleviate any adverse impact.</p> <p>Visually impaired – ability to read payslips etc. Ex-staff who are unable to work due to disability and are therefore on a reduced income may have difficulty in repaying outstanding amount</p> <p>Staff who have left employment in order to raise a family or who have retired, may have reduced income and have difficulty in repaying outstanding amounts.</p> <p>Each case will be dealt with, on an individual basis.</p>	

Is the Policy Lawful?	Yes	
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Will the Policy be adopted?	Yes	
	If no, please record the reason and any further action required:	

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Are monitoring arrangements in place?	Yes	

Who is the Lead Officer?	Name:	Lisa Gostling Approved by People, Organisational Development & Culture Committee
	Title:	Director of Workforce & Organisational Development
	Department:	Workforce & Organisational Development
Review Date of Policy:	Three yearly or sooner if required	

Signature of all parties:	Name	Title	Signature
	Lisa Hughes	Assistant Head of Workforce	
	Alan Winter	Senior Diversity &	

		Inclusion Officer	
<p><b>Please Note: An Action Plan should be attached to this Outcome Report prior to signature</b></p>			





**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

# Underpayments and Overpayments of Salary Policy

**THIS IS A DRAFT DOCUMENT FOR CONSULTATION PURPOSES ONLY**

**All comments on this document should be sent to the author by the consultation end date, using the comment form on the policy consultation pages.**

**Approved Hywel Dda University Health Board policies can be found on the [Policies and Procedures Approved section of the intranet](#)**

Policy Number:	002	Classification			Employment	
Supersedes						
Version No	Date of EqIA:	Approved by:	Date of Approval:	Date made Active:	Review Date:	
V1		POPDC				

Brief Summary of Document:	To outline the procedures to follow when managing underpayments and the recovery of overpayments, ensuring that any such payments are dealt with promptly, fairly and consistently.
Scope:	This document applies to employees, workers, and former employees/workers.
To be read in conjunction with:	051 - Income and Cash Collection Financial Procedure
Patient information:	Not applicable

## HYWEL DDA UNIVERSITY HEALTH BOARD

Owning Committee/ Group	People, Organisational Development & Culture Committee (PODCC)
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Executive Director:	Lisa Gostling	Job Title	Director of Workforce & OD
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Reviews and updates		
Version no:	Summary of Amendments:	Date Approved:
2	New Policy	09/10/2012
3	Updates completed	February 2015
4	Updates	19/05/2017
5	Full review – 2017; minimal changes only	15/03/2018
6	Full review	27.4.2021
7	Full review	

### Glossary of terms

Term	Definition

Keywords	<b>Underpayments, Overpayments, Recovery</b>
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HYWEL DDA UNIVERSITY HEALTH BOARD

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# HYWEL DDA UNIVERSITY HEALTH BOARD

## 1. Introduction

An underpayment is where an employee, or an ex-employee, is underpaid what they are due under their contractual or statutory entitlement. Normally underpayments arise as the result of either an 'error of calculation', which results in too little or no payment being made, or as the result of incorrect, insufficient or late notification of a change to the individual's circumstances or contract of employment.

Overpayments arise as the result of either an 'error of calculation', which results in a payment being made in error, or as the result of incorrect, insufficient, or late notification of a change to the employee's circumstances or contract of employment including the late notification of employment ending.

This policy is designed to outline the process for reimbursement of any underpayment and recovery of overpayment and aims to reduce financial risk of overpayment / underpayment and provides a process for recovery / reimbursement.

## 2. Policy Statement

Where an underpayment has occurred the Health Board has a duty to ensure that the underpayment is rectified and repaid in accordance with this policy.

The Health Board has a legal right to recover any overpayment where it arose from a mistake of fact. Whenever monies are to be recovered, the Health Board will aim to do so in a fair and reasonable manner. These payments are made in good faith and are deemed to be correct at the time of issue. Mistakes of fact are where the payment was inconsistent with the facts e.g. through clerical error, computer input, or procedural error. Money paid out under a mistake of fact is recoverable in law.

In accordance with this policy statement and Welsh Government guidance, the Health Board must pursue the recovery of all amounts due to it as a result of such overpayments.

## 3. Scope

This document applies to employees, workers, and former employees/workers.

## 4. Aim

The aim of the policy is to outline how underpayments are managed and to recover all overpayments made.

## 5. Objectives

The aim of the policy will be achieved by having a standardised process to ensure the consistent management of salary overpayment and underpayments.

## 6. SECTION 1 – UNDERPAYMENTS

### Principles related to an underpayment of salary

1. The Health Board has a duty to remedy an underpayment of salary as soon as reasonably practicable to avoid any financial detriment or hardship for the individual.
2. Normally, the underpayment will be rectified in the next pay run unless the underpayment is for a bank worker. Bank workers may receive the underpayment in the supplementary

## HYWEL DDA UNIVERSITY HEALTH BOARD

payroll on the last working day of each month, via an emergency payment or in the next pay run.

3. Individuals have a responsibility for checking their payslips in a timely manner and advising their manager or Payroll in writing or via email/telephone if they have been underpaid by any amount.
4. Managers must email details of an underpayment to Payroll within 24 hours of notification by an individual.
5. The Health Board will consider compensating individuals where they can demonstrate they have incurred costs such as bank charges directly caused by the underpayment being attributable to the employer. Evidence of such charges will need to be emailed to the manager before a decision can be taken to recompense an individual for charges incurred. Any charges recompensed will be paid in the next pay run.

### 7. SECTION 2 – OVERPAYMENTS

#### Principles governing the recovery of an overpayment

1. The Health Board has a legal right to recover any overpayment of salary in a fair and reasonable manner.
2. Individuals have a responsibility for checking their payslips and to advise their manager or Payroll in writing or via email/telephone if they have been overpaid by any amount.
3. Managers must email details of an overpayment to Payroll within 24 hours of notification by an employee.
4. Budget holders have a duty to review all salaries and wages charged to their budget and query any unusual items or unexplained variances with their Finance Business Partner or Payroll each month.
5. Where a minor overpayment has occurred, recovery will normally be actioned over the same period.
6. Where a mid-range overpayment has occurred, recovery will normally be actioned over a three-month period.
7. Where a significant overpayment has occurred, recovery will be delayed pending considered by the Local Counter Fraud Team.
8. Where misconduct/criminal activity is suspected e.g. through falsification of records to obtain payment, failing to notify the manager or Payroll of an overpayment, the Local Counter Fraud Team will be informed **before** commencing any process for recovery.
9. Recovery should not cause individuals undue financial hardship.
10. Repayment terms should normally be agreed between the manager and the individual to enable repayment of the full amount within a reasonable timeframe.
11. Individuals have recourse to the desktop appeal process to resolve issues arising from an overpayment including the recovery schedule (See Section 3).

#### Process for recovery by type of overpayment

##### a. Minor overpayment

- i) Where the overpayment has occurred over a period of 3 months or less and the total overpayment is less than 10% of normal net monthly or weekly pay.
- ii) Payroll will notify the individual of the overpayment within 5 working days setting out the reasons and appropriate calculations.

## HYWEL DDA UNIVERSITY HEALTH BOARD

- iii) Payroll will copy the manager into the email to the individual advising them of the overpayment and repayment schedule.
- iv) Pay will normally be adjusted in the next pay period.

### b. Mid-range overpayment

- i) Where the overpayment has occurred over a period of 3 months or less and is less than 25% of normal net monthly or weekly pay.
- ii) Payroll will normally notify the manager by email within 72 hours of an overpayment being identified and provide a letter for issue to the individual.
- iii) The manager must meet with the individual within 72 hours to advise them of the overpayment, the reason for it and issue the letter. Recovery terms should be agreed within a further five working days.
- iv) Managers have discretion to agree recovery within the following parameters:-
  - Repayment is made in full in the next pay period; **or**
  - Repayment is a minimum of 10% of net pay;
  - Repayment is normally completed within a 6-month period.
- v) Once the manager has agreed a repayment plan with the individual, the manager will need to email the details to Payroll immediately.
- vi) Where there is disagreement regarding the overpayment or the recovery terms, the matter **must** be escalated to the relevant Finance Business Partner, with a view to agreeing appropriate terms of repayment.
- vii) Where repayment terms cannot be agreed within a further five working days, Finance will set out an appropriate schedule for recovery commencing from the next pay period.

### c. Significant overpayment

- i) Where the overpayment has occurred for a period of more than 3 months or is greater than 25% of normal monthly or weekly net pay.
- ii) Counter Fraud will advise Payroll if recovery can be undertaken.
- iii) Payroll will then notify the manager by email within 72 hours of an overpayment being identified and provide a letter for issue to the individual.
- iv) The manager must meet with the individual within 72 hours to advise them of the overpayment, the reason for it and issue the letter. Recovery terms should be agreed within a further five working days.

Managers have discretion to agree recovery within the following parameters: -

  - Repayment is made in full in the next pay period; **or**
  - Repayment is a minimum of 10% of net pay;
  - Repayment is normally completed within a 6-month period.
- v) Once the manager has agreed a repayment plan with the individual, the manager will need to email the details to Payroll immediately.
- vi) Where there is disagreement regarding the overpayment or the recovery terms, the matter **must** be escalated to the relevant Finance Business Partner, with a view to agreeing appropriate terms of repayment.
- vii) Where repayment terms cannot be agreed within a further five working days, Finance will set out an appropriate schedule for recovery commencing from the next pay period.

## HYWEL DDA UNIVERSITY HEALTH BOARD

### 8. Section 3 - Desktop Appeal

Where an individual remains dissatisfied with the repayment terms proposed, they may submit an appeal to the next appropriate level of manager within five working days of receiving the recovery schedule from the Finance Business Partner. The appeal must set out the grounds of appeal and include any information relevant to the consideration of the appeal. The individual may wish to discuss their documentation with their trade union representative prior to submission to the appeal officer. The appeal officer will then undertake a desktop paper exercise to consider all documentation relevant to the issue and notify the individual of the outcome of the appeal within a further five working days. This decision will be final. Failure to repay in line with the appeal decision will result in the matter being referred to the Debt Recovery Process [https://nhswales365.sharepoint.com/sites/HDD\\_Corporate\\_Governance/SitePages/Financial%20procedures/051---Income-and-Cash-Collection-Financial-Procedure.aspx](https://nhswales365.sharepoint.com/sites/HDD_Corporate_Governance/SitePages/Financial%20procedures/051---Income-and-Cash-Collection-Financial-Procedure.aspx)

(See Appendix 1 for Flow chart of recovery & appeal processes)

### 9. Section 4 - Former employees and workers

#### Process for recovery of an overpayment

1. Where an overpayment is identified, recovery cannot be made via Payroll and so all recoveries will be undertaken via the Accounts Receivable Financial Control Procedure [https://nhswales365.sharepoint.com/sites/HDD\\_Corporate\\_Governance/SitePages/Financial%20procedures/051---Income-and-Cash-Collection-Financial-Procedure.aspx](https://nhswales365.sharepoint.com/sites/HDD_Corporate_Governance/SitePages/Financial%20procedures/051---Income-and-Cash-Collection-Financial-Procedure.aspx)

#### Process to remedy an underpayment

1. Where an underpayment is identified, the ex-employee must contact their former manager in the first instance. Where the underpayment has been agreed, the manager must inform Payroll within 48 hours so that payment can be made. Where the supplementary payroll has already been run and the P45 issued, payment will be made in the next available pay run. HMRC will be notified electronically once the payment has been made so that an adjustment to taxable pay can be made at source.

### 10. Responsibilities

#### Chief Executive

The Chief Executive has overall responsibility for effective management of organisational policies relating to Hywel Dda University health board employees.

#### Director of Workforce & Organisational Development

The Director of Workforce & Organisational Development has responsibility for ensuring that all employment policies are developed in line with employment legislation and practice and are reviewed and updated as required.

#### Hywel Dda University Health Board

The Health Board will:

- Pay staff correctly and on time
- Provide and distribute payslips to its employees.
- Correct identified errors as soon as possible
- Rectify any identified overpayment or underpayment with the co-operation of the individual and in line with this policy.
- Ensure pay related data and information is forwarded to the NWSSP Employment Services (Payroll) on a timely basis

## HYWEL DDA UNIVERSITY HEALTH BOARD

- Inform relevant staff regarding cut off dates for submission of travel claims or Variation/timesheets

### Payroll

NWSSP Employment Services (Payroll) will:

- Adhere to this policy for the recovery of any overpayments and underpayment of salary.
- Write to employees, providing them with details of the overpayment as soon as the matter has been identified enclosing details of the overpayment and the reason it occurred and requesting them to contact the Payroll office to agree arrangements to repay the overpayment.
- Maintain an accurate log of overpayments
- Monitor repayment conditions
- Where there is disagreement, the matter must be discussed with the Line manager and the Workforce department, with a view to agreeing appropriate terms of repayment

### Employees

The Employee will:

- Check their pay slip on receipt
- Seek clarification from the NWSSP Employment Services (Payroll) if unsure of the amount or any payments indicated on their pay slip
- Immediately report any pay discrepancy/variances identified on their pay slip to their Line manager, Payroll or Workforce.
- Have the right to resolve any identified overpayments without financial hardship
- Agree terms of repayment in appropriate circumstances and ensure payment of the full amount within the time frame stipulated in this policy
- Engage with the Health Board to ensure that any underpayments are repaid to them in line with this policy
- Access support and advice from staff side representatives/ Workforce Department/Line manager as appropriate

### Managers

The Manager will:

- Process documentation promptly and ensure submission in line with salary/payroll timetable
- Negotiate the terms of the repayment of overpayments if required. If there is a dispute, they will act a point of communication between parties

### Directorate General Managers/County Directors and Assistant Directors

Directorate General Managers/County Directors and Assistant Directors will be responsible for:

- Chairing Appeals Meetings (which may or may not relate to individuals within their own division) OR
- Nominating a deputy to chair Appeals Meetings, who must be of sufficient seniority to make independent outcome decisions.

### Counter Fraud Team

The Counter Fraud Team will:

- Investigate all significant overpayments and may pursue criminal prosecution if it is deemed that overpayments were dishonestly retained.



# HYWEL DDA UNIVERSITY HEALTH BOARD

## Workforce

Workforce will work in partnership with Managers and Employee Representatives to ensure employees are treated fairly and consistently within the framework of the policy.

They will advise managers of options available should an issue arise for a member of staff under this policy.

Appendix 1

Table 1 - Minor Overpayment - total less than 10% of net pay

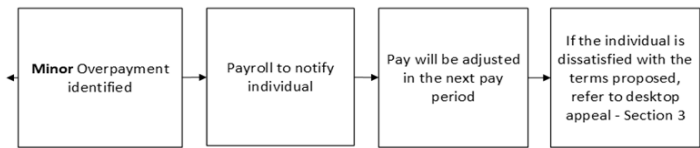


Table 2 - Mid Overpayment - total less than 25% of net pay

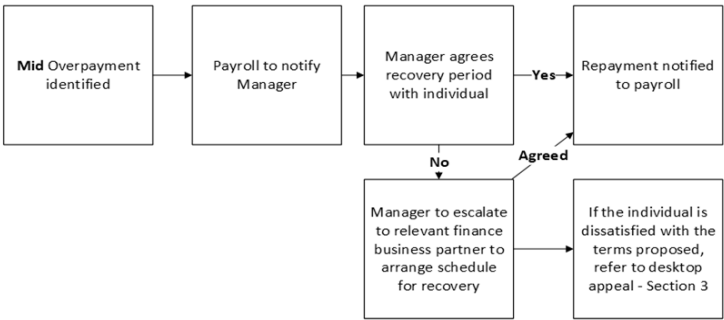


Table 3 - Significant Overpayment - total more than 25% of net AND for a period of 3 months

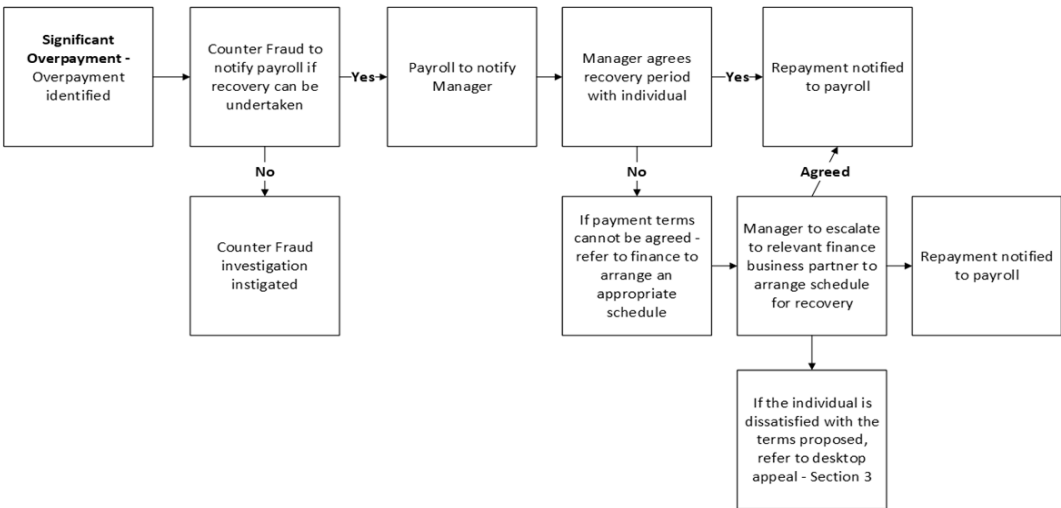
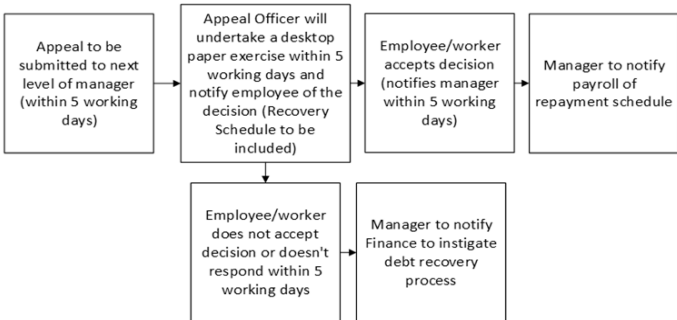


Table 4 - Desktop Appeal





## PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	20 June 2022
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	DBS Policy
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce and Organisational Development (OD)
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Lisa Gostling, Director of Workforce and Organisational Development (OD)

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

### ADRODDIAD SCAA

#### SBAR REPORT

##### Sefyllfa / Situation

The purpose of this new policy is to inform all Health Board employees of the parameters for undertaking Disclosure and Barring Service (DBS) checks and referrals for prospective and existing employees.

##### Cefndir / Background

The DBS Task and Finish Group was established in 2019 following a Healthcare Inspectorate Wales (HIW) report calling for improvements to DBS checks at an all Wales level.

A DBS Policy has therefore been written following benchmarking across the UK and consultation with the Wales Disclosure Barring Service Advisor who has commended the Policy and deemed it best practice.

The revisions have been shared with the Local Partnership Forums, the Local Negotiating Committee (LNC) and Staff Partnership Forum (SPF).

##### Asesiad / Assessment

The Health Board is committed to ensuring that people in its care are safeguarded against exploitation and harm, from any of its actions or its staff. The purpose of this Policy is to ensure a robust and consistent approach in the DBS checking and referral processes.

##### Argymhelliad / Recommendation

The People, Organisational Development & Culture Committee is requested to review and approve the DBS policy.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.13 Approve workforce and organisational development policies and plans within the scope of the Committee.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability 7.1 Workforce
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>	

<b>Gwybodaeth Ychwanegol:</b> <b>Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termiau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	DBS Task and Finish Group Partnership Forum DBS Advisor Wales Workforce Management Team

<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	Not Applicable

<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	e.g. adverse quality and/or patient care outcomes/impacts: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Gweithlu: Workforce:</b>	e.g. adverse existing or future staffing impacts: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Risg: Risk:</b>	e.g. risks identified and plans to mitigate risks: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Cyfreithiol: Legal:</b>	e.g. legal impacts or likelihood of legal challenge: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Enw Da: Reputational:</b>	e.g. potential for political or media interest or public opposition: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Gyfrinachedd: Privacy:</b>	e.g. potential impact on individual's privacy rights or confidentiality and/or the potential for an information security risk due to the way in which information is being used/shared, etc: (if yes, please complete relevant section of the integrated impact assessment template available via the link below) <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>
<b>Cydraddoldeb: Equality:</b>	e.g. potential negative/positive impacts identified in the Equality Impact Assessment (EqIA) documentation – follow link below <ul style="list-style-type: none"> <li>• Has EqIA screening been undertaken? Yes/No (if yes, please supply copy, if no please state reason)</li> <li>• Has a full EqIA been undertaken? Yes/No (if yes please supply copy, if no please state reason)</li> </ul> <a href="http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906">http://howis.wales.nhs.uk/sitesplus/862/opendoc/453906</a>



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University Health Board

# Disclosure & Barring and Referral Policy

**DRAFT FOR CONSULTATION ONLY**

Policy Number:	948	Classification			Employment	
Supersedes	349					
LOCSSIP reference:	Not Applicable	NATSSIPS Standards	List standard ( <a href="#">NATSSIPS Standards</a> )			
Version No	Date of EqIA:	Approved by:		Date of Approval:	Date made Active:	Review Date:
V		People, Organisational Development and Culture Committee				3 years

Brief Summary of Document:	The purpose of this policy is to inform all Health Board employees of the parameters for undertaking Disclosure and Barring Service (DBS) checks and referrals for prospective and existing employees.
Scope:	This policy applies to all staff whose post requires them to have a DBS disclosure certificate. For the purposes of this policy, this includes permanent, temporary, bank and agency staff and fixed contract holder, in addition to honorary contracts holders, secondees, work experience and volunteers.
To be read in conjunction with:	<a href="#">201 - All Wales Disciplinary Policy</a> 098 - All Wales Policy on the Protection of Vulnerable Adults from Abuse All Wales Child Protection Guidance <a href="#">836 – All Wales Information Governance Policy</a> <a href="#">158 – Redeployment Policy</a> <a href="#">173 – Freedom of Information Act Policy</a> <a href="https://www.gov.uk/db-check-applicant-criminal-record">https://www.gov.uk/db-check-applicant-criminal-record</a> <a href="#">107 – volunteers Policy</a> <a href="#">192 – Records Management Policy</a> <a href="#">713 – Honorary Contract procedure</a>

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	<a href="#">541 – Control of Contractors Policy</a>
Patient information:	Not Applicable

Owning Committee	People, Organisational Development and Culture Committee
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Executive Director:	Lisa Gostling	Job Title	Director of Workforce and OD
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Reviews and updates		
Version no:	Summary of Amendments:	Date Approved:
1	New Policy	

### Glossary of terms

Term	
DBS	Disclosure and Barring Service
SRA	Senior Recruitment Advisor
AM	Appointing Manager
NWSSP	NHS Wales Shared Services Partnership

Keywords	Disclosure Barring Service DBS
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### DBS Policy

# HYWEL DDA UNIVERSITY HEALTH BOARD

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### DBS Policy

Please check that this is the most up to date version of this written control document

Paper copies of this document should be kept to a minimum and checks made with the electronic version to ensure that the printed version is the most recent



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### DBS Policy

# HYWEL DDA UNIVERSITY HEALTH BOARD

## 1. Introduction

The purpose of this policy is to inform all Hywel Dda University Health Board (Health Board) employees of the parameters for undertaking Disclosure and Barring Service (DBS) checks for prospective and existing employees, in addition to making a referral when required. Legislation introduced in September 2012 and a statutory obligation placed on employers to refer employees undertaking Regulated Activity to DBS if certain criteria are met. It is an offence to fail to report and also an offence for someone on the Barring List to apply for Regulated Activity employment.

## 2. Policy Statement

To ensure the Health Board delivers its aims, objectives, responsibilities and legal requirements transparently and consistently, the Health Board recognises the importance of pre-employment Disclosure & Barring Service (DBS) checks on both newly appointed employees and three yearly checks for existing staff, in accordance with the following legislation guidance:

- Rehabilitation of Offenders Act and Exceptions Order (1974)
- Legal Aid, Sentencing and Punishment of Offenders Act 2012
- Police Act (Part V) (1997)
- Police Act (Criminal Records) (Amendment) Regulations 2013
- Police Act 1997 (Criminal Records) Regulations 2002, as amended by the Police Act 1997 (Criminal Records) (Amendment No.2) Regulations 2013/2669
- Safeguarding Vulnerable Groups Act 2006
- The Protection of Freedoms Act 2012
- Data Protection Act 2018 / General Protection Regulations 2016 (GDPR 2016) or any subsequent legislation
- Welsh Health Circular WHC (2005) 029: Mandatory DBS Checks for all Eligible New NHS Staff
- Welsh Health Circular WHC (2005) 071: Safer Recruitment

## 3. Scope

This DBS policy applies to all staff whose post requires them to have a DBS disclosure certificate. For the purposes of this policy, this includes permanent, temporary, fixed term, bank and agency staff as well as honorary contracts holders, secondees, work experience and volunteers.

## 4. Aim

The Health Board is committed to ensuring that people in its care are safeguarded against exploitation and harm, from any of its actions or its staff. The purpose of this Policy is to ensure a robust and consistent approach in the DBS checking and referral processes.

## 5. Objectives

The aim of this policy will be achieved by the following objectives:

- Identify the need for a DBS
- Identify the types of DBS
- DBS process
- Identify process for positive disclosures
- Identify the process for referral to DBS

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### 6. Assessing the Need to Conduct a Disclosure & Barring Service (DBS)

Not all positions within the Health Board will require a DBS check. The Health Board has a legal responsibility to ensure that the position being appointed to is eligible for a check under the current provisions before requiring individuals to have a DBS check. The level of the check required needs to meet the eligibility criteria.

In all circumstances, the decision taken to request a DBS check will need to be made in accordance with the Rehabilitation of Offenders Act 1974 Order 1975 and other relevant legislation.

Where a position is eligible for a DBS check, the Health Board must make it clear to the applicant that any offer of employment or placement will be subject to a satisfactory DBS disclosure and that any offer of employment or placement may be withdrawn if they knowingly withhold information, or provide false or misleading information.

### 7. Types of DBS Check

The following types of DBS check are available to employers in the NHS, each providing different types of information:

1. Basic
2. Standard
3. Enhanced without barred list
4. Enhanced with children's barred list information
5. Enhanced with adults barred list information
6. Enhanced with children's and adults barred list information

For up to date guidance on workforce guides please visit:

[Eligibility guidance for enhanced DBS checks - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/eligibility-guidance-for-enhanced-dbs-checks)

[Eligibility guidance for standard DBS checks - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/eligibility-guidance-for-standard-dbs-checks)

For information relating to periodic checks please refer to Paragraph 21.

For more information on the types of checks and regulated activity please visit:

<https://www.nhsemployers.org/your-workforce/recruit/employment-checks/criminal-record-check>

### 8. Advertising Posts Which Require Disclosure

Disclosure checks will be required for all posts, which will require the person engaged in that work, to have access to patients as part of their normal day to day duties. In such cases the advertisement will clearly advise applicants of this requirement.

Appointing managers are responsible for identifying if a post requires a DBS check as part of the Vacancy Authorisation process on the Trac Recruitment system. This will also include whether or not the post holder will have access to children or adults or both groups.

Further guidance on the level of checks required for posts within the Health Board is available at

[DBS eligibility guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/db-eligibility-guidance)

[Eligibility guidance for standard DBS checks - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/eligibility-guidance-for-standard-dbs-checks)

Staff should approach the Resourcing Team for advice /guidance if required.

A statement is added to the advert to make applicants aware that the post is subject to the Rehabilitation of Offenders Act (Exceptions Order) 1974 and as such it will be necessary for a

## HYWEL DDA UNIVERSITY HEALTH BOARD

submission for disclosure to be made to the Disclosure and Barring Service to check for any previous criminal convictions

All Doctors and Dentists require enhanced disclosure with barred lists checks which will be processed by the Medical Recruitment/Workforce Department.

### 9. Appointing to Posts Which Require Disclosure

The interview panel should remind candidates during the interview process that appointment to the post is subject to a satisfactory Disclosure Check if applicable. They should also, as part of the interview, ask candidates if they are aware of any legal reason they can't undertake the role eg: have any criminal convictions, cautions, reprimands or other disposals that will show up on a DBS. It should be emphasised that this includes spent convictions and also includes details of driving offences, including speeding (if dealt with within a court) and drink-driving.

Where an appointment is subject to a satisfactory disclosure, this will be outlined in the appointee's offer of employment letter.

To determine if existing NHS staff require a disclosure or not see [section 15](#) below.

### 10. Requesting Disclosure

If a candidate is made a conditional offer of employment to a post where disclosure is required, the requirement for them to undertake a DBS check will be outlined in the offer letter and they will be sent an electronic link to the e-DBS system to complete before attending their Pre-Employment Appointment meeting.

They will be required to bring a specified set of documentation with them to their Pre-Employment Appointment meeting for verification before the e-DBS form is submitted via the Trac system by secure electronic connection to the DBS.

The DBS performs the checks.

### 11. Receipt of Disclosure

When the checks are complete, Trac is notified via the secure electronic connection and the DBS post the certificate to the applicant.

Trac automatically updates the applicant's file on the Trac system to 'success' for clear DBS forms or 'await DBS certificate' if there is something on the certificate. The actual details of the information included are not disclosed.

DBS is requested from the applicant by either NWSSP or the Senior Recruitment Advisor (SRA) and is sent to the SRA who will then discuss this with the Appointing Manager (AM) and only escalated if there is not an agreed outcome with the AM.

If withdrawing a job offer is being considered the Senior Recruitment Advisor will refer the matter to the Assistant Director of W & OD for further discussion/consideration.

### 12. Starting Work Prior To Receipt Of A DBS Check

In exceptional circumstances staff may be allowed to commence employment prior to the receipt of their DBS check. In such exceptional circumstances a Risk Assessment must be completed. The Risk Assessment form can be found – [DBS Risk Assessment Form](#).

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### 13. Dealing with Unsatisfactory Disclosures

When assessing applicants who declare convictions, cautions etc. the criteria should allow for the fact that a conviction does not automatically stop a person gaining employment. However, someone who is barred must not be engaged in regulated activity as this is a criminal offence.

Appointing managers should consider the situation carefully before making a conditional offer of employment to individuals who are:

- On probation (in a legal sense);
- Under a suspended prison sentence;
- Released from prison on parole;
- Still under a conditional discharge;
- Subject to Terrorism Prevention and Investigation Measures.

A DBS disclosure will reveal if the individual has a criminal record, including details of convictions, cautions, reprimands or warnings – subject to filtering. The certificate will only provide the basic facts such as the name and date of offence(s) and, if applicable, details of any sentence(s). It will not put them into context.

When considering disclosure information employers must assess:

- Any legal or regulatory requirements;
- The nature of the offence;
- Its relevance to the position being applied for;
- The length and type of sentence issued;
- At what age the individual committed the offence;
- Whether the applicant has a pattern of offending behaviour, for example, if there are multiple offences;
- Whether the applicant's circumstances have changed since the offending behaviour. For example, where the offence was time limited or committed as a juvenile, and the individual has taken on responsibilities in life to enhance their standing in society, such as through education or voluntary work;
- The circumstances surrounding the offending behaviour and the explanation offered by the individual.

However, where the disclosure indicates that the DBS has made a barring decision against regulated activity, it is illegal for an employer to allow them to engage in regulated activity from which they are barred.

A record of the decision made must be kept by the Appointing Manager for six months.

### 14. Withdrawing an Offer of Employment

If the nature of the additional information provided, is such that the Health Board feels that the conditional offer of employment should be withdrawn, the applicant should be informed that the reason for the withdrawal is due to the contents of their DBS. Managers must discuss such cases with the Senior Recruitment Advisor before taking any action.

However, where a disclosure check reveals that the DBS has made a barring decision against regulated activity, the offer of employment must be withdrawn immediately as it is illegal for the employer to allow them to engage in the regulated activity from which they are barred. The appointing officer must explain to the appointed employee that it is a criminal offence and give consideration as to whether the Health Board wants to notify the police for the Health Board to

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knowingly offer or give employment to any person who has been barred from working with children or adults or to fail to remove them from such work if it is discovered that they have been barred.

### 15. Internal Applicants (Internal to Health Board or NHS Wales)

Internal applicants (to Health Board or NHS Wales) who are moving to a post which demands the same level of disclosure will not require another disclosure provided a satisfactory DBS check was carried out within the last 3 years prior to the application for the post.

The trigger for a new check is where:

- Their current DBS check is more than 3 years old;
- They have never had a DBS check before and are moving to a position that now requires them to have a check. The level of check is dependent on the roles and responsibilities of the job;
- They have made a positive declaration;
- Their role has changed and they now require a higher or lower level check or a check against one or both of the barred lists;
- There is concern about the individual's suitability for the post.

If any of the above triggers apply, a new DBS check must be undertaken.

Under no circumstances should a previous Standard DBS check be accepted for posts which require an Enhanced DBS check.

### 16. Recruiting from overseas

Currently, the DBS cannot access criminal records held overseas.

If the Health Board is recruiting individual staff from any overseas country, the Recruitment Team will request a certificate of good conduct or overseas criminal record check at the offer stage.

If the Health Board is recruiting a number of overseas applicants as part of a dedicated recruitment campaign, the Health Board must ask the applicant to provide a certificate of good conduct or overseas criminal record check at the offer stage.

N.B. if the individual requires a skilled worker visa and Certificate of Sponsorship in order to be able to work in the UK, a certificate will be required for applicants and from their partners covering the last 10 years.

For guidance on how to obtain certificates visit [Criminal records checks for overseas applicants - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/criminal-records-checks-for-overseas-applicants)

Before commencing all overseas recruits must complete a DBS overseas risk assessment. This Risk Assessment form can be – [DBS Risk Assessment Form](#).

### 17. Arrangement for Checking Staff Not Engaged by the Health Board

#### Agency Workers/Locums

It is important that all workers or locums provided via an Agency are subject to checks that are no less rigorous than for employees. The agency is accountable for ensuring that the



## HYWEL DDA UNIVERSITY HEALTH BOARD

appropriate DBS checks have been conducted to the required level three yearly. This will include Enhanced Checks for regulated activity if required.

The Health Board reserves the right to conduct random audits of the DBS checks completed by agencies.

The requirement of agencies to undertake disclosure on their staff is written into and form part of the Agency's Terms and Conditions with the Health Board.

### Temporary Staffing

All Bank-only workers, who require a DBS check, will be required to undertake the appropriate level of DBS Disclosure prior to commencement in post.

### Contractors

Where private contractors provide staff who work in positions giving them access to patients, they must carry out an appropriate level of DBS Disclosure checks in respect of each member of their staff with the Disclosure and Barring Service. This must happen at least once a year, and they must be able to provide the results of the disclosure to the Health Board upon request.

The requirement of private contractors to undertake disclosure on their staff will be written into and form part of their contract with the Health Board. Refer to the Health Board Policy: [541 – Control of Contractors Policy](#).

### Placement Students

It is the responsibility of the relevant university or college to carry out DBS checks on any of their students who will be undertaking clinical placements where they will undertake work that falls within the Exceptions Order, Police Act regulations and/or regulated activity within Health Board.

The level of disclosure must be agreed with the Health Board in advance. The Health Board will advise on any placement that meets this criterion. Eligibility criteria must be met.

### Honorary Contract Holders

In terms of honorary contracts it is the responsibility of the employing organisation to carry out DBS checks and to ensure that the correct level of disclosure check is undertaken. A DBS Eligibility Checklist should be completed and provided with the Honorary Contract request to ensure the correct level of check.

DBS Checks that are more than 3 years old will not be accepted. This also applies to requests for an extension to an Honorary Contract.

Refer to [713 – Honorary Contract procedure](#).

### Work Experience/Placements

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

Students aged 16-18 who are on work experience placements engaging in activity with vulnerable groups will also 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 full supervision. Within the Health Board, work experience students are 16 years, or older, on commencement.

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## Volunteers

The eligibility criterion for a DBS check is the same regardless of whether the individual is a paid employee or unpaid volunteer.

If a volunteer requires a DBS check because of their volunteering role and responsibilities, consideration will be given as to whether the position satisfies certain criteria to qualify for a free of charge disclosure. 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 DBS purposes 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 not therefore:

- 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.

Refer to the Health Board Policy [107 – Volunteers Policy](#).

## 18. Redeployment

The Health Board's [158 - Redeployment Policy](#) notes a number of reasons why a member of staff may be redeployed. Dependent on the role of the redeployed staff member, a DBS check may be required. The receiving Line Manager must liaise with the staff member to complete the Registration onto the Redeployment Register. Where required the DBS of the staff member being redeployed, must be checked if the role requires this.

## 19. Retire and Return

A check may take place to ensure the person retiring and returning has a relevant DBS check in place. Dependant on the role returning to a DBS check may be required.

## 20. Periodic Checks

There is no legal requirement for employers to carry out periodic checks, however positions within the Health Board which require staff to work with children will be required to have a DBS re-check every 3 years.

A table detailing positions within the Health Board requiring periodic checks can be found at hyperlink: [DBS Periodic Check](#).

## 21. Use of the DBS Update Service

The DBS Update Service is a facility where an individual may choose to have their DBS Disclosure certificate continually monitored to ensure the information is still correct and take it with them from role to role – where the new role does not change the level of check required or the workforce they will be working or volunteering with i.e. children, adults or both.



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If an applicant declares that they have subscribed to the Update Service, the Health Board can go online, with employee consent, and carry out a free, instant check to find out if the information released on the DBS certificate is current and up-to-date. This negates the need to undertake a periodic check if applicable. The responses to the update service checks will be:

- No new information exists;
- If the original certificate contained 'no relevant information';
- New information exists;

There is no record of the certificate in the service.

### Referral to DBS

Referral to DBS is required to ensure that those who pose a risk are considered for being barred from working with the relevant workforce: adult, children or both. It is an offence for individuals on the Barred List to apply for posts in Regulated Activity (post 10<sup>th</sup> September 2012 definition). Previously it was illegal for them to apply for all posts. Now individuals who are on the Barred List can now apply for posts that do not fall within the parameters of the new definition of Regulated Activity.

The DBS has responsibility for making barring decisions on the Children's list and the Adult's list, which falls under the following legislation:

- Safeguarding Vulnerable Groups Act 2006;
- Safeguarding Vulnerable Groups (Northern Ireland) Order 2007;
- Protection of Freedoms Act 2012;

The DBS does not have investigative powers and therefore relies on the information the employers sends them to make a decision as whether or not to place someone on the Barring List.

Before making a referral the employer is to gather sufficient evidence to support the referral. A fully concluded internal investigation may not be required prior to making the referral.

### Referring someone to the DBS

There may be occasions where there is a legal duty to refer to the DBS. Once a referral has been made a unique reference will be provided to the employer.

### Who should refer?

The Head of the relevant service has the responsibility for making the referral. Advice can be sought from the County Workforce Team.

**There is a legal duty to make a referral when the following two conditions have both been met:**

### Condition One

You withdraw permission to engage in regulated activity or you would have taken the action to withdraw but the employee;

- Dismissed;
- Redeployed;
- Retired;
- Redundant;
- Resigned.

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## Condition Two

You think the person has either:

- Engaged in relevant conduct
- Satisfied the harm test; or
- Received a caution for, or a conviction for or been convicted for a relevant offence

### Relevant Conduct

Conduct which:

- endangers a child or adult or is likely to endanger a child or adult
- if repeated against or in relation to a child or adult would endanger the child or adult or be likely to endanger the child or adult
- involves sexual material relating to children (including possession of such material)
- involves sexually explicit images depicting violence against human beings (including possession of such images)
- is of a sexual nature involving a child or adult

Relevant Conduct information can be found at

[Making barring referrals to the DBS - GOV.UK \(www.gov.uk\)](http://www.gov.uk/making-barring-referrals-to-the-dbs) (see list on left of page and click on Relevant Conduct)

Satisfied the Harm Test in relation to children and/or vulnerable adults. The harm test is satisfied when Relevant Conduct cannot be established but it appears to the DBS that a person **may**:

- Harm a child or adult who is in receipt of regulated activity
- Cause a child or adult who is in receipt of regulated activity to be harmed
- Put a child or adult who is in receipt of regulated activity at risk of harm
- Attempt to harm a child or adult who is in receipt of regulated activity
- Incite another to harm a child or adult who is in receipt of regulated activity

Harm information can be found [Making barring referrals to the DBS - GOV.UK \(www.gov.uk\)](http://www.gov.uk/making-barring-referrals-to-the-dbs) (see list on left of page and click on Harm)

### **Requirement for an Investigation**

The Health Board should **not** refer someone when an allegation is first made. The Health Board should always investigate and gather sufficient evidence and information to establish if the allegation has foundation. This will also inform the Health Board processes for any decision to dismiss or remove the person from working with children and / or vulnerable adults. The Health Board should, as far as possible, complete the investigations and disciplinary processes (even if the person has left employment) once sufficient evidence has been gathered. This is particularly important, as the DBS has no investigatory powers. In making the barring decisions DBS rely upon the evidence provided with referrals and any other relevant evidence that they may be able to gather.

The duty to make a referral is **not** triggered by temporary suspension. The Health Board may suspend a person pending an investigation where there have been allegations of harm or risk of harm. If following the investigation the Health Board decides to return the person to a position working in regulated activity with children or vulnerable adults (perhaps with additional training or supervision) then there is **no** legal duty to make a referral to the DBS. However, if following investigation it is decided to dismiss the person or remove them from working in regulated activity with children or vulnerable adults then the referral criteria would be met.

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## Referrals for Automatic Barring Offences

Anyone convicted or cautioned for certain serious offences will, subject to the consideration of representations where permitted be barred from working in regulated activity with children and/or vulnerable adults through the criminal sentence auto bar route.

If the Health Board becomes aware that one of its employees has been convicted or cautioned for a relevant offence the Health Board has a legal duty to make a referral to the DBS.

[Making barring referrals to the DBS - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

The Health Board also has a legal duty to remove a person from working in regulated activity with children or vulnerable adults if they are barred by the DBS.

## Referral to DBS if the legal criteria are not met

There may be occasions when the Health Board may wish to make a referral in the interests of safeguarding children or vulnerable adults, but the legal duty has not been met. For example, where the Health Board have strong concerns but the evidence is not sufficient to justify dismissing or removing the person from working with children or vulnerable adults. This may be the result of a formal process

The DBS is required by law to consider any and all information sent to it from any source. If the Health Board wishes to make a referral to the DBS in the interests of safeguarding children or adults where the legal duty is not met, it can do so in consideration of relevant employment and data protection laws (section 29).

## Requirement to Supply Information to DBS on Request

If the DBS makes a request for information about one of Health Boards current or former employees, the Health Board has a legal duty to provide the information if it has the information available. This should be treated as a priority. This duty applies irrespective of whether a referral has already been made.

## 22. Responsibilities

### Executive Director of Workforce & OD

The Executive Director of Workforce & OD is the named manager responsible for ensuring the contents of the policy and procedure are applied fairly and consistently within the Health Board.

### NWSSP Employment Services

NHS Wales Shared Services Partnership (NWSSP) Employment Services are responsible, on behalf of the Health Board, for undertaking all of the DBS checks for all non-Medical/Dental substantive and bank applicants as well as Medical and Dental trainees who have been made conditional offers of employment.

### Health Board Medical Recruitment Team

The Health Board Medical Recruitment Team are responsible for undertaking all of the DBS or police checks (as applicable) for all Medical/Dental applicants who have been made conditional offers of employment.

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## Medical Workforce Team

The Health Board Medical Workforce team are responsible for undertaking DBS checks DBS checks for Medical and Dental workers who have been made conditional offers to join the Temporary Staffing recruitment (Bank) and for overseas recruits within their first three months of employment.

## Future Workforce Team

The Health Board Volunteer Manager is responsible for undertaking all of the DBS checks for volunteer and work experience individuals.

## Appointing Managers

Appointing Managers are responsible for ensuring that all appointees are recruited appropriately for their service, in line with this procedure and that the appropriate level of check is requested for the vacancy. They are also responsible for ensuring any position requiring a periodic check has one.

Additionally, Appointing Managers must ensure that any information they receive regarding applicants convictions during the recruitment process remains confidential.

Appointing Managers are responsible for ensuring that DBS referrals are made in a timely and accurate manner when the necessary conditions are met. They are also responsible for ensuring that the Health Board Safeguarding team are advised immediately.

## All responsible parties

All responsible parties are to ensure that DBS checks are not undertaken inappropriately as there are specific eligibility criteria, in relation to the role and activities, for each level of DBS check and it is illegal to request a higher level of check than is necessary for the post.

## Senior Recruitment Advisor

Within Workforce and OD, the Senior Recruitment Advisor, is responsible for supporting and advising managers if a DBS check reveals information relating to criminal convictions/cautions which may lead to an offer of employment being withdrawn.

## Employees

For the purpose of this policy the term 'employees' includes permanent, temporary, fixed term, bank and agency staff in addition to honorary contract holders, secondees, work experience and volunteers.

Employees are responsible for taking due consideration of this policy when they apply for a transfer or promotion, or in the event that they are subject to a caution or conviction or other relevant disposal by the Crown Justice System whilst in employment.

All individuals who are convicted or found guilty of a criminal offence are required to inform their manager as soon as possible. Failure to disclose such convictions or findings of guilt could result in disciplinary action, which may result in dismissal. This includes any charges or cautions.

Employees are also required to inform their manager of any child / adult safeguarding investigations which they may be subject to, both inside and outside of the workplace, at any time during the period of their employment.

## HYWEL DDA UNIVERSITY HEALTH BOARD

### 23. Training and Awareness Raising for Managers

All staff will be made aware of this guidance upon commencement with the Health Board at either the Health Board or the departmental induction. Copies can also be viewed on the Health Board's Intranet or obtained via the Workforce & OD Department. Various training may be provided by Workforce & OD training which all staff will be informed of via internal communication channels or their line manager in advance or via newsletters.

### 24. Data Protection Act / General Protection Regulations 2016 (GDPR2016) or any subsequent legislation to the same effect

All documents generated under this policy, including applications, and formal notes and documents generated by managers and any review panel, that relate to identifiable individuals are to be treated as confidential documents, in accordance with the Health Board's 225 - Data Protection Policy. It is recommended that all parties familiarise themselves with the relevant parts of this Policy.

### 25. Records Management

All documents generated under this policy, including applications, and formal notes and documents generated by managers and any review panel, are official records of the Health Board and will be managed and stored and utilised in accordance with the Health Board's 192 - Records Management Policy.

The Health Board's compliance with DBS checks required will be monitored through a Workforce Dashboard which monitors performance of National Delivery Framework targets (5.B.i) The percentage of compliance for staff appointed into roles where a DBS is required will be regularly reported to the People, Organisational People and Culture Committee. Compliance with 'periodic checks' will be reported to the same Committee. The Strategic Safeguarding Working Group will satisfy their aim for assurance via the content of the report presented to the People, Organisational Development and Culture Committee.

### 26. Discipline

Breaches of this policy will be investigated and may result in the matter being treated as a disciplinary offence under the Health Board's [201 - Disciplinary procedure.](#)



**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL**  
**PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

<b>DYDDIAD Y CYFARFOD:</b> <b>DATE OF MEETING:</b>	20 June 2022
<b>TEITL YR ADRODDIAD:</b> <b>TITLE OF REPORT:</b>	All Wales Pay Progression Policy
<b>CYFARWYDDWR ARWEINIOL:</b> <b>LEAD DIRECTOR:</b>	Lisa Gostling, Director of Workforce & Organisational Development (OD)
<b>SWYDDOG ADRODD:</b> <b>REPORTING OFFICER:</b>	Lisa Gostling, Director of Workforce & Organisational Development (OD)

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA**

**SBAR REPORT**

**Sefyllfa / Situation**

In line with Hywel Dda University Health Board's (HDdUHB's) written control documentation process, the People, Organisational Development & Culture Committee (PODCC) is asked to approve the following revised procedure:

- All Wales Pay Progression Policy

**Cefndir / Background**

All Wales and local employment policies/procedures are reviewed on a 3 yearly basis, unless there is a change in legislation that requires a more frequent review.

All Wales policies/procedures are developed by an all-Wales group that comprises of members from all Health Boards and Trade Union Colleagues from across Wales.

It is imperative that HDdUHB has up to date and accurate written control documentation in order to comply with relevant legislation and to minimise any associated risks.

**Asesiad / Assessment**

The revised procedure has been reviewed to include reference to the Respect & Resolution Policy and to ensure consistency between Section 5.7 and the flowchart.

This has been done with the involvement of key stakeholders including those identified above and has been shared with the HDdUHB Partnership Forum Chair's for Chairs action to progress to PODCC in June as the next Staff Partnership Forum is not due to meet until 2 August 2022. Due to only minor amendments from an all Wales level, there has been no requirement to undertaken consultation via global email to staff. This process is in line with Policy 190 Written Control Documentation.



It is imperative to reflect the most recent All Wales Pay Progression Policy at this time due to the conclusion of automatic pay progression for staff on 30 September 2022 and the new process commencing from 1 October where managers will need to take positive action to implement pay progression for their staff. The Task & Finish Group for this activity met for the first time on 10 June 2022 and approval now of this revised policy will enable us to develop a simultaneous communications strategy as part of this work.

An All Wales Equality Impact Assessment (EqIA) has not been undertaken at this time due to the minor changes undertaken.

Following approval, the All Wales Pay Progression Policy will be uploaded to the intranet site and will replace the existing version.

### **Argymhelliad / Recommendation**

The People, Organisational Development & Culture Committee is requested to approve the All Wales Pay Progression Policy for uploading onto the intranet by the Policy Co-ordination Officer.

### **Amcanion: (rhaid cwblhau)**

### **Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.13 Approve workforce and organisational development policies and plans within the scope of the Committee.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable.
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	7.1 Workforce
Amcanion Strategol y BIP: UHB Strategic Objectives:	6. Sustainable use of resources
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

### **Gwybodaeth Ychwanegol: Further Information:**

Ar sail tystiolaeth: Evidence Base:	Not applicable
Rhestr Termau: Glossary of Terms:	Contained within the body of the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	Chair's action on behalf of the HDdUHB Partnership Forum. The policy will be submitted in full to the next meeting of the Staff Partnership Forum in August as part of noting Chair's action taken.

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	<a href="#">Effective budgeting for pay progression in line with national terms and conditions of employment.</a>
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Not applicable
<b>Gweithlu: Workforce:</b>	<a href="#">The procedure applies to all staff.</a>
<b>Risg: Risk:</b>	The presence of written control documentation on the intranet, outside of the policies, procedures and other written control documentation intranet webpage, may result in staff accessing documents which are out of date, no longer relevant, or contradicting current guidance.
<b>Cyfreithiol: Legal:</b>	It is essential that HDdUHB has up to date policies and procedures in place.
<b>Enw Da: Reputational:</b>	<a href="#">Not applicable</a>



<b>Gyfrinachedd: Privacy:</b>	<a href="#">Not applicable</a>
<b>Cydraddoldeb: Equality:</b>	The current equality impact assessment remains unchanged as a result of the minor changes undertaken.

# Polisi ar Ddatblygiad Cyflog

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# 01

## Polisi ar Ddatblygiad Cyflog

Cymeradwywyd gan: Fforwm Partneriaeth Cymru  
Dyddiad Cyhoeddi: Ionawr 2020



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01 Polisi ar Ddatblygiad Cyflog

1. Egwyddorion Craidd GIG Cymru yw:

- **Rydym yn rhoi cleifion a defnyddwyr ein gwasanaethau yn gyntaf:** Rydym yn gweithio gyda’r cyhoedd a chleifion/defnyddwyr gwasanaethau drwy gyd-gynhyrchu, gan wneud yr hyn sydd ei angen yn unig, dim mwy, dim llai a pheidio â gwneud dim niwed. Rydym yn onest, yn agored, yn llawn empathi ac yn dosturiol. Rydym yn sicrhau ansawdd a diogelwch yn fwy na dim arall drwy ddarparu’r gofal gorau posibl ar bob achlysur.
- **Rydym yn ymdrechu i wella ein gofal:** Rydym yn gofalu am y rhai sydd â’r angen iechyd mwyaf yn gyntaf, gan wneud y defnydd mwyaf effeithiol posibl o’r holl sgiliau ac adnoddau a gan wneud ymdrech barhaus i sicrhau bod y gofal a’r gwasanaethau yr ydym yn eu darparu’n addas ar gyfer anghenion y defnyddwyr. Rydym yn integreiddio gwelliant yn ein gwaith bob dydd, trwy fod yn agored i newid yn ein holl waith, sydd hefyd yn lleihau niwed a gwastraff.
- **Rydym yn canolbwyntio ar lesiant ac atal:** Rydym yn ceisio gwella iechyd a chael gwared ag anghydraddoldebau drwy gydweithio gyda phobl Cymru i sicrhau eu llesiant heddiw ac ar gyfer y blynnyddoedd a’r cenedlaethau i ddod.
- **Rydym yn myfyrio ar ein profiadau ac yn dysgu:** Rydym yn buddsoddi mewn dysgu a datblygu. Rydym yn gwneud penderfyniadau sy’n fanteisiol i gleifion a defnyddwyr ein gwasanaethau drwy ddefnyddio

adnoddau, systemau ac amgylcheddau sy’n caniatáu i ni weithio’n fedrus, yn ddiogel ac yn effeithiol. Rydym yn ddyfeisgar, yn addasu ac yn lleihau amrywiadau amhriodol gan ystyried y sylfaen briodol o dystiolaeth i’n harwain.

- **Rydym yn gweithio mewn partneriaeth ac fel tîm:** Rydym yn gweithio gydag unigolion gan gynnwys cleifion, cydweithwyr a sefydliadau eraill; gan ymfalchïo yn ein gwaith, gwerthfawrogi a pharchu ein gilydd, bod yn onest ac yn agored a gwrando ar gyfraniad eraill. Rydym yn ceisio datrys anghytundeb yn effeithiol ac yn gyflym, ac nid ydym yn goddef bwlio neu erledigaeth o unrhyw glaf, defnyddiwr gwasanaeth neu aelod o staff.
- **Rydym yn gwerthfawrogi pawb sy’n gweithio i’r GIG:** Rydym yn cefnogi’n holl gydweithwyr wrth iddynt wneud y swyddi y maent wedi cytuno i’w gwneud. Byddwn yn gofyn yn rheolaidd beth sydd ei angen arnynt i wneud eu gwaith yn well, ac yn ceisio darparu’r cyfleusterau angenrheidiol i ragori yn y gofal y maent yn ei roi. Byddwn yn gwrando ar ein cydweithwyr ac yn gweithredu ar eu hadborth a’u pryderon.

Maent wedi cael eu datblygu er mwyn helpu a chefnogi staff sy’n gweithio yn y GIG yng Nghymru.

Yr hyn sydd wrth wraidd GIG Cymru yw pobl, gweithio gyda phobl, i ofalu am bobl. Mae’r Egwyddorion Craidd hyn yn disgrifio sut gallwn weithio gyda’n gilydd i sicrhau bod yr hyn rydym yn ei wneud a sut rydym yn ei wneud yn cael ei ategu gan ymdeimlad cyffredin o bwrpas y mae pob un ohonom yn ei rannu a’i ddeall.



Mae'r GIG dan bwysau parhaol i gyflenwi mwy o wasanaethau, gyda chanlyniadau gwell a chynnal a gwella ansawdd mewn cyfnod o heriau ariannol sylweddol, disgwyliadau uchel gan y cyhoedd a gyda phoblogaeth sy'n heneiddio ac yn profi lefelau uwch o gyflyrau cronig.

Datblygwyd yr egwyddorion hyn i helpu i fynd i'r afael â'r pwysau y mae'r galwadau hyn yn ei achosi i staff. Byddant yn rhoi cydbwysedd i'r ffordd rydym yn

cydweithio er mwyn i ni ddibynnu llai ar y broses ac yn cael ein cynorthwyo i wneud y peth iawn trwy gael ein llywio gan yr egwyddorion hyn wrth roi polisiau a gweithdrefnau ar waith yn y gweithlu.

Fel pobl sy'n gweithio yn y gwasanaeth iechyd, byddwn yn eu defnyddio i'n helpu i wneud ein gwaith gydag ymrwymiad ymroddedig parhaus i'r rhai sy'n defnyddio ein gwasanaethau, mewn cyfnodau o newid cyson.

Mae'r Egwyddorion yn rhan o ymrwymiad parhaus i gryfhau gwerthoedd cenedlaethol a lleol a fframweithiau ymddygiad sydd eisoes wedi'u sefydlu ledled Byrddau Iechyd ac Ymddiriedolaethau.

Datblygwyd yr Egwyddorion mewn partneriaeth â chynrychiolwyr o blith y cyflogwyr a'r staff.

Defnyddir yr Egwyddorion i greu dull mwy syml a chyson o ran rheoli materion yn ymwneud â chyflogaeth yn y gweithle.

## 2. Nodau'r Polisi, Crynodeb a'r Broses Werthuso

### Nodau'r Polisi

- **2.1** Mae'r polisi hwn gan GIG Cymru yn berthnasol i'r holl aelodau staff sy'n gweithio o dan Delerau ac Amodau Gwasanaeth y GIG, ac fe'i datblygwyd yn unol ag Atodiad 23 Llawlyfr Telerau

ac Amodau'r GIG. Rhaid i'r polisi gael ei ddefnyddio ar y cyd â pholisiau lleol ar yr Adolygiad Gwerthuso a Datblygu Perfformiad (PADR) a'r Fframwaith Gwybodaeth a Sgiliau (KSF), ac egwyddorion PADR/Gwerthuso.

- **2.2** Mae'r polisi hwn yn nodi'r rhesymau dros ddatblygiad cyflog a'r weithdrefn i'w dilyn i ddelio â'r broses godiad cyflog. Mae'n egluro'r graddau perfformiad a ddefnyddir ac mae'n cynnwys disgrifiad o bob gradd. Mae'r polisi hefyd yn ymdrin â materion sy'n codi sy'n gysylltiedig â datblygiad codiad cyflog a'r broses o'i ohirio, a'r broses ar gyfer ymdrin ag unrhyw anghytundeb, a'i nod yw sicrhau cysondeb o ran dulliau a chymhwyso.
- **2.3** Nod y dull datblygiad cyflog yw gwella perfformiad a chynhyrchedd, yn ogystal â helpu i roi'r newid hwn ar waith trwy helpu staff i ddeall yn gliriach yr hyn y disgwylir ohonynt o ran ymddygiadau a ffyrdd newydd o weithio. Y nod yw darparu fframwaith sy'n ceisio sicrhau gwerth am arian trwy gysylltu datblygiad cyflog â pherfformiad yn hytrach na'r amser a dreulir mewn rôl.
- **2.4** Mae angen i'r Polisi ar Ddatblygiad Cyflog weithio'n agos â'r Broses Werthuso ac, felly, mae'n amlinellu rhai egwyddorion ar gyfer arferion gorau wrth werthuso a dylai pob Bwrdd Iechyd ac Ymddiriedolaeth wreiddio'r rhain yn eu prosesau lleol.

Dyma'r egwyddorion hyn:

- Byddwn yn cytuno ar yr hyn y disgwylir ohonom ni o safbwynt yr hyn y dylem fod yn ei wneud a sut y dylem ei wneud, a byddwn yn deall hynny
- Bydd pob un ohonom yn cael adborth adeiladol ac amserol ar sut rydym ni wedi gwneud
- Bydd pob un ohonom yn sicrhau ein bod ni'n mynd ati i geisio datblygu a gwella'r hyn rydym ni'n ei wneud er budd cleifion

- **2.5** Bydd y Polisi ar Ddatblygiad Cyflog, ynghyd â Pholisiau Gwerthuso lleol, yn annog ac yn gwobrwyo staff i gyfrannu o'u gorau beth bynnag yw eu swydd, ac i sicrhau y rhoddir codiad cyflog yn wobwr am berfformiad, nid oherwydd cyfnod mewn cyflogaeth.
- **2.6** Bydd Prif Weithredwr GIG Cymru yn sicrhau bod y polisi'n cael ei roi ar waith yn deg
- **2.7** Bydd y polisi hwn yn ddarostyngedig i adolygiad llawn ym mis Ebrill 2021 pan fydd blwyddyn lawn o ddata ar ddatblygiad cyflog ar gael. Bydd yr adolygiad hwn yn cynnwys asesiad effaith o nifer y rhybuddion disgyblu ysgrifenedig cyntaf a therfynol yn erbyn y nodweddion gwarchodedig a amlinellir yn y Ddeddf Cydraddoldeb.

## 3. Crynodeb o Ddatblygiad Cyflog

- **3.1** I'n helpu ni i roi'r gofal a'r gwasanaethau gorau posibl, beth bynnag yw ein rôl, mae'n bwysig ein bod yn deall yr hyn y disgwylir ohonom, sut mae ein cyfraniad yn helpu'r sefydliad i gyflawni ei nodau a'n bod ni'n cael ein gwobrwyo am wneud y pethau cywir yn dda, nid oherwydd y treuliwyd blwyddyn arall yn y swydd. Felly, ni fydd codiad cyflog ond yn cael ei roi ar ôl i ni gyflawni'r hyn y disgwylir ohonom mewn 3 maes:

*Gwneud y pethau cywir, Eu gwneud nhw yn y ffordd gywir, Gwneud pethau mewn ffordd well.*

- **3.2** Y rheswm dros gyflwyno datblygiad cyflog yn gysylltiedig â pherfformiad yw helpu i wella eich perfformiad a'ch cynhyrchedd chi, a pherfformiad a chynhyrchedd y sefydliad. Bydd yn helpu'n well i roi newid ar waith trwy eich helpu chi a'ch rheolwr i gytuno ar yr hyn y disgwylir ohonoch o ran eich ymddygiadau a ffyrdd newydd o weithio. Mae'n bwysig

deall bod hyn wedi cael ei gyflwyno i gynyddu gwerth am arian ac annog tegwch trwy gysylltu datblygiad cyflog â pherfformiad yn hytrach na seilio datblygiad cynyddrannol ar gyfnod yn y rôl yn unig.

- **3.3** Ochr yn ochr â'r rhesymeg hon, mae Atodiad 23 o Delerau ac Amodau Gwasanaeth y GIG yn nodi pum safon datblygiad cyflog benodol sy'n nodi gofynion y mae'n rhaid eu dangos cyn y gallwch symud ymlaen i'ch codiad cyflog nesaf ar ddyddiad eich codiad cyflog.

Dyma'r safonau hyn:

- i. Cwblhawyd y broses werthuso o fewn y 12 mis diwethaf ac mae'r canlyniadau'n unol â safonau'r sefydliad.
  - ii. Nid oes proses allu ffurfiol ar waith.
  - iii. Nid oes unrhyw gosb ddisgyblu ffurfiol yn bresennol ar eich cofnod (mae'r polisi hwn yn ehangu ar gymhwyso'r ddarpariaeth hon yn benodol ym mharagraff 5.4.4).
  - iv. Mae hyfforddiant statudol a/neu orfodol wedi'i gwblhau.
  - v. Ar gyfer rheolwyr llinell yn unig - cwblhawyd gwerthusiadau ar gyfer eich holl staff yn ôl yr angen.
- **3.4** Dim ond ar ôl dwy, tair neu bum mlynedd y bydd eich cyflwyniadau codiad cyflog yn digwydd yn dibynnu ar eich band cyflog. Bydd eich arfarniadau yn parhau i gael eu cynnal yn flynyddol.
  - **3.5** Bydd gan bob band cyflog naill ai un neu ddau o bwyntiau codiad cyflog gydag isafswm cyfnodau penodol cyn i chi ddod yn gymwys i symud ymlaen. Mae eich codiad cyflog wedi'i bennu mewn perthynas â'ch dyddiad cychwyn



yn y band tâl hwnnw. Os byddwch yn cwrdd â'r safonau gofynnol ar ddyddiad eich codiad cyflog, disgwylir y byddwch yn symud ymlaen i'ch pwynt codiad cyflog nesaf.

- **3.6** Bob blwyddyn, byddwch chi a'ch rheolwr yn adolygu pa mor dda rydych chi wedi bodloni'ch amcanion codiad cyflog ac yn cytuno p'un a yw eich perfformiad yn foddhaol neu'n anfoddhaol. Yn y flwyddyn pan fydd codiad cyflog yn ddyledus, bydd angen i'ch perfformiad fod yn foddhaol i chi symud ymlaen i'r pwynt codiad cyflog nesaf. Os yw'n anfoddhaol, yna ni fyddwch yn derbyn eich codiad cyflog a byddwch yn gweithio gyda'ch rheolwr i gytuno ar gynllun i'ch helpu i fodloni'r gofynion er mwyn i chi dderbyn eich codiad cyflog unwaith y dangosir bod y gofynion perthnasol wedi'u bodloni.

Yn bwysig, os na fu'n bosibl i chi fodloni'r hyn y disgwyliid ohonoch, ac nad oedd unrhyw fai arnoch chi am hynny, bydd gwiriadau ar waith i sicrhau y dylech dderbyn y codiad cyflog nesaf.

- **2.7** Mae datblygiad cyflog yn gweithio ochr yn ochr â gwerthuso, ond maent yn parhau'n ddwy broses ar wahân. Mae'r diagram llif isod yn dangos sut mae'r ddwy'n gweithio gyda'i gilydd.

**4. Y Broses Werthuso**

- **4.1** Nid yw'r Polisi hwn ar Ddatblygiad Cyflog yn disodli nac yn newid Polisiâu Gwerthuso, ond mae'n amlinellu tair egwyddor a fydd yn cael eu gwreiddio mewn prosesau gwerthuso lleol. Dyma'r egwyddorion:
  - *Byddwn yn cytuno ar yr hyn y disgwylir ohonom ni o safbwynt yr hyn y dylem fod yn ei wneud a sut y dylem ei wneud, a byddwn yn deall hynny*
  - *Bydd pob un ohonom yn cael adborth adeiladol ac amserol ar sut rydym ni wedi gwneud*

- *Bydd pob un ohonom yn sicrhau ein bod ni'n mynd ati i geisio datblygu a gwella'r hyn rydym ni'n ei wneud er budd cleifion*
- **4.2** Mae manylion technegau arferion gorau wrth werthuso, a fydd yn cefnogi datblygiad cyflog yn gysylltiedig â pherfformiad, wedi'u cynnwys yn atodiad A a dylent gael eu gwreiddio yn eich prosesau gwerthuso lleol.
- **4.3** Dylai eich arfarniadau barhau i gael eu cynnal yn flynyddol o leiaf, ni waeth a yw'n flwyddyn sy'n cynnwys dyddiad codiad cyflog, neu a ydych chi ar frig y raddfa.

02

**Crynodeb o  
Ddatblygiad Cyflog**





**Proses Datblygiad Cyflog****Proses Werthuso**

Gwnewch yn siŵr bod amcanion eich gwerthusiad yn cwmpasu'r tri maes hyn

- Beth mae disgwyl i mi ei gyflawni
- Sut dylwn i wneud pethau (gwerthoedd sefydliadol)
- Sut gallaf i ddatblygu/gwneud pethau mewn ffordd well?

Ar ddechrau'r flwyddyn, dylech chi a'ch rheolwr gytuno ar eich amcanion a nodi pa bobl y byddwch chi'n gofyn iddynt am adborth

Dau neu dri mis cyn y dyddiad codiad cyflog, adolygwch hyn gyda'ch rheolwr a defnyddiwch adborth trydydd parti. Cytuno p'un a ydych chi wedi bodloni'r amcanion ym mhob un o'r tri maes

**Sgyrsiau parhaus**  
Gofynnwch am adborth rheolaidd ar sut rydych chi'n ei wneud. Cynhwyswch adborth gan amrywiaeth o bobl (lle y bo'n briodol, cynhwyswch adborth gan gleifion, cleientiaid, partneriaid, rheolwyr prosiectau a chydweithwyr)

(Yn dibynnu ar ddyddiad y codiad cyflog, gellid cynnal yr adolygiad hwn fel rhan o'r adolygiad gwerthuso diwedd blwyddyn)

Os ydych chi'n methu bodloni amcanion, cytunwch ar gynllun gwella gyda'ch rheolwr.

Bydd y rheolwr yn penderfynu a fu perfformiad yn foddhaol neu'n anfoddhaol

**Adolygiad/gwerthusiad diwedd blwyddyn gyda rheolwr**

Bydd hwn yn adeiladu ar sgyrsiau ac adborth yn ystod y flwyddyn. Byddwch yn cytuno ar yr hyn y mae angen ei gynnwys yn amcanion y flwyddyn nesaf. Fe'i cofnodir ar ESR

Bydd y rheolwr yn cyfleu'r canlyniad i'r unigolyn ac yn ceisio'i gytundeb iddo

Os nad yw'r unigolyn yn fodlon, h.y. bwriedir atal y codiad cyflog, dylid gofyn i reolwr y rheolwr adolygu'r penderfyniad (o fewn 7 diwrnod). Mae ei benderfyniad yn derfynol

Os bydd yr unigolyn yn fodlon, telir y codiad cyflog neu beidio, yn dibynnu ar ganlyniad yr adolygiad.

Nid oes proses apelio bellach ynghylch y penderfyniad ar y dosbarthiad. Os bydd yr unigolyn o'r farn na ddilynwyd y broses yn gywir, gall ystyried y Polisi Parch A Datris

**5. Pwy sy'n gwneud beth a phryd?****5.1 Cytuno ar Amcanion**

Fel rhan o'r broses werthuso flynyddol, byddwch chi a'ch rheolwr yn cytuno ar set o amcanion sy'n cwmpasu:

- yr hyn y mae angen i chi ei wneud h.y. y pethau y mae angen i chi eu cyflawni;
- sut y mae angen i chi wneud pethau, h.y. eich ymddygiadau, a'r ffordd rydych chi'n arddangos y gwerthoedd;
- ffyrdd y gallwch chi geisio datblygu a gwella yr hyn rydych chi'n ei wneud.

Dylech chwarae rhan weithgar wrth osod yr amcanion a gwirio'ch bod yn deall yr hyn mae'ch rheolwr yn ei ddisgwyl ohonoch, oherwydd bydd y graddau rydych chi'n bodloni'r amcanion hyn yn penderfynu p'un ai a fyddwch chi'n cael eich codiad cyflog pan mae'n ddyledus ai peidio.

**5.2 Adborth**

Dylech chi a'ch rheolwr fynd ati'n weithgar i geisio adborth a gwybodaeth gan bobl wahanol (e.e. cleifion, cydweithwyr, partneriaid), unrhyw ganlyniadau/data perthnasol, gwaith prosiect/gwella rydych chi wedi cymryd rhan ynddo. Bydd yr adborth hwn yn eich helpu chi a'ch rheolwr i baratoi ar gyfer eich adolygiad o ddatblygiad cyflog a chefnogi'r dosbarthiad sy'n cael ei roi i chi.

**5.3 Adolygiad Codiad Cyflog**

Dylech gael adolygiad 8 i 12 wythnos cyn dyddiad eich codiad cyflog a dylai eich rheolwr drefnu hwn. Dylech chi a'ch rheolwr baratoi ymlaen llaw. Yn y cyfarfod, dylech drafod enghreifftiau o sut rydych chi wedi bodloni eich amcanion, gan ddefnyddio adborth gan bobl eraill lle y bo'n briodol.

Yn dibynnu ar ddyddiad eich codiad cyflog, gall y cyfarfod hwn fod yn werthusiad diwedd blwyddyn/adolygiad PADR ar eich cyfer hefyd.

Mae cynnal sgyrsiau ac adborth trwy gydol y flwyddyn yn arfer da, fel nad oes pethau annisgwyl yn codi. Os ydych chi wedi bod yn cael trafferth bodloni'ch amcanion, dylai hyn fod wedi cael ei drafod yn gynt yn ystod y flwyddyn, gan gytuno ar gynllun gwella.

**5.4 Cytuno ar y canlyniad**

- 5.4.1** Ar ddiwedd adolygiad eich codiad cyflog, bydd eich rheolwr yn rhoi eich canlyniad i chi, h.y. p'un ai a ydych chi'n foddhaol neu'n anfoddhaol, a'i resymau dros y penderfyniad. Os yw'r ddau ohonoch yn cytuno ar y canlyniad, bydd eich rheolwr yn hysbysu Adran y Gweithlu a Datblygu Sefydliadol a'r gyflogres ac yn cymryd y camau angenrheidiol mewn perthynas ag ESR. Os bydd y canlyniad yn foddhaol, caiff eich codiad cyflog ei dalu; os bydd y canlyniad yn anfoddhaol, ni chewch godiad cyflog.

**Boddhaol**

Mae wedi bodloni'r amcanion craidd yn llwyddiannus ac wedi dangos cynnydd boddhaol wrth gyflawni amcanion eraill ac wedi bodloni'r egwyddorion datblygiad cyflog cenedlaethol a nodir isod

**Anfoddhaol**

Bu'n aflwyddiannus wrth fodloni'r amcanion craidd a/neu nid yw wedi dangos cynnydd boddhaol wrth gyflawni amcanion eraill a/neu heb fodloni'r egwyddorion datblygiad cyflog cenedlaethol a nodir isod

Bydd angen i sefydliadau unigol benderfynu beth sy'n cael ei ystyried yn berfformiad boddhaol neu anfoddhaol ar sail adran, tîm neu unigolyn. Bydd yn dibynnu ar y math o rôl a natur y rôl, ond dylai gael ei seilio ar amcanion clir, rhesymol a chytunedig.



Dylai rheolwyr gytuno ar set graidd o amcanion cyraeddadwy i asesu datblygiad cyflog ond dylent hefyd gynnwys amcanion mwy uchelgeisiol fel rhan o broses adolygu perfformiad ehangach. Rhaid bod yn glir, fodd bynnag, ynghylch pa lefel o berfformiad fyddai'n cael ei hystyried yn foddhaol ac, felly, beth fyddai'n berfformiad ar lefel anfoddhaol.

- **5.4.2** Yn ogystal â chyflawni'r amcanion, bydd angen dangos y safonau datblygiad cyflog cenedlaethol canlynol hefyd:

- Cwblhawyd y broses werthuso o fewn y 12 mis diwethaf ac mae'r canlyniadau'n unol â safonau'r sefydliad.
- Nid oes proses allu ffurfiol ar waith.
- Nid oes unrhyw gosb ddisgyblu ffurfiol yn bresennol ar gofnod yr aelod staff (nodir cymhwysiad penodol y ddarpariaeth hon ym mharagraff 5.4.4).
- Mae hyfforddiant statudol a/neu orfodol wedi'i gwblhau.
- Ar gyfer rheolwyr llinell yn unig - cwblhawyd gwerthusiadau ar gyfer eu holl staff yn ôl yr angen.

- **5.4.3** Disgwylir y byddwch yn cyflawni'r safonau gofynnol ar ddyddiad eich codiad cyflog. Disgwylir hefyd y dylech chi a'ch rheolwr llinell fod wedi cael trafodaethau rheolaidd am unrhyw broblemau wrth gyrraedd y safonau gofynnol cyn dyddiad y codiad cyflog. Bydd hyn yn caniatáu amser i faterion gael eu codi a dod o hyd i ddatrysiadau posibl i allu gwneud trefniadau ar gyfer rhoi'r codiad cyflog mewn da bryd.

- **5.4.4** Rhaid i'ch rheolwr ddefnyddio'r cyfarfod adolygu codiad cyflog i drafod y safonau. Os na chyrhaeddwyd unrhyw un o'r safonau, dylid cynnal adolygiad o'r trafodaethau blaenorol am y rhain i ystyried unrhyw ffactorau lliniarol ac i gofnodi'r penderfyniad.

O ran sancsiynau disgyblu byw, os ydych yn derbyn eich rhybudd ysgrifenedig cyntaf, ni fydd eich datblygiad yn cael ei oedi oherwydd y rhybudd. Fodd bynnag, bydd eich rheolwr yn ystyried y rhesymau a'r amgylchiadau a arweiniodd at y sancsiwn, yn ogystal â'ch perfformiad a'ch ymddygiad ers i'r sancsiwn gael ei gymhwyso. Bydd hyn yn rhan o'r wybodaeth y bydd eich rheolwr yn ei defnyddio wrth benderfynu ar ganlyniad datblygiad cyflog. Os bydd eich rheolwr, yn dilyn ystyriaeth ddyledus, yn penderfynu y dylech dderbyn canlyniad boddhaol, yna byddwch yn symud ymlaen i'r codiad cyflog nesaf. Os byddwch yn derbyn canlyniad anfoddhaol, bydd eich codiad cyflog yn cael ei oedi. Bydd y penderfyniad yn cael ei gofnodi'n glir, gan nodi'r rhesymeg dros atal y codiad cyflog. Bydd rhybudd terfynol bob amser yn arwain at oedi codiad cyflog.

- **5.4.5** Yn bwysig, os na fu'n bosibl i chi fodloni'r hyn y disgwyli'd ohonoch, ac nad oedd unrhyw fai arnoch chi am hynny, yna dylech dderbyn y codiad cyflog.
- **5.4.6** Bydd codiad cyflog ar gau ar y system gyflogres. Ar ôl i'r adolygiad codiad cyflog gael ei gwblhau'n llwyddiannus, rhaid i'ch rheolwr gymryd y camau angenrheidiol i agor y codiad cyflog.
- **5.4.7** Rhaid i reolwyr sicrhau bod y broses cyflwyno cais am godiad cyflog yn cael ei chwblhau mewn modd amserol er mwyn sicrhau y gellir gweithredu codiad cyflog mewn da bryd erbyn dyddiad codiad cyflog yr aelod staff. Rhaid i hyn ystyried amserlenni'r gyflogres leol a gofynion ESR.
- **5.4.8** Er bod yn rhaid eich bod wedi cwblhau eich gwerthusiad diwethaf yn llwyddiannus er mwyn symud i'ch codiad cyflog nesaf, nid oes rhaid i'r dyddiad pan gynhaliwyd yr arfarniad fod yn gysylltiedig â'ch dyddiad codiad cyflog.

Os nad oedd eich canlyniad gwerthuso diwethaf yn foddhaol ond bod camau adfer wedi'u cwblhau'n llwyddiannus erbyn dyddiad y codiad cyflog, byddwch yn gallu symud ymlaen heb unrhyw oedi os ydych chi'n bodloni'r safonau eraill.

## 5.5 Penderfyniadau i ohirio dyfarnu codiad cyflog

- **5.5.1** Mewn sefyllfaoedd lle na chyrhaeddwyd safonau ac nad oes unrhyw ffactorau lliniarol sy'n ddigonol i gyfiawnhau hyn, bydd eich codad cyflog yn cael ei oedi. Bydd eich rheolwr llinell yn trafod ac yn cytuno ar gynllun gyda chi ar gyfer unrhyw gamau adfer sydd eu hangen i sicrhau bod y safonau gofynnol ar gyfer datblygiad cyflog yn cael eu bodloni, gan gynnwys amserlen, a sut y bydd unrhyw anghenion hyfforddi a chymorth yn cael eu diwallu. Mewn amgylchiadau o'r fath mae'n rhaid i chi gymryd pob cam angenrheidiol i fodloni'r gofynion cyn gynted â phosibl a rhaid i'ch rheolwr llinell roi'r gefnogaeth angenrheidiol i chi.
- **5.5.2** Dylid trefnu cyfarfod adolygu codiad cyflog pellach ar ddyddiad y cytunwyd arno i adolygu cynnydd a, lle bo hynny'n foddhaol, cychwyn agor y gynyddran. Dylai'r dyddiad dod i rym ar gyfer symud ymlaen i'r codiad cyflog nesaf fod y dyddiad cynharaf y dangosir bod y gofynion perthnasol wedi'u bodloni. Bydd dyddiad codiad cyflog y blynyddoedd i ddod yn aros yr un peth.
- **5.5.3** Pan fydd codiad cyflog yn cael ei ohirio oherwydd cosb ddisgyblu fyw, neu broses allu ffurfiol, dylai eich rheolwr llinell gychwyn cyfarfod adolygu codiad cyflog cyn i'r gosb neu'r cynllun ddod i ben. Dylid defnyddio hwn i gadarnhau bod yr holl ofynion eraill wedi'u bodloni ac i sicrhau eich bod yn symud ymlaen i'r codiad cyflog nesaf, gan ddod i rym y diwrnod ar ôl i'r sancsiwn ddod i ben.

Bydd unrhyw ddyddiadau codiad cyflog yn y dyfodol yn aros yr un peth.

## 5.6 Integreiddio canlyniadau i werthusiad y flwyddyn nesaf

- **5.6.1** Dylai adolygiad y codiad cyflog fod yn rhan o'ch trafodaethau parhaus ar reoli perfformiad gyda'ch rheolwr a bydd yn ffynhonnell adborth ddefnyddiol i'w hystyried yn yr adolygiad gwerthuso diwedd blwyddyn ac wrth osod amcanion at y dyfodol. Os cewch eich dosbarthu'n 'foddhaol', yna gallwch chi a'ch rheolwr drafod p'un a oes arnoch angen cyfleoedd datblygu pellach ac ati. Os cewch eich dosbarthu'n 'anfoddhaol', dylech chi a'ch rheolwr gytuno ar gynllun i'ch helpu i wella a chael eich perfformiad ar y trywydd cywir unwaith eto. Dylid cynnwys ac adolygu'r amcanion hyn yn eich gwerthusiad nesaf.
- **5.6.2** Os bydd eich rheolwr yn nodi na fu'n bosibl i chi fodloni'ch amcanion ac nad oedd unrhyw fai arnoch chi am hynny, bydd angen i chi a'ch rheolwr weithio gyda'ch gilydd i ailosod eich amcanion neu ddileu'r rhwystrau rhag eu cyflawni.

## 5.7 Datrys anghydfod

Yn achlysurol iawn, gallech chi a'ch rheolwr anghytuno ar ba mor dda rydych chi wedi bodloni'ch amcanion ac, felly, a nghytuno ar y dosbarthiad a roddir i chi. Lle bynnag y bo'n bosibl, dylech geisio datrys problemau gyda'ch rheolwr. Os yw'ch rheolwr yn eich ystyried yn anfoddhaol a'ch bod yn teimlo eich bod wedi dangos cynnydd boddhaol wrth gyflawni eich amcanion a'ch bod wedi bodloni'r egwyddorion datblygiad cyflog cenedlaethol, ac na allwch ddatrys y rheswm dros ganlyniad anfoddhaol yn uniongyrchol â'ch rheolwr, yna gallwch ofyn i reolwr eich rheolwr adolygu'r penderfyniad.





Bydd y broses hon yn digwydd o fewn darpariaethau'r Polisi Parch a Datrys a dylid ei chyflawni o fewn 14 diwrnod calendr i roi gwybod i'ch rheolwr eich bod am fwrw ymlaen â'r mate. Dylid defnyddio'r gofynion hysbysu yn y polisi Parchu a Phenderfynu ar gyfer gwneud cais am benderfyniad ffurfiol, gan nodi ar ba sail yr ydych yn ystyried y dylid adolygu'r gyfradd. Bydd rheolwr eich rheolwr eisiau deall eich safbwynt chi a safbwynt eich rheolwr. Yna bydd ef/hi yn gwneud penderfyniad ar y gyfradd ac yn cyfleu eu rhesymau i chi a'ch rheolwr.

Os ydych chi'n anhapus â'r broses, os oes gennych chi bryderon eraill nad ydyn nhw'n uniongyrchol gysylltiedig â chanlyniad eich gwerthusiad, neu os ydych chi'n credu y gwahaniaethwyd yn eich erbyn mewn unrhyw ffordd, yna gwnewch gais ffurfiol am ddatrysiad yn unol â'r polisi Parch a Datrys. Yna bydd eich rheolwr yn rhoi gwybod i Adran y Gweithlu a Datblygu Sefydliadol ac i'r gyflogres, ac yn diweddarau ESR. Os cytunir y dylech dderbyn eich codiad cyflog, bydd yn cael ei ôl-ddyddio i'r dyddiad codiad cyflog gwreiddiol.

### 5.8 Rolau Band 8c/d a 9

Rydym yn cydnabod bod gwobrwyo perfformiad da gyda chodiad cyflog yn newid arwyddocaol a chadarnhaol. Hefyd, rydym yn cydnabod bod disgwyl yn gyffredinol i uwch arweinwyr fod yn gosod ac yn adolygu amcanion yn y ffordd hon eisoes. Maent yn fwy tebygol hefyd o fod wedi arfer â gofyn am adborth a chael adborth gan nifer o bobl. Yn ogystal, gwyddom ei bod hi'n bwysig i arweinwyr ddangos esiampol o'r ymddygiadau yr ydym eu heisiau gan eraill.

Felly, mae'r gwahaniaethau canlynol yn berthnasol i rolau Band 8c a d/9:

Yn y flwyddyn ar ôl i chi gyrraedd brig bandiau 8c, 8d neu 9, bydd 5 y cant neu 10 y cant o'r cyflog sylfaenol yn cael ei ad-ennill. Pan gytunir ar berfformiad boddhaol, cedwir eich cyflog ar frig y band.

Os bernir bod eich perfformiad yn anfoddhaol, gellir gostwng eich cyflog 5 y cant neu 10 y cant \* o ddyddiad y codiad cyflog. Byddwch yn gallu adfer eich cyflog i frig y band ar ddiwedd y flwyddyn ganlynol trwy gyrraedd y safonau gofynnol. Mae gennych hawl i herio penderfyniad i ostwng eich cyflog gan ddefnyddio'r broses Datrys Anghydfod a amlinellir uchod.

\*mae Gweithrediaeth Cyngor Staff y GIG wedi cynghori bod cynlluniau i ddatblygu rhai meini prawf mewn perthynas â chymhwyso'r cyflog 5% a 10% y gellir ei ail-ennill a bydd yr adran hon o'r polisi yn cynnwys y manylion priodol ar ôl i'r rhain gael eu penderfynu.

# 03

## Atodiad 1: Materion cyfreithiol



# 3 Atodiad 1: Materion cyfreithiol

## Absenoldeb o’r Gwaith Pan Fydd Codiad Cyflog yn Ddyledus

Os ydych chi’n absennol o’r gwaith am resymau fel salwch neu absenoldeb rhiant pan fydd codiad cyflog yn ddyledus, dylid dilyn egwyddor triniaeth gyfartal a theg fel na ddioddefir unrhyw anfantais o ganlyniad i hyn.

Yn achos absenoldeb â thâl tymor hir wedi’i gynllunio ymlaen llaw fel mamolaeth, mabwysiadu ac absenoldeb rhiant a rennir, gellir cynnal eich adolygiad codiad cyflog yn gynnar os yw hyn yn rhesymol ac yn ymarferol, gan ganiatáu i’r codiad cyflog gael ei gymhwyso ar ddyddiad eich codiad cyflog yn eich absenoldeb.

Os ydych ar absenoldeb â thâl yn y tymor hir, megis absenoldeb mamolaeth, mabwysiadu neu riant a rennir ac ni ellir cynnal adolygiad codiad cyflog cyn dyddiad y codiad cyflog, dylid gweithredu’r codiad cyflog yn awtomatig yn absenoldeb yr unigolyn ar yr amod nad oes sancsiynau disgyblu neu brosesau gallu ffurfiol ar waith. Os oes cosb ddisgyblu fyw ar waith ar yr adeg eich absenoldeb, dylid gweithredu’r codiad cyflog yn eich absenoldeb os yw’n briodol, gan ddod i rym o’r diwrnod ar ôl i’r sancsiwn ddod i ben.

Pe bai proses gallu ffurfiol weithredol ar y gweill ar yr adeg y byddwch yn absennol, gellir gohirio’r codiad cyflog. Dylid ailddechrau ar y broses wella yn syth ar ôl ichi ddychwelyd. Ar ôl ei gwblhau’n foddhaol, dylid neilltuo’r cyfnod absenoldeb, ac ôl-ddyddio’r codiad cyflog i ddyddiad y cytunwyd arno fel petaech wedi cwblhau’r broses wella heb fod wedi bod yn absennol.

Mae gwahardd cyflogai o’r gwaith â chyflog llawn yn weithred niwtral. Er mwyn sicrhau bod hyn yn wir, dylai eich cyflogwr sicrhau bod eich codiad cyflog yn cael ei weithredu o ddyddiad adolygu eich codiad cyflog lle cewch eich atal dros dro ar y dyddiad hwnnw, ar yr amod yr ystyrir eich perfformiad yn foddhaol a’ch bod wedi cwrdd â’r safonau datblygiad cyflog cenedlaethol.

Dyma’r safonau hyn:

- Cwblhawyd y broses werthuso o fewn y 12 mis diwethaf ac mae’r canlyniadau’n unol â safonau’r sefydliad.
- Nid oes proses allu ffurfiol ar waith.
- Nid oes unrhyw gosb ddisgyblu ffurfiol yn fyw ar eich cofnod.
- Mae hyfforddiant statudol a/neu orfodol wedi’i gwblhau.
- Ar gyfer rheolwyr llinell yn unig - mae gwerthusiadau wedi’u cyflawni ar gyfer eich holl staff yn ôl yr angen.

Os yw’n anfoddhaol yna ni fyddwch yn derbyn eich codiad cyflog a byddwch yn gweithio gyda’ch rheolwr i gytuno ar gynllun i’ch helpu i fodloni’r gofynion er mwyn i chi dderbyn eich codiad cyflog unwaith y dangosir bod y gofynion perthnasol wedi’u bodloni. Mae’n bwysig nodi, os na fu’n bosibl i chi fodloni’r hyn y disgwyliid ohonoch, ac nad oedd unrhyw fai arnoch chi am hynny, dylech dderbyn y codiad cyflog nesaf.

Yn ôl eu diffiniad, eich dewis chi yw cyfnodau sabothol/seibiannau gyrfa, felly os byddwch yn dewis cymryd cyfnod sabothol/seibiant gyrfa ar unrhyw adeg yn ystod eich gyrfa, bydd eich datblygiad cyflog yn cael ei ‘rewi’ ar bwynt y gynyddran a gyflawnwyd gennych ar eich diwrnod gwaith olaf. Felly, pan ddychwelwch i’r gwaith, byddwch yn gweithio ar yr un gynyddran ag yr oeddech

pan ymadawoch chi. Bydd angen cynnal asesiad o fewn ychydig wythnosau wedi i chi ddychwelyd i nodi eich anghenion hyfforddi a datblygu.

## Monitro Cydraddoldeb

yn monitro sut mae’r polisi hwn yn cael ei gymhwyso o ran y nodweddion gwarchodedig, yn unol â Deddf Cydraddoldeb 2010. Gellid gwneud hyn ar sail sampl. Yna, bydd adroddiad yn cael ei ddarparu’n flynyddol i’r Bwrdd neu i is-bwyllgor priodol.

## Amgylchiadau Esgusodol Eraill

yn cydnabod y gall fod amgylchiadau esgusodol eraill sydd heb gael eu trafod eisoes yn yr adran hon. Mewn achosion lle y tybir bod amgylchiadau esgusodol yn gysylltiedig â pheidio â chyflawni’r meini prawf datblygu, dylid ceisio cyngor gan eich rheolwr llinell ac aelod perthnasol o Adran y Gweithlu a Datblygu Sefydliadol.



# 04

## Atodiad 2: Egwyddorion ac Arferion Gorau i'w hintegreiddio i Brosesau Gwerthuso Lleol

### 4 Atodiad 2: Egwyddorion ac Arferion Gorau i'w hintegreiddio i Brosesau Gwerthuso Lleol

I'n helpu ni i roi'r gofal a'r gwasanaethau gorau posibl, beth bynnag yw ein rôl, mae'n bwysig ein bod ni'n deall yr hyn y disgwylir ohonom a sut mae ein cyfraniad personol yn helpu ein timau a'r sefydliad i gyflawni eu nodau.

Dylai trafodaethau gwerthuso fod yn rhai parhaus a:

- Rhoi adborth ar sut rydym ni wedi'i wneud - dylai'r adborth fod yn onest, yn adeiladol ac yn amserol, a dylem fod yn ceisio adborth gan amrywiaeth o bobl rydym ni'n gweithio gyda nhw (e.e. cydweithwyr, rhanddeiliaid, cleifion, rheolwyr prosiect) lle bynnag y bo'n bosibl
- Sicrhau bod pob un ohonom yn cytuno ar yr hyn y disgwylir ohonom ni a sut y dylem fod yn gwneud pethau, a'n bod yn deall hynny, h.y. yr hyn y mae angen i ni ei gyflawni a'r ymddygiadau a'r ffyrdd o weithio y disgwylir ohonom ni
- Sicrhau ein bod yn datblygu ein hunain i wneud pethau yn well a/neu symud ymlaen i rôl arall a chael cynllun o ba ddysgu byddwn ni'n ei wneud

Rhaid i reolwyr sy'n ymwneud ag adolygu, asesu, cytuno ar amcanion a chefnogi cynlluniau datblygu personol, sicrhau eu bod yn gymwys ac yn hyderus i gyflawni'r rôl hon. Gall timau dysgu a datblygu helpu i gynorthwyo rheolwyr lle y bo angen hyn.

#### Cytuno ar Amcanion

Mae'n hanfodol ein bod ni'n gwybod beth y disgwylir ohonom ni. Yn bwysig, dylem gytuno ar ein hamcanion penodol fel ein bod yn berchen arnynt. Dylai gosod amcanion fod yn sgwrs ddwyffordd bob amser.

Er mwyn i amcanion fod yn ystyrllon, rhaid iddynt fod yn rhai CAMPUS: cyraeddadwy, amserol, mesuradwy, penodol, uchelgeisiol a synhwylol; yn benodol, rhaid iddynt "fod o fewn ein cylch rheoli ni". Ni ddylech gytuno ar amcanion sy'n ymwneud â phethau na allwch wneud unrhyw beth yn eu cylch. Mae amcanion da yn rhai lle y mae'r canlyniadau yn deillio o'r hyn a wnawn a sut rydym ni'n ymddwyn, h.y. maent yn bethau y gallwn ni eu rheoli.

#### Cytuno ar Anghenion Datblygu

Fel rhan o waith adolygu neu osod amcanion, mae'n debygol y byddwch wedi nodi pethau a/neu ffyrdd y gallwch eu gwneud yn well. Mae'r rhain yn debygol o fynnu ein bod ni'n treulio amser yn datblygu ein hunain a dylech gytuno ar y ffordd orau o wneud hyn gyda'ch rheolwr. Yn aml, nid cwrs hyfforddi ffurfiol yw'r unig ateb neu'r ateb gorau, a dylech feddwl am yr amser y bydd arnoch angen ei dreulio ar eich datblygiad, nid dim ond pa gyllideb y gall fod arnoch ei hangen.

#### Cadw Cofnodion

Mae cadw cofnodion cywir yn bwysig a dylid cadw unrhyw gofnodion a gedwir gennych chi a'ch rheolwr yn unol â gofynion Diogelu Data 2018. Rhaid i reolwyr sicrhau bod holl fanylion cyfarfodydd gwerthuso'n cael eu cofnodi ar ESR.



# 05

## Atodiad 3: ASESIAD O'R EFFAITH AR GYDRADDOLDEB

### 1. Cyffredinol

<b>Teitl y ddogfen</b>	Polisi ar Ddatblygiad Cyflog (staff anfeddygol)
<b>Pwrpas y ddogfen</b>	Amlinellu'r weithdrefn i'w dilyn wrth gysylltu datblygiad cyflog â pherfformiad, disgrifio'r broses ar gyfer ymdrin ag adolygiadau blynyddol o godiadau cyflog, mynd i'r afael â phroblemau'n codi yn gysylltiedig â datblygiad cynyddrannol a gohirio cynyddran a sicrhau cysondeb o ran dulliau a chymhwyso. Mae'r ddogfen yn dangos sut mae prosesau gwerthuso a datblygiad cyflog yn cyd-fynd ac mae'n pwysleisio'r angen bod pob aelod staff yn deall eu rôl a'u swyddogaeth ddisgwyliedig yn glir a bod ganddynt y cyfle i gael adborth ar eu perfformiad, er mwyn iddynt allu datblygu i'w potensial mwyaf.
<b>Cwmpas bwriadedig</b>	Yr holl staff anfeddygol a deintyddol a gyflogir gan GIG Cymru.

### 2. Ymgynghori

<b>Ymgynghorwyd â pha grwpiau/ cymdeithasau/cyrff neu unigolion wrth lunio'r ddogfen hon?</b>	Fforwm Partneriaeth GIG Cymru (gan gynnwys pob undeb sy'n cael ei chydabod gan GIG Cymru); Grŵp Gweithredu'r Tasglu Strategol ar Dâl; Sefydliadau'r GIG; Rheolwyr Llinell
<b>Beth oedd effaith unrhyw adborth ar y ddogfen?</b>	Gwnaed newidiadau a rhoddwyd ymrwymiad i adolygiad llawn ym mis Ebrill 2021 pan fydd blwyddyn lawn o ddata ar gael. Gweler paragraff 2.7.
<b>Pwy oedd yn rhan o gymeradwyo'r ddogfen derfynol?</b>	Fforwm Partneriaeth GIG Cymru a Grŵp Gweithredu'r Tasglu Strategol ar Dâl.
<b>Unrhyw sylwadau eraill i'w cofnodi?</b>	

### 3. Asesiad o'r Effaith ar Gydraddoldeb

<b>A yw'r ddogfen yn effeithio'n annheg ar staff penodol neu grwpiau penodol o staff? Os ydyw, dywedwch sut mae hyn yn cael ei gyfiawnhau.</b>	Nac ydyw.
<b>Pa fesurau sy'n cael eu cynnig i fynd i'r afael ag unrhyw annhegwch?</b>	Dim.
<b>A all y ddogfen gael ei darparu mewn fformat arall neu ar ffurf cyfieithiad?</b>	Gall, o wneud cais i Gyfarwyddwyr y Gweithlu a Datblygu Sefydliadol.



4. Asesiad o Gydymffurfiaeth

A yw’r ddogfen yn cydymffurfio â deddfwriaeth cyflogaeth berthnasol?Rhowch fanylion.	Ydyw.

5. Aseswyd y ddogfen gan:

Enw	Grŵp Adolygu’r Bartneriaeth Datblygiad Cyflog
Swydd/Teitl y Swydd	
Dyddiad	Mehefin 2019

# Pay Progression Policy



GIG  
CYMRU  
NHS  
WALES

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# 01

## Pay Progression Policy

**Approved by: Welsh Partnership Forum**

**Issue Date: January 2020**





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# 01 NHS Wales Pay Progression Policy

## 1. The Core Principles of NHS Wales:

- **We put patients and users of our services first:** We work with the public and patients/service users through co-production, doing only what is needed, no more, no less and trying to avoid harm. We are honest, open, empathetic and compassionate. We ensure quality and safety above all else by providing the best care at all times.
- **We seek to improve our care:** We care for those with the greatest health need first, making the most effective use of all skills and resources and constantly seeking to fit the care and services we provide to users' needs. We integrate improvement into everyday working, by being open to change in all that we do, which also reduces harm and waste.
- **We focus on wellbeing and prevention:** We strive to improve health and remove inequities by working together with the people of Wales so as to ensure their wellbeing now and in future years and generations.
- **We reflect on our experiences and learn:** We invest in our learning and development. We make decisions that benefit patients and users of our services by appropriate use of the tools, systems and environments which enable us to work competently, safely and effectively. We actively innovate, adapt and reduce inappropriate variation whilst being mindful of the appropriate evidence base to guide us.
- **We work in partnership and as a team:** We work with individuals including patients, colleagues, and other organisations; taking pride in all that we do, valuing and respecting each other, being honest and open and listening to the contribution of others. We aim to resolve disagreements effectively and promptly and we have a zero tolerance of bullying or victimisation of any patient, service user or member of employees.
- **We value all who work for the NHS:** We support all our colleagues in doing the jobs they have agreed to do. We will regularly ask about what they need to do their work better and seek to provide the facilities they need to excel in the care they give. We will listen to our colleagues and act on their feedback and concerns.

They have been developed to help and support employees working in NHS Wales.

NHS Wales is about people, working with people, to care for people. These Core Principles describe how we can work together to make sure that what we do and how we do it is underpinned by a strong common sense of purpose which we all share and understand.

The NHS is continually under pressure to deliver more services, with better outcomes and maintain and increase quality against the backdrop of significant financial challenge, high levels of public expectation and with a population which is getting older and with increased levels of chronic conditions.

These principles have been developed to help address some of the pressures felt by employees in responding to these demands. They will re-balance the way we work together so we are less reliant on process and are supported to do the right thing by being guided by these principles when applying policies and procedures to the workforce.

As people working within the health service, we will all use them to support us to carry out our work with continued dedicated commitment to those using our services, during times of constant change.

The Principles are part of an ongoing commitment to strengthen the national and local values and behaviour frameworks already established across Health Boards and Trusts.

They have been developed in partnership with representatives from employers and staff side.

The Principles will be used to create a simpler and consistent approach when it comes to managing workplace employment issues.

## 2. Policy Aims, Summary and The Appraisal Process

### Policy Aims

- **2.1** This policy applies to all members of staff on NHS Terms and Conditions of Service and has been developed in line with Annex 23 of the NHS Terms and Conditions Handbook and must be used in conjunction with local PADR and KSF policies and with the PADR/ Appraisal principles.
- **2.2** This policy sets out the reasons for pay progression and the procedure to be followed to deal with the pay step process. It clarifies the performance ratings to be used and includes a description of each rating.

The policy also covers issues arising relating to pay step progression and deferment and the process for handling any disagreement and it aims to ensure consistency of approach and application.

- **2.3** The aim of the pay progression approach is to improve performance and productivity as well as support the implementation of change by helping staff to understand more clearly what is expected of them in terms of behaviours and new ways of working. The aim is to provide a framework that seeks to get value for money by linking pay progression with performance rather than time served in a role.
- **2.4** The Pay Progression Policy needs to work closely with the Appraisal Process and therefore sets out some best practice principles for appraisal that all organisations should embed in their local processes.

These principles are:

- We will agree and understand what's expected of us in terms of what we should be doing and how we should be doing it
- We will all receive constructive and timely feedback on how we have done
- We will all ensure that we actively seek to develop and improve what we are doing for the benefit of patients
- **2.5** The Pay Progression Policy together with local Appraisal Policies will encourage and reward all staff to give their best contribution whatever their job is and to ensure that when pay steps are awarded they are a reward for performance not because of time in employment.
- **2.6** The Chief Executive of NHS Wales will ensure that the policy is implemented fairly.



- **2.7** This policy will be subject to a full review in April 2021 when a full year of data on pay progression will be available. This review will include an impact assessment of the number of first and final written disciplinary warnings against the protected characteristics outlined in the Equality Act.

### 3. Pay Progression summary

- **3.1** To help us give the best possible care and services, whatever our role, it is important that we understand what is expected of us, how our contribution helps the organisation achieve its aims and that we are rewarded for doing the right things well and not because of another year in post. Therefore, pay steps will only be given after we've achieved what's expected of us in 3 areas:

*Doing the right things, Doing them the right way, Doing things better.*

- **3.2** The reason for introducing pay progression linked to performance is to help improve your performance and productivity and that of the organisation. It will better support the implementation of change by helping you and your manager agree what is expected of you in terms of your behaviours and new ways of working. It is important to understand that this has been introduced to increase value for money and to promote fairness by linking pay progression with performance rather than basing incremental progression simply on time served in the role.
- **3.3** Alongside this rationale, Annex 23 of the NHS Terms and Conditions of Service sets out five specific pay progression standards which set out requirements which need to be demonstrated before you are able to progress to your next pay step point

on your pay step date.

These standards are:

- i. The appraisal process has been completed within the last 12 months and outcomes are in line with the organisation's standards.
  - ii. There is no formal capability process in place.
  - iii. There is no formal disciplinary sanction live on your record (this policy expands on the specific application of this provision in paragraph 5.4.4).
  - iv. Statutory and/or mandatory training has been completed.
  - v. For line managers only – appraisals have been completed for all your staff as required.
- **3.4** Your pay step submissions will only take place after two, three or five years depending on your pay band. Your appraisals will continue to take place annually.
  - **3.5** All pay bands will have either one or two step points with specified minimum periods before you become eligible to progress. Your pay step point is set in relation to your start date in that pay band. It is expected that if you meet the required standards at your pay step date you will progress to your next pay step point.
  - **3.6** Each year, you and your manager will review how well you have met your objectives, whether you have met the pay progression standards and agree whether your performance is satisfactory or unsatisfactory. In the year when a pay step is due your performance will need to be satisfactory for you to progress to the next pay step point.

If it is unsatisfactory then you will not receive your pay step and you will work with your manager to agree a plan to help you meet the requirements in order that you receive your pay step once the relevant requirements are shown to have been met.

you are at the top of the scale.

Importantly, there will be checks in place to make sure that if you have not been able to meet what was expected of you, through no fault of your own, then you should receive the next pay step.

- **3.7** Pay progression works in parallel with appraisal however they remain as two separate processes. The flow diagram overleaf shows how the two work together.

## 4. The Appraisal Process

- **4.1** This Pay Progression Policy does not replace or change Appraisal policies but does set out three principles that will be embedded into local appraisal processes. They are:
  - *We will agree and understand what's expected of us in terms of what we should be doing and how we should be doing it*
  - *We will all receive constructive and timely feedback on how we have done*
  - *We will all ensure that we actively seek to develop and improve what we are doing for the benefit of patients*
- **4.2** The details of best practice appraisal techniques which will support performance linked pay progression are included in appendix 2 and should be embedded in your local appraisal processes.
- **4.3** Your appraisals should continue to take place on an annual basis at the very least, regardless of whether it is a year which includes a pay step date, or



# 02

## The Pay Progression Process

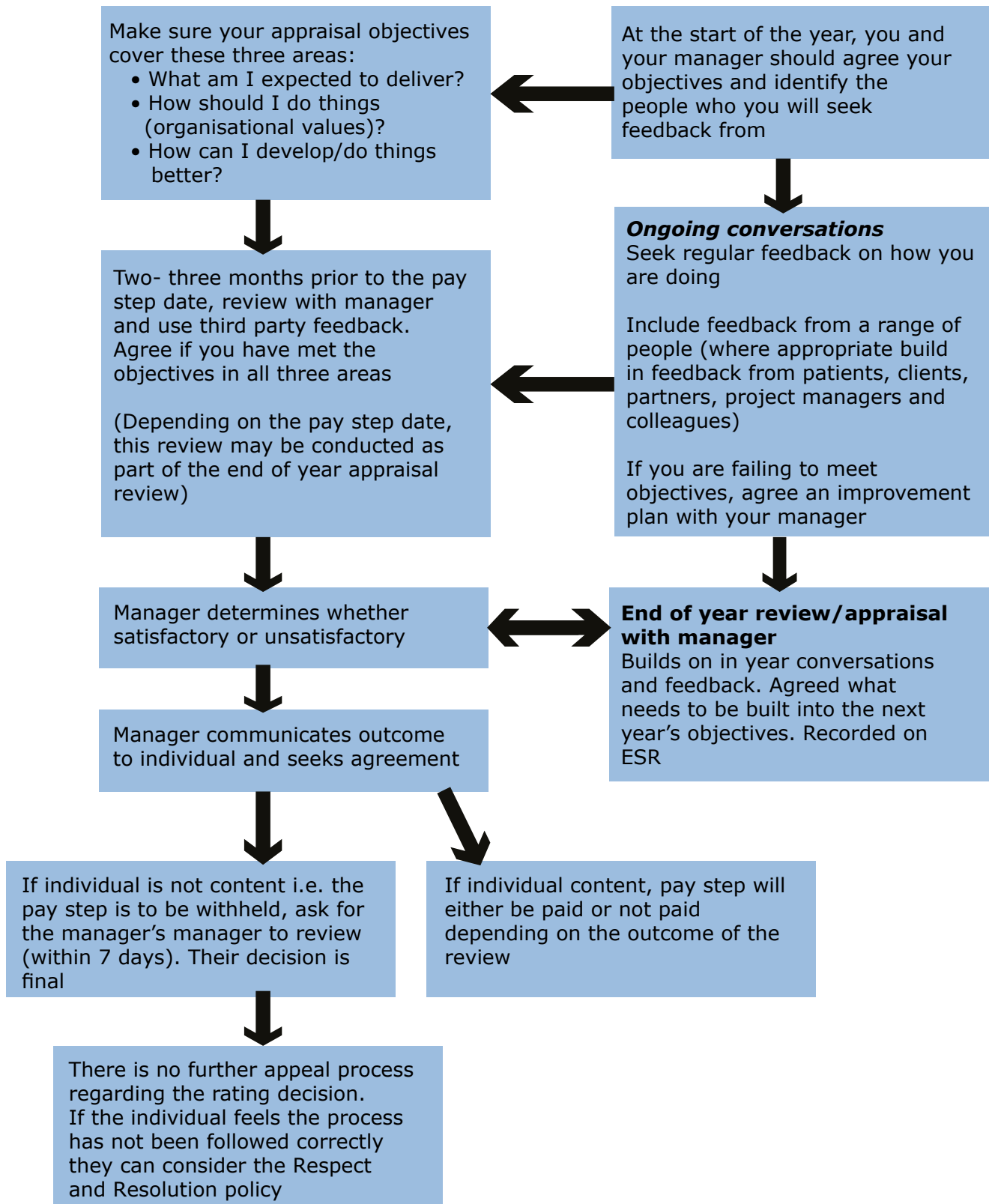


# 2

## The Pay Progression Process

### Pay Progression Process

### Appraisal Process





## 5. Who does what and when?

### 5.1 Agreeing Objectives

As part of the annual appraisal process, you and your manager will agree a set of objectives which cover:

- what you need to do i.e. the things you need to deliver;
- how you need to do things, i.e. your behaviours, and the way you demonstrate the values;
- ways in which you can seek to develop and improve what you are doing.

You should play an active role in setting the objectives and checking that you understand what your manager expects of you as the extent to which you meet these objectives will determine whether or not you receive your pay step when it is due.

### 5.2 Feedback

Both you and your manager should actively seek feedback and information from different people (e.g. patients, colleagues, partners), any relevant results/data, project/improvement work you have been involved in. This feedback will help you and your manager prepare for your pay progression review and support the rating you are given.

### 5.3 Pay Step Review

You should have a review 8-12 weeks before your pay step is due which will be arranged by your manager. Both you and your manager should prepare in advance. At the meeting you should discuss examples of how you have met your objectives, where appropriate using feedback from other people. Depending on your pay step date, this meeting may also be your end of year appraisal/PADR review. It is good practice to have regular conversations and feedback through out the year so there should be no surprises.

If you have been struggling to meet your objectives, this should have been discussed earlier in the year and an improvement plan agreed.

### 5.4 Agreeing the rating

- **5.4.1** At the end of your pay step review, your manager will tell you your rating i.e. whether you are satisfactory or unsatisfactory and their reasons for the decision. If you both agree the rating, your manager will inform the W&OD department and payroll and undertake the necessary steps in relation to ESR. If the rating is satisfactory your pay step uplift will be paid, if the rating is unsatisfactory you will not receive the pay step.

#### Satisfactory

Has successfully met core objectives and demonstrated satisfactory progress in achieving other objectives and met the national pay progression principles set out overleaf

#### Unsatisfactory

Has been unsuccessful in meeting core objectives and/or has not demonstrated satisfactory progress in achieving other objectives and/or has not met the national pay progression principles set out overleaf

Individual organisations will need to determine what will constitute a satisfactory or unsatisfactory performance on a departmental, team or individual basis. It will depend on the type and nature of the role but should be based on clear, reasonable, agreed objectives.





Managers should agree a core set of achievable objectives on which pay progression is assessed but also include furthermore ambitious objectives as part of a wider performance review process. It must, however, be made clear what level of performance would amount to satisfactory and therefore what would be an unsatisfactory level of performance.

- **5.4.2** In addition to achieving objectives the following national pay progression standards will also need to be demonstrated:

- i. The appraisal process has been completed within the last 12 months and outcomes are in line with the organisation's standards.
- ii. There is no formal capability process in place.
- iii. There is no formal disciplinary sanction live on the staff member's record (the specific application of this provision is set out in paragraph 5.4.4).
- iv. Statutory and/or mandatory training has been completed.
- v. For line managers only – appraisals have been completed for all their staff as required.

- **5.4.3** It is expected that you will achieve the required standards at the point of your pay step date. It is also expected that you and your line manager should have had regular discussions about any problems in reaching the required standards before the pay step date. This will allow time for issues to be raised and possible solutions found to enable the pay step point to be opened on time.

- **5.4.4** Your manager must use the pay step review meeting to discuss the standards. If any of the standards have not been met, there should be a review of the previous discussions about these to consider any mitigating factors and to record the decision.

With regard to live disciplinary sanctions, if you are in receipt of a first written warning, your progression won't be delayed because of the warning. Your manager will however, consider the reasons and circumstances giving rise to the sanction, as well as your performance and behaviour since the sanction was applied. This will form part of the information which your manager will use in determining a pay progression rating. If following due consideration your manager determines that you should receive a satisfactory rating, then you will progress to the next pay step. If you receive an unsatisfactory rating your pay step will be delayed. The decision will be clearly recorded, noting the rationale for withholding the pay step. A final warning will always result in a pay step delay.

- **5.4.5** Importantly, if you have not been able to meet what was expected of you, through no fault of your own, then you should receive the pay step.

- **5.4.6** Pay step points will be closed on the payroll system. Once the pay step review has been successfully completed your manager must take the necessary action to open the pay step point.

- **5.4.7** Managers must ensure that the pay step submission process is completed in a timely fashion to ensure that pay step points can be implemented in time for the staff member's pay step date. This must take account of local payroll timescales and ESR requirements.

- **5.4.8** Although you must have successfully completed your last appraisal to move to your next pay step point, the date the appraisal takes place does not have to be linked to your pay step date. If your last appraisal outcome was not satisfactory but remedial actions have been successfully completed by the time of the pay step date you will be able to progress without delay if you meet the other standards.



## 5.5 Decisions to delay a pay step

- **5.5.1** In situations where standards have not been met and there are no mitigating factors sufficient to justify this, your pay step will be delayed. Your line manager will discuss and agree a plan with you for any remedial action needed to ensure that the required standards for pay progression are met, including a timescale, and how any training and support needs will be met. In such circumstances you must take all necessary steps to meet the requirements as soon as possible and your line manager must provide you with the necessary support.
- **5.5.2** A further pay step review meeting should be arranged at an agreed date to review progress and, where satisfactory, initiate the opening of the pay step. The effective date for progressing to the next pay step should be the earliest date that the relevant requirements are shown to have been met. The pay step date for future years will remain unchanged.
- **5.5.3** Where a pay step is delayed due to a live disciplinary sanction, or a formal capability process, your line manager should initiate a pay step review meeting before the expiry of the sanction or capability plan. This should be used to confirm that all other requirements have been met and to ensure that you progress to the next pay step, effective the day after the sanction expires. Any future pay step dates will remain unchanged.

## 5.6 Integrating outcomes into next year's appraisal

- **5.6.1** The pay step review should be part of your ongoing performance management discussions with your manager and will provide a useful source of feedback to take into account in the end of year appraisal review and future objective setting.

If you are rated satisfactory then you and your manager can discuss whether you require further development opportunities etc. If you are rated unsatisfactory you and your manager should agree a plan to help you improve and get your performance back on track. These objectives should be included and reviewed in your next appraisal.

- **5.6.2** If your manager identifies that you have been unable to meet your objectives through no fault of your own, then you and your manager will need to work together to reset your objectives or remove the barriers to their achievement

## 5.7 Dealing with disagreement

Very occasionally, you and your manager may disagree on how well you have met your objectives and therefore on the rating you are given. Wherever possible, you should try to resolve issues with your manager. If your manager rates you unsatisfactory and you feel that you have demonstrated satisfactory progress in achieving your objectives and you have met the national pay progression principles, and you can't resolve the reason for an unsatisfactory rating directly with your manager, then you can ask your manager's manager to review the decision.

This process will take place within the provisions of the Respect and Resolution Policy and should be undertaken within 14 calendar days of notification to your manager that you wish to.

The notification requirements for requesting a formal resolution within the Respect and Resolution policy should be used, setting out the grounds upon which you consider the rating should be reviewed. Your manager's manager will want to understand both you and your manager's points of view. She/he will then make a decision on the rating and will communicate their reasons to both you and your manager.



If you are unhappy with the process, have other concerns not linked directly to the result of your appraisal, or believe that you have been discriminated against in any way, then please raise a formal request for resolution in line with the Respect and Resolution policy. Your manager will then inform the W&OD department and payroll, and update ESR. If it is agreed that you should receive your pay step it will be backdated to the original pay step date.

## **5.8 Band 8c/d and 9 Roles**

We recognise that rewarding good performance with pay steps is a significant and positive change. We also recognise that senior leaders are in the main already expected to be setting and reviewing objectives in this way. They are also more likely to be used to asking for and receiving feedback from a number of people. Additionally, we know it's important for leaders to model the behaviours we want from others.

Therefore, for Band 8c, 8d and 9 roles, there are the following differences:

In the year after you have reached the top of bands 8c, 8d or 9, 5 per cent or 10 per cent of basic salary will become re-earnable. Where a satisfactory performance is agreed, your salary will be retained at the top of the band.

If your performance is deemed to be unsatisfactory, your salary may be reduced by 5 per cent or 10 per cent \* from the pay step date. You will be able to restore your salary to the top of the band at the end of the following year by meeting the required standards. You have the right to contest a decision to reduce your pay using the Dealing with Disagreement process outlined above.

\*the NHS Staff Council Executive has advised that there are plans to develop some criteria in relation to the application of the re-earnable 5% and 10% of salary and this section of the policy will include the appropriate details once these have been determined.



# 03

## Appendix 1: Legal issues

## Absence from Work When a Pay Step Is Due

If you are absent from work for reasons such as sickness or parental leave when a pay step is due, the principle of equal and fair treatment should be followed so that no detriment is suffered as a result.

In the case of planned long-term paid absence such as maternity, adoption and shared parental leave your pay step review can be conducted early if this is reasonable and practical, allowing the pay step to be applied on your pay step date in your absence.

If you are on long-term paid absence such as maternity, adoption and shared parental leave and a pay step review cannot be conducted prior to the pay step date, the pay step point should be automatically applied in your absence provided that there are no disciplinary sanctions or formal capability processes in place.

If there is a live disciplinary sanction in place at the point you go on leave, the pay step point should be applied in your absence if appropriate, effective from the day after the sanction expires.

If there was an active formal capability process underway at the point you go on leave, the pay step point can be delayed. The improvement process should be resumed immediately upon your return. On satisfactory completion, the period of absence should be set aside, and the pay step point backdated to an agreed date as if you had completed the improvement process without being absent.

Suspension from work on full pay is a neutral act. In order to ensure this is the case, your employer should ensure that your pay step point is applied from your pay step review date where you are suspended on that date, provided your performance was deemed satisfactory and you have met the national pay progression standards.

These standards are:

- i. The appraisal process has been completed within the last 12 months and outcomes are in line with the organisation's standards.
- ii. There is no formal capability process in place.
- iii. There is no formal disciplinary sanction live on your record (this policy expands on the specific application of this provision in paragraph 5.4.4.
- iv. Statutory and/or mandatory training has been completed.
- v. For line managers only – appraisals have been completed for all your staff as required.

If it is unsatisfactory then you will not receive your pay step and you will work with your manager to agree a plan to help you meet the requirements in order that you receive your pay step once the relevant requirements are shown to have been met.

Importantly, there will be checks in place to make sure that if you have not been able to meet what was expected of you, through no fault of your own, then you should receive the next pay step.

Sabbaticals/career breaks are by definition your choice, therefore if you choose to take a sabbatical/career break at any stage during your career your pay progression will be 'frozen' at the incremental point you have achieved at your last working day.

You, therefore, will return to work at the same incremental point you left on.

An assessment will need to be undertaken within a few weeks of returning to identify your training and development needs.

## **Equality Monitoring**

will monitor the application of the policy against the protected characteristics in line with the Equality Act 2010. This may be done a sample basis. A report will then be provided to the Board or appropriate sub committee on an annual basis.

## **Other Extenuating Circumstances**

recognises that there may be other extenuating circumstances that have not already been covered in this section. In cases where it is believed there are extenuating circumstances for not achieving the progression criteria, advice should be sought from your line manager and a relevant member of the W&OD department.

# 04

## **Appendix 2: Principles and Best Practice to be integrated in to Local Appraisal processes**



# 4

## Appendix 2: Principles and Best Practice to be integrated in to Local Appraisal processes

To help us give the best possible care and services, whatever our role, it is important that we understand what is expected of us and how our personal contribution helps our teams and the organisation achieve its aims.

Appraisal discussions should be ongoing and:

- Provide feedback on how we have done - feedback should be honest, constructive and timely and where possible we should seek feedback from a range of people we work with (e.g. colleagues, stakeholders, patients, project managers)
- Ensure each of us agree and understand what's expected of us and how we should be doing things i.e. what we need to deliver and the behaviours and ways of working that are expected of us
- Ensure that we develop ourselves to do things better and/or move to another role and have a plan of what learning we are going to do

Managers involved in reviewing, assessing, agreeing objectives and supporting personal development plans, must ensure that they are competent and confident to do this role. Learning and development teams can help support managers where this is needed.

### Agreeing Objectives

It is vital that we know what is expected of us. Importantly, we should agree our specific objectives so that we own them. Objective setting should always be a two-way conversation.

For objectives to be meaningful, they must be SMART: specific, measurable, realistic, time-based and achievable; they must particularly be "within our circle of control". You should not agree objectives on things you can do nothing about. Good objectives are ones where the outcomes are as a result of what we do and how we behave, i.e. they are things we can control.

### Agreeing Development Needs

As part of the review or setting of objectives, it is likely that you will have identified things and/or ways you can do better. These are likely to need us to spend time developing ourselves and you should agree the best way to do this with your manager. Often a formal training course may not be the only or the best solution and you should think about the time you need to spend on your development, not just the budget you may need.

### Keeping Records

Keeping accurate records is important and any records that you and your manager keep should be within the General Data Protection Regulations 2018 requirements. Managers must ensure that all details of appraisal meetings are recorded on ESR.



# 05

## **Appendix 3: EQUALITY IMPACT ASSESSMENT**

## 1. General

<b>Title of document</b>	Pay Progression Policy (non-medical staff)
<b>Purpose of document</b>	To set out the procedure to be followed for linking pay progression to performance, to describe the process for handling annual incremental reviews, addressing issues arising relating to incremental progression and deferment and to ensure consistency of approach and application. The document shows how pay progression and appraisal processes align and reiterated the need for all staff to have a clear understanding of their expected role and function and have the opportunity to receive feedback about their performance in order that they may develop to their maximum potential.
<b>Intended scope</b>	All non-medical and dental staff employed by NHS Wales.

## 2. Consultation

<b>Which groups/associations/bodies or individuals were consulted in the formulation of this document?</b>	NHS Wales Partnership Forum (including all unions recognised by NHS Wales); Strategic Pay Taskforce Implementation Group; NHS organisations; Line Managers.
<b>What was the impact of any feedback on the document?</b>	Amendments were made and a commitment given to a full review in April 2021 when a full year of data will be available. See paragraph 2.7.
<b>Who was involved in the approval of the final document?</b>	NHS Wales Partnership Forum & Strategic Pay Taskforce Implementation Group.
<b>Any other comments to record?</b>	

## 3. Equality Impact Assessment

<b>Does the document unfairly affect certain staff or groups of staff? If so, please state how this is justified.</b>	No.
<b>What measures are proposed to address any inequity?</b>	None
<b>Can the document be made available in alternative format or in translation?</b>	Yes, on request to Workforce & OD Directors.



4. Compliance Assessment

Does the document comply with relevant employment legislation? Please specify.	Yes.

5. Document assessed by:

Name	Pay Progression Partnership Review Group
Post Title/Position	
Date	June 2019

