

Medical and Dental Cover for Absent Colleagues	
Author (s)	Philip Wyre, HR Advisor
Corporate Lead	Leeds Community Healthcare NHS Trust
Document Version	Version 1
Date approved by Joint Negotiating Consultative Forum	May 2019
Date ratified by Remuneration Committee	May 2019
Date issued	1 June 2019
Review date	3 years from ratification date

Contents

- 1 Introduction..... 3
- 2 Definitions..... 3
- 3 Responsibilities 3
- 4 Consultant Medical and Dental Staff 4
 - 4.1 Short term cover (up to 72 hours) 4
 - 4.2 Long term cover (more than 72 hours)..... 4
 - 4.3 Consultant Covering SAS Grades..... 5
- 5 SAS Doctors..... 5
- 6 Salaried Primary Care Dentists (Covering Dental Officers, Senior Dental Officer and Specialists) 6
- 7 Doctors and Dentists in Training 6
- 8 Rest between shifts 7
- Appendices..... 10
 - Appendix 1 – Cover for Absent Colleagues Form – Short Term..... 10
 - Appendix 2 – Cover for Absent Colleagues Form – Long Term 12
 - Appendix 3 – Equality Analysis (EA) Relevance Screening Form 14

1 Introduction

This policy outlines the arrangements that exist within Leeds Community Healthcare NHS Trust when medical and dental Consultants are required to cover for absent colleagues of the same or lower grades.

The Trust is mindful of the impact of out of hours work on personal lives, the need to support a good work/life balance, and also of individual circumstances where it may prove more difficult for them to provide additional out of hours cover, and will take all relevant factors into account.

The aim will be to allow flexibility, and aim to reach local agreement with all involved in each rota, as far as this is possible whilst still ensuring patient safety

2 Definitions

2.1 Planned, long- term absence

This may include maternity and paternity leave, secondments, sabbaticals, call-up of military reservists or planned periods of prolonged sickness. In such circumstances, the medical manager should make prospective arrangements to cover the duties until the absent colleague is able to return to work.

2.2 Unplanned, short-term absence and emergency cover

It is recognised that there are also unexpected sickness and emergency domestic situations which arise from time to time. In such emergencies, a decision will be made as to the most appropriate way in which to provide cover in the short term.

3 Responsibilities

3.1 Management Responsibilities

- Ensure that the Trust's Job Planning for Consultants, SAS doctors, Salaried GPs, and Dentists Policy is followed, ensuring that reliance on additional clinical work is minimised.
- Ensure that annual leave and other planned absences are managed to minimise the potential for impact on the team and service.
- Consider the obligations the Trust has under The Working Time Regulations (1998) which are set out in the Trust's Working Time Regulations Policy.

3.2 Clinicians

- Participate fully in the job planning process by taking the opportunity of the job planning process to see that they are neither over nor under committed in delivering local or wider objectives of the NHS.
- Ensure that your working pattern and hours are such that these are not detrimental to your clinical practice.

4 Consultant Medical and Dental Staff

The expectations for Consultants to cover for absent colleagues are set out in the Terms and Conditions under schedule 2, point 3:

Consultants shall be expected in the normal run of their duties to deputise for absent consultant or associate specialist colleagues so far as is practicable, even if on occasions this would involve interchange of staff within the same employing organisation. This does not include deputising where an associate specialist colleague is on a rota with doctors in training...

Consultants should work with the service to ensure that any unforeseen absences are covered to allow service delivery to continue.

If it is not possible for a Consultant to temporarily rearrange their work there is a requirement to cover for an absent colleague, the below sections should be considered.

4.1 Short term cover (up to 72 hours)

If Consultant cover is required in the short term, suitable consultants within the service will be approached to provide cover. If the Consultant agrees to provide cover in the circumstances, then Time Off in Lieu (TOIL) would normally apply.

If, in exceptional circumstances TOIL would not be appropriate, then an hourly rate set out in the table below may apply.

Monday to Friday 07:00 to 19:00	Monday to Thursday 19:00 to 07:00	Friday 19:00 to Monday 07:00 <i>and</i> Bank Holidays Midnight to Midnight
£60.00 an hour	£75.00 an hour	£100.00 an hour

4.2 Long term cover (more than 72 hours)

The Service Manager and Consultant will jointly consider whether additional Programmed Activities are appropriate in the circumstances. The manager and Consultant will refer to the Job Planning Policy for guidance in these cases.

If an amendment to the Consultant Job Plan is not considered to be appropriate in a particular case and the Consultant agrees to provide cover in the circumstances, which are exceptional, then an hourly rate set out in the table below may apply.

Monday to Friday 07:00 to 19:00	Monday to Thursday 19:00 to 07:00	Friday 19:00 to Monday 07:00 <i>and</i> Bank Holidays Midnight to Midnight
£60.00 an hour	£75.00 an hour	£100.00 an hour

4.3 Consultant Covering SAS Grades

The trust will endeavour to secure alternative cover for Specialist Trainee gap initially from the absent doctor's colleagues internally, then the LCH CLaSS Medical Bank, or external locum agencies.

If alternative cover is unavailable, a consultant may be approached to voluntarily cover at the SAS grade.

A consultant acting down to cover Associate Specialist gap will be remunerated according to the consultant rates above.

5 SAS Doctors

The Associate Specialist and Specialty Doctors Terms and conditions state

Doctors will be expected to be flexible and to cooperate with reasonable requests to cover for their colleagues' absences where they are safe and competent and where it is practicable to do so. Where doctors undertake duties in accordance with this paragraph and such duties take place outside of their contracted hours they will receive either an equivalent off duty period or remuneration. Where this adversely impacts on the Job Plan and/or opportunities for individual doctors a temporary Job Plan will be agreed for the period of cover.

If it is not possible for a SAS Doctor to temporarily rearrange their work when there is a requirement to cover for an absent colleague, the below sections should be considered.

5.1 Cover for the same grade

If an Associate Specialist or Specialty (SAS) Doctor is providing cover for the same grade TOIL should be provided. Where TOIL isn't possible then **an hourly rate of £50.00 will apply at all times.**

5.2 Covering at consultant grade

When a consultant is absent for more than 14 days (except for annual leave or professional leave) and arrangements cannot be made for either for cover by other consultants or for a locum to be engaged, it may be appropriate for a suitably qualified SAS Doctor to provide cover.

The service must consider it practicable for the practitioner to take on the full range of duties and responsibilities of the absent consultant without supervision before considering acting up.

Acting up allowance will be paid were an SAS doctor undertakes the full range of duties and responsibilities without supervision, this payment will bring the doctor's pay to the rate he or she would receive on promotion to the consultant grade.

A Doctor shall not act up under the arrangements set out in the Schedule for a continuous period longer than 6 months.

6 Salaried Primary Care Dentists (Covering Dental Officers, Senior Dental Officer and Specialists)

6.1 Cover for the same grade

All dentists shall be expected in the normal run of their duties to deputise for absent colleagues as far as is practicable.

If Dental cover is required in the short term, and is provided in addition to current duties then Time Off in Lieu (TOIL) would normally apply. A dentist should not be required to cover either fully or partially, for an absent colleague in addition to his or her current duties for a continuous period of more than six weeks.

If, in exceptional circumstances when TOIL would not be possible then an hourly rate of **£50.00 will apply at all times.**

6.2 Covering at consultant grade

Where a dentist is required by the Trust to undertake the full duties and responsibilities of a colleague in a more senior band instead of his or her current duties, a temporary salary adjustment will be payable from the first day of acting up bringing the dentist's salary up to the rate they would receive in the more senior band.

A period of acting up will cease after two years. Any period of acting up in a post, broken by a gap of less than six months, shall be linked for the purpose of calculating the two years. If a dentist has completed a two-year period of acting up, they may not act up in the same post until a period of six months has elapsed.

7 Doctors and Dentists in Training

Prior discussion with the Deanery must take place before any request is made of Junior Medical Staff to provide longer term cover (more than 72 hours).

Employed Junior Doctors on rotation, with LCH, will have the option to consider undertaking additional "on-call" rotas in addition to their Work Schedule and to be remunerated for such work. In such circumstances Junior Doctors on both the 2016 Junior Doctors, or Dentists on Rotation Terms and Conditions of Employment, or the 2002 Medical and Dental terms and conditions will be remunerated at an **hourly rate of £30.00 at all times.**

Where a Junior Doctor on rotation employed by another NHS Trusts agrees to undertake an "on-call" rota with LCH to fill a rota gap this must be undertaken through the LCH CLaSS Medical Bank.

Junior Doctors may book accommodation locally in order to ensure they are available to undertake duties during the "on-call" rota if required to attend. Reimbursement for accommodation will be limited to £100 per night in these circumstances.

8 Rest between shifts

If a clinician undertakes additional work to cover an absent colleague, both the clinician and the Trust must consider their responsibility to ensure that the hours worked are not detrimental to safe clinical practice. It is not advisable to provide overnight cover and then go directly to a daytime shift for example, as it cannot be expected that you would be well enough slept to function at a safe level throughout both consecutive shifts, nor that this would be consistent with good personal health and wellbeing.

Statutory rest entitlements are set out in The Working Time Regulations (1998) and further guidance on these entitlements can be found in the Trust's Working Time Regulations Policy, or through the Human Resources team. The relevant entitlements to rest are:

- Uninterrupted rest of at least 11 hours between shifts
- 24 hours rest per 7 days
- A right to work no more than 48 hours per week (averaged over 17 weeks)

There are exceptions in relation to a shift worker when they change shift and cannot take a daily rest period between the end of one shift and the start of the next one. Instead compensatory rest must be given, at LCH this should be given within 2 weeks.

It is expected that both clinician and management work together to ensure that clinicians are giving enough rest between shifts to allow for safe provision of clinical care.

References

- LCH Working Time Regulations Policy
- LCH Medical and Dental Job Planning Policy
- Terms and Conditions – Consultants - England (2003) (Version 10, April 2018)
- Terms and conditions of service specialty doctors (2008) (Version 4, April 2018)
- Terms and conditions of service for associate specialists – England (2008) (Version 3, April 2018)

Appendices

Appendix 1 – Cover for Absent Colleagues Form – Short Term

Short Term Cover Arrangements Record Form

It is envisaged that time off in lieu (TOIL) in compensation for providing cover in these circumstances will normally apply. The arrangements for TOIL should be agreed at the same time as the cover arrangements are agreed.

Where remuneration is agreed, in place of TOIL due to the needs of the service, payment will be made for actual hours worked and payment will be made for resulting agreed administration time. Reference should be made to the additional remuneration rates (Appendix 1) in these circumstances.

Practitioner	
Service Manager	
Reason for Cover and anticipated number of hours. (note: must be less than 72 hours duration)	
Date/time cover provided	e.g. 25 th November 2018 – 2.00pm – 5.00pm
Time in Lieu	e.g. 5 th December 2018 – 9.00am – 12.00 noon

Signed (Practitioner) :

Signed (Service Manager) :

Date :

Appendix 2 – Cover for Absent Colleagues Form – Long Term

Long Term Cover Arrangements Record Form

Practitioner	
Service Manager	
Reason for cover and anticipated duration.	
Change to Job Plan Considered /Outcome.	
Additional payment – hourly rates Considered/Outcome	
Acting Up Considered/Outcome	
External Options Considered/Outcome	

Service managers should keep the arrangements under review with the practitioner.

Particular note should be taken of the term of the agreed arrangements and if additional Programmed Activities are agreed through Job Planning then the notice period required to amend the arrangements must be followed.

Rates of remuneration are to be found in Appendix 3.

Signed (Practitioner) :

Signed (Service Manager) :

Date :

Appendix 3 – Equality Analysis (EA) Relevance Screening Form

1. Name of the document	Medical and Dental Cover for Absent Colleagues			
2. What are the main aims and objectives of the document				
3. Is this a key strategic document?	Yes		No	
			x	
4. What impact will this document have on the public or staff?	High	Medium	Low	Don't know
			x	
Explain:				
5. Is there any evidence, or reasons that different groups have different needs, experiences, issues and priorities in respect of this particular document?	Yes		No	
			x	
Explain:				

If you have answered **Yes** to question 3, you should move straight onto EA.

If, for question 4 you have answered **Low**, there is no need to continue to conduct an EA.

If for question 4 you have answered **Medium** and **No** for question 5, there is no need to conduct an EA.

If, for question 4 you have answered **Medium** or **Don't Know**, and have answered **Yes** or **Don't Know** for question 5 you should move on to a **Stage One** EA.

If, for question 4 you have answered **High**, you need to conduct an EA.

	Equality Analysis	None
6. Based on the result of the screening, is an EA required?		x

Completed by Philip Wyre, HR Advisor – Corporate.

More EA information is available on the Equality and Diversity pages of the Inet.

Responder (including titles and organisation)	Version, Comment and Date	Response from Author