

Organisational Change Policy

| Issue Date | Review Date | Version |
|--------------|------------------------|---------|
| January 2013 | Extended to March 2022 | 2.4 |

Purpose

The purpose of this policy is to provide an effective approach to managing organisational change, to explain the procedures for consultation and communication, and in cases of redundancy, the procedure to be followed.

Who should read this document?

This Policy applies to all employees of University Hospitals Plymouth NHS Trust .

Key Messages

Communication and a clear understanding of the required process is key in managing organisational change. Managers of change should ensure they understand and follow the guidance and processes set out within this policy.

Core accountabilities

| | |
|--|---------------------|
| Owner | HR Business Partner |
| Review | JSNC |
| Ratification | Director of People |
| Dissemination (Raising Awareness) | HR Business Partner |
| Compliance | HR Business Partner |

Links to other policies and procedures

Redeployment Policy.

Version History

| | | |
|------------|---------------|---|
| 1 | March 2006 | Policy created |
| 2 | January 2013 | Full review and new policy template |
| 2.1 | November 2018 | Extended to April 2019 by HR SMT |
| 2.2 | August 2019 | Extended to February 2020 by Richard Maguire & Lisa White |
| 2.3 | June 2020 | Extended to May 2021 by Lisa White |
| 2.4 | August 2021 | Extension Granted to March 2022 |

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to)

age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

**An electronic version of this document is available on Trust Documents.
Larger text, Braille and Audio versions can be made available upon
request.**

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1 Introduction

Most planned organisational change is triggered by the need to respond to new challenges or opportunities in the external environment. University Hospitals Plymouth NHS Trust (the Trust) faces changes in response to the challenges facing the NHS, including Quality, Innovation, Productivity and Prevention (QIPP), service transformation, improvements in patient safety and NHS financial constraints.

Whatever the reason driving the change and whatever the nature of the change it is clear that staff are central to its achievement and success.

Most change involves new working practices or changes to contractual terms. Some change entails uncertainty about future employment prospects. The Trust seeks to ensure that staff understand the reasons for, and are committed to, the change. It aims to maintain stability of employment where this is consistent with efficient provision of services and to act fairly and reasonably with staff whose jobs are affected by such changes.

Communication is key in managing organisational change. Open, honest, and transparent communication will take place between all parties i.e. the Joint Staff Negotiating Committee (JSNC), management and affected staff. Information about proposed change, its implications and potential benefits will be communicated and consulted upon by the relevant manager. Staff affected are encouraged to contribute their own ideas and suggestions and to voice any concerns with their manager. At all stages of the process, members of staff will be able to seek the advice and support from their professional or trade union representatives.

2 Purpose, including legal or regulatory background

This document outlines how the change should be managed, explaining the procedures for consultation and communication, and making sure appropriate support and advice is given to staff.

This policy is designed:

- to provide an effective approach to managing organisational change;
- to outline and explain the procedures for consultation and communication;
- in the case of redundancy, to outline the procedure to be followed.

This policy complies with relevant employment legislation including the Trade Union and Labour Relations (Consolidation) Act 1992, the Employment Rights Act 1996, the Information and Consultation of Employees Regulations 2004, The Information and Consultation of Employees Regulations 2004, and the Equality Act 2010, and other relevant legislation). The application of this policy must also comply with the requirements of the Equality Act 2010, and NHS terms and conditions of employment

3.1 Reorganisation

Re-organisation or Organisational Change means any significant change that could potentially impact on staff terms and conditions, examples include where the Trust examines its structures with a view to:

- rationalise service provisions;
- re-organisation of the staffing structure of a department;
- closure of wards / departments;
- skill mix reviews;
- relocation of services.

The aim of any such change must be to ensure that services are as efficient as possible in order to meet service demand.

3.2 Redundancy

As defined within the Employment Rights Act 1996, an employee is dismissed by reason of redundancy if the dismissal is wholly or mainly attributable to a position whereby:

- the employer has ceased, or intends to cease, to carry on the business for the purposes of which the employee was so employed; or
- the employer has ceased, or intends to cease, to carry on the business in the place where the employee was so employed; or
- the requirements of the business for employees to carry out work of a particular kind has ceased or diminished or are expected to cease or diminish or;
- the requirements of the business for the employees to carry out work of a particular kind, in the place where they were so employed, has ceased or diminished or are expected to cease or diminish.

Redundancies can occur in a variety of ways:

- entire service or a particular workplace is closed down;
- a job is disestablished as there is no longer any need for the work to be performed;
- there is a reduction in the Trust's requirement for employees to do their work. This may arise from there being less work, or from the need to have fewer employees for the same amount of work, whether that is through redesigning of services or economic realities.

3.3 At Risk

This is defined as:

At Risk status:

Individuals will be considered at risk following a period of formal consultation, which identifies that an individual does not have a substantive post and/or their post is subject to firm proposals of being affected by organisational change.

Formally at Risk of Redundancy:

Individuals declared formally at risk of redundancy will be under contractual notice of termination of employment due to redundancy. Any individual with 'at risk' or 'formally at risk of redundancy' will be afforded preferential rights (for further details please refer to Redeployment Policy).

4 Responsibilities

Key Responsibilities:

The ultimate responsibility for the introduction and review of this policy sits with the Director of HR and Organisational Development.

It is the responsibility of the manager leading the change, working in partnership with HR to ensure that the guidance and requirements of this policy are applied in all cases of significant organisational change, and that the Trust follows best practice and employment legislation.

4.1 It is the responsibility of Management to:

- identify, communicate and consult with staff and union representatives over organisational change required and the reasons for it;
- work in partnership with HR to identify the workforce implications of the change, prior to commencing the change initiative;
- provide the necessary training and personal development support to staff affected to ensure they have the opportunity to acquire the range and level of skills needed by the organisation;
- be mindful of the impact change can have upon their team. Managers have a responsibility to support their teams and individuals during a period of change.

4.2 It is the responsibility of Human Resources to:

- act as a change agent and work in partnership with the manager leading the change in developing a consultation process by providing advice and support on issues related to the change;
- ensure timescales are agreed, communicated and achieved regarding the change;
- work in partnership with the manager leading the change to ensure the process is documented and communicated effectively to staff affected by the change;
- ensure that the process of consulting, supporting and implementing the change is fair, transparent and consistent for all staff affected in line with employment legislation and best practice.

4.3 It is the responsibility of Staff to:

- engage in constructive dialogue with management on the proposed change, potential developments and implementation;
- continue to undertake and perform their existing role throughout the process, ensuring service continuity is maintained;
- take a pro-active approach to minimise the impact on their own role by engaging in training and development in order to re-skill as appropriate;

- work flexibly with their manager to take full advantage of support and alternative opportunities that are available to them;
- contribute constructively to the functioning of their team, throughout the change process and in any new form.

4.4 It is the responsibility of **Trade Unions**, through staff side and JSNC to:

- represent the needs of their members;
- support the consultation and communication process;
- support their members through organisational change.

5 Principles

The Trust is committed to providing stability and security of employment for its entire workforce. However, that is not always possible for a variety of reasons. The Trust has a responsibility to its employees and patients to ensure all service changes are managed in a planned and sensitive manner. In times of organisational change, the Trust will attempt to redeploy staff and redundancies will be considered as a last resort. Compulsory redundancy will only be undertaken following full consultation with individuals and the appropriate representatives from recognised trade unions. The Trust is committed to maintaining and developing a workforce which has the necessary skills to provide a high quality and responsive service to our patients.

5.1 Values

It is inevitable that the potential for compulsory redundancies will bring uncertainty for the workforce and anxieties for individuals about their future. The key to addressing these issues and maintaining a constructive employee relations environment will be through clear demonstration of the following values:

5.1.1 Fairness and equity

All staff have the right to be treated fairly, with dignity and respect. The application of this policy will ensure that all staff have equal opportunities in employment throughout the Trust.

5.1.2 Consistency

Managing change in a consistent way is essential to employees not feeling disadvantaged. Working in partnership will play a key role and decisions with respect to selection criteria, procedures and timings will be taken with staff side colleagues. If redundancies are necessary we will ensure they are made in line with current employment law and best employment practice.

5.1.3 Transparency

The Trust will aim to share issues and problems early and in full. It will be open and transparent with regards to the changes needed and the scale of any workforce implications. The Trust is committed to sharing information and will consider the views from all employees and their representatives.

5.1.4 Partnership working

Engaging and working with employees and their representative is crucial when faced with organisational change that requires amendments to working practices, redesigning of

services and dealing with displaced employees and where necessary making redundancies. The Trust has developed good working relations with staff side and is committed to full and meaningful partnership working with staff side and staff engagement over change.

5.1.5 Protecting employment

The Trust aims to maintain stability of employment within the organisation that is consistent with its efficient and effective operation. Where there is a requirement to reduce the number of employees, the Trust will take steps to minimise the numbers affected in consultation with staff side colleagues.

6 Managing Organisational Change and Redundancy

6.1 Consultation Process

6.1.1 When it has become apparent that any organisational change or other developments will affect the terms and conditions of the workforce, then the employees concerned and their representatives must be consulted. This consultation must begin at the earliest opportunity. In more significant cases of change and in cases of redundancy, the Organisational Change proposal template at Appendix 1, including an assessment of any risks, will be used and completed by the manager with support from an HR representative for consultation with the JSNC.

Redundancy Consultation

6.1.2 In cases of redundancy, consultation must begin in good time, and there is a statutory duty to begin consultation:

- at least 30 days before the first dismissal takes effect if 20 to 99 employees are to be made redundant at the Trust over a period of 90 days or less;
- at least 90 days before the first dismissal takes effect if 100 or more employees are to be made redundant at the Trust over a period of 90 days or less. (This will change from 90 to 45 days with effect from the 6 April 2013, under changes proposed by the UK Government).

The Trust has a statutory duty to disclose in writing to staff and recognised trade unions certain information concerning proposals for redundancies, so that they can play a constructive part in the consultation process. All affected employees must be consulted with.

6.1.3 The Information and Consultation of Employees Regulation 2004 (ICER) introduced procedures requiring employers to inform and consult with their employees in all undertakings.

The Trust will provide, as formal consultation commences, in writing to staff and recognised Trade Unions information relating to:

- the reason for the proposals;
- the numbers and descriptions of employees affected;
- the total number of employees in the description concerned;
- the proposed method for carrying out redundancies and the timescale;

- the proposed method of calculating redundancy payments.

6.1.4 Consultation is the process where management and employees and/or staff representatives jointly examine and discuss issues of mutual concern. Consultation does not remove the right of managers to manage, they must still make the final decision, but it does impose an obligation that the view of the employees and their representatives will be sought and considered before decisions are taken.

6.1.5 The Trust will carefully consider representations made by employees and appropriate recognised trade union before coming to a decision on proposed redundancies.

The consultation must also include considering ways of:

- avoiding the dismissals;
- reducing the number of employees to be dismissed;
- mitigating the effects of the dismissals.

Following a period of consultation the Trust will confirm to staff and their representatives to detail:

- the way in which employees will be selected for redundancy;
- how the dismissals are to be carried out, including the period over which the dismissals are to take effect;
- the method for calculating the amount of redundancy payments to be made to those who are dismissed.

6.1.6 The approach to consultation will depend on the type of change and the number of staff and locations involved. However, following best practice, employees must be invited to a meeting with their line manager to discuss the proposed change and the implication for them and their continued employment with the Trust.

6.1.7 The consultation process will be undertaken with a view to reaching agreement. It is anticipated that both Management and staff representatives will have exhausted all reasonable possibilities of reaching a compromise on the proposals before implementing any redundancies. The prime consideration will be consistency and operational efficiency, whilst taking account wherever possible of the views of staff affected by the changes.

6.1.8 Consultation will be carried out with the relevant staff and their representatives for the affected group. Staff side representatives will be consulted on the timetable and progress should be made in a realistic and timely manner.

6.2 Competitive Selection

6.2.1 There will be certain situations where there will be a larger number of employees than posts available, where that situation occurs the following provides a framework to be followed.

6.2.2 Following consultation, where existing post(s) is/are eliminated from the structure the following steps will be taken:

- the proposed organisational structure chart and rationale for change will be given to the affected staff and their representatives;

- the individual(s) in the post(s) affected will be consulted and supported, with trade union representation where appropriate and given time to consider the options or make alternative suggestions. The identified individual(s) will be considered 'at risk' from that time;
- the individual(s) in the post(s) affected will be met with and placed on the redeployment register or if appropriate given redundancy or early retirement estimates.

6.2.3 Where slightly different roles and fewer jobs are required the following steps will be taken:

- the organisational structure chart will be given to the affected staff and trade unions with rationale and outline responsibilities;
- the staff affected by the revised structure will meet with management, and staff representatives where appropriate and will be declared 'at risk'. Staff will be given an explanation and time to consider the structure and make comments and suggestions for avoiding redundancies;
- the affected staff will be asked to provide a written 'expression of interest' in one or more of the remaining posts;
- if more than one member of staff expresses an interest in any post and meets the essential criteria required then competitive selection will take place. This will involve a formal interview with the manager and an HR representative;
- if any of the remaining posts are more than 80% of an existing role then consideration will be given to current staff and whether they can be 'slotted' into the new structure.

6.2.4 In line with ACAS guidelines, managers may consider:

- skills and experience;
- standard of work performance or aptitude for work;
- attendance and / or disciplinary record.

6.2.5 Any member of staff who is unsuccessful in this selection process will be provided with support and placed onto the redeployment register or, if appropriate, given redundancy or early retirement estimates.

6.3 Redundancy Criteria

6.3.1 Essentially there are two redundancy situations. The first is where there is a specific decline in the need for the workforce in certain functions or areas. The second is where there is a general need to reduce the workforce as a whole.

6.3.2 The question of who to select for redundancy is one which employers must consult with employees' representatives. It is important that the selection process is clear before consultation begins.

6.3.3 The selection criteria must be clear, objective and precisely defined. The pool for selection and the selection criteria should be clear and understood by managers, employees and employee representatives.

6.3.4 Any selection criteria, as set out below, must be applied in a reasonable, fair and objective manner and should not discriminate against staff on any grounds, in particular

that of age, sex, race, religion and belief, disability, sexual orientation or part-time/fixed term status (this list is indicative). Consideration must also be given to re-appropriation of work or duties and the affect on the remaining workforce.

Thought must also be given to the maximum weightings which should be applied to each criterion. It is not possible to predefine the criteria for selection, but the following provides some guidance, which will be consulted on, as outlined above. The selection criteria might include:

- attendance record – the period of assessment should be reasonable and absences related to a disability or pregnancy/maternity/paternity must be treated with caution;
- skills/qualifications;
- performance/capability – provided that the assessment of performance itself is objective, and ‘performance criteria’ is clearly defined from the outset. Evidence might be obtained through the appraisal process or other objective external assessment;
- disciplinary record – records must be compared over a reasonable period of time to ensure they are representative;
- Length of service – may be used as one of a range of possible criteria, and not to be used as the sole criteria to avoid possible discrimination on the basis of age or sex.

6.3.5 It will be the responsibility for managers to draft the criteria for redundancy after taking advice from an HR Business Partner, and then to consult, as outlined above. When dealing with redundancies it is very important that all staff are consulted including those absent due to sickness or maternity.

6.4 Types of Redundancies

6.4.1 Volunteers for Redundancy

Volunteers for redundancy may be sought in the first instance. When seeking volunteers, it is important to avoid losing the services of those whom it would be in the interests of the organisation to retain. This could be achieved by making it clear from the outset, that there is no guarantee that an application will be accepted, and that management reserves the right to decide whether any particular employee should be selected. Consideration should include the impact on service delivery/continuity and how this might be managed, and whether any associated redundancy and pension costs can be recovered within an acceptable period. When considering any application it is also important to take account of any one-off or ongoing costs.

6.4.2 Compulsory Redundancy

In certain circumstances redundancies will need to be made on a compulsory basis and consideration will need to be given as to the criteria to be appropriately used, with reasonable objectivity when selecting those to be dismissed (please see above at 6.3).

6.4.3 Early retirement on the grounds of redundancy

Qualification Criteria

Members of NHS pension scheme who are made redundant and meet required conditions may choose to retire early without reduction in the value of pension benefits as an alternative to receiving the full lump sum benefit. To qualify for early retirement the member of staff must:

- be a member of the NHS pension scheme;
- have at least two years continuous service and two years qualifying membership;
- have reached the minimum pension age.

Staff should take advice from the NHS Pensions Agency before making any decision that may affect their pension.

6.5 Support available for staff affected by change

6.5.1 Members of staff as individuals or a group are advised to seek the support and advice of their union or professional organisation representatives when change is proposed.

6.5.2 An individual will be practically supported by the Trust and the manager leading the change as much as possible, including access to Staff Health and Wellbeing support, support in the application and assessment process and support when seeking suitable alternative employment.

6.6 Redundancy Payments

Redundancy payments will be calculated using the formula in the national Agenda for Change Terms and Conditions of Service Handbook.

Before payment is made the employee will certify that:

- they have not obtained, been offered, or unreasonably refused to apply for or accept suitable alternative NHS service employment within 4 weeks of the termination date;
- they understand that payment is made only on this condition and undertake to refund it if this condition is not satisfied.

Employees shall not be entitled to redundancy payments or early retirement on grounds of redundancy if:

- they are dismissed for reasons of misconduct, with or without notice;
- they commence employment with the Trust or another NHS employer, within 4 weeks of the date of termination;
- they unreasonably refuse to accept or apply for suitable alternative employment with the same or another NHS employer;
- they leave their employment before expiry of notice except if they are being released early by agreement;

- they are offered a renewal of contract (with the substitution of the new employer for the previous NHS one);
- where their employment is transferred to another public service employer who is not an NHS employer.

6.7 Appeals against selection for compulsory redundancy

An employee selected for redundancy will be entitled to appeal against the decision using the Trust's Appeal Procedure (available on the Trust Document Drive or from HR).

Any appeal must be put in writing setting out the grounds of appeal. The appeal must be submitted to the Director of HR and OD within 10 working days of receipt of a formal notification that he/she has been selected for redundancy. Please refer to the Appeals Procedure for further detail.

7 Overall Responsibility for the document

The Director of HR and OD has overall responsibility for this document.

8 Consultation and ratification

The Director of HR and OD, in conjunction with the JSNC Policy Group is responsible for consulting on this document. The Director of HR and OD has overall responsibility for the dissemination, implementation and review of this policy, following ratification of the policy by the HR&OD Committee.

9 Dissemination and Implementation

Following approval and ratification by the HR&OD Committee, this policy is being implemented across the Trust.

Publication of this policy will be publicised in the IG Staffnet Page, the Trust's weekly staff news briefing and it will be available electronically on the Trust Document Network Share Folder.

10 Monitoring compliance and effectiveness

Monitoring of the policy and procedure will be undertaken by the Deputy Director of Human Resources. This Policy will be reviewed regularly by the HR Directorate, management and staff side through the JSNC.

The standards and Key Performance Indicators identified with the implementation of this policy are the National Health Service Litigation Authority (NHSLA) and Standards as determined by the Care Quality Commission.

The Trust will undertake an annual review of this policy. It should be noted that the responsibilities in this policy are legally enforceable and that managers (and employees where applicable) failing to uphold their responsibilities may find themselves in breach of internal disciplinary policies and legislation.

Information for equality monitoring will be recorded as required to ensure equality regulations are met in respect of any formal process commenced under this policy.

11 References and associated documentation

Redeployment Policy.
Agenda for Change Handbook.

| Dissemination Plan | | | |
|--------------------------------------|--|--------------------------------------|-----------------------------|
| Document Title | Organisational Change and Redundancy Policy | | |
| Date Finalised | January 2013 | | |
| Previous Documents | | | |
| Action to retrieve old copies | Still current, will be replaced by this one. | | |
| Dissemination Plan | | | |
| Recipient(s) | When | How | Responsibility |
| All Trust staff | | Information Governance StaffNet Page | Information Governance Team |
| | | | |

| Review Checklist | | |
|--|--|-----|
| Title | Is the title clear and unambiguous? | Yes |
| | Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP? | Yes |
| | Does the style & format comply? | Yes |
| Rationale | Are reasons for development of the document stated? | Yes |
| Development Process | Is the method described in brief? | Yes |
| | Are people involved in the development identified? | Yes |
| | Has a reasonable attempt has been made to ensure relevant expertise has been used? | Yes |
| | Is there evidence of consultation with stakeholders and users? | Yes |
| Content | Is the objective of the document clear? | Yes |
| | Is the target population clear and unambiguous? | Yes |
| | Are the intended outcomes described? | Yes |
| | Are the statements clear and unambiguous? | Yes |
| Evidence Base | Is the type of evidence to support the document identified explicitly? | Yes |
| | Are key references cited and in full? | Yes |
| | Are supporting documents referenced? | Yes |
| Approval | Does the document identify which committee/group will review it? | Yes |
| | If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document? | Yes |
| | Does the document identify which Executive Director will ratify it? | Yes |
| Dissemination & Implementation | Is there an outline/plan to identify how this will be done? | Yes |
| | Does the plan include the necessary training/support to ensure compliance? | Yes |
| Document Control | Does the document identify where it will be held? | Yes |
| | Have archiving arrangements for superseded documents been addressed? | Yes |
| Monitoring Compliance & Effectiveness | Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document? | Yes |
| | Is there a plan to review or audit compliance with the document? | Yes |
| Review Date | Is the review date identified? | Yes |

| | | |
|-------------------------------|---|-----|
| | Is the frequency of review identified? If so is it acceptable? | Yes |
| Overall Responsibility | Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document? | |

Core Information

| | |
|--|--|
| Date | January 2013 |
| Title | Organisational Change Policy |
| What are the aims, objectives & projected outcomes? | <p>This policy is designed to:</p> <ul style="list-style-type: none"> • provide an effective approach to managing organisational change; • outline and explain the procedures for consultation and communication; • in the case of redundancy, to outline the procedure to be followed; • comply with relevant employment legislation. |

Scope of the assessment

Data analysed over a 12 month period of individuals were involved in an organisational change process

Collecting data

| | | | | |
|-------------|---|--------|-------|-------------|
| Race | There is no evidence to suggest there is a disproportionate impact on race. | | | |
| | 91% of individuals involved in organisational change were White which is broadly in line with the workforce. A slightly higher proportion of white individuals involved in organisation change is due to the change processes involving mainly non clinical administrative areas which has less BME individuals than other staff groups such as Medical and Dental. Workforce data will be reviewed to identify any potential impact. | | | |
| | Ethnicity | White | BME | Undisclosed |
| | % | 88.11% | 6.29% | 5.60% |

| | | | | | | | | | | | |
|-----------------|---|---------|----------|--------------|----------|-------|---------|---------|---------|-------|------------|
| Religion | There is no evidence to suggest there is a disproportionate impact on religion. | | | | | | | | | | |
| | 44% of individuals involved in organisational change were Christian and 35% did not disclose their religion. This is in line with the workforce statistics and there was no evidence to suggest any particular group suffered a disproportionate impact. Data will be monitored to identify any potential impact. | | | | | | | | | | |
| | Religion | Atheism | Buddhism | Christianity | Hinduism | Islam | Jainism | Judaism | Sikhism | Other | Undeclared |
| | % | 9.3 | 0.6 | 47.8 | 0.9 | 0.9 | 0 | 0 | 0 | 6.2 | 34.2 |

| | | | | | |
|-------------------|--|----------|--------------|------------|-----------|
| Disability | There is no evidence to suggest there is a disproportionate impact related to disability. | | | | |
| | 5% of individuals involved in organisational change disclosed a disability which is not significantly different from the overall workforce. This involved 2 individuals. Data will be reviewed to identify any potential impact. The process of organisational change is non discriminatory and focuses on service need. | | | | |
| | Disability | Disabled | Not Disabled | Undeclared | Undefined |
| | % | 3.1 | 72.5 | 23.5 | 0.9 |

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------------------------|--------------|---------|--------------|-----------|------------|-----------|----------|-------|-------|-------|-------|------|----------|-----|-----|------|------|------|------|------|------|------|-----|-----|-----|
| Sex | <p>There may be an impact on gender in relation to females. 85% of individuals involved in organisational change were female which is higher than the workforce statistics. The majority of changes programmes involved non clinical administrative functions which are predominately female. Workforce data will be reviewed to monitor any potential impact.</p> <table border="1" data-bbox="448 376 1417 450"> <tr> <td>Gender</td> <td>Male</td> <td>Female</td> </tr> <tr> <td>%</td> <td>26.2</td> <td>73.8</td> </tr> </table> | Gender | Male | Female | % | 26.2 | 73.8 | | | | | | | | | | | | | | | | | | | | |
| Gender | Male | Female | | | | | | | | | | | | | | | | | | | | | | | | | |
| % | 26.2 | 73.8 | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gender Identity | <p>There is no evidence to suggest there is a disproportionate impact on gender identity. Workforce data will be reviewed to identify any potential impact.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sexual Orientation | <p>There is no evidence to suggest there is a disproportionate impact on individuals within this group. 65% of individuals involved in a change process were heterosexual and the remaining 35% did not disclose their orientation. This is broadly in line with the workforce statistics and does not indicate a disproportionate impact. Workforce data will be reviewed to identify any potential impact</p> <table border="1" data-bbox="448 763 1417 1010"> <tr> <td>Sexual Orientation</td> <td>Bisexual</td> <td>Gay</td> <td>Heterosexual</td> <td>Lesbian</td> <td>Undeclared</td> <td>Undefined</td> </tr> <tr> <td>%</td> <td>0.3</td> <td>0.5</td> <td>68.8</td> <td>0.2</td> <td>30.2</td> <td>0.1</td> </tr> </table> | Sexual Orientation | Bisexual | Gay | Heterosexual | Lesbian | Undeclared | Undefined | % | 0.3 | 0.5 | 68.8 | 0.2 | 30.2 | 0.1 | | | | | | | | | | | | |
| Sexual Orientation | Bisexual | Gay | Heterosexual | Lesbian | Undeclared | Undefined | | | | | | | | | | | | | | | | | | | | | |
| % | 0.3 | 0.5 | 68.8 | 0.2 | 30.2 | 0.1 | | | | | | | | | | | | | | | | | | | | | |
| Age | <p>There may be an impact on age with a higher number of individuals over 50 who were involved in organisational change (50%). This is higher than the proportion of individuals across the organisation that are over 50 (30%). Organisational change processes have involved non clinical areas where individuals are more likely to be in a higher age bracket Workforce data will be reviewed to monitor any potential impact.</p> <table border="1" data-bbox="448 1240 1439 1435"> <tr> <td>Age Group</td> <td>Under 20</td> <td>20-24</td> <td>25-29</td> <td>30-34</td> <td>35-39</td> <td>40-44</td> <td>45-49</td> <td>50-54</td> <td>55-59</td> <td>60-64</td> <td>65-69</td> <td>70+</td> </tr> <tr> <td>%</td> <td>0.7</td> <td>5.0</td> <td>11.5</td> <td>13.1</td> <td>11.9</td> <td>13.5</td> <td>14.3</td> <td>13.4</td> <td>10.2</td> <td>4.5</td> <td>1.3</td> <td>0.4</td> </tr> </table> | Age Group | Under 20 | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70+ | % | 0.7 | 5.0 | 11.5 | 13.1 | 11.9 | 13.5 | 14.3 | 13.4 | 10.2 | 4.5 | 1.3 | 0.4 |
| Age Group | Under 20 | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70+ | | | | | | | | | | | | | | | |
| % | 0.7 | 5.0 | 11.5 | 13.1 | 11.9 | 13.5 | 14.3 | 13.4 | 10.2 | 4.5 | 1.3 | 0.4 | | | | | | | | | | | | | | | |
| Socio-Economic | <p>There is no evidence to suggest that socio economic factors are disproportionately affected. 35% of individuals involved in a change process held posts at Band 4 and below compared to 33.7% of the workforce in general. Workforce data will be reviewed to establish whether any information can be gathered.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Human Rights | <p>All staff will be dealt within in line with Human Rights regulations. No treatment throughout the management process of this policy will place individuals in a situation where their human rights may be negatively affected. The management process will facilitate open communication and enable individuals to express their views in a safe environment without repercussion. Consideration will be given to any staff who have special requirements such as a disability and the process aims to be fair and consistent for all staff.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| What are the overall trends/patterns in the above data? | <p>There are trends to indicate that a higher number of individuals who were over 50 involved in organisational change. Similarly more females have been affected.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|---|
| Specific issues and data gaps that may need to be addressed through consultation or further research | There is currently insufficient data to monitor the impact on socio economic factors and gender identify. |
|--|---|

Involving and consulting stakeholders

| | |
|--|---|
| Internal involvement and consultation | Joint Staff Negotiating Committee, Senior Management, Human Resources Business Partners |
| External involvement and consultation | None |

Impact Assessment

| | |
|--|---|
| Overall assessment and analysis of the evidence | <p>There is a trend to indicate that a higher proportion of females have been subject to organisational change. The proportion of females (73.8%) in the Trust is greater than males (26.2%) and the areas associated to organisational change processes have involved mainly non clinical administrative areas which are known to have more females.</p> <p>There is a trend in relation to age which indicates a higher number of individuals over 50 have been involved in change processes. The areas affected by organisational change are likely to have individuals within the higher age bracket.</p> <p>The management process will be fairly applied to individuals regardless of personal characteristics.</p> |
|--|---|

Action Plan

| Action | Owner | Risks | Completion Date | Progress update |
|--|---------------|-------|-----------------|--|
| Monitoring of workforce data on a bi annual basis | Martin Bamber | | Ongoing | Action to be taken as and when issues are identified |
| Equality Impact Assessments to be completed on all Organisational Change proposals | Martin Bamber | | Ongoing | Action to be taken as issues are identified. |
| | | | | |

STRICTLY CONFIDENTIAL

Change Plan

DIRECTORATE NAME

NAME OF PLAN

OVERALL SUMMARY

| | |
|--|------------|
| | |
| | |
| | |
| TOTAL Increase/decrease (change as appropriate) | wte |

| VERSION CONTROL & AUTHORISATION | |
|---------------------------------|--|
| Version | |
| Directorate Manager preparation | |
| Clinical Director approval | |
| Senior Management Team Sign Off | |
| Status | |

1. Purpose

The purpose of this plan is to set out the required changes to

2. Rationale for change

3. Summary of Proposed Changes

4. Proposed structure

There are no fundamental changes to department structure or see appendix 1.

5. Changes in establishment

| Description | Medical | Nursing | Admin & Managers | Other | Total |
|---------------------------------|----------|----------|------------------|----------|----------|
| AFC 1 | | | | | 0 |
| AFC 2 | | | | | 0 |
| AFC 3 | | | | | 0 |
| AFC 4 | | | | | 0 |
| AFC 5 | | | | | 0 |
| AFC 6 | | | | | 0 |
| AFC 7 | | | | | 0 |
| AFC 8 | | | | | 0 |
| AFC 9 | | | | | 0 |
| Junior Doctors | | | | | 0 |
| Senior Medical - Non Consultant | | | | | 0 |
| Senior Medical - Consultant | | | | | 0 |
| Total Post Increase | 0 | 0 | 0 | 0 | 0 |

6. Change process

| Proposed change | Change process |
|-----------------|----------------|
| Title | |

7. Risk assessment and equality impact assessment

A risk assessment (appendix 2) and equality impact assessment (appendix 3) has been undertaken to assess the impact of the proposal.

8. Timescales

The following timescales and process will apply:

- XXXXXXXXXX Brief JSNC
- XXXXXXXXXX Launch of the proposal with teams and individual meetings.

- XXXXXXXXXX Consultation period.
- XXXXXXXXXX Reflection period.
- XXXXXXXXXX Launch final paper with team and individual meetings
- XXXXXXXXXX Feedback, serve notice (if applicable)
- XXXXXXXXXX Implement new structure.

9. Staff support and process

The following steps will be taken to support staff through this process:

- **Individual meetings**
Staff directly affected will be given the opportunity of individual meetings with the appropriate manager who will be accompanied by a HR representative. Although these are not formal meetings at this stage staff may wish to be accompanied by a work colleague or trade union representative for support in the meetings. Throughout the consultation period there will be regular meetings with staff to answer questions on the structure, the process and the proposed service model.
- **Application workshops**
Staff affected by the change will be offered a workshop on interview preparation (where appropriate). This will include support for both application and assessment (where appropriate).
- **Assessment process**
Staff who have to go through an interview assessment process will be asked to submit an expression of interest and will undertake a competency based interview and case study or test or where appropriate a presentation. All staff will be offered detailed feedback after the assessment process whether successful or not.
- **Contacts for support**

XXXXXXX (this would be a manager within Directorate) ext. XXXX
Staff Health and Wellbeing: ext. 37222
Trade Unions: ext. 39274
Pastoral and Spiritual Care: ext. 55255

10. Questions for consultation

The following questions are part of the formal consultation process with staff affected, staff side and key stakeholders:

- Is the proposed structure fit for purpose?
- Does the process follow the Trusts management of organisational change policy?
- Has the Trust assessed any quality and patient safety issues adequately and mitigated any risks?

Feedback can be provided by email to XXXXX at XXXXX@nhs.net all responses by XXXX