

## Recruitment and Selection Policy

Issue Date	Review Date	Version
March 2016	Extended to November 2021	6.1

### Purpose

Recruiting and selecting the right people is of paramount importance to the provision of the best possible patient care at Plymouth Hospitals NHS Trust. This policy sets out how the Trust will seek to ensure that the highest calibre candidates are recruited on merit and that the recruitment process is safe and free from bias and discrimination in accordance with all applicable legislation.

### Who should read this document?

All staff  
All managers  
HR Department Staff

### Key Messages

- All vacancies must be formally approved before they are advertised.
- Prospective candidates must be subject to a fair and transparent selection process that is free from bias and discrimination.

All successful candidates must meet the requirements of the NHS Employers Safe Recruitment Checks before they can be offered unconditional appointments.

Core accountabilities		
Owner	Workforce and Recruitment Manager	
Review	HR and Organisational Development Committee	
Ratification	Director of People	
Dissemination (Raising Awareness)	Workforce and Recruitment Manager	
Compliance	Workforce and Recruitment Manager	
Links to other policies and procedures		
Verification of Registration of Clinical Staff SOP Safe Recruitment SOP Equality and Diversity Policy Workforce Induction and Training policy Redeployment policy Recruitment and Retention Strategy		
Version History		
3.1	August 2008	Amended and approved
3.2	August 2009	Reformatted, EIA, Dissemination Plan & checklist included
3.3	August 2010	Amended and approved
4	November 2010	Amended to clarify actions to take where recruitment check results are not complete.
5.1	July 2012	Review in response to organisational changes across the Trust, to ensure consistency with workforce strategic priorities; and to ensure clarity of responsibilities and assurances.
5.2	September 2012	Minor amendments to Equality Impact Assessment
5.2	July 2015	Extended by Assistant Director of Learning and Organisational Development to March 2016
6	March 2016	Updated by Workforce and Recruitment Manager
6.1	August 2021	Extension Granted to November 2021

*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

This policy is designed to assist in the recruitment and selection of the highest calibre candidate for a vacancy. In doing so, it takes account of relevant legislation and guidance and other Trust policies and procedures. This policy also takes account of NHS pay systems including Agenda for Change, the Medical and Dental and all relevant NHS pay awards.

Advice on any aspect of this policy, or procedures related to it, is available from the Recruitment Team.

## 2 Purpose, including legal or regulatory background

This policy is intended to assist recruiting managers/clinicians to:

- Understand the Trust's overall approach to Recruitment & Selection, including the relevant pre-employment checks.
- Ensure an understanding of the relevant roles and responsibilities with regards to recruitment and selection.

Recruiting and selecting the right people is of paramount importance to provision of the best possible patient care at Plymouth Hospitals NHS Trust. This Recruitment and Selection Policy sets out how to ensure that the highest calibre candidates are recruited on merit and that the recruitment process is safe and free from bias and discrimination. Accordingly, this policy is underpinned by a set of procedures to enable the Trust to deliver and monitor staff recruitment.

By following this policy and its supporting procedures, in addition to fulfilling employment law requirements, Plymouth Hospitals NHS Trust will also ensure that it continues to uphold its commitment to equal opportunities. PHNT seeks to make diversity an integral part of its operations by creating an environment where differences between staff are welcomed.

This policy applies to all appointments and Trust employees, including Medical and Dental staff. The standards contained within this policy also apply to secondments, fixed term contracts, temporary staff, volunteers and honorary contracts.

Separate arrangements are in place for the appointment of non-executive directors who are appointed through the Appointment's Commission.

### ***Regulatory and legal background***

Recruitment and selection procedures must comply with the Trust's Equality and Diversity Policy and the statutory provisions relating to employment in the Equality Act 2010.

All job applicants are protected in law against discrimination on grounds of gender, marital or civil partnership status, ethnicity, disability, age, sexual orientation, pregnancy and maternity and religious belief throughout every stage of the recruitment process. Any candidate who is treated in a discriminatory way during the recruitment process may bring a complaint of discrimination to an employment tribunal, provided that the claim is lodged within three months of the date of the alleged discriminatory act.

The Trust's procedures take account also of the requirements set out in the following legislation:

- The Immigration Act 2014.
- The Rehabilitation of Offenders Act 1974 (Exemptions Order 1975, Amendment Orders 1986 including guidance from 10<sup>th</sup> March 2014).
- The Data Protection Act 1998.

### 3 Definitions

For the purposes of this policy and supporting operating procedures, the following definitions apply:

- **Safe Recruitment** – To ensure that all Safe Employment checks are applied in accordance with NHS Employers guidance.
- **Agenda for Change** – agreed in 2004, is the national NHS grading and salary system for almost all grades of NHS staff, excluding doctors, dentists and senior managers. It seeks to ensure that staff in similarly demanding jobs will receive similar remuneration, regardless of the particular discipline in which they work.
- **Secondment** – the transfer of an existing employee, or an employee of another organisation, for an agreed period of time, after which they will return to their original post, or employer. There is no protection of enhanced remuneration and conditions, received during the period of the secondment, once it is completed.
- **Internal transfer, redeployment** – the transfer of an existing employee, or an employee of another NHS organisation, to a new post on a permanent basis.
- **Recruitment Team** - This term refers to both the Medical Workforce Team (who undertake the recruitment for all medical and dental staff appointments) and the general Recruitment Team (who undertake the recruitment process for all other staff grades within the Trust).

### 4 Duties

Duties and responsibilities specific to the key steps in the selection and recruitment process are set out in the following sections. The following overall responsibilities apply.

The **Director of People** is responsible for:

- providing assurance to the Trust Board that the Trust is complying with the requirements of this policy and relevant employment legislation;
- agreeing targets and reviewing the performance of the HR Service Line in respect of recruitment and selection.

The **Workforce and Recruitment Manager, the Medical Workforce Manager and Recruitment Team** are responsible for:

- providing guidance and support to all Trust staff involved at any stage of the selection and recruitment process;
- responsible for obtaining and verifying all safe recruitment checks prior to an unconditional offer and start date being issued in line with the processes set out in The Safe Recruitment SOP;
- monitoring and reporting on the Trust's compliance with the requirements set out in this document and with relevant legislation;

- monitoring and reporting on the Trust's performance against targets set by the Trust, and those set by relevant government departments.

**Directors and recruiting managers** are responsible for:

- Ensuring that all new appointments and transfers of staff, within their direct scope of responsibility, are made in compliance with this policy and underpinning procedures including Equality and Diversity.
- Ensuring correct vacancy approval is actioned including ERP process and adverts, job descriptions and vacancy approval forms are provided in the correct format.
- Ensuring appropriate and effective selection methods are used at shortlist, interview and recruitment stages through NHS Jobs.
- Ensuring correct Interview Outcome confirmation paperwork is submitted to the Recruitment Team including ensuring that information detailing Occupational Health requirements, ID and salary is provided at the initial stage of appointment.

## 5 Key elements

### Vacancy approval

Financial approval for the establishment of a new post or filling of a vacancy must be obtained before recruiting. In all cases, confirmation of funding a vacancy must be obtained prior to submission to the Recruitment Team.

Service Lines should consider recruitment from within the Trust where practicable in order to aid career progression and retention of talent. The occurrence of a vacancy is an opportunity to consider service redesign, new ways of working or review the need for the post, its duties, and banding/grade.

Where the duties of a post have changed significantly, the appointing manager must seek confirmation of the banding/grade before financial approval is sought. This will require job matching / job evaluation in line with Agenda for Change guidance.

The Executive Team retain the right to withdraw vacancies where there is a need to do so. A member of the Executive Team will inform the appointing manager of such decisions.

### Advertising a vacancy

The approach that the Trust takes to advertising will be determined by the job description and the availability of suitably qualified people within the Trust and local economy. The process as described in the Recruitment and Selection SOP to advertise a vacancy must be adhered to. All vacancies are advertised on NHS Jobs where an application form is required to be completed. Adverts can also be provided on social media and other sourced publications as required by the Recruitment Team or approved individuals.

All authorised vacancies must be considered for staff requiring redeployment, in line with the Trust's Redeployment Policy, prior to advertisement.

With exception to occasions that the Trust's Redeployment Policy is being applied, appointments will normally be subject to advertisement and interview. The Recruitment Team must approve any other exceptions, prior to advertisement.

## **Selection and Appointment**

All appointments, of both internal and external individuals, must be subject to a transparent selection process consisting of at least a written application and interview. For some roles, it may be appropriate to carry out selection tests and/or set tasks. Selection processes should be discussed and agreed with the Recruitment Team in order to ensure consistency throughout the Trust.

Applications will only be accepted subject to a completed application form via NHS Jobs unless under exceptional circumstances where sourced from an external organisation. All shortlisting and interviews will be based upon the completed application form and meeting the essential criteria of the job description. This will be scored through NHS Jobs and all candidates will be shortlisted, invited to interview, communicated with and offer accepted through NHS Jobs.

All interviews must be conducted by a panel. Interview panels act for the Trust in making selection decisions and are accountable for such decisions.

Compliance with the procedures set out in the Recruitment and Selection SOP must be adhered to and will be monitored and challenged by the Recruitment Team where it is apparent that due processes have not been followed.

Internal staff appointments will have a maximum of 4 weeks' notice (Up to 12 weeks for certain grades of Medical and Dental staff) between departments as standard unless agreed separately by the line managers of both departments to be actioned in less than that time period.

The Immigration Act 2014 makes it an offence to employ anyone who does not have permission to be in, or work in, the UK. It may be necessary for the Trust to apply for a Certificate of Sponsorship for any candidate who does not currently have the right to work in the UK.

## **Temporary Staffing**

All requests for temporary staff, other than NHSP flexible workers, must be engaged through the Nursing Workforce Support Manager, Procurement Team or Medical Workforce Team with the Recruitment Team supporting checks where required. The Procurement Team will ensure that the agency has a contractual agreement to ensure that the staff provided have confirmed that their status meets all NHS Employers Safe Recruitment requirements, with all the necessary pre-employment checks completed as set out in the Safe Recruitment SOP.

The Trust makes every effort to only use NHS Professionals (NHSP) or a framework approved agency as this provides the Trust with assurances surrounding professional registration checks. In exceptional circumstances where non-approved agencies are used the Trust is responsible for checking the professional registration with the relevant body.

Lapsed registrations, work permit issues and any general queries regarding employment checks will be dealt with by NHSP or the Agency and the temporary member of staff will be excluded from working until these have been renewed or rectified.

## **Honorary Staff, Volunteers, Students in Placement. Service Level Agreements and Research Passports**

All staff who are required to hold a placement within the Trust have the following options:

- Short Term Placement: A 2-week placement to allow an applicant to experience a particular type of work or department. This placement will be for a short term and will be fully supervised. This can be arranged by the Recruitment Team.
  - Educational Clinical/Observation Placements: People undertaking professional 'clinical' courses, or degrees, who require a formal placement (e.g. elective placements, return to practice nurses, nursing/medical students from overseas;) This can be up to a **maximum 12 months**. This can be arranged by the Recruitment Team.
  - Working Placements: Applicants will hold a substantive contract with another organisation. This usually occurs when an employee of another organisation works across two sites in two different organisations to deliver a service commissioned by one provider (up to 12 months contract). This can be arranged by the Recruitment Team.
  - Work experience: Any student considering a career in a healthcare profession who would benefit from time spent in a clinical area. All individuals must be aged 16 or over and are encouraged to commit to a minimum period of six months attending on a weekly or fortnightly basis. This can be arranged by the Voluntary Services Team.
  - Work Shadowing: Students who are considering careers in healthcare professions spending a short period of time work shadowing/observing in a clinical area. Placements are already agreed in principle by the PHNT member of staff who has offered to 'host' (sponsor) a student. This can be arranged by the Voluntary Services Team.
  - Day Visitors: Applicants applying to come into PHNT for a short visit of one day or less in a clinical area. All individuals must be aged 16 or over. No formal documentation is required by the visitor, but the 'host' (PHNT Sponsor) completes a 'day visitor' form to accept responsibility for them. This will be shadowing only. This can be arranged by the Voluntary Services Team.
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- Service Level Agreements: All members of staff for other organisations who hold a Service Level Agreement with the Trust will be subject to providing information on NHS Employers Safe Recruitment Checks and information with regards to completion of relevant training.
  - Research Passports: The Trust accept research passports in line with Department of Health recommendations for research passports to the NHS. This allows NHS to NHS arrangements for sharing and accepting pre-engagement checks between NHS organisations when NHS staff wish to undertake research within the NHS outside of their employing Trust. More information can be found at <http://www.nihr.ac.uk/policy-and-standards/research-passports.htm>

### **Safe Recruitment checks**

All NHS providers are required to be registered with the Care Quality Commission (CQC) and, as part of this registration are required to comply with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (as amended) and the Care Quality Commission (Registration) Regulations 2009. The Regulations outline a set of fundamental standards which must be met, including having robust recruitment and employment practices in place to verify a person's suitability for the job they are being appointed to do. Employers should demonstrate that they are in compliance with the

relevant fundamental standards by undertaking the checks outlined within the NHS Employment Check Standards.

The Trust is required to undertake all necessary pre-employment checks as detailed in the Safe Recruitment SOP. These checks are documented within the Employment Check Standards produced by NHS Employers and are the standards referred to in the NHSLA Risk Management Standards. The Employment Check Standards specify checks in relation to verification of identity, right to work, employment history & reference checks, registration & qualifications, occupational health and DBS checks. NHS Employers information is found here: <http://www.nhsemployers.org/your-workforce/recruit/employment-checks/nhs-employment-check-standards>

The engagement of all individuals including substantive staff, temporary workers, volunteers, work placements and apprentices are subject to the Employer Check Standards, without exception.

There are measures in place to address any appointee who is unable to satisfy any of the safe recruitment checking arrangements as set out in the Safe Recruitment SOP. Ultimately a start date will not be given to any new appointee, until all safe recruitment checks have been satisfied in compliance with NHS Employers Safe Recruitment standards.

The Recruitment Team are responsible for obtaining and verifying all checks prior to an unconditional offer and start date being issued in line with the processes set out in The Safe Recruitment SOP.

For senior roles within the Trust and in accordance with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 5 Fit and Proper Persons Requirements and the PHNT Fit and Proper Persons' test, information will be sought in order to gain evidence for Board approval to ensure compliance. This will include several additional checks to confirm the role of director at PHNT.

Advice on any aspect of this policy, or procedures allied to it, is available from the Recruitment Team.

### **Overseas Nursing**

Some overseas nursing intakes will work in liaison with a chosen Recruitment Agency in accordance with the Code of Practice for the international recruitment of healthcare professionals. Plymouth Hospitals NHS Trust will work in conjunction with the chosen agency to ensure that all Safe Recruitment checks take place in accordance with NHS Employers. An orientation programme will also take place as part of their induction and integration into the Trust.

## **6 Overall Responsibility for the Document**

The Director of People is responsible for ratifying this document. The Workforce and Recruitment Manager has responsibility for the dissemination, implementation and review of this policy.

## **7 Consultation and Ratification**

The design and process of review and revision of this policy will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved by the HR & OD Committee and ratified by the Director of People.

Non-significant amendments to this document may be made, under delegated authority from the Director of People, by the nominated author. These must be ratified by the Director of People and should be reported, retrospectively, to the approving HR & OD Committee

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades that are directly affected by the proposed changes.

## **8 Dissemination and Implementation**

Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the named Director of People and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

## **9 Monitoring Compliance and Effectiveness**

The responsibilities in this policy are legally enforceable and managers (and employees where applicable) failing to uphold their responsibilities may find themselves in breach of internal disciplinary policies and legislation.

Compliance with this policy will be monitored by the following:

- i) adherence to NHS Safe Recruitment Checks as evidenced through agreed monthly auditing by the Recruitment Team;
- ii) bi-monthly auditing of a sample of recruitment files by the Workforce Development Team or Medical Workforce Manager to seek assurance of compliance with the recruitment process;

The above will be led by the Workforce and Recruitment Manager with the results reported to the Director of People as required.

Plymouth Hospitals NHS Trust is required by the Equalities Act 2010 to monitor the protected characteristics of applicants for all vacancies, via the NHS Jobs website. Additional monitoring is undertaken on applications that are not submitted via NHS jobs. This informs the Trust as to how its Equality & Diversity Policy is working and whether recruitment practices are having a discriminatory effect.

Any issues identified, where non-compliance is identified, will be investigated and addressed by the Workforce & Recruitment Manager. The actions taken to address the non-compliance will be reported to the HR and Organisational Development Committee.

## **10** | **References and Associated Documentation**

The following sources of information are referred to in this policy, or provide additional reference material.

### ***Statutory references***

- Equality Act 2010
- Data Protection Act 1998
- The Rehabilitation of Offenders Act 1974 (Exemptions Order 1975, Amendment Orders 1986 including guidance from 10<sup>th</sup> March 2014)
- The Immigration Act 2014
- NHS Employers website – NHS Employment Check Standards

<http://www.nhsemployers.org/your-workforce/recruit/employment-checks/nhs-employment-check-standards>

- NHS Jobs website <http://www.jobs.nhs.uk/>

Dissemination Plan			
Document Title	Recruitment and Selection Policy		
Date Finalised	March 2016		
Previous Documents			
Action to retrieve old copies	Update staffnet and advertise of new policy to replace existing copy		
Dissemination Plan			
Recipient(s)	When	How	Responsibility
All staff	April 2016	Information Governance StaffNet Page	Information Governance Team

Review Checklist		
<b>Title</b>	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
<b>Rationale</b>	Are reasons for development of the document stated?	Yes
<b>Development Process</b>	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
<b>Content</b>	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
<b>Evidence Base</b>	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
<b>Approval</b>	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
<b>Dissemination &amp; Implementation</b>	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
<b>Document Control</b>	Does the document identify where it will be held?	Yes
	Have archiving arrangements for superseded documents been addressed?	Yes
<b>Monitoring Compliance &amp; Effectiveness</b>	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
<b>Review Date</b>	Is the review date identified?	Yes
	Is the frequency of review identified? If so is it acceptable?	Yes

<b>Overall Responsibility</b>	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes
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<b>Core Information</b>	
<b>Date</b>	22 <sup>nd</sup> March 2016
<b>Title</b>	Recruitment and Selection Policy
<b>What are the aims, objectives &amp; projected outcomes?</b>	To ensure that the highest calibre candidates are recruited on merit and that the selection process is free from bias and discrimination,
<b>Scope of the assessment</b>	
<b>Collecting data</b>	
<b>Race</b>	<p>The recruitment and selection standing operating procedure makes reference to ensuring non-discriminatory practice throughout the recruitment and selection process.</p> <p>Consideration will need to be given to adjustments required to ensure the application process is accessible for all.</p> <p>Recruitment data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead, and data published as required by the Workforce Race Equality Standard and necessary actions are put in place.</p>
<b>Religion</b>	<p>The recruitment and selection standing operating procedure makes reference to ensuring non-discriminatory practice throughout the recruitment and selection process.</p> <p>Recruitment data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead and necessary actions are put in place..</p>
<b>Disability</b>	<p>There is potentially an impact on people with a disability.</p> <p>Consideration will need to be given to adjustments required to ensure the application process is accessible for all.</p> <p>The recruitment and selection standing operating procedure makes reference to reasonable adjustments and guaranteed interview schemes that are available as appropriate to disabled applicants.</p> <p>Recruitment data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead and necessary actions are put in place.</p>
<b>Sex</b>	<p>The recruitment and selection standing operating procedure makes reference to ensuring non-discriminatory practice throughout the recruitment and selection process.</p> <p>Recruitment data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead and necessary actions are put in place.</p>
<b>Gender Identity</b>	NHS Jobs is currently unable to collect data for this area however, this will be monitored via feedback.
<b>Sexual Orientation</b>	<p>The recruitment and selection standing operating procedure makes reference to ensuring non-discriminatory practice throughout the recruitment and selection process.</p> <p>Recruitment data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead and necessary actions are put in place.</p>

<b>Age</b>	<p>The recruitment and selection standing operating procedure makes reference to ensuring non-discriminatory practice throughout the recruitment and selection process.</p> <p>Recruitment data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead and necessary actions are put in place.</p>
<b>Socio-Economic</b>	<p>There is currently no data collected to show the impact in this area, however this will be monitored via feedback as appropriate.</p> <p>Consideration will need to be given to adjustments required to ensure the application process is accessible for all.</p>
<b>Human Rights</b>	<p>There is currently no data collected to show the impact in this area, however this will be monitored via feedback as appropriate.</p>
<b>What are the overall trends/patterns in the above data?</b>	<p>No trends or patterns identified at this stage. However, recruitment data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead, published as required and necessary actions are put in place. Consideration will need to be given to adjustments required to ensure the application process is accessible for all.</p>
<b>Specific issues and data gaps that may need to be addressed through consultation or further research</b>	<p>Current monitoring has not identified any issues that need addressing. There is currently no data collected to monitor the impact on Gender Identity, Socio-Economic or Human Rights. This will be monitored via feedback.</p>

### Involving and consulting stakeholders

<b>Internal involvement and consultation</b>	<p>The Workforce &amp; Recruitment Manager has created the document and the Medical Workforce Manager has been consulted. All consultation has been relayed via email to HR, Assurance Team, Occupational Health and Trust key stakeholders to offer comment and consultation of the document. This information will also be submitted to the JNSC, Policy Sub Group (PSG) and HR &amp; OD Committee for comment and final ratification.</p>
<b>External involvement and consultation</b>	

### Impact Assessment

<b>Overall assessment and analysis of the evidence</b>	<p>The recruitment and selection standing operating procedure makes reference to ensuring non-discriminatory practice throughout the recruitment and selection process.</p> <p>Workforce data is monitored quarterly and annually by the Recruitment and Resourcing team. Analysis and audit is undertaken by the Trusts' Equality and Diversity Lead and necessary actions are put in place.</p>
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### Action Plan

Action	Owner	Risks	Completion Date	Progress update
Monitoring of recruitment data on a regular basis	Matt Glastonbury		On-going	Action will be taken as and when required.