

Recruitment & Selection Procedure for Appointment of Doctors to Remunerated Management Posts

Issue Date	Review Date	Version
August 2014	Extended to December 2021	6.3

Purpose

To ensure that all vacant posts will be advertised either within the Trust or additionally, externally depending on the requirements of the post.

Who should read this document?

All Senior Medical and Dental Doctors,
Service Line Managers and Executive Leads

Key messages

This policy sets out a clear and transparent process for the appointment of doctors into remunerated management posts.

Accountabilities

Production	Hein Scheffer, Director of HR & OD
Review and approval	Medical Staff Panel
Ratification	Director of Human Resources & Organisational Development
Dissemination	Medical Workforce Office
Compliance	Medical Director

Links to other policies and procedures

Version History

2.1	January 2006	MSP
2.2	September 2009	Reformatted, EIA, Dissemination Plan & Checklist included
2.3	January 2010	Updated in line with management structure
3	March 2011	Trust Commitment to Valuing People amended in line with the Equality Act 2010 Electronic policy paths updated
4	August 2014	Section 3 added, policy also re-formatted
5	January 2019	Extended to April 2019
6	August 2019	Extended to April 2020 by Louise Tate
6.1	August 2020	Extended to April 2020 by Medical Staff Panel
6.2	June 2021	Extended to August 2021
6.3	September 2021	Extended to December 2021

The Trust is committed to creating a fully inclusive and accessible service. By making equality and diversity an integral part of the business, it 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 StaffNet Larger text, Braille and Audio versions can be made available upon request.

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1 Introduction

The aim of this policy is to ensure that a standard, fair and transparent procedure is followed for all appointments to paid medical management posts.

2 Key elements

2.1 Status

2.1.1 These arrangements have been agreed within the Trusts Medical Staff Panel.

2.2 Scope and Definitions

2.2.1 The arrangements are intended to cover all vacancies where Senior Medical Staff are appointed to paid managerial posts either by additional programme activity or responsibility payments.

2.3 Advertising the Vacancy

2.3.1 Any vacancy will be advertised internally by e-mail to all Senior Medical and Dental staff and all other senior potential candidates in the Trust. The communication will contain a copy of the job description, remuneration package, person specification and tenure of the post with details of how to apply. For some very senior posts e.g. medical director the vacancy may be advertised externally.

2.3.2 The closing date will be a minimum of 3 weeks from the advertising date and interviews will normally be held within 2 weeks of the closing date.

2.4 Shortlisting

2.4.1 Candidates should submit a Curriculum Vitae together with any supporting information requested indicating their suitability for the post.

2.4.2 The named referees should be provided as specified.

2.4.3 Applications should be sent to the Medical HR team before the closing date. Late applications will not be accepted.

2.4.4 Shortlisting will be carried out by the designated interview panel. It must be done objectively with direct comparisons being drawn against the person specification and records kept. A reference for each of the short listed candidates will be obtained by the Medical HR team.

2.4.5 The interview panel should typically be drawn from, the CEO; COO; MD; Associated MD and/or Care Group Directors, (when appropriate), with HR in attendance. The panel chair may wish to invite other Senior Consultants to partake in panel interviews where appropriate.

2.5 Interviewing

2.5.1 After shortlisting, interviews will be set up by the HR team in accordance with the Trust's Recruitment and Selection Procedure. The reference for the preferred candidate will be considered by the panel prior to confirming (or otherwise) an appointment.

2.5.2 Prior to, and during the formal interview process, alternative selection tools may be used, to ensure a competent and value based recruitment process is maintained.

2.6 Appointing

2.6.1 The panel chair will determine who on the panel is best suited in providing feedback to both the successful and unsuccessful candidate(s).

3 Principle of Responsibility Payments

3.1 Where clinicians have management responsibility, an appropriate amount of Professional Activity (PA) would be made available to enable sufficient time to conduct the management responsibility activities. These activities will also be timetabled according to the Trust job planning guidelines. No other payments would be made in addition to the 12 PA job plan.

3.2 In the case of Senior Managerial roles, i.e. Medical Director, Care Group Directors, or Speciality Leads, an additional non-pensionable management responsibility payment would be made for their term of office. This amount would be determined by the Chief Executive, after consultation, and will be disclosed when the post is advertised.

3.3 Management Responsibility Payments will be reviewed by members of the Executive Team on an annual basis.

4 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.

Core Information				
Document Title	Recruitment & Selection Procedure for Appointment of Doctors to Remunerated Management Posts			
Date Finalised	20 th August, 2014			
Dissemination Lead	Medical Workforce Business Partner			
Previous Documents				
Previous document in use?	Yes			
Action to retrieve old copies.	The document controller will ensure that old versions are archived in the archive master file. Access to archived documents will be through the document controller.			
Dissemination Plan				
Recipient(s)	When	How	Responsibility	Progress update
Medical and Dental Consultants	Ratified	Electronic	Medical Workforce Team	
Directorate Managers, Clinical Directors and Service Line Directors	Ratified	Electronic	Medical Workforce Team	

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

Core Information	
Manager	Yvonne Linley-Shaw
Directorate	HR & OD
Date	March 2014
Title	Recruitment & Selection Procedure for Appointment of Doctors to Remunerated Management Posts
What are the aims, objectives & projected outcomes?	To ensure a fair recruitment process of doctors into management posts.
Scope of the assessment	
Collecting data	
Race	This is mitigated as the guidelines can be made available in alternative languages
Religion	The document has no impact in this area
Disability	This is mitigated as the guidelines can be made available in alternative formats
Sex	The document has no impact in this area
Gender Identity	The document has no impact in this area
Sexual Orientation	The document has no impact in this area
Age	The document has no impact in this area
Socio-Economic	The document has no impact in this area
Human Rights	The document has no impact in this area
What are the overall trends/patterns in the above data?	There are no trends/patterns in this data. External consideration has been given to 2011.12 NHS Litigation Authority Risk Management Standards for NHS Trusts.
Specific issues and data gaps that may need to be addressed through consultation or further research	Trust wide documents can be made available in a number of different formats and languages if requested. No further research is required as there are no further equality issues.
Involving and consulting stakeholders	
Internal involvement and consultation	These guidelines have been compiled by Consultant medical staff representatives and has been circulated for consultation to LNC members and the Medical Staff Panel.

External involvement and consultation	None			
Impact Assessment				
Overall assessment and analysis of the evidence	<p>The assessment has shown that there could be an impact on race or disability groups. However, this document can be made available in other formats and languages if requested.</p> <p>The document does not have the potential to cause unlawful discrimination. The document does not have a negative impact.</p>			
Action Plan				
Action	Owner	Risks	Completion Date	Progress update
Provide documents in alternative formats and languages if requested	Medical Workforce Business Partner	Potential cost impact	Ongoing	This action will be addressed as and when the need occurs