

Recruitment Policy

Author:	Head of Resourcing
Document Owner:	Executive Director of HR & OD
Revision No:	3
Document ID Number	POLCHR039
Approved By:	Joint Staff Committee
Implementation Date:	July 2018
Date of Next Review:	July 2020

Recruitment Policy

Document Control / History	
Revision No	Reason for change
2	Reformat only to bring in line with other policies and procedures. No other changes
3	To add local Medway Foundation Trust requirements to the reflect the NHS guideline changes and new recruitment procedure.

Consultation

© Medway NHS Foundation Trust [2018]

Recruitment Policy

Table of Contents

1	INTRODUCTION	4
2	PURPOSE / AIM AND OBJECTIVE	4
3	(DUTIES) ROLES & RESPONSIBILITIES	5
4	VERIFICATION OF IDENTITY	5
5	JOB DESCRIPTION AND PERSON SPECIFICATION	6
6	RIGHT TO WORK CHECKS	7
7	PROFESSIONAL REGISTRATION AND QUALIFICATION CHECKS	8
8	EMPLOYMENT HISTORY AND REFERENCE CHECKS	10
9	DISCLOSURE AND BARRING SERVICE (PREVIOUSLY CRB) CHECKS	11
10	OCCUPATIONAL HEALTH CHECKS	12
11	OFFERS OF EMPLOYMENT	12
12	EMPLOYMENT CHECKING OF STAFF EMPLOYED ON HONORARY CONTRACTS	13
13	TRAINING AND IMPLEMENTATION	13
14	EQUALITY IMPACT ASSESSMENT STATEMENT & TOOL	13
15	REFERENCES	14

Recruitment Policy

To be read in conjunction with any policies listed in Trust Associated Documents.

1 Introduction

- 1.1 The purpose of the Recruitment and Selection Policy and Procedure is to promote fair and effective recruitment procedures across the Trust, also to ensure that all checks are carried out to an agreed standard.
- 1.2 The aim of this policy and Recruitment Procedure is to:
- Continuously improve the consistency and effectiveness of recruitment and selection processes
 - Set out a systematic framework to promote objective, fair and transparent recruitment practices throughout the Trust;
 - Ensure that selection decisions are based on objective and justifiable criteria;
 - Ensure that the recruitment and selection procedure promotes a positive image of the organisation

2 Purpose / Aim and Objective

- 2.1 This document sets out the procedure for undertaking pre- and post-employment checks for all applicants and employees. This procedure has been developed in line with the NHS Employment Check Standards which are mandatory for all applicants and employees for ongoing NHS employment.
- 2.2 This procedure provides a framework for all applicants and workers, irrespective of their contractual arrangements; it thus applies to all permanent, fixed-term and temporary staff such as agency staff, volunteers, students, trainees, and staff on honorary contracts.
- 2.3 The Recruitment and Selection Policy and its associated Procedural documents (Procedure for Recruitment and Selection to non-medical posts and the Consultant Recruitment Procedure) set out the duties and responsibilities for those involved in recruitment activities.
- 2.4 NHS Employment Check Standards
- 2.5 These Standards set out the checks that are to be undertaken to gain, and continue, work in our NHS environment. There are 6 checks that are required:
- - Verification of identity
 - - Right to work
 - - Professional Registration and qualifications
 - - Employment history and reference checks

Recruitment Policy

- - Criminal Record Checks
- - Occupational Health checks

3 (Duties) Roles & Responsibilities

3.1 The Trust has a responsibility to:

- Ensure staff and managers are fully aware of their rights and responsibilities relating to this Policy and the associated Standard Operating Procedure.
- Ensure that managers receive the appropriate training and guidance so that they can apply the Policy and the associated Standard Operating Procedure appropriately and effectively.

3.2 The manager has a responsibility to:

- Ensure that they apply this Policy and the associated Standard Operating Procedure in a fair and consistent way.
- Ensure that they take the appropriate action once made aware that a staff member has a disability.
- Meet reasonable adjustments required, in line with organisational needs.

3.3 The individual employee has a responsibility to:

- Make the Trust comply with Trust requests for ID documentation (as/when required). Inform the Trust should checks / documentation not be available.
- Keep their future Line Manager and Recruitment Lead fully updated should anything relating to their situation.

3.4 The HR Employee Relations team has a responsibility to:

- Support line managers and advise them on how the Policy and the associated Standard Operating Procedure should be applied.
- Inform staff about their rights and responsibilities relating to disability in employment.

4 Verification of Identity

4.1 An identity (ID) check involves checking two elements of a person's identity:

- **Attributable:** the evidence of a person's identity that they are given at birth (including their name, place of birth, parent's names and addresses)
- **Biographical:** a person's personal history including registration of birth, education and qualifications, electoral register information, details of taxes and benefits paid by or to the person, employment history, interactions with banks and utilities providers.

Recruitment Policy

- 4.2 These two elements should be in accordance with the list of acceptable ID documents which can be found in the Recruitment and Selection Procedure and by viewing the Identity Checks NHS download document (Link found in reference section).
- 4.3 ID Verification checks are required in order to:
- Determine that the identity of the applicant or employee is genuine and relates to a real person
 - Establish that the person owns and is rightfully using that identity.
- 4.4 The check of the original ID documents should corroborate: - full name – forenames, middle and last name or change of name
- Date of birth
 - Full permanent address
- 4.5 Documents should be photocopied and signed and dated to verify that the original documents were produced by the applicant and seen by a member of Trust staff. These photocopies should then be stored on the personal file. This will be done by the Recruitment Teams for all employed staff.
- 4.6 Internal staff moving to new roles within the Trust do not require an identity check as long as an appropriate documentation already exists on their file.

5 Job Description and Person Specification

- 5.1 Job descriptions are an important part of the recruitment and selection process. A job description will ensure that managers are clear about the nature of the job to be filled and that employees/applicants understand the duties and responsibilities of the job. It also provides a basis for measurement of job performance. The Job Description and the Person Specification determine the appropriate banding for the job.
- 5.2 All posts must have an up-to-date, comprehensive description of the job and reporting arrangements. This should include a summary of the job purpose and key responsibilities.
- 5.3 A person specification sets out to specify the qualifications, skills, knowledge, experience, personal qualities and other requirements which are needed to perform the duties identified in the job description.
- 5.4 When preparing a person specification managers should ensure that the criteria for selection are objective, measurable, job related, clearly defined and justifiable. The person specification is used as a means of shortlisting fairly, selecting fairly and as a means by which managers justify their decisions in any potential claim of discrimination. Once the person specification has been devised therefore, it is essential that it be adhered to. When writing a person specification consideration should be given to how each of the criteria will be assessed.

Recruitment Policy

- 5.5 The person specification is the first decision-making step in the recruitment and selection process and lays the foundation for the success or failure of the process as a whole.

6 Right to Work Checks

- 6.1 Under the Immigration, Asylum and Nationality Act (2006) the failure of the Trust in applying processes for checking a person's entitlement to work in the United Kingdom prior to appointment and ongoing during the course of their employment with the Trust could result in a civil penalty. However although the Trust must undertake pre-employment and ongoing checks, the onus to provide evidence of right to work is on the individual.
- 6.2 At recruitment stage the right to work checks can be carried out in conjunction with verification of identity checks; however a separate checklist entry should be completed to show that the right to work has been specifically assessed (see Recruitment SOP). The applicant will be asked to provide one document from the list to prove their right to work in the United Kingdom.
- 6.3 The Resourcing, Medical Staffing, Temporary Staffing and Workforce Teams are all responsible for ongoing checks i.e. checks on internal staff and therefore there is no requirement to duplicate this process when staff move to new roles within the Trust.
- 6.4 Where a member of staff is recruited from outside the EU, the appropriate member of the Resourcing and Medical Staffing Team will apply for a certificate of sponsorship directly or through the approved immigration route for the role.
- 6.5 The Resourcing, Temporary Staffing and Medical Staffing Teams will carry out post-employment checks where the individual's right to remain has an expiry date. The expiry date is captured on the first day via the Starter Form. The process for these on-going checks is set out below.
- 6.6 At the middle of each month the Workforce Team run a report from ESR to capture those individuals whose leave to remain expires within the next 3 months. An email/letter is then sent to the employee asking them to contact either the Resourcing, Medical Staffing, Temporary Staffing and Workforce Teams.
- 6.7 For additional information reference should be made to the UK Border Agency website www.ukba.homeoffice.gov.uk
- 6.8 If Line Managers receive reference requests from external organisations please forward this onto medway.recruitment@nhs.net. Line Managers should not complete any request sent to them directly.
- 6.9 If an employee is in the application process they are requested to show their UKVI confirmation letter; this permits them to work past the expiry date. They are requested to attend with their passport on receipt. The application process can take a significant amount of time and therefore the Resourcing and Medical Staffing Teams will check with these individual's on an on-going and monthly basis until evidence on a new permit has been provided by the employee.

Recruitment Policy

- 6.10 If an employee's limited leave to remain has been extended, or indefinite leave to remain has been granted, then they are asked to bring in evidence and ESR is updated accordingly.
- 6.11 One week before the expiry of the visa, the Director of Nursing and The Divisional Directors (or Clinical Service Lead/Divisional Director for Medical Staff), are informed of the employee's situation if Resourcing, Temporary Staffing and Medical Staffing has not received any documentation. The employee will not be allowed to work in any capacity beyond the expiry of the visa if proof to remain cannot be provided (see below for further details).
- 6.12 If an employee has not provided the relevant documentation either within 6 months of application or the day after the expiry date, they would be suspended from duty (without pay) and a letter sent to them to inform them that the Trust's continued employment of them may be in breach of s8 Asylum and Immigration Act 1996. They are requested to immediately provide documentary evidence of their right to remain within 5 days and attend a meeting, on a date (no more than a week from the letter), to discuss their immigration status and its impact on their employment. At the meeting they are informed that unless they are able to provide evidence of leave to remain/compliance with UKBA requirements the Trust will proceed to terminate their contract: A report will be prepared documenting the employee's failure to prove the right to live and work in the UK and the individual will be invited to attend a meeting to consider the report and the recommendation of termination of employment.
- 6.13 For additional information reference should be made to the UK Border Agency website www.ukba.homeoffice.gov.uk

7 Professional Registration and Qualification Checks

- 7.1 Professional regulation is intended to protect the public, making sure that those who practise a health profession are doing so safely.
- 7.2 Checks for professional registration are undertaken during the recruitment checks and are on-going throughout employment.
- 7.3 Workforce, Resourcing, Medical Staffing and Temporary Staffing are all responsible for regularly checking the registration of health professionals with the relevant regulatory body. For further detailed information, please refer to the Professional Registration Policy and associated procedures which can be found on the Trust's Intranet.
- 7.4 For internal appointments, recruitment staff should check ESR/professional body website for the status of the registration and place evidence of checking on the file where applicable.
- 7.5 **Qualification Checks**

Recruitment Policy

- 7.5.1 The purpose of qualification checks is for the verification of information about educational or professional qualifications provided by the prospective employee.
- 7.5.2 For non-medical staff where specific qualifications form part of the essential requirements for the position, qualification checks should be conducted; the original certificate should be seen and a copy taken by the appropriate recruitment team and kept in the individual's personal file.
- 7.5.3 Where qualifications have been gained overseas, these should be checked directly, where this is possible, with the awarding institution whether the qualification exists, is equivalent to the stated UK qualification and that the individual actually holds the qualification. Further guidance about whether qualifications are genuine can be sought from the National Academic Recognition Centre (NARIC) – website link: www.naric.org.uk
- 7.5.4 For nursing/AHPs and medical and dental staff, the NMC/HCPC, HPAN, GMC and GDC check the suitability of primary qualifications and any qualifications required for those entering the NMC/HCPC Register and GMC/GDC Specialist Register (this includes overseas qualifications). The Resourcing Team will verify all relevant qualifications with a University / College and request to see original certificates (where applicable).
- 7.5.5 Where additional qualifications, are relied upon in the medical recruitment and selection process which undertaken by the Trust to appoint medical and dental staff, they are required to be additionally verified by the Medical Staffing Team.

7.6 Internal Staff

- 7.6.1 Where evidence is available to show that this check has already been undertaken, unless the qualifications for the new role are different from their current role, there is no requirement to re- check qualifications.
- 7.6.2 Where the professional registration remains the same as the employee's current professional body please refer the Trust's Professional Registration Policy and associated procedural documentation.

7.7 Alert Notices

- 7.7.1 Alert notices are sent to Professional leads i.e. Director of Nursing, Medical Director within the Trust and Deputy Director of HR. These are then kept on an electronic database within the HR Team and are searched prior to recruiting an individual as part of the pre- employment checking process. If an alert notice has been issued for an individual already within employment or within the recruitment application process then a check will be undertaken, through the relevant professional lead, in order to decide if they are suitable to be employed into the position offered.

Recruitment Policy

- 7.7.2 If a suspension alert is received for a currently registered member of staff, the Professional lead and Deputy Director of HR are notified. The member of staff will not be permitted to remain on duty and a meeting with the individual concerned will take place in line with the appropriate Investigation/ Disciplinary Procedure, if such a meeting has not already taken place.

8 Employment History and Reference Checks

- 8.1 In order to check the prospective employee's employment history, previous employers will be asked to give a reference on behalf of their organisation.
- 8.2 For non-medical staff, one written reference to cover the last 3 years of (employment) history is sought for all candidates including internal staff. Where a 3-year history is not covered in the reference, another reference should be sought. Where a 3 year history is not covered by the 2nd reference others need only be sought to cover the whole 3-year period where there is a need to highlight and check specific expertise or employment. At least one reference must be obtained from the last or most recent employer (or educational establishment if the person has not previously worked). Character references may be taken up if candidates are not able to provide an employer, however these must not be friends or family members, but of a professional standing e.g. doctor, social worker.
- 8.3 For Medical and Dental staff recruited by the Trust, 3 years references will be sought, one of which should be from the current or most recent employer (or an educational establishment as appropriate). Where the individual has had a number of posts within a 3 year period, it is anticipated that the 3 references will normally be from within the last 3 years unless there is a need to highlight and check specific expertise or employment. Where the individual has had less than 3 employers in 3 years, other appropriate references will be sought by the Medical Staffing Team.
- 8.4 Where staff recruited have been employed by another NHS Trust, one reference is required from that end employer. IAT checks will also be required to support Trust transfers.
- 8.5 For medical and dental staff recruited by HEKSS (Health Education Kent, Surrey and Sussex) and placed within the Trust for training purposes, further reference checks are not required as these are undertaken by HEKSS as part of the requirements of the national training system.
- 8.6 References are required to be approved by the Recruiting Manager or Head of Temporary Staffing. If the Recruiting Manager does not feel that the reference provided is satisfactory, does not contain sufficient information or where there are doubts about the authenticity, then guidance should be sought from the Recruitment Team for non-medical staff and the Medical Staffing Team for medical and dental staff.
- 8.7 Interview panel members should not solicit information concerning the applicant from persons other than nominated referees. Verbal references are discouraged;

Recruitment Policy

however where this will speed up the process, or allow an otherwise unattainable reference to be gained, the individual gaining the reference should document the discussion and where possible confirm the information in writing with the referee as appropriate.

- 8.8 For registered nurses only - Prospective employees would generally not commence employment until their references have been received and assessed as satisfactory. However, in circumstances where the references have not been received prior to the candidate's start date they may be allowed to start work (under supervision if appropriate) if a risk assessment has taken place and signed off by the Associate Chief Nurse. Where information provided by the referees does not agree with that provided by the applicant, this should be discussed in confidence with the applicant before reaching any decision about the offer of employment. This discussion will need to be with HR and the Recruiting Manager.
- 8.9 Under the Data Protection Act, candidates may request to see details written about them in a reference. If Recruiting Managers, or the relevant recruitment teams, receive such requests, then advice must be sought from the Resourcing Team/Medical Staffing Team. Permission should be sought from the author of the reference, prior to disclosure, as this will have been given in confidence.
- 8.10 The Trust uses the standard NHS application form, from the NHS jobs website. All candidates must apply on line for all jobs within the Trust, including internal only vacancies.
- 8.11 Paper applications will not be accepted unless there are exceptional circumstances; the final decision in this situation lies with the Resourcing Department.

9 Disclosure and Barring Service (previously CRB) checks

- 9.1 The Trust is fully committed to recruitment on the basis of an objective assessment of candidates against job related factors and having a criminal record will not necessarily prevent an individual from working at the Trust. This will depend on the nature of the position and the circumstances and background of the offence(s).
- 9.2 Certain positions require applicants to have been screened by means of a "disclosure" obtained from the Disclosure and Barring Service (DBS, previously CRB). A disclosure is an impartial and confidential document that details an individual's criminal record and, where appropriate, details of those who are barred from working with young people under 18 and vulnerable groups.
- 9.3 Please review the Standard Operating Procedure - Disclosure and Barring Service Check for further details
- 9.4 The Trust will accept a DBS from another Trust for a Junior Doctor as long as it has been issued within the past three years. Exceptions apply for those working within Obstetrics and Gynaecology or Paediatrics as the Trust will need to undertake our own checks.

Recruitment Policy

10 Occupational Health Checks

- 10.1 All NHS staff are required to have a pre-employment health check. These checks are carried out in order to:
- 10.1.1 Ensure that prospective employees are physically and psychologically capable of doing the work applied for, taking into account any current or previous illness,
- 10.2 Identify anyone likely to be at excess risk of developing work- related diseases from hazardous agents present in the workplace,
- 10.2.1 Identify any risks for those working at night, unsocial hours or long hours i.e. long days
 - 10.2.2 Ensure, as far as possible, that the individual does not represent a risk to patients, staff or general public
 - 10.2.3 Ensure that the individual will be doing work that is suitable and safe for them.
- 10.3 With the conditional offer of employment, the successful candidate will be sent a pre-employment health questionnaire by the Recruitment Teams to complete and return directly to the Occupational Health department. Medical staff may also need to be screened for additional health checks e.g. Blood Borne Viruses where appropriate.
- 10.4 The **Occupational Health Department** are responsible for assessing the details given in the questionnaire against the job role. In some instances, a report from the individual's GP or medical specialist may need to be requested
- 10.5 An Occupational Health report confirming the outcome of the Occupational Health check will be kept on the individual's personal file.
- 10.6 Please review SOP0393 - Occupational Health Clearance and Immunisations for New Healthcare Workers Procedure for further details regarding Occupational Health Checks

11 Offers of Employment

- 11.1 Any offers of employment made will be conditional and subject to satisfactory pre-employment checks. Offers may be withdrawn if it is discovered that the individual has knowingly withheld information, or provides false or misleading information. For internal applicants this can lead to disciplinary action up to and including dismissal.
- 11.2 Once there is evidence that all checks have been satisfactorily received or risk assessments are in place, the offer of employment may be progressed and where appropriate an unconditional offer of employment can then be made to the prospective employee. Please see Section 7 re: DBS checks.
- 11.3 **Withdrawal of offer**

Recruitment Policy

- 11.3.1 The Trust reserves the right to withdraw an offer of employment where any of the pre-employment checks are considered to be unsatisfactory by the Recruiting Manager.
- 11.3.2 In such a situation, the Line Manager will advise the candidate that the offer of employment has been withdrawn. Where this has been done verbally, this will then be followed up in writing and a copy stored in recruitment file for the candidate.

12 Employment checking of staff employed on honorary contracts

- 12.1 For staff on honorary arrangements, suitable checks are undertaken by the substantive employer as appropriate. The Trust's **checks** will therefore be adapted as appropriate in accordance with the Honorary Contract **Policy** and Procedure.

13 Monitoring and Review

What will be monitored	How/Method/Frequency	Lead	Reporting to	Deficiencies/ gaps Recommendations and actions
Policy review	Next review in 2020 year and then every three years	Author	Group Head of HR for Resourcing	Where gaps are recognised action plans will be put in place

14 Training and Implementation

- 14.1 Bite Size Workshops are available to support recruitment and selection training KPMG support the Trust with annual Recruitment / Security Training for all members of the Resourcing, Medical Staffing and Temporary Staffing teams.

15 Equality Impact Assessment Statement & Tool

All public bodies have a statutory duty under The Equality Act 2010 (Statutory Duties) Regulations 2011 to provide "evidence of analysis it undertook to establish whether its

Recruitment Policy

policies and practices would further, or had furthered, the aims set out in section 149(1) of the [Equality Act 2010]"; in effect to undertake equality impact assessments on all procedural documents and practices. Authors should use the Equality Impact Toolkit to assess the impact of the document.

In the first instance this will mean screening the document *and*, where the screening indicates, completing a full assessment. The Toolkit can be found on the Trust website <http://www.medway.nhs.uk/our-foundation-trust/publications/equality-and-diversity/equality-impact-assessments/>

A document will not be considered approved until the author has confirmed that the screening process has been carried out and where required a full impact assessment has been completed. Where a full assessment is completed this should be submitted along with the document for approval.

16 References

Document
References:
NHS Employment Checks Standards – http://www.nhsemployers.org/your-workforce/recruit/employment-checks
Centre for the Protection of National Infrastructure – www.cpni.gov.uk
Home Office UK Border Agency – www.ukba.homeoffice.gov.uk
National Academic Recognition Centre – www.naric.org.uk
Disclosure and Barring Service – http://www.homeoffice.gov.uk/agencies-public-bodies/dbs/
Search the register – NMC - https://www.nmc.org.uk/registration/search-the-register
NCAS - Checking whether an individual is the subject of an HPAN - www.ncas.nhs.uk
NHS Identity Checks Standards: http://www.nhsemployers.org/~media/Employers/Publications/Employment%20checks%20NEW%20A
Trust Associated Documents:
Recruitment and Selection Procedure
Disability Employment Policy
Temporary Staffing Recruitment Procedure
Fit and proper person requirement for directors Procedure
Exit Interview Procedure
Job Evaluation Procedure
Honorary Contract Procedure
Relocation and Removal Expenses Procedure

END OF DOCUMENT