Nicola Griffiths
Deputy Director of Governance
North Staffordshire Combined Healthcare NHS Trust
Lawton House
Bellringer Road
Trentham
ST4 8HH

Reception: 0300 123 1535

Dear

Freedom of Information Act Request
I am writing in response to your e-mail of the 21st May 2025. Your request has been processed using the Trust's procedures for the disclosure of information under the Freedom of Information Act (2000).

Requested information:

1. A copy of any policies that set out how the Trust ensures that employees have a legal right to work in the UK, and how these policies are enforced.
   Please see Appendix 1 attached.

2. A copy of any records or audits, from within the last two years, that set out details as to how far these policies are complied with.
   Please see Appendix 2 attached.

3. The job title and grade of the person (or people) responsible for overseeing and enforcing this policy? (For the avoidance of doubt, I am not seeking any personal information other than job title and grade). **Recruitment Lead, band 7**

4. A copy of any policies that set out how the Trust ensures that employees contracted through third parties have a legal right to work in the UK, and how these policies are enforced. **All the Trust's third Parties contracts are supplied under The HealthTrust Europe (HTE) framework in the UK which focuses on efficient and compliant workforce solutions for healthcare and public sector organizations, ensuring right-to-work compliance. The framework streamlines the process of hiring temporary and permanent staff by providing access to a range of approved suppliers and offering guidance on recruitment and compliance. Right-to-work checks are a crucial part of this process, ensuring that all individuals hired through the framework have the legal right to work in the UK.**

   The Trust also has an agency compliance checklist for all workers where they have to indicate that the worker has the right to work in the UK and that they have checked this and confirm the expiry date.

5. A copy of any records or audits, from within the last two years, that set out details as to how far these policies are complied with. **Data not held**

Chair: Janet Dawson
Chief Executive: Dr Buki Adeyemo
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6. The job title and grade of the person (or people) responsible for overseeing and enforcing this policy. (For the avoidance of doubt, I am not seeking any personal information other than job title and grade). **E-Rostering and Temporary Staffing Manager, band 7**

7. Information that sets out, for each of the last three years, how many asylum seekers were hired on a temporary right to work visa by the Trust. **None**

8. Information that sets out, for each of the last three years, how many asylum seekers were registered volunteers at the Trust. **None**

9. A copy of any policy concerning how you ensure that asylum seekers who are registered volunteers are not replacing paid roles. **N/A**

10. Information that sets out, for each of the last three years, how many checks have been conducted due to expiration of a Positive Verification Notice of a Temporary work visa. **N/A**

11. Information that sets out, for each of the last three years, how many employees had an employment contract terminated due to a change in their immigration status? **N/A**

12. Information regarding any schemes or partnerships that your Trust has with charities or other external organisations that support or promote the employment of foreign nationals, asylum seekers or those who have recently successfully claimed asylum. I am seeking information on the name of the charity or organisation and any partnership agreement or document that sets out the nature of the relationship or scheme. **The Trust does not have any relevant schemes or partnerships in place.**

If you are dissatisfied with the handling of your request, you have the right to ask for an internal review of the management of your request. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Dr Buki Adeyemo, Chief Executive, North Staffordshire Combined Healthcare Trust, Trust Headquarters, Lawton House, Bellringer Road, Trentham, ST4 8HH. If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF.

Yours sincerely

Nicola Griffiths
Deputy Director of Governance

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Recruitment and Selection Policy

Lead executive	Director of People, Organisational Development and Inclusion
Authors details	Recruitment Lead

Type of document	Recruitment and Selection Policy
Target audience	Senior managers, Employees and applicants
Document purpose	This policy is designed to support managers in providing a fair, consistent, effective and efficient approach to the recruitment of all employees and workers; and to help managers undertake the recruitment and selection process.

Approving meeting	PCDC Trust Board	Meeting date	30th January 2023 13th April 2023
Implementation date	30th April 2023	Review date	30th April 2026

Trust documents to be read in conjunction with	
3.07	Management of Change Policy
3.08	New Starters Relocation Policy
3.12	Inclusion at Work Policy
3.15	Personal Relationships at Work Policy
3.21	Disclosure and Barring Service Policy
3.23	Performance Improvement Policy
3.38	Pay Progression Policy
3.44	The Management of Probationary Periods Policy
3.48	Job Evaluation Policy
3.45	Temporary Staffing Policy
7.07	Records Management Policy
	Establishment Control Process
	Internal Recruitment Process
	Personal File checklist & guidance
	Salary on Appointment Process
	NHS Employment Check Standards

Document change history		Version	Date
What is different?	-		
Appendices / electronic forms	-		
What is the impact of change?	-		

Training requirements	Unconscious Bias Selection Training – Mandatory for Recruitment Manager/Chairs – best practice for other panel members

Document consultation	
Directorates	JNCC and JLNC Policy Working Group
Corporate services	JNCC and JLNC Policy Working Group
External agencies	JNCC and JLNC Policy Working Group

Financial resource implications	Training is required for recruiters

External references
www.nhsemployers.org www.bia.homeoffice.gov.uk www.nhsemployers.org

Monitoring compliance with the processes outlined within this document	Mandatory training attendance will be logged on LMS and cross matched with Recruitment panel details registered on TRAC.

Equality Impact Assessment (EIA) - Initial assessment	Yes/No	Less favourable / More favourable / Mixed impact
Does this policy / document, or the implementation or outcomes of the policy / document, affect one or more group(s) less or more favourably than another (see list)?		
− **Age** (e.g. consider impact on younger people/ older people)	No	
− **Disability** (remember to consider physical, mental and sensory impairments)	Yes	
− **Sex/Gender** (any particular M/F gender impact; also consider impact on those responsible for childcare)	No	
− **Gender identity and gender reassignment** (i.e. impact on people who identify as trans, non-binary or gender fluid)	No	
− **Race / ethnicity / ethnic communities / cultural groups** (include those with foreign language needs, including European countries, Roma/travelling communities)	Yes	

– **Pregnancy and maternity, including adoption** (i.e. impact during pregnancy and the 12 months after; including for both heterosexual and same sex couples)	No	
– **Sexual Orientation** (impact on people who identify as lesbian, gay or bi – whether stated as 'out' or not)	Yes	
– **Marriage and/or Civil Partnership** (including heterosexual and same sex marriage)	Yes	
– **Religion and/or Belief** (includes those with religion and /or belief and those with none)		
– **Other equality groups?** (may include groups like those living in poverty, sex workers, asylum seekers, people with substance misuse issues, prison and (ex) offending population, Roma/travelling communities, and any other groups who may be disadvantaged in some way, who may or may not be part of the groups above equality groups)	No	

If you answered yes to any of the above, please provide details below, including evidence supporting differential experience or impact.

Data indicates that current recruitment practices disadvantage those people with protective characteristics specifically Black, Asian, Minority Ethnic (BAME), and those people with a disability.

This policy aims to mitigate the potential adverse, negative or potentially discriminatory impact of recruitment practices. Recruitment by its very nature is a competitive process with one individual being chosen over and above another. This policy aims to ensure transparent, fair and appropriate merit based assessment focused on skills and ability to mitigate unconscious bias.

If you have identified potential negative impact:
- Can this impact be avoided? Staff are required to complete mandatory education to ensure a safe service provision
- What alternatives are there to achieving the document without the impact? Can the impact be reduced by taking different action? Recruiters will be required to undertake Unconscious bias and Inclusion training and Selection training to improve the recruitment skills of managers and reduce the impact of unconscious bias within the selection process
-

Do any differences identified above amount to discrimination and the potential for adverse impact in this policy?	
If YES could it still be justifiable e.g. on grounds of promoting equality of opportunity for one group? Or any other reason	

Where an adverse, negative or potentially discriminatory impact on one or more equality groups has been identified above, a full EIA should be undertaken. Please refer this to the Diversity and Inclusion Lead, together with any suggestions as to the action required to avoid or reduce this impact.

Discussed the above with the Inclusion & Diversity Lead – adjustments offered and made ensured equality and inclusion.
For advice in relation to any aspect of completing the EIA assessment, please contact the Diversity and Inclusion Lead at Diversity@combined.nhs.uk

Recruitment and Selection Policy

CONTENTS

1. Purpose

1.1 The Trust recognises that the way it manages its recruitment and selection processes will influence how it will be viewed by many, both within and external to the organisation. This policy is therefore designed to support managers in providing a fair, consistent, effective and efficient approach to the recruitment of all employees and workers; and to help managers undertake the recruitment and selection process.

1.2 This policy will support the Trust to positively promote the organisation as an employer of choice. This will enable the Trust to recruit and retain a high quality workforce with the required skills and attributes to deliver high quality, innovative, person-centred care.

1.3 All recruitment and selection processes undertaken by the Trust will be carried out in accordance with all relevant legislation and the NHS Employment Checks Standards.

1.4 The Trust is committed to providing positive and inclusive experiences for all our service users, carers and staff. As part of this, we will ensure that no job applicant or employee receives less favourable treatment on the grounds of age, disability, gender or gender identity, race, religion or belief, sexual orientation, marital status, or pregnancy/maternity. We fully support the right of all staff to equal opportunities and are committed to the development of a diverse workforce that is reflective of the communities that we serve.

1.5 This policy will not discriminate, either directly or indirectly, on the grounds of age, disability, race, religion or belief, sexual orientation, gender, gender identity, marriage and civil partnership or pregnancy and maternity in accordance with the Equality Act (2010). This policy will also not discriminate, either directly or indirectly, on the grounds of Trade Union membership/activities, offending background and domestic circumstances/caring arrangements. We will comply fully with the equality legislation and avoid all unlawful discrimination. This is in relation to those employed by the Trust, our volunteers, honorary appointments and those employed by partner organisations who work alongside Trust staff.

1.6 The policy supports application of our Trust values which guide our actions and behaviour as an employer and provider of services. These are:

Proud to CARE:

Compassionate – Caring with compassion, it's about how we listen, what we say, what we do;

Approachable – Friendly, welcoming, sharing ideas and being open;

Responsible – Taking personal and collective responsibility,

being accountable for our actions;

Excellent – Striving for the best, for high-quality safe care and continually improving.

2. Scope

2.1 This policy applies to all Trust employees who are involved with any aspect of the management and/or administration of the recruitment and selection process within the Trust; permanent, temporary and bank worker/casual positions.

2.2 Medical recruitment is governed by statute and best practice guidance issued by the Department of Health, General Medical Council (GMC), Health Education West Midlands and relevant Royal College. These bodies support the majority of senior medical appointments in order to ensure that those recruited into the Trust have correct and appropriate skills and competencies and that the recruitment procedure is carried out fairly

2.3 This policy also applies to those not directly employed by the Trust who are acting on behalf of the Trust and any other recruitment agency and/or external consultant (including in relation to agency-employed temporary staff) representing or supporting the recruitment and selection processes of the Trust on any occasion.

2.4 Volunteers should be recruited in line with the standards outlined in this document. Formal interview and selection processes might not always be appropriate but application forms should be completed, competencies assessed and relevant pre-employment checks obtained.

3. General guidance

3.1 **Staff at Risk**
Staff at Risk of losing their job either through a management of change process, or health grounds will be placed on the Redeployment Register. During an Agenda for Change process special procedures will allow for the ring fencing of new posts to existing staff within affected teams as appropriate (sometimes this will be extended to other NHS Trusts and/or supporting organisations), displaced and/or 'at risk' staff will be given priority access to job opportunities.

3.2 **UK Visa and immigration requirements**
According to UK Visas and Immigration requirements, recruitment will be from within the UK except in unusual circumstances where skill shortages/specific recruitment difficulties exist. In such cases, only where specific Visa and Immigration requirements are met will it be possible to employ an individual from outside this area.

3.3 Right To Work

All individuals offered a position with the Trust will have to evidence their right to work in the UK.

It should also be noted that there is a fine of £20,000 fine per illegally employed individual. In addition, individuals can be imprisoned for up to 5 years and receive an unlimited fine if they are found to have 'knowingly employed' an illegal worker.

3.4 Disability Confident

As part of the Trust's commitment to equal opportunities for disabled people it is signed up to being 'Disability Confident', all applicants who declare a disability with a disability who meet the minimum requirements of the job, as set out in the person specification, will be guaranteed an interview. Where appropriate, reasonable adjustments will be made to the recruitment process and/or to the position applied for; this will ensure that the applicant is not unfairly disadvantaged as a result of their disability.

3.5 Criminal records check

In accordance with UK legislation, jobs that involve carrying out certain activities may require a criminal record check via the Disclosure and Barring Service (DBS). If a DBS check is required successful applicants will be required to apply for a DBS check through the e-DBS system, which will is administered by the recruitment team. Guidance and support regarding whether or not a DBS check is required, and if so, to what level (standard/enhanced) is available from the people and recruitment teams. Please also refer to the Policy 3.21 Disclosure and Barring Service Policy.

In addition and also in accordance with UK legislation, jobs that involve carrying out certain activities with children and vulnerable adults may require an enhanced DBS check with a check of the barred lists. This will check whether someone is included in the two DBS 'barred lists' of individuals who are unsuitable for working with:

- Children
- Vulnerable Adults

People on the barred lists are not permitted to undertake certain types of work.

Further information can be found at: https://www.gov.uk/disclosure-barring-service-check/dbs-barred-lists and https://www.gov.uk/find-out-dbs-check

If an applicant's DBS certificate details a caution/conviction (spent or unspent) and/or demonstrates that they are on a barred list further advice must be sought from the human resources team. It is an expectation that applicants applying for a role that is eligible for a DBS check disclosing any relevant information during the application process and before offer.

3.6 Temporary staff

All temporary staff, including agency and bank workers, will be recruited in accordance with the Trust's temporary staffing procedures. The Trust will only use agencies from nationally assured frameworks, to employ agency staff, as these organisations have met the standards required for recruitment and placement of staff. Please refer to procurement for further guidance regarding these frameworks Where Master Vendor agreements are in place (e.g. Medacs), agency staff should be recruited through these agreements.

3.7 Short-term temporary post (Secondment)

If a post becomes available on a short-term temporary basis (6 months maximum) for example due to long-term sickness or to support a short-term project, the recruitment and selection process should be followed when selecting an employee to cover the vacancy through advertising the opportunity via an internal advertisement and application via the Trust Intranet.

In such circumstances, it may also be appropriate to recruit to the vacancy from a specific group of staff or team, for example, where the post is of a specialist nature. Advice must be sought from the people department in such circumstances.

All short-term temporary posts and secondment opportunities are subject to establishment control, where approval must be sought. Once approved, the opportunity should be advertised internally only unless it is highly specialised and/or hard to fill and applications should be made via the recruitment system. The recruiting manager takes responsibility for shortlisting, interviews and secondment appointments, including EASY forms. Secondment contracts should be used; temporary variation to contract template letters are available from the people department.

3.8 Medical staffing

All medical staffing vacancies should be advertised in accordance with Royal College guidelines; further support and advice is available from the medical staffing team. All medical vacancies follow the same standard recruitment process and should be loaded and tracked through the Trust's recruitment application Management System.

3.9 Social Media

The Trust encourages all recruiting managers to use social media (e.g. Facebook, LinkedIn and Twitter) to promote any vacant posts they may have; further advice is available from the communications team.

3.10 Recruitment campaigns

Recruitment campaigns, using on and offline media may be appropriate where there are difficulties in recruiting to vacant posts; however, further advice and guidance must be sought from the recruitment team.

3.11 Service user and carer representation

The Trust is committed to service user and carer representation throughout the selection process. Sufficient time should be allowed to facilitate their attendance. However, in the event that a service user or carer is not available for the shortlisting process or interview panel, the process will continue without service user representation.

3.12 **Inclusive Recruitment Guardian representation**
The Trust is committed to inclusive recruitment and as such an Inclusive Recruitment Guardian should be sought to provide representation throughout the selection process. Sufficient time should be allowed to facilitate their attendance. This is an essential requirement for all assessment centres and Band 7 and above interviews and should be sought as best practice for all vacancies.

3.13 **Personal relationships**

Where there is a consideration of near relatives and those with close personal relationships working together in the same department, this should be fully disclosed during the recruitment process. Panel members must also be open about any particular friendships when on interview panels and have a conversation as to whether it would be appropriate for them to remain on the panel so as to ensure that the process is fair and transparent.

Please see the 3.15 Personal Relationships at Work Policy for more information.

Both applicants and Trust employees that are involved in the recruitment process are required to declare any personal/work or clinical relationships that may result in any potential conflict of interest. Applicants are required to declare such information on their application form.

Upon appointment to the Trust, if an employee is found to have knowingly failed to declare a relationship on their application form with an employee who was involved in the recruitment process this will be investigated in accordance with the Trust's disciplinary procedures and ultimately this may lead to disciplinary action being taken, which could include dismissal.

3.14 **Expenses**
The Trust does not reimburse any applicant expenses incurred by attending for interview.

4. Responsibilities

4.1 **The Trust Board** has the responsibility for the provision of this policy
The board will ensure that
   a. The policy is implemented through the Trust's Line Management Structure

b. All staff are made aware of their personal responsibilities under this Policy

c. Formal training to support this policy is provided via the People Management Programme to appropriate staff

d. All Staff are informed about the contents of this Policy and its availability on the Trusts intranet site

e. The Policy provisions comply with UK Law.

4.2   The Trust operates a centralised system of recruitment and selection, whereby a **Recruitment Team** hold responsibility for the transactional aspects of the recruitment and selection administration and in conjunction with the Trust's Recruitment Lead will ensure that appropriate process is followed robustly and diligently.

4.3   **All employees** involved in aspects of the administration and/or management of recruitment and selection processes within the Trust have a responsibility to:

a. Act in accordance with this policy, current recruitment procedure and relevant legislation

b. Ensure a high level of professionalism and uphold the Trust values, in relation to all stages and activities within the recruitment and selection process

c. Maintain confidentiality of those involved in the recruitment process through its entirety and beyond

d. Declare any conflicts of interest and/or personal relationships.

4.4   **Recruiting managers** have a specific responsibility to:

a. Ensure that an appropriate process is followed robustly and diligently in relation to all aspects of establishment control and recruitment and selection activity that they have involvement in

b. Ensure that the job description and person specification is fit for purpose and meets the Trusts standard (template available on intranet) and has been evaluated according to the Trust's Job Evaluation process.

c. Ensure involvement of service users and Inclusive Recruitment Guardians on interview panels.

d. Ensure a high degree of competence of all employees within their area of responsibility who are involved in any aspect of recruitment and selection and that relevant and mandatory training has been completed.

e. Ensure that appropriate action is taken based on the result of the pre-employment checks

f. Ensure where applicable that appropriate sponsorship licence and/or other immigration procedures and checks are followed precisely for any workers requiring permission to work in the UK prior to commencement of employment in conjunction with the Recruitment Team

g. Ensure that a personal file is set up for every new employee to a required standard (further details are available on the intranet)

h. Scheduling/arranging local inductions and ensuring these are completed.

i. Completing probationary paperwork
j. Holding regular reviews during the initial 6 month probationary period and ensure that all responsibilities under the probationary arrangements are met.

4.5 The **People** department is responsible for:

   a. The provision of advice and/or support to managers and staff in relation to the application of this policy
   b. The development of the policy and related guidance as required
   c. Ensuring that monitoring and review of recruitment and selection data takes place in respect of equality of opportunity at the application, short listing and appointment stages, according to statutory obligations (see 4.5 below)

4.6 The **recruitment team** is responsible for providing an efficient and effective recruitment administration service. This will include the following transactional steps:

   a. Reviewing the vacancy requisition and ensuring all information is accurate and complies with Trust policy and Employment Law
   b. Monitoring of the redeployment register and alerting the recruiting manager and People Team of any 'At Risk' applicants.
   c. Publish recruitment advert following receipt of approval. The recruitment team will be responsible for ensuring that adverts and job description/person specifications are in the Trust's current template; any which do not meet these criteria will be brought to the attention of the recruiting manager for updating.
   d. Provide an effective support service to Recruiting Managers throughout the Recruitment & Selection Process advising on process as required.
   e. Undertake pre-employment checks in line with NHS Employers Check Standards communicating the results to recruiting manager
   f. Process all relevant paperwork for candidates
   g. Book new starters onto the next available corporate induction course.
   h. Ensure all information is recorded and completed in electronic system(s) appropriately
   d. Provide training on the Trust's recruitment system
   e. Provision of appropriate training in recruitment and selection

4.7 The Trust's **People Culture and Development Committee** is responsible for:

   a. Conducting an annual review of equal opportunities monitoring information with regard to the Trust's recruitment and selection activities, specifically with due regard to all areas within discrimination legislation
   b. To raise any areas of concern and/or recommend action based on the review findings (via the people team department)

4.8 The Trust's **Audit Committee** is responsible for:

a. Undertaking periodic audits of the Trust's recruitment and selection policy and associated procedure

Recruitment Procedure

4.9 Reviewing the vacancy

When a post becomes vacant, before deciding to fill the vacancy, the line manager should consider both current and future service needs, taking account of skill mix requirements and job design, and ensuring that any recruitment activities are consistent with the people plan for the service.

Some useful questions to consider are:

- Is the work still required?
- Can the work be absorbed by re-organising existing resources?
- Is it the same job as was done previously?
- Could a change to the skill mix be considered as an alternative?
- Will the job be permanent or temporary?
- Can the vacancy be covered with a temporary secondment?
- Is this one vacancy or can a single process be used to fill this and subsequent vacancies?
- Could the post be undertaken by an apprentice?

Where service re-design is required the People Business Partner should be consulted.

4.10 Job Description

A job description describes a job at the time of writing; existing job descriptions should be reviewed for each vacancy to ensure it is still current. It describes what the post holder is required to do to carry out the job effectively. It should contain sufficient detail to clarify the roles and responsibilities and provide a clear description of the job for the post holder. A template job description (including person specification) can be found on the Trust's intranet pages. Agenda for Change Job Descriptions must be evaluated through the Trust Job Evaluation process; each evaluated Job Description will be allocated a Job Evaluation Code.

4.11 Person Specification

This defines the qualifications, skills, experience and aptitudes etc., that are required by a person to fulfil the role. The criteria must be categorised as either essential (the minimum standards required to perform the job adequately) or desirable (the standards which enable the post-holder to perform the role more effectively). The criteria used should be competency based to enable candidates to demonstrate at interview how they have used particular skills previously.

The person specification is key to a fair selection process and is used as a framework for short-listing and interviewing candidates. The criteria must be in line with the needs of the job.

4.12 Agenda for Change Job Evaluation

If you have a new job/vacancy, you must ensure that the job description and person specification has been through the job matching process. In order to do this there will be a few forms which need to be provided, details of which can be found on the Trust's intranet pages and within the 3.48 Job Evaluation Policy.

If the job description is undergoing the process then you may still go out to advert if the post is critical to service delivery. If you are raising a vacancy with a post still in the job evaluation process this must be indicated on the job advert and job description that the band is 'subject to job evaluation banding outcome'. All roles awaiting job evaluation must first have approval from HRBP/Deputy Director of People Operations via the Trac authorisation process.

4.13 Establishment Control

The purpose of establishment control is to ensure that any recruitment or changes to establishment are appropriately authorised through an auditable procedure.

Establishment control is maintained via recruiting managers raising a Vacancy Authorisation request in Trust's recruitment system. The request is then scrutinised by the Recruitment team for accuracy and approved when appropriate. It is then is sent for approval from Finance, the relevant Senior Service Lead and the People Business Partner if required as per the Establishment Control Process. Once all these parties have approved the requisition it will be seen at Establishment Control Panel for final approval if required as per the Establishment Control Process. Once this final approval has been given the vacancy can be progressed to advert. The full purpose and procedure for Establishment control can be found in the Establishment Control Process.

START ………..>…………>………….>………...>…………>………..>…………>			
Recruiting manager requests vacancy authorisation	Senior manager, and Finance approval (People Business Partner if required)	Establishment control panel meets weekly to consider requests	Recruitment Team publish approved vacancies
Recruiting manager has full visibility of the vacancy at all stages of the process and should follow the recruitment system through to completion.			

4.14 **Job Advert**

An advertisement is the recruiting manager's opportunity to market the organisation, department and service and to engage with potential applicants. The advert is written from the job description and person specification. The information must be accurate, up-to-date, non-discriminatory, inclusive and should include brief details of the job and key requirements of the person specification.

It should detail the:

- duration of the appointment (if fixed term)
- closing date for applications (please allow sufficient time for prospective applicants to consider the role and make their application, two weeks as a minimum) and make the candidate aware if the vacancy is likely to close early if high numbers of applications are received.
- date of interview, if known (when planning this ahead please do allow sufficient time for shortlisting, contacting shortlisted applicants and for applicants to make arrangements to attend, this is also the ideal time to gain service user and Inclusive Recruitment Guardian representation).
- contact name and details of Trust staff member(s) who may be contacted for further information

External vacancies will be made public via www.jobs.nhs.uk , various electronic job boards and on the Trust's micro website. They may also be shared via social media. Regardless of where the vacancy is seen and applied for all applications will be processed in the Trust's recruitment system.

Internal vacancies will be published on the Trust's micro website.

6. **Selection Process**

A selection process consists of shortlisting, selection methodology appropriate to the role followed by the offer of appointment made on the condition of clear employment checks.

6.1. **Role and Responsibilities of the Recruiting panel**

The Recruiting manager is responsible for using the Trust's recruitment system to support administration at all points of the recruitment process. Access to this system and training can be obtained from the Recruitment Team.

It is the Recruiting Manager's responsibility to build a recruiting panel of suitably qualified individuals to carry out the selection process.

The Recruiting panel should where possible consist of a chair and at least 2 other members. The Recruiting Manager should be involved in all stages of the selection

process e.g. shortlisting and selection. Only in exceptional circumstances should the membership of the panel change during the process.

It is mandatory that the chair of the recruiting panel (usually the recruiting manager) should have undertaken recruitment and selection training and unconscious bias training and have participated in selection in the previous two years.

It is best practice that Recruiting panel members should have undertaken Recruitment and Selection and Unconscious bias training. It is intended that this becomes a mandatory requirement overtime as training is rolled out and becomes more accessible.

In addition, the panel should also where possible include a service user representative, including a carer, please contact the Volunteer Coordinator at the earliest opportunity to arrange this. It is important to check whether a conflict of interest exists between the Service User and potential applicant. A Service User Representative should not be expected to assess the technical competencies of the role however they can contribute to the assessment of a candidate's ability to evidence and demonstrate the Trust's Values and Behaviours.

For Band 7 and above roles and assessment centres it is mandatory for there to be an Inclusive Guardian Representative. The Recruitment Team can support Recruiting Managers in coordinating representatives for their interviewing panels.

An external representative may be asked to join the panel, for example where specialist skills are required for the post, or if it is felt that there are particular areas which require specialist assessment.

It is important the recruitment panel work swiftly and comply with the Process KPI's identified in Schedule One to ensure that the Trust is competitive in a busy recruitment market place.

Any panel member, including external assessors or service user representatives, must declare a conflict of interest as soon as this becomes apparent in order that alternative arrangements can be made.

6.2. Shortlisting Applicants

The selection panel, or at least two members of the panel, should assess and shortlist the applications received against the person specification.

Online application forms are identified by reference numbers and are anonymised to ensure that candidates are shortlisted based on their merit with an assessment of their skills, knowledge, qualifications and experience against the Person Specification.

All Panel members should shortlist separately and discuss their individual assessment to ratify the scores and decide on a shortlist of applicants to be invited to interview. These scores should be logged on the recruitment system against the applicant.

The Trust has committed to the Disability Confident Scheme. This means that all applicants who have declared that they are disabled must be invited to an interview if they meet the essential criteria of the role.

The selection panel members are required to add notes on the recruitment system against all applicants to enable feedback on non-selection. This is especially important for applicants who come under the Disability Confident scheme as the Trust is committed to providing detail as to why they have not met the essential criteria as stated on the Person Specification

6.3. Selection

The Recruiting manager should consider the different options available to assess a candidate's suitability for the role against the Job Description and Person Specification. Selection options may include, but are not limited to, interviews, group interviews, group exercises, presentations, psychometric tests or skill tests.

Selection processes should assess both the technical competence and the candidate's values and behaviours against the Trust's Values and Behaviours Framework. Further guidance on Values Based Recruitment can be found on the Trust's intranet pages.

To ensure fairness, all candidates should be assessed in the same way, with reasonable adjustments being made for individuals with a declared disability. Advice regarding reasonable adjustments can be obtained from Human Resources.

The recruiting manager is responsible for arranging the selection schedule. It is important that the selection is well structured, this means:

In-person Interviews:

- Holding the selection in a suitable, confidential location that is easily accessible
- Ensuring the location is free from disturbances or any distractions
- Allowing sufficient time for the selection process to take place
- Planning the selection process in advance of the assessment event
- Basing questions and assessments on the person specification and Trust values
- Referring to the application form so that the previous employment history is checked
- Scoring answers using a rating system
- Where appropriate give the candidate explicit opportunity to declare any convictions or disclosures relevant to the role

When completing remote or virtual interviews please also take into consideration:
- Ensuring the panel is on Do Not Disturb and free from disturbances or any distractions

- Providing the interview link 24 hours in advance of the interview
- Providing on the day contact details should there be any technical difficulties
- Offering understanding of the applicants surrounding circumstances when attending a virtual interview.
- Ensuring the correct access permissions (created a virtual lobby for applicants)
- If required obtain presentations in advance to mitigate any technical difficulties on the day.
- Basing questions and assessments on the person specification and Trust values

Please note that written notes taken at interviews and all other selection may be provided to the candidate as official documentation for any legal challenges.

6.4. Interview and selection outcome

Following the selection process the recruitment manager must contact the successful applicant by telephone to inform them of the decision. This will be followed up in writing by the recruitment team once a written instruction has been given by the Recruiting Manager via the recruitment system. Delaying contacting the unsuccessful applicants until the offer has been verbally accepted may allow the recruiting manager to approach other appointable candidates should the first choice not accept the position offered.

The recruiting manager may choose to contact the unsuccessful applicants by telephone and provide any constructive feedback with areas of development at the time.

When providing feedback the recruiting manager should:

- Be prepared in advance
- Provide a recap of the process the candidate has been through
- Ask the candidate about their experience
- Provide the results using specific examples and evidence
- Balance the positive and negative
- Check that it has been understood by the candidate.
- Consider if the unsuccessful applicant would be suitable for another role within the Trust. If so they should discuss this with the applicant and offer the opportunity to join our Trust Talent Pool via our Recruitment System.

Once the decision is recorded in the recruitment system the unsuccessful candidates will be informed of the panel's decision via email by the Recruitment Team.

6.5. Conditional offer of Employment

A conditional offer of employment will be made to the successful applicant by the recruitment team. This should reflect the offer as agreed between the Recruiting Manager and the Applicant either in the interview or subsequent discussions.

The successful candidate will be informed that the appointment is subject to pre-employment checks and references satisfactory to the Trust in accordance with the NHS Employment Checks Standards.

6.6. Pre-employment checks

The Trust is mandated to carry out a range of employment checks on all prospective employees prior to appointment, regardless of the term of the contract. The checks are designed to safeguard both staff and patients. All pre-employment checks will be carried out as prescribed by NHS Employers standards and will incorporate:

- Verification of identity checks
- Occupational Health clearance
- Proof of right to work
- Receipt of satisfactory criminal record check (DBS) if required
- Proof of relevant qualifications
- Professional registration details if applicable
- Employment history and reference checks

When appointing Executive Directors and Non-Executive Directors the Trust will ensure all available information is sourced to confirm any appointed person passes the Fit and Proper Person Test as per the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Recruiting managers cannot allow new starters to commence in post without satisfactory receipt of all pre-employment checks – other than in limited circumstances, where risk assessments have been carried out and formally authorised by a People Business Partner and Associate Director / Clinical Director.

6.7. Salary on appointment and pay-step dates

Starting salaries should be in-line with Agenda for Change, Medical Terms and Conditions or The Pay Framework for Very Senior Managers (VSM) as relevant.

Under Agenda for Change, previous service with employers outside of the NHS can be counted towards reckonable service for new employees.

Staff joining the NHS should under most circumstances commence on the bottom of the pay band, and work their way through the pay steps, dependent upon achieving the requirements to progress through pay steps as outlined in the Agenda for Change Handbook (please note that there are separate pay arrangements in place for Medical and Dental staff, as well as senior managers employed on VSM contracts).

The awarding of incremental credit without good reason is contrary to the principles of fair pay, both within national equal pay legislation and within the Agenda for Change agreement (AfC). Therefore it is important that any variations in starting salary have supporting evidence and clear justification.

If you wish any variations to be considered then do please reference the guidance and complete the form before making a conditional offer to your successful candidates.

For further information please refer to the Salary on Appointment process on the Trust Intranet Pages.

Pay Progression:
This is not an automatic process and employees will not go up the incremental pay steps unless they have met the criteria and completed the necessary steps in line with the 3.38 Pay Progression Policy. Please see the Trust's [intranet](#) for more information.

6.8. Reasonable adjustments

The need for reasonable adjustments to support employment, if required, should be discussed with the individual concerned, and details included in the occupational health referral for discussion during pre-employment checks. Further advice may be obtained from human resources as required.

6.9. Reserve candidates

Where more than one candidate is appointable the interview panel may decide to list second, third and so on, choice candidates. Where the first choice candidate is unable to take up employment for any reason, the second choice candidate may be offered the position and so on. Reserves may be held for a period of six months and if there is the requirement to fill the same post during that period the reserve candidate may be offered the position without having to repeat the recruitment process.

6.10. Performance improvement plan or warning – Internal Applicants

Where an employee is currently engaged in a performance improvement plan, conduct counselling or has a live warning then they must disclose this as part of the selection process (e.g. during the interview) to the recruiting manager. The Recruiting Manager should facilitate an opportunity within the selection process for this type of information to be disclosed in a private and confidential manner.

In some circumstances a change of department or role may support an individual to improve their performance and/or attendance and where this is the case, this will be supported by the current line manager as part of the reference process with their current status and file transferring to the new department if successful.

Where a change of location or role would not support resolution of the issues, the current line manager should reflect this as part of the reference and be discussed with the individual so that support can continue to be provided.

Once a live warning has expired there will be no need to reference this on internal applications.

6.11.   Withdrawing an offer of employment

If, following careful consideration, it is decided to withdraw an offer of employment then the grounds for withdrawal must be very clear, e.g. due to unsatisfactory references or other pre-employment checks, and the offer must be rescinded in writing by the Recruiting Manager. Advice is available from HR.

6.12.   Documentation and record keeping

Recruiting managers are required to maintain clear and comprehensive notes and keep relevant documentation together and retain them securely for a minimum of 6 months. The content will be particularly important if a claim is made from an unsuccessful candidate or a freedom of information request is received.

Data is held and destroyed in line with the General Data Protection Regulations (GDPR) and the Trust's Records Management Policy (7.07).

6.13.   Applications that contain false information

Any attempt to submit, whether successful or not, any document that is either fake, or has been altered with the intention of falsifying a person's identity, qualification or other information sought as part of the recruitment process, may be a potential offence under either the Identity Documents Act 2010 or the Fraud Act 2006. The applicant will be subject to investigation and liable to have any offer of employment withdrawn, or subject to disciplinary procedures if a current employee.

Any such instance, even if the person does not gain employment, should be referred to the Trust's counter fraud specialists.

6.14.   Counter Fraud

The Trust is required by law to protect the public funds it administers. In order to prevent and detect fraud the Trust has its own local counter fraud specialists who staff can contact in confidence if they have any concerns that fraud may have taken place.

7. Monitoring and Review

7.1   The Trust's People Cultural Development Committee will review the application of this policy on an annual basis (see section 4.5 above) by reviewing the Trust's recruitment and selection related monitoring data in conjunction with human resources team and the Inclusion Council.

7.2 The Trust's audit committee will undertake periodic audits of the Trust's recruitment and selection policy and procedure.

Training Needs Analysis for the policy for the development and management of Trustwide procedural / approved documents
Please tick as appropriate

There **is no** specific training requirements- awareness for relevant staff required, disseminated via appropriate channels (Do not continue to complete this form-no formal training needs analysis required)	
There **is** specific training requirements for staff groups (Please complete the remainder of the form-formal training needs analysis required- link with learning and development department.	✓

Staff Group	✓ if appropriate	Frequency	Suggested Delivery Method (traditional/ face to face / e-learning/handout)	Is this included in Trustwide learning programme for this staff group (✓ if yes)
All Chairs of Recruitment Panels	✓	Mandatory	Face to face /elearning	
All Panel Members for recruitment	✓	Best Practice	Face to Face /elearning	

Please give any additional information impacting on identified staff group training needs (if applicable) **Training requirement includes: Unconscious Bias and Inclusion Recruitment and Selection methodologies and selection practices**

Please give the source that has informed the training requirement outlined within the policy i.e. National Confidential Inquiry/NICE guidance etc.

Any other additional information

Completed by		Date	

Policy statement for the Recruitment of Ex-offenders.

As an organisation using the Disclosure and Barring Service (DBS) to assess applicant's suitability for positions of trust, North Staffordshire Combined Healthcare NHS Trust complies fully with the DBS code of practice and undertakes to treat all applicants for positions fairly. It undertakes not to discriminate unfairly against any subject of a disclosure on the basis of conviction or other information revealed.

North Staffordshire Combined Healthcare NHS Trust is committed to the fair treatment of its staff, potential staff or users of its services, regardless of race, gender, religion, sexual orientation, age, responsibilities for dependents, physical/mental disability or offending background.

We have this written policy statement on the recruitment of ex-offenders, which is available to all Disclosure applicants on request.

We actively promote equality of opportunity for all with the right mix of talent, skills and potential and welcome applications from a wide range of candidates, including those with criminal records. We select all candidates for interview based on their skills, qualifications and experience.

A Disclosure is only requested after a thorough risk assessment has indicated that one is both proportionate and relevant to the position concerned. Within the NHS this is mandatory for all new staff who have access to patients. For those positions where a Disclosure is required, all appliINTRion forms, job adverts and recruitment briefs will contain a statement that a Disclosure will be requested in the event of the individual being offered the position.

Where a Disclosure is to form part of the recruitment process, we encourage all applicants called for interview to provide details of their criminal record at an early stage in the application process. We request that this information is sent under separate, confidential cover, to a designated person within North Staffordshire Combined Healthcare NHS Trust and we guarantee that this information will only be seen by those who need to see it as part of the recruitment process.

As an employer, North Staffordshire Combined Healthcare NHS Trust is exempt from the Rehabilitation of Offenders Act 1974 and therefore will have access to your entire police record of convictions, cautions, reprimands and final warnings, both juvenile and adult, including those considered 'spent' as defined by the Act.

We ensure that all those in North Staffordshire Combined Healthcare NHS Trust who are involved in the recruitment process have been suitably trained to identify and assess the relevance and circumstances of offences. We also ensure that they have received appropriate guidance and training in the relevant legislation relating to the employment of ex-offenders, e.g. the Rehabilitation of Offenders Act 1974.

At interview, or in a separate discussion, we ensure that an open and measured discussion takes place on the subject of any offences or other matter that might be

relevant to the position. Failure to reveal information could lead to the withdrawal of an offer of employment.

We make every subject of a DBS Disclosure aware of the existence of the DBS Code of Practice and make a copy available on request.

We undertake to discuss any matter revealed in a Disclosure with the person seeking the position, before withdrawing a conditional offer of employment.

Having a criminal record will not necessarily bar you from working with us. This will depend on the nature of the position and the circumstances and background of your offences.

Contents

MIAA would like to thank all staff for their co-operation and assistance in completing this review.

This report has been prepared as commissioned by the organisation, and is for your sole use. If you have any queries regarding this review please contact the Engagement Manager. To discuss any other issues then please contact the Director.

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1 Executive Summary

Overall Audit Objective: To provide assurance that the systems and controls in place for recruitment are appropriate and in line with policy and national standards.

Scope Limitation:

This review focussed on recruitment information held within the TRAC system and by the recruitment team.

The recruitment of Medical staff was excluded from the scope of this review

Key Findings/Conclusion

Overall, we found that there is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.

The Trust's recruitment strategy is covered within the Trust's *Our Combined People Plan* with retention work monitored through key performance indicators and the Steering Group. The Recruitment and Activity report provides quarterly updates to the People Culture and Development Committee and Trust Board on KPI's in place. Audit testing on a sample of new starters during 2023/24 found that vacancy approval, shortlisting and interviews had all been completed in line with policy and NHS guidance and the Trust maintained records separately to those retained on TRAC.

There is an opportunity to further strengthen controls by introducing training KPI's that should be reported and monitored to ensure all recruiting managers have completed mandatory training. In addition, there is an opportunity to establish the Steering Group as a formal meeting within the governance structure and review the Recruitment and Selection Policy to ensure that keys dates including approval date, implementation date and review date have been included.

As part of this review, we undertook some detailed analysis of recruitment data on TRAC. A summary of the key findings is included in appendix A and more detailed information has been provided to management. Whilst this review shows that there are adequate processes in place to support recruitment it is clear from the analysis that some areas of the recruitment process could be more streamlined in terms of time frames and these areas should be reviewed by management to determine whether they can be made more efficient.

Objectives Reviewed	RAG Rating
Policies and procedures	Green
Training	Amber
Vacancy approval	Green
Shortlisting and interviews	Green
Pre-employment checks	Amber
Staff retention	Amber
Recruitment Strategy	Green
Reporting and monitoring	Green
Overall Assurance Rating	**Substantial**

Recommendations		
Risk Rating	Control Design	Operating Effectiveness
Critical	0	0
High	0	0
Medium	3	2
Low	0	0
Total	**3**	**2**

Areas of Good Practice

- The Trust has in place a Recruitment and Selection (R&S) Policy and Disclosure and Barring Policy supported by standing operating procedures (SOP) for Appointment of Internal Employees and Establishment and Vacancy Control Process. The policy's and supporting SOPs are readily accessible on the Trust's intranet for all staff.

- Review of the R&S policy confirmed that each stage of the recruitment process is clearly defined and details the required pre-employment checks in line with NHS Employment Check Standards. Roles and responsibilities are clearly detailed for key staff involved in the recruitment process from the recruitment manager and recruitment team through to committee and Board level.

- Our Combined People Plan 2003-2028 is the Trust's strategy that includes detail of staffing position as at 22/23 with work plans and work streams including '*Great Place to Work*' (appendix A). The work plan sets out trust programmes and milestones with target completion dates set. There is a focus on being inclusive, staff health and wellbeing, turnover and staff sickness.

- As per the R&S policy all recruiting managers are required to undertake recruitment and selection training as part of mandatory training requirements. Completion is recorded and monitored via the Trust's Learning Management System (LMS). Unconscious bias training is also available and should also be completed as best practice however this is not mandatory.

- Review of the mandatory Inclusive and Values Based Training that is currently provided by the Trust confirmed that it is comprehensive covering each aspect of the recruitment process from raising a vacancy through to interview. The training also covers inclusion and discrimination.

- Auditing testing was undertaken on a sample of new starters for the period April – June 2024. Testing confirmed that each vacancy had been appropriately approved in line with Trust policy prior to advertisement and evidenced on TRAC. It was also confirmed that each vacancy had a job description and person specification attached to TRAC.

- Trust policy requires shortlisting to be conducted by two members of the selection panel. Testing confirmed that each of the sample had at least two members recorded for shortlisting on TRAC and also documented the interviewers. It was confirmed through discussions that interview scoring is maintained by the recruiting manager and there is no requirement for this to be included on TRAC.

- Audit review of the pre-employment checks undertaken for the sample identified that each check had been completed in full for the majority of the sample with the exception of one as noted in recommendation 2. Supporting evidence for each check was available on the TRAC system and also stored securely by the recruitment team on a shared drive. In addition, it was confirmed that the recruiting manager also retains a full copy of the TRAC form for the personnel file.

- The Trust are part of the ICS retention programme with a named People Partner in place. A Trust Steering Group has been established and this group has responsibility for monitoring phase 2 of the programme. Whilst this group is not part of the Trust's formal governance structure, there is an agenda and minutes are shared with the attendees. The people partner provides updates on Trust work to the formal ICS Steering Group.

- The People Culture and Development Committee (PCDC) receive a quarterly report, Supplementary People Metrics Summary, which forms part of the Recruitment Activity report. Review of the

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Recruitment Activity report confirmed that it includes KPI's and provides an oversight into recruitment activity, monitoring performance and identifying trends that require action and/or review. The report also provides a comparison between ESR vacancies and WTE vacancies in TRAC. Review of the last 3 reports confirmed that time to recruit is included.

- Review of Trust Board papers confirmed that updates on the recruitment activity report are provided via the PCDC meeting update quarterly. Trust Board also receives the Improving Quality and Performance report (IQPR) monthly which includes a section on Organisational Health and Workforce. Review of the IQPR report identified that updates on vacancy rate and staff turnover are included each month.

Key Findings – Issues Identified	
Medium	1.1. There is currently no KPI in place for mandatory recruitment training. There is also no specific training provided for exit interviews.
	1.2. Testing highlighted a retire and return hire that had not had mandatory ID and Right To Work checks completed.
	1.3. NSCH Steering Group is not a formal meeting and is not included within the governance structure.
	1.4. ESR new starter forms are not consistently raised prior to start date.
	1.5. There is currently no tracker in place to monitor actions identified from the recruitment activity report.

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2 Findings and Management Action

1. Training		Risk Rating: Medium
Control Design		
Key Finding – Discussions highlighted that at the time of this review there were no specific KPI's in place for recruitment training and compliance with mandatory training was not being reported. It was noted that this will be an area of focus following review of the current training arrangements. In addition, exit interviews have recently moved from survey monkey to ESR but there are issues with timeliness of completion and completion in general. It was confirmed that there is currently no training provided relating to exit interviews and completion of the ESR exit data.	**Specific Risk** – Staff not completing the appropriate training leading to inconsistencies in recruitment and retention processes.	**Recommendation** – The Trust should establish KPI's in relation to recruitment training. Compliance should then be monitored and reported, where compliance is below expectations this should be addressed. Training specific to exit interviews and the importance of timely completion for ESR data should be introduced and monitored to ensure staff have completed as appropriate to their role.
Management Response – Training for recruitment and exit interviews that is currently in development to be tracked through our LMS system and will be in place by Q4 24/25. Responsible Officer – Recruitment Lead Implementation Date – 31 March 2025		Evidence to confirm implementation – KPI reporting Exit interview training materials

2. Pre employment checks		Risk Rating: Medium
Operating Effectiveness		

Key Finding –	Specific Risk –	Recommendation -
Audit testing identified one retire and return hire commenced back in post prior to ID and Right To Work (RTW) checks being completed which is not in line with NHSE guidance. NHSE guidance requires ID and RTW as mandatory. Discussions confirmed best practice is to complete the required checks for these roles. There is no documented Trust guidance for retire and return applications	Non-compliance with NHSE guidance	The Trust should update the Recruitment and Selection policy to include guidance on retire and return hires to ensure that all staff are aware of the mandatory pre-employment checks for this type of hire. In addition, the Trust should also compete routine audits to ensure that all mandatory pre-employment checks are being completed as per trust policy and NHSE guidance.
Management Response –

Retire and Return has been highlighted as an area for further review including the introduction of a standard operating procedure. Retire and Returns are also to be included in recruitment training going forward to help applicants and managers understand why checks need to be completed ahead of returning into post. This will be audited as part of a wider in-house audit on new starts through Trac – March 2025 will be a suitable target date for audit of starting files.

Responsible Officer – Recruitment Lead

Implementation Date – 31 March 2025 | | Evidence to confirm implementation –

Policy

Audits |

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3. NSCH Steering Group		Risk Rating: Medium
Control Design		
Key Finding – Discussions with the ICS People Partner confirmed that the NSCH Steering Group in not currently a formal meeting and does not feed into the Trust's governance structure. It was noted from discussions and review of papers that the meeting does have an agenda in place and minutes are taken and circulated to attendees.	**Specific Risk** – No clear oversight and monitoring of retention work plans and action plans at Trust level.	**Recommendation** – The NSCH Steering Group should be formalised and report into the Trusts governance structure to ensure oversight of the work plans.
Management Response - The meeting will be formalised going forward with the first meeting taking place on the 3rd October 2024. Responsible Officer – ICS People Partner Implementation Date – 31 October 2024		Evidence to confirm implementation – Governance structure Copy of reports into Trust meetings/committee

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4. ESR new starter form		Risk Rating: Medium
Operating Effectiveness		
Key Finding – It was confirmed that EASY new starter forms should be raised either prior to the actual start date or on the start date for all new employees. Sample testing identified that out of 28 new hires there were, • 3 raised prior to start date • 12 raised on start date • 13 raised between 1 day to 32 days after the start date	**Specific Risk** – Delay in processing new starter forms leading to delay in pay and/or errors.	**Recommendation** – The Trust should ensure that EASY new starter forms are completed timely to ensure that all new hires are processed appropriately.
Management Response - a. We will check guidance to ensure it references the requirement to complete an appointment form in EASY for the new member of staff b. We will issue comms to managers to reinforce/ remind them of the requirement c. We will undertake routine audits to monitoring completion of the forms Responsible Officer –Recruitment Lead / Workforce Planning and Information Officer to support Implementation Date – a. 30 November 2024 b. 30 November 2024 c. 31 March 2025		Evidence to confirm implementation – Copy of guidance Copy of communication of guidance Copy of audits undertaken

5. Action tracker		Risk Rating: Medium
Control Design		
Key Finding – It was identified through review of reporting arrangements that the Recruitment Activity report identifies trends that require action and/or review. It was noted that updates are provided within the Supplementary People Metrics Summary provided to PCDC under key actions and progress however, there is currently no tracker in place to monitor progress for the identified actions and completion.	**Specific Risk** – Lack of evidence to support identified actions and completion.	**Recommendation** – The Trust should maintain a record of actions identified for recruitment through a tracker that can be monitored for completion. This will ensure that there is a clear audit trail of progress and completion with an accountable officer identified.
Management Response – Action Tracker has been incorporated and will be in use for future reporting. This will be included in the Directorate quarterly report from Q3 24/25. Responsible Officer – Recruitment Lead Implementation Date – 31 December 2024		Evidence to confirm implementation – Copy of Tracker Copy of Quarterly report Q3 24/25

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Appendix A: Data Analytics

Caveat: Since the dates within the data report do not always flow in chronological order, the averages will be influenced by occasional negative values.

Authorisation started at
- Average: 11.0
- Max: 66.0 days
- Min: 0.0 days

Authorisation Ended at
- Average: -1.5
- Max: 15.0 days
- Min: -35.0 days

Advertising Start Date
- Average: 13.4
- Max: 67.0 days
- Min: 0.0 days

Closing Date
- Average: 14.8
- Max: 82.0 days
- Min: -5.0 days

Shortlisting Completed
- Average: 15.6
- Max: 41.0 days
- Min: -48.0 days

Interview
- Average: 2.2 days
- Max: 48.0 days
- Min: 0.0 days

Interview outcome completed
- Average: 3.1 days
- Max: 26.0 days
- Min: 0.0 days

Date offer made
- Average: 3.6 days
- Max: 133.0 days
- Min: 0.0 days

References Requested
- Average: 12.9
- Max: 86.0 days
- Min: -19.0 days

ID Check Appointment
- Average: 7.4 days
- Max: 105.0 days
- Min: -14.0 days

DBS Clearance
- Average: 4.7 days
- Max: 70.0 days
- Min: -100.0 days

OH Clearance
- Average: 15.6
- Max: 162.0 days
- Min: 0.0 days

All checks Complete
- Average: 0.4 days
- Max: 8.0 days
- Min: 0.0 days

Starting letter
- Average: 32.2
- Max: 370.0 days
- Min: -338.0 days

Booked Start
- Average: 4.9 days
- Max: 367.0 days
- Min: 0.0 days

Actual Start Date

Average of key time periods, by Internal/External

Legend:
- Average of Time to hire
- Average of Time to fill
- Average of Entire interview process time
- Average of Entire offer process
- Average of Time to start

External: 103, 94, 20, 43, 29
Internal: 83, 72, 14, 31, 15

Average of key time periods, by Grade

Legend:
- Average of Time to hire
- Average of Time to fill
- Average of Entire interview process time
- Average of Entire offer process
- Average of Time to start

Band 2: 138, 119, 13, 66
Band 3: 73, 90, 21, 39, 29
Band 4: 69, 56, 15, 21, 6
Band 5: 98, 92, 16, 50, 23
Band 6: 88, 80, 14, 36, 11
Band 7: 93, 81, 12, 30, 26
Band 8a: 71, 73, 15, 27, 25
Band 8b: 135, 120, 30, 80
Band 8c: 75, 61, 14, 20
Band 8d: 95, 95, 15, 54
VSM or NHS Medical and Dental: 258, 249, 15, 209

Average of key time periods, by Sector

Sector	Average of Time to hire	Average of Time to fill	Average of Entire interview process time	Average of Entire offer process	Average of Time to start
Administrative Services	95	85	13	37	9
Allied Health Professions	99	86	20	38	25
Allied Health Professions Nursing and Midwifery	68	61	14	21	8
Directors	258	249	14	209	
Directors Medical and Dental			15		
Health Science Services					
Medical and Dental					
Nursing and Midwifery	83	89	18	40	27
Support Services	87	80	16	49	

Average of key time periods, by Directorate

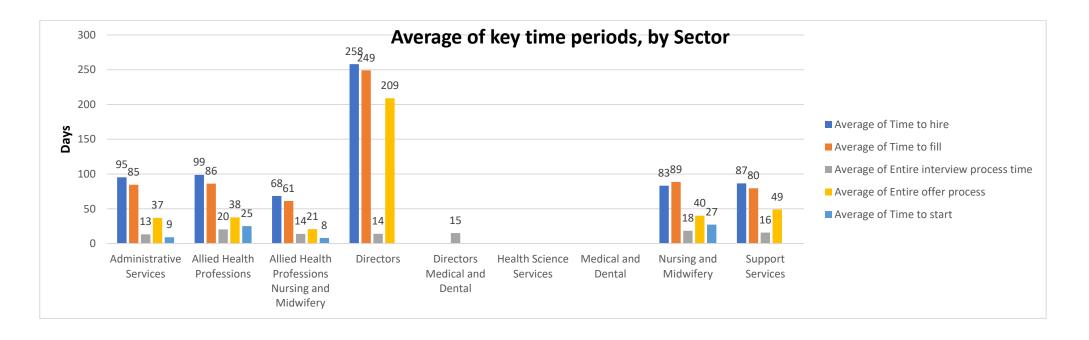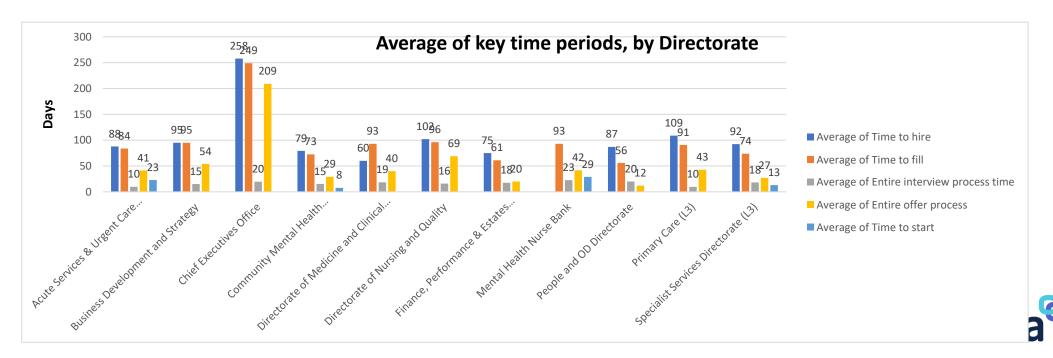| Directorate	Average of Time to hire	Average of Time to fill	Average of Entire interview process time	Average of Entire offer process	Average of Time to start
Acute Services & Urgent Care...	88	84	10	41	23
Business Development and Strategy	95	95	15	54	
Chief Executives Office	258	249	20	209	
Community Mental Health...	79	73	15	29	8
Directorate of Medicine and Clinical...	60	93	19	40	
Directorate of Nursing and Quality	102	96	16	69	
Finance, Performance & Estates...	75	61	18	20	
Mental Health Nurse Bank	93		23	42	29
People and OD Directorate	87	56	20	12	
Primary Care (L3)	109	91	10	43	
Specialist Services Directorate (L3)	92	74	18	27	13

Appendix B: Engagement Scope

Scope

The overall objective is to provide assurance that the systems and controls that the Trust has in place for recruitment are appropriate and in line with policy and national standards.

- Recruitment policies are robust, in line with national requirements, identify key responsibilities and are appropriately disseminated.

- Staff involved in the recruitment process have received appropriate training.

- Posts are approved in line with policy requirements, prior to advertising.

- Shortlisting and interviews are conducted in line with policy requirements and appropriate records are retained.

- Processes are in place to ensure the NHS Employment Check Standards are carried out prior to appointment and evidence retained to support checks

- The Trust are utilising the best practice guides and tools available and working with system partners to support staff retention.

- There is a recruitment strategy in place which is monitored to assess the effectiveness of delivery and adjusted if necessary

- There are appropriate monitoring & reporting arrangements to support the effective management of recruitment.

Scope Limitations

- The scope of this review will focus on the objectives described above and is limited to the assessment of controls and processes in operation at the organisation, at the time of testing.

- The recruitment of Medical staff will be excluded from the scope of this review.

Limitations

The matters raised in this report are only those which came to our attention during our internal audit work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required. Whilst every care has been taken to ensure that the information in this report is as accurate as possible, based on the information provided and documentation reviewed, no complete guarantee or warranty can be given with regards to the advice and information contained herein. Our work does not provide absolute assurance that material errors, loss or fraud do not exist.

Responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify all circumstances of fraud or irregularity. Effective and timely implementation of our recommendations by management is important for the maintenance of a reliable internal control system

Appendix C: Assurance Definitions and Risk Classifications

Level of Assurance	Description
High	There is a strong system of internal control which has been effectively designed to meet the system objectives, and that controls are consistently applied in all areas reviewed.
Substantial	There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.
Moderate	There is an adequate system of internal control, however, in some areas weaknesses in design and/or inconsistent application of controls puts the achievement of some aspects of the system objectives at risk.
Limited	There is a compromised system of internal control as weaknesses in the design and/or inconsistent application of controls puts the achievement of the system objectives at risk.
No	There is an inadequate system of internal control as weaknesses in control, and/or consistent non- compliance with controls could/has resulted in failure to achieve the system objectives.

Risk Rating	Assessment Rationale
Critical	Control weakness that could have a significant impact upon, not only the system, function or process objectives but also the achievement of the organisation's objectives in relation to: • the efficient and effective use of resources • the safeguarding of assets • the preparation of reliable financial and operational information • compliance with laws and regulations.
High	Control weakness that has or is likely to have a significant impact upon the achievement of key system, function or process objectives. This weakness, whilst high impact for the system, function or process does not have a significantimpact on the achievement of the overall organisation objectives.
Medium	Control weakness that: • has a low impact on the achievement of the key system, function or process objectives; • has exposed the system, function or process to a key risk, however the likelihood of this risk occurring is low.
Low	Control weakness that does not impact upon the achievement of key system, function or process objectives; however implementation of the recommendation would improve overall control.

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Appendix D: Report Distribution

Name	Title
███████████	Interim Chief People Officer
███████████	Deputy Chief People Officer
██████	Recruitment Lead
█████████████████	People Business Partner
████████████	People Operations Lead

Title:
Tel:
Email:

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