Clinical, Medical and Dental Staff and Manager Reassignment Orientation Guide

COVID-19 Contingency
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    Thank you

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1. Introduction

In response to the unprecedented demands posed by the COVID-19 pandemic, it is now necessary to put in place arrangements to help sustain essential services in NHSGGC.

Where there is an identified risk to the continuity of patient facing services being delivered, your line manager may be seeking volunteers to assist in the areas of greatest need. This may require clinical, medical and dental staff to prepare for reassignments into different roles and/or locations in order to give support on a temporary basis.

In response to COVID-19 you may be identified by your line manager/Director of Medical Education as someone who falls into the above categories and who may be able to support NHSGGC at this unprecedented time. The following guide has been developed to provide staff and managers with information and support related to this.

Staff will only be asked to be reassigned where this is absolutely critical for the delivery of patient services during this pandemic. Reassignment requires the agreement of both parties and training, support and orientation will be given.

2. General Principles

We recognise that clinical, medical and dental staff may have concerns about being moved from their normal work area; however, your manager will discuss this in more detail with you, including potential roles and duties.

We recognise that some discussions may have already taken place; however, this Guide is intended to help prepare staff for reassignment over the coming days and weeks. It is hoped that it will allow support conversations, and start preparations for training and orientation between staff and their managers and assure staff of arrangements and support in place in the event that they are asked to be reassigned elsewhere.

Timeous discussions will take place, in partnership, with the trade union/professional organisations where reassignment is being considered and required to allow a collaborative and support approach. Heads of HR will lead in these discussions.

2.1 Career Grades

The general principles that will be followed in relation to reassignment for Career Grade staff:

- Whilst there will be no requirement for a full interim job plan review, managers, along with teams and individuals will discuss proposed re-assignment, any restrictions, and seek understanding of ability to travel to a different site as necessary.

- The request to move to an alternate area must be within the scope of practice and capability of the medical practitioner. Managers will provide comprehensive information for the reassigned staff member in relation to use of risk assessment and Personal Protective Equipment in the proposed new work area.

- Timescales of the re-assignment will be discussed in advance however it is unlikely in the early stages that anyone will be able to confirm the specific duration due to the evolving nature of the pandemic. It is therefore essential that regular reviews are undertaken, not less than monthly, to discuss progress and anticipated return to the normal place of work.

- There will be no financial detriment to medical and dental staff who undertake reassigned duties i.e. you will continue to receive, as a minimum, your applicable rate of pay and allowances as per your agreed Job Plan and any additional travel costs at normal reimbursement levels. Where the revised working pattern moves elements of work into premium time periods, the applicable rate will apply.

- Training and induction will be provided to equip you for the role that you may be assigned to.
• Where required orientation shifts will be provided. This will be in addition to online orientation and training.

• You should continue to observe ‘social distancing’ measures where practically possible.

• You should report any absence to your point of contact on site and also to your substantive line manager to ensure accurate recording on SSTS.

• You will be advised of a point of contact, to discuss any queries.

2.2 Training Grades

The general principles that will be followed in relation to reassignment for Training Grades:

• Trainees must not be asked to undertake any activity beyond their level of competence and must be advised they should seek senior workplace guidance if that arises.

• The relevant Postgraduate Dean should be informed of plans to redeploy trainees of any grade prior to any reassignment and should have an opportunity to raise any concerns around the educational impact of the proposed move.

• Trainees deployed to a different clinical area must have appropriate induction and be informed of who they are reporting to, and who is providing supervision with details of how to contact them.

• Where required orientation shifts will be provided. This will be in addition to online orientation and training.

• There will be no financial detriment to trainees who undertake reassigned duties i.e. you will continue to receive, as a minimum, your previous rota banding except where the revised rota is of a higher banding, in which case the higher rate will be applied. You will also receive any additional travel costs at normal reimbursement levels. Where the revised working pattern moves elements of work into premium time periods, the applicable rate will apply.

• Arrangements for reassigned trainees should be reviewed monthly and updates provided to the relevant Postgraduate Dean on a weekly basis to ensure that trainees are adequately supervised in the host environment/specialty, and that they continue to work within the limits of their competence appropriate to their stage of training.

• Where training is interrupted or learning outcomes are not achieved due to a major incident response, these issues will be taken into account at the trainee’s next Annual Review of Competence Progression (ARCP) which will inform future training requirements and placement planning.

Source: Supporting the COVID-19 Response – Guidance Regarding Medical Education and Training

2.3 Other Clinical Staff including Nursing, HSCP and AHPs.

The general principles that will be followed in relation to reassignment for other clinical staff:

• Managers will discuss proposed re-assignment, any restrictions, and seek understanding of ability to travel to a different site as necessary.

• The request to move to an alternate area must be within the scope of competence and capability of the practitioner.

• For those staff on Agenda for Change Terms and Conditions, any temporary change of work pattern must be agreed on a voluntary basis by you. Discussions will be held to understand your current contractual hours and pattern of work and these will be retained.
There will be no financial detriment to staff who undertake reassigned duties i.e. you will continue to receive, as a minimum, your standard rate of pay and allowances and any additional travel costs.

Staff will only be asked to be reassigned where this is absolutely critical for the delivery of patient services during this pandemic. Participation in this process is voluntary and training, support and orientation will be given prior to staff commencing clinical activity in host location.

Managers will provide reassurance in relation to use of risk assessment and Personal Protective Equipment, if necessary.

Timescales of the re-assignment will be discussed in advance however it is unlikely that managers will be able to confirm the specific duration due to the evolving nature of the pandemic. Regular reviews will take place with individuals Line Manager.

Training and induction will be provided to equip you for the role that you may be assigned to.

Where required orientation shifts will be provided. This will be in addition to online orientation and statutory training.

You should continue to observe ‘social distancing’ measures where practically possible.

You should report any absence to your point of contact on site and also to your substantive line manager to ensure accurate recording on SSTS.

You will be advised of a point of contact, to discuss any queries.

3. Identifying Roles

Lists of career grade medical and dental staff have been compiled by the Chiefs of Medicines to determine those who possibly could be reassigned to assist in other areas. Some medical and dental staff could be immediately available, others could be available when other services are stopped and past key deadlines for priority work.

Lists of non-essential clinical staff have been compiled by local managers to determine who could possibly be reassigned to assist in other areas. Where a member of staff is included in such a list, they will be informed directly by their line manager.

Appendix 2 contains a copy of the Covid-19 Trainee Redeployment process which is being followed by the DME and her team.

4. Reassignment Discussions

In the first instance your manager/DME will discuss possible reassignment with you. They will discuss role, location and specifics relating to the position. If you are in agreement to the reassignment, then you will be provided with details of who and when to report. Discussions will be held in line with the principles outlined above. In addition:

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>What training will I receive?</td>
<td>You will receive local induction and orientation. You will also be asked to familiarise yourself with online materials as appropriate to your grade</td>
</tr>
<tr>
<td>What about Personal Protective Equipment (PPE)?</td>
<td>If PPE is required for the role, you will be issued this when you report to your reassigned area and shown how to use appropriately</td>
</tr>
<tr>
<td>Will I need a different ID security badge?</td>
<td>You should display your existing ID security badge. Where staff require higher levels of access to secure areas, a temporary ID badge to enable this will be arranged by your named contact</td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
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<tr>
<td>Will I require to travel to a different site?</td>
<td>You may be required to travel and provide services at another site and you should discuss feasibility of this with your manager. If you have to move to another site you will be reimbursed for excess travel expenses paid in accordance with the Terms and Conditions of employment and travel time will also be provided.</td>
</tr>
<tr>
<td>Will I receive my normal salary?</td>
<td>There will be no change to your existing terms and conditions. Specifically there will be no financial detriment to those who undertake reassigned duties.</td>
</tr>
<tr>
<td>Who should I contact to report absence e.g. sickness, or request leave</td>
<td>You should report absence, or request leave, from your named contact, but also contact your substantive line manager to ensure accurate recording on SSTS. Where there has been pre-approved leave, individuals should be encouraged to take this.</td>
</tr>
<tr>
<td>Will be asked to change my normal work pattern?</td>
<td>Any temporary change of work pattern must be agreed on a voluntary basis by you. Discussions will be held to understand your specific requirements and flexibility.</td>
</tr>
<tr>
<td>Will I receive a uniform?</td>
<td>If you require a uniform to work in your reassigned area but do not currently have one, please inform your line manager to arrange this.</td>
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</tbody>
</table>
5. Reporting to a Reassigned Location

Once agreed by you and your manager arrangements will be made for you to ensure online orientation and training. Following this you will be given contact details for your named contact in your reassigned role and where and when you should report to.

If you cannot report for work in your reassigned area for any reason, please ensure you contact your substantive line manager/supervisor, to ensure accurate recording on SSTS, as well as the manager in your reassigned work area.

6. Infection Prevention and Control

6.1 COVID 19

If you have any of the COVID 19 symptoms, or you have come into contact with someone who has, please report this to your substantive line manager as soon as possible and follow the guidance from NHS Inform regarding Self Isolation. Further information for NHSGGC staff is regularly updated on NHSGGC website using the following links:

<table>
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<tbody>
<tr>
<td>Health Protection Scotland</td>
<td><a href="https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/">https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/</a></td>
</tr>
</tbody>
</table>

6.2 Hand Hygiene

Wherever you are working you must continue to follow the guidelines of good hand hygiene - washing hands (20 seconds minimum) or use hand sanitiser. These principles are key to managing the spread of COVID 19.

![Clean Hands Are Safer Hands](image)

7. Personal Protective Equipment (PPE)

You will be advised on further infection prevention and control precautions appropriate to your reassigned role and work location. If you require PPE this will be included as part of your local induction.
8. Statutory and Mandatory Training

8.1 NHSGGC Core Topics

As an existing staff member you must ensure that your NHSGGC Core Statutory and Mandatory training is up to date.

As a minimum, you must be current with the following prior to moving to your reassigned area, any outstanding modules should be completed immediately:

- Fire Safety,
- Manual Handling Theory,
- Standard Infection Control Precautions
- Health & Safety, An Introduction.

These modules must be completed prior to commencement within your reassigned work area. All other Mandatory Training should be completed as soon as reasonably practical.

8.2 Additional Topics

You will be advised on any additional mandatory training that may be required in your reassigned work location. You will not be able to commence work in the new location until these have also been completed.

9. Fire Safety

You will need to know what to do in the event of a fire in your reassigned work location. This may differ from your usual place of work. For example Horizontal Evacuation is common within the ward areas of most hospital sites. This is a progressive evacuation process and is different from the ‘standard’ evacuation. This is explained in the NHSGGC Fire Safety Statutory module on Learnpro – please ensure that you complete this module before any reassignment.

Your reassigned manager will provide an update and orientation on the fire procedure in your work location.

10. Keeping you safe

Remember, NHSGGC will do everything it can to reduce any risks. In addition, you are responsible to take appropriate actions to ensure your own health and safety and that of your colleagues, patients and service users.

Do not put yourself or others in situations where your actions or inactions could cause harm, for example by undertaking procedures when you do not have the required PPE. Although we are working in unprecedented times, we must ensure that we are all working safely.

11. Medical Indemnity

CNORIS indemnifies Health Boards for activities carried out under the direction and control of NHS staff, including those carried out by students and trainees.

Thank you

We are in unprecedented times and all of our staff are critical to us. If you are able to move to a reassignment role we are very grateful – you are helping us to keep patients safe and deliver much needed services. We greatly value everyone’s team spirit and we recognise that you may have anxieties, - please speak to your Line Manager and we will try to continue to support and reassure you in any way we can.
Appendix One - Orientation Guide for Reassigned Staff

For completion by Managers at reassigned location.

<table>
<thead>
<tr>
<th>Category</th>
<th>Orientation Activities</th>
<th>Notes</th>
</tr>
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</table>
| Orientation and Induction at Reassigned Work Location | ▪ Confirm named contact details.  
▪ Introduction to key colleagues  
▪ Orientation of work area including:  
  o Toilets  
  o Breaks and rest areas  
  o Uniform and PPE requirements  
  o ID badge  
  o Key equipment | |
| Role Specific Induction               | ▪ Agree job shadow peer or mentor.  
▪ Put in place orientation shifts | |
| Infection Prevention and Control      | Reinforce hand hygiene and social distancing arrangements. | |
| Statutory and Mandatory Training      | Ensure staff members has completed NHSGGC Core 9 topics, plus:  
  GGC: 057 HCSW Code of Conduct  
  GGC: 061 Management of Needlestick & Similar Injuries  
  GGC: Falls Prevention Training  
  GGC: 221 Bedrails | |
| Fire Safety                           | Confirm:  
  ▪ Where are the fire exits?  
  ▪ Where is the fire assembly point?  
  ▪ When does the fire test take place?  
  ▪ What fire alarm is used?  
  ▪ Sign in arrangements? | |
| Manual Handling                       | Reinforce manual handling Dynamic Risk Assessment - TILER | |
| Keeping You Safe                      | Remind that any accidents and near misses should be reported to named contact and through Datix. | |

Appendix 2

Covid-19 Trainee Redeployment Process

Principles

- Where possible, tailoring of destination to current skill sets of those being redeployed
- Provision of induction and orientation to the expected roles & responsibilities.
- Ensuring that clinical supervision, escalation, and health and safety issues for all trainees who have been redeployed have been identified and addressed.
- Ensuring that all redeployed trainees health and safety needs and escalation procedures have been addressed.

Process

- This will be in stages over the next few days allowing reasonable numbers to be inducted into new placements. This process will change as required.
  
  - Service (DMD) – Identify resource need - taking into account greatest clinical pressures / staff absence and inform DME
  - DME identifies potential trainees for redeployment and agrees this with service / NES
  - DME – writes to trainees with redeployment potential asking for preferences (Webropol)
  - 48-hour window for replies from trainees
  - DME – once trainees’ preferences are known – allocation in discussion with SD/CD and taking into account preferences where possible.
  - Med ed team contact trainee stating placement and induction arrangements – ideally in 4 trainee cohorts.
  - Med ed team contact service to let know who is being redeployed and when.
  - Med ed team inform medical staffing of any trainees moving and to where – tracking, banding and employment purposes.
  - Med ed team track all redeployment placements and report to NES for educational, training tracking purposes.