

On-Call Policy

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Version	Description of changes	Reason for changes	Author	Date
V0.1	Updated policy to reflect Herefordshire and Worcestershire merger	Updated policy for HWCCG	EPRR Lead	10-01-2020
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V1.0	Updated with title changes	Changes to job titles	H Hancock, EPRR Lead	20-01-2020
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1. Introduction

It is a requirement under the Civil Contingencies Act (2004), NHS Emergency Planning Guidance (2005), and the Arrangements for Health Emergency Preparedness, Resilience and Response from April 2015, that on-call arrangements are in place to ensure a 24 hours a day, seven days a week response to significant and major incidents. The Herefordshire & Worcestershire Clinical Commissioning Group (CCG) will support the NHS England Area Team (AT) to mobilise, and where necessary co-ordinate the local NHS response in the event of a major emergency or major incident.

As commissioners of patient services, CCGs are required to have in place a robust process whereby providers with whom the CCGs commissioned services can access someone (person on-call) from the CCGs 24 hours a day, seven days a week.

The CCG on call policy, covers both elements:

- Daily System pressures
- EPRR, emergencies

2. Purpose

The purpose of this policy is to set out the on-call arrangements put in place by the Herefordshire and Worcestershire CCG to ensure compliance with Emergency Preparedness Resilience and Response (EPRR), business continuity plan requirements and system pressures.

This policy has been developed in accordance with the Principles for Harmonised On-Call Arrangements in Annex 3 of the NHS Agenda for Change.

The CCGs are category two responders under the Civil Contingencies Act 2004. Under this legislation the CCG has a duty to cooperate and share information with other responders including NHS England, Public Health England, Acute Trusts and Foundation Trusts, Community and Mental Health Providers which are category one responders. This Policy will detail how the CCGs will meet those duties including the establishment of an on-call system that allows the CCGs to discharge their duties out of normal business hours and the required representation on the Local Health Resilience Partnership and any multi agency tactical coordinating groups that may be established to meet the need of a major incident or emergency.

3. Scope

This policy applies to all CCG staff at Agenda for Change Band 8c and above who participate in the on-call rota in Herefordshire & Worcestershire CCG.

4. Responsibilities and Duties

4.1 Accountable Officer

- Be accountable for major incident and service/business continuity planning within the CCG. The day to day implementation of this policy will be the responsibility of the Accountable Emergency Officer (AEO) for EPRR.
- Ensure they share information that may be cascaded from NHS England in relation to on call and EPRR.
- Act as an escalation point for on-call employees and where appropriate raise concerns with providers where high volumes of inappropriate calls are received.

4.2 Accountable Emergency Officer

- Oversee and support senior managers to meet EPRR National Occupational Standards
- Act as the joint lead for this policy and be responsible for its implementation.
- Manage directly the EPRR element for on call
- Report on a quarterly basis to the Clinical Executive Committee, highlighting any issues or concerns in relation to the operation of this policy.
- Periodically review the information resources available to support on-call employees in carrying out their responsibilities
- Act as an escalation point for on-call employees, and raise concerns with providers where high volumes of inappropriate calls are received
- Manage the EPRR function and assurance to NHS England and Improvement.

4.3 Herefordshire & Worcester Managing Director

- Manage directly the system pressures element for on call
- Act as the clinical lead for this policy.
- Act as an escalation point for on-call employees for system pressure calls, and raise concerns with providers where high volumes of inappropriate calls are received working with the Accountable Emergency Officer
- To deputise for the Accountable Emergency Officer as required.

4.4 Urgent Care Lead

- Be responsible for providing up-to-date guidance and information resources to support on-call employees in carrying out their responsibilities.
- Provide training for staff with on-call responsibilities for system pressures
- Support in day system pressures and out of hours support as required.

4.5 EPRR Lead

- Interpret national policy, guidance and legislation relating to emergency preparedness, resilience and response, and design and deliver ways of implementing this to ensure the CCGs meet their statutory duties and responsibilities.

- Provide in house Emergency response training for staff where possible who have on-call responsibilities and maintain training records. System pressure and surge training provided by urgent care lead.
- Ensure the on-call resources are comprehensive and up-to-date and policies and plans assessable on SharePoint.
- Maintain the Emergency Contacts Directory in on call pack.
- Main Liaison point with NHS England and Improvement for EPRR assurance
- Deputise for the Accountable Emergency Officer
- TCG lead in hours for HWCCG including supporting debrief, response and recovery

4.5 On Call Rota Employees

- Be available and contactable out of hours 5pm – 9am (weekends 24hours) seven days a week during the period of on-call in order to manage system resilience and system pressures
- Ensure that any changes in contact details are notified to the Business Support Officer (Corporate) and EPRR Lead so that the rota and emergency contacts directory is maintained
- Arrange own cover for any on call period where they are unable to carry out their on-call commitment and to advise the Business Support Officer & EPRR lead of the changes and update on Teams where the rota is stored for ease of access
- Ensure they have access to the latest on-call information resources on teams
- Log onto on call central number system at start of on call shift and change number
- Be able to respond appropriately to an emerging emergency situation should the need arise and give clear advice
- During the period of on-call, to maintain a log of calls, messages, decisions and actions and provide an appropriate handover to the next person on-call
- Undertake face to face training, online training and participate in emergency planning exercises as requested and to ensure they maintain their compliance with the NOS (National occupational standards) requirements.
- Be aware of and act in accordance with the CCGs' Health and Safety Policy and Lone Working Policy.
- In the event of a declared major incident or emergency 'out of hours' to be able to support as requested:
 - Undertake the role of tactical commander and represent NHS services at Tactical Coordinating Group(s) (TCGs) if required
 - lead the establishment and operation of the CCG Incident Control Centre (ICC)
 - Ensure all actions and decisions are fully documented
 - Lead the CCG Incident Management Team.
 - Liaise with Accountable Emergency officer/EPRR Lead
 - Provide assurance and reports to NHS England and Improvement

Full details of the role and responsibilities of the CCG in the event of a major incident can be found in the CCGs' Incident Response Plan.

4.6 Business Support Officer – Corporate

- Prepare, update and distribute the CCGs' on call rotas.
- Support training and schedules
- Undertake Loggist training to support
- Central point for any changes and communication

5. The Policy

5.1 Rota

The out of hours on-call service is provided between the hours of 5.00 pm – 9.00 am (Monday to Friday) and 24 hours a day on weekends and bank holidays. The rota as requested by on call managers has been split into two shifts per week – Monday to Thursday and Friday to Monday.

During in-hours, i.e. between 9.00am and 5.00pm, Monday to Friday, the responsibility for responding to major incidents, business continuity incidents or other emergency planning issues will reside with the Accountable Emergency Officer and EPRR Lead and for system and winter pressures these will remain with the Herefordshire & Worcestershire Managing Director and Urgent Care Lead.

There is a primary 'on-call rota' identifying the employee who is on call during the period. On-call managers are allocated a 'CCG escalation point' on the on-call rota, and the Accountable Emergency Officer and Herefordshire & Worcester Managing Director for System Pressures, who they must also notify if there is a requirement to travel to sites outside of normal working hours and who can be contacted in case of sickness.

The on-call rota once initiated from 1st April 2020 will then be available at least three months in advance on checking holiday and unavailable days with on call managers, to allow individuals to plan ahead where possible. Swapping on-call shifts is allowed but must be managed by the on-call staff within each rota. If an individual is unable to fulfil their slot, they will be expected to swap with a colleague directly and inform the Corporate team and EPRR Lead to ensure that management have access to the most up-to-date record of who is covering each shift.

The CCG is committed to ensuring a fair and consistent approach when implementing the on-call rota, however given the time commitment required from staff on-call and in recognition of the level of responsibility, the CCG has made some exceptions that will apply to those Band 8c and above, exempting them from on-call responsibilities.

The exceptions are as detailed below:

- To be included in the on-call rota individuals must be working over 15 hours per week for the CCG. Those working 15 hours or under are not included in the on-call rota.
- Only permanent staff are included on the on-call rota. Individuals working with the CCG on zero-hour contracts, fixed term contracts, or as contractors will not be included in the on-call rota.

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- The Accountable officer and Herefordshire and Worcestershire Managing Director and Accountable Emergency Officer who will be the on call for emergency EPRR and system resilience to support on call staff, but not on the rota.

5.2 Availability for work

During the period of an on-call shift, employees must be available to resolve calls in a timely manner. If the on-call employee is unable to answer a call, for example if driving, it is normally expected that voicemail messages will be returned within one hour. It will be the responsibility of the on-call employee to ensure that the voicemail tool is enabled. Employees must also ensure that they have access to the necessary equipment in order to respond to calls within an hour.

As part of the on-call requirements, the employee on-call will be expected to chair 'systems calls' when required on Saturdays, Sundays and Bank Holidays, the detail of this call should be accurately recorded and feedback should be provided to the appropriate person on the next working day.

Currently all calls will be resolved remotely from the employee's home or other location. If in the future there is a requirement for on-call to include site visits, it is anticipated that the individual will be within a reasonable travel time (no more than an hour's travel time) distance based on employee's home and site location. Should this become a requirement the CCG will review and update this document in conjunction with employees included in the on-call rota. If you need to travel to a site please escalate.

For business continuity issues out of area (i.e. different county), with respect to buildings, the escalation contact will need to be contacted.

If an on-call employee becomes unavailable to work outside of normal working hours for reasons such as sickness absence and you have no cover, they must telephone the on-call escalation point or EPRR lead (in hours) who will make appropriate arrangements. The on-call employee must also follow normal sickness reporting arrangements with their line manager, if they are still unable to work the next day.

Please note new members of staff will not be required to undertake on call until 3 months and will be required to shadow for at least 4 shifts and undertake training.

5.3 Managing working hours whilst on-call/compensatory rest

The CCG is committed to issuing the on-call rota a minimum of three months in advance and will check holidays to allow for the individual on-call to plan and manage their work diary accordingly, once the initial rota has been embedded. When planning for on-call individuals will be responsible to ensure they get adequate rest periods. This may involve ensuring that meetings are not booked for first thing in the morning to ensure that if the individual has a busy night on-call, that they take their time back. Where high volumes of calls are received this should be reported within the handover and highlighted to the Accountable Emergency Officer.

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In accordance with Section 27 of Agenda for Change, on-call employees may not always have a daily rest period of 11 uninterrupted hours. However, where the employee's rest period has been interrupted to cause a total rest period of less than 11 hours, the employee will be able to take a compensatory rest period the following morning equivalent to the rest missed. The CCG will allow employees to take time back the following day when they have taken a call after midnight that lasts more than one hour. If an individual's working pattern is changing as a result of on-call activity then it will be their responsibility to inform their manager and any necessary team members, keeping their diary updated.

5.4 Payment for on-call

As part of the introduction of the single operating model for Herefordshire and Worcestershire CCG the CCG has ensured that, subject to the exceptions detailed in section 7.1, all posts Band 8c and above will be expected to participate in the on-call rota. As a result, the rota will normally consist of approximately 28 individuals and consequently the CCG do not currently pay on-call.

The CCG expectation of on-call is that individuals are on-call 1 in 28, however the CCG have supported individuals' wishes that the rota be split in the week into two on the understanding that this will not result in entitlement for on-call payment. The rota will be adjusted periodically to take account of staff leaving or joining the CCG

Although the CCGs do not pay on-call, individuals are expected to use flexible working patterns during and after being on-call to ensure they have sufficient rest periods, claiming time back where appropriate. Should the expectation change in the future and individuals on-call are expected to attend work during on-call periods, then this policy will be reviewed and a decision will be made on how individuals will be reimbursed for their time as detailed in the NHS Handbook.

5.5 Training

Training is required to ensure those on-call are aware of their roles and responsibilities and will focus on the following areas:

- theory and structure
- chairing of system-wide conference calls
- escalation plan & process
- handling major incidents
- accessing Resilience Direct

All staff will be expected to attend all training modules, undertake and evidence achievement of the online course and refresher training to ensure they meet the National Occupational Standards (NOS) and compliance will be monitored by the EPRR Lead.

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Any new staff required to undertake on-call duties will receive an induction delivered jointly by the Herefordshire & Worcestershire CCG Urgent Care Lead and EPRR Lead.

The Training Plan sets out the requirements the CCGs must meet in relation to their EPRR responsibilities to meet the NOS standards as detailed in the EPRR Policy. This also forms part of the CCGs' EPRR and Business Continuity Policy assurance requirements.

5.6 On call information /Resilience Direct

The CCG does not upload any information on Resilience direct or sitreps, all sitreps are provided both verbally and email direct to NHS England and Improvement, even in the event of a TCG emergency event unless requested otherwise by NSH England and Improvement. Any information will be shared as appropriately from RD to on call managers. The AEO and EPRR and urgent care lead, communications have access to the system if required. The administrator is the EPRR Lead.

It should be noted that there are two separate TCGs, Herefordshire Tactical Coordinating Group and the Worcestershire Tactical Coordinating Group, supported and chaired separately.

Both the Herefordshire and Worcestershire TCGs hold the central EPRR on call number in the event of a TCG being called and normally also notify by email. (Central HWCCG EPRR number 01432 250 7377).

To ensure consistency, and that the most up to date information is available at all times, all information will be stored in the central on call depository system in Teams for both on-call and EPRR. It should be noted the two counties have many different policies and procedures.

When information in the 'on call pack' is updated Microsoft teams will advise all the managers on-call, so individuals can print out any changed pages to add to their paper copy of their on call pack, these should be printed directly from the system before their on-call slot. Managers should always ensure they have access to a printed copy in case of power failure and IT access is limited.

The information on the on-call folder will be reviewed at regular intervals by the EPRR lead, the Urgent Care Lead and the Accountable Emergency Officer. If you notice any changes or differences in documentation, please notify EPRR lead immediately.

5.7 Resolving calls

Currently all on-call issues will be dealt with remotely via telephone and there will not be requirement to travel to sites unless a multi-agency Tactical Coordinating Group is established, and face-to-face meetings are requested. If this does become an expectation, communication will be sent to staff and the CCG will make a decision as to how staff will be reimbursed for their time following NHS Agenda for change guidance.

All on-call employees will be provided with the required equipment to respond to calls remotely (mobile phone and laptop), it will then be the responsibility of the employee to raise any issues with their equipment with the appropriate department.

It is important that those on-call are only dealing with appropriate calls and feel confident in redirecting inappropriate calls to the right place. As a result the CCGs have produced a table of escalation (included as Appendix A), to ensure clear guidance on what the identified individual on-call from the providers should be dealing with and that CCG employees do not feel pressured to offer resolutions to operational questions.

It is expected that the individual on-call will use this to determine if the call should be dealt with, redirected or escalated. Where individuals receive high volumes of inappropriate calls this should be reported back to the Accountable Emergency Officer.

5.8 Keeping a record of calls

Employees on-call should keep a record of the number and type of calls they are receiving from each provider. The purpose of this is to ensure effective handover information can be provided and feedback can be escalated where inappropriate calls are being received. An example of a call record sheet template can be found in Appendix B and the latest version will always be found in the on-call folder, in the Herefordshire & Worcestershire CCG EPRR and on-call folder in Microsoft Teams.

Where individuals receive inappropriate calls, they should keep a note of the provider, the issue raised, and the redirection instructions provided by the on-call employee. This is to ensure the escalation point can highlight patterns of behaviour and ensure providers are clear on the appropriate use of the CCG on-call information.

5.9 Handover and Reporting Issues

When commencing an on-call shift, it will be the responsibility of the starting employee to identify who is the escalation point for on-call and who they will hand over to the following week by checking the most up-to-date rota which is stored on the EPRR and on call folder in Teams. The on-call manager must also ensure they have access to the On-Call Emergency contact numbers and key documentation.

The on-call manager will also need to log into the on call central telephone system to register their on-call number when they commence their shift, up to three can be entered. **Failure to add your number, will result in the previous on call manger being called.** A guide to using the telephone system is provided in the on-call guidance pack.

On completion of an on-call shift, it will be the responsibility of the finishing employee to fully handover to the next on-call employee. This will include informing them of the nature of any resolved or unresolved calls, areas of concern or query. The latest Handover Document template can be found in Appendix C and will be managed in the on-call folder in SharePoint and can also be shared using Microsoft team.

6. Implementation and dissemination

Following approval, a copy of the policy will be distributed to all employees involved in the on-call arrangements. It will also be published on the Herefordshire & Worcestershire CCG website and in our policy folders in SharePoint.

7. Policy Review

This policy will be reviewed after twelve months and then every two years, or when required.

8. Equality Impact Assessment

Please see Appendix D.

9. Associated Documentation

- Incident Response Plan
- Business Continuity Plan
- Emergency Contacts Directory
- Health and Safety Policy
- Lone Working Policy

10. Appendices

- A Escalation and Alerting
- B Call Record Sheet
- C Handover document
- D Equality Impact Assessment

Appendix B – Call Record Sheet

Name of Caller:		
Position:		
Organisation:		
Contact Information:	Tel:	Email:
Call Received:	Time:	Date:
Nature of Incident:		
Reason for Notification:	<input type="checkbox"/> For Information Only/Stand-by	<input type="checkbox"/> For Action
Location of incident		
Current hazards/Casualties		
Potential hazards		
Hospitals/ other health services involved		
Name		
Job Title		
Signature		
<p>Log of Action Taken</p> <p>Include:</p> <ul style="list-style-type: none"> • Date and Time • When you are making decision record the rationale for the course of action you have taken • Include names and job titles of people you have spoken to 		
<p>Lessons/Issues</p> <p>Please record anything that you feel we can learn from to make future incidents easier to manage, so things that you feel could have been done better</p>		

Appendix D - Equality analysis initial assessment

Title of the change proposal or policy:

On-Call Policy for HWCCG

Brief description of the proposal or policy:

The policy sets out the on-call arrangements put in place by Herefordshire and Worcestershire CCG to ensure compliance with Emergency Preparedness Resilience and Response requirements, on-call and business continuity plans. This is an update to the existing policy.

Name(s) and role(s) of staff completing this assessment:

H Hancock, EPRR Lead

Date of assessment: 10 January 2020

Please answer the following questions in relation to the proposed change:

Will it affect employees, customers, and/or the public? Please state which.

Yes, it has set the senior on call level at 8c and above as per the Worcestershire policy, in Herefordshire CCG this included 8b and above, staff on 8b on the on call rota will no longer be on call. The rota of members has increased, so frequency of on call is now less.

Is it a major change affecting how a service or policy is delivered or accessed?

No, merging of the two on call systems.

Will it have an effect on how other organisations operate in terms of equality?

No

If you conclude that there will not be a detrimental impact on any equality group, caused by the proposed change, please state how you have reached that conclusion:

From an initial assessment of this policy and consideration of employees with protected characteristics under the Equality Act 2010 there is no anticipated detrimental impact on any equality group. There are no statements or conditions within this policy or requirements of this policy that disadvantage any particular group of people with a protected characteristic.