

Policy for secondment to pre – registration training for nursing, midwifery and allied health professions

Department / Service:	Corporate Nursing	
Originator:	Sonya Murray	Associate Chief Nursing Officer – Workforce & Education
Accountable Director:	Mari Gay	Interim Chief Nursing Officer
Approved by:	Joint Negotiating and Consultative Committee (JNCC) Key Document Approval Group	
Date of Approval:	24 th February 2016	
Extension approved:	22 nd July 2021	
Review Date: This is the most current document and should be used until a revised version is in place	1 st September 2022	
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust	
Target Departments	All Departments	
Target staff categories	All staff seconded to training leading to a Professional Qualification.	

Policy Overview:

This policy details arrangements for salary support for pre-registration training for nursing midwifery and allied health professions. The Local Education & Training Board (LETB) via Health Education West Midlands (HEWM) is currently able to provide salary support for suitably qualified and/or experienced NHS staff to enter nurse and AHP training. This policy outlines the options available within the secondment process and procedure for the Trust when supporting secondment.

Latest Amendments to this policy:

New document – January 2016
November 2017 - Document extended for 3 months as per TLG recommendations – TLG
April 2018 – Document extended for 12 months whilst apprenticeship leave and courses are aligned – Sarah Needham
February 2021- Document extended for 6 months, as per Trust agreement 11.02.2021.
August 2021- HR documents extended until 1st September 2022, approved by TME and JNCC

1.0 Introduction

The regional LETB is currently able to provide salary support for suitably qualified and/or experienced NHS staff to enter pre- registration nurse and allied health professions (AHP) training, either as a first or second qualification. This policy outlines the options available within the secondment process and the procedure for the Trust when supporting secondment.

2.0 Scope of this document

This policy sets out guidance on the secondment procedure within Worcestershire Acute Hospital NHS Trust and is applicable to all staff groups.

The Trust is committed to offering salary support secondments where possible and where funded by the LETB

3.0 Definitions

3.1 Salary Support/secondments are a route for currently employed non- registered staff to obtain a professional qualification whilst retaining their employment status within the Trust

3.2 The LETB is the umbrella organisation for the west midlands that commissions pre-registration education.

4.0 Responsibility and Duties

4.1 Associate Chief Nursing Officer – Workforce and Education

The Associate Chief Nurse is responsible for advising of salary support secondment opportunities available, seeking nominations and for completing returns to Health Education West Midlands.

4.2 Divisional Directors of Nursing & Midwifery/AHP Leads

Divisional Directors of Nursing are responsible for approving nominations for salary support/secondment.

4.3 Matrons/Departmental Managers

Matrons are responsible for submitting requests for funding to the Associate Chief Nursing Officer (ACNO) for Workforce and Education

4.4 Line Managers

Line Managers are responsible for ensuring nominated staff have met the Criteria for secondment, submitting nomination forms, verifying the start and finish date of courses and completing the appropriate change forms for submission to finance/e- rostering.

5.0 Policy detail

5.1 The Trust is committed to offering salary support **secondments** where possible and where funded by the LETC.

5.2 Applicants must:

- Hold a substantive employment contract and have been employed for a period of at least 12 months to be eligible for secondment.

- Be eligible to apply for pre-registration training by way of having reached the minimum entry requirements of the University and have received a formal offer (conditional or unconditional)
- Not be subject to any formal sickness or absence management procedures or formal disciplinary or performance management procedure.
- Be fully supported by their Line Manager, Matron and Divisional Director of Nursing.
- The applicants wish for secondment should have been identified formally via the annual appraisal process.
- The applicant's line manager must be fully conversant with this procedure and adhere to the relevant aspects.

5.3 The number of secondments is determined by the funding available from HEWM and will be confirmed by Finance to the ACNO Workforce and Education once the level of funding has been notified. Where the nominations exceed places allocation will be on a 'first come – first serve basis'.

5.4 Successful secondees will be seconded for the duration of the course and a change form must be completed by the individual's line manager before they commence training.

5.5 The Trust retains responsibility for the seconded member of staff's contract of employment for the duration of the secondment.

5.6 Secondees will be paid at a rate determined by HEWM and the Trust will be re-imbursed for this amount via salary replacement costs. No additional payments will be made by the Trust

5.7 The line manager of the seconded candidate is expected to provide personal mentorship/support to the seconded individual during their secondment. Therefore the line manager will monitor the member of staff's progress and provide adequate support.

5.8 The seconded member of staff will abide by the requirements that the education provider in terms of annual leave, hours of work, sickness, absence and conduct.

5.9 Whilst they have a contract with Worcestershire Acute Trust the seconded member remains bound by the Trusts employment policies.

5.10 Should training be discontinued by the education provider for any reason including misconduct, the seconded member should inform their line manager at the earliest opportunity who should contact the Associate Chief Nursing Officer. An interview with the Associate Chief Nursing Officer and Line Manager will take place and this will usually result in a return to substantive employment, although not necessarily in their original post or area, unless other employment policies apply e.g. in the case of misconduct.

5.11 The return to a substantive post before the end of training should culminate in a change form being submitted and the termination formally communicated to the Divisional Director of Nursing by the Line Manager.

5.12 The Associate Chief Nursing Officer will notify the Finance Department and HEWM immediately if a seconded member of staff has:

- Withdrawn from the course
- Been granted an extension of the course.

5.13 The secondee may be able to work additional hours for the Trust under a bank arrangement for which separate contractual arrangements will apply.

5.14 The offer of secondment may be withdrawn at any time prior to the course start date if there is found to be a substantial reason to do so.

5.15 Once the secondee has commenced the course the Line Manager can appoint substantively to the post following the approval of an approval to recruit form.

5.16 On completion of the course the secondment will cease and the seconded member of staff will be eligible to apply for posts as a qualified professional.

5.17 The secondee will be guaranteed a preferential interview for vacant entry level posts.

5.18 The Trust cannot guarantee Band 5 post availability and in circumstances where there are no posts available the secondee will be offered a suitable non registered role and with regard to the post held prior to secondment.

6.0 Implementation of key document

6.1 This process is already in place subject to a few amendments therefore staff will be made aware of the presence of a formal document via Divisional Directors of Nursing.

6.2 The document will be circulated to the following group for comment and approval to the following:

- JNCC
- Nursing & Midwifery Workforce Group
- Senior Nurse Group
- Clinical Professional Forum
- Trust Education Committee

6.3 Training and Awareness

The policy will be available on the Trust Intranet. Staff may print key documents but must be aware that these are only valid on the day of printing and must refer to the intranet for the latest version. Hard copies must not be stored for use as this undermines the effectiveness of an intranet based system.

Individuals are responsible in ensuring they are familiar with all key documents that impinge on their work and must ensure that they work within the current version of the document.

Line managers are responsible for ensuring that a system is in place for their clinical area of responsibility that keeps staff up to date with any new key documents and policy changes.

7.0 Monitoring and compliance.

Page/ Section of Key Document	Key control:	Checks to be carried out to confirm compliance with the Policy:	How often the check will be carried out:	Responsible for carrying out the check:	Results of check reported to: <i>(Responsible for also ensuring actions are developed to address any areas of non- compliance)</i>	Frequency of reporting:
	WHAT?	HOW?	WHEN?	WHO?	WHERE?	WHEN?
	To ensure all employees have information about and access to secondments where, appropriate and that the criteria have been applied fairly.	Compliance with this policy will be audited.	Annually .	Associate Chief Nurse, Workforce & Education	Nursing and Midwifery Workforce Group.	annually.

7.0 Policy review

The policy will be reviewed in 2 years

8.0 References

Not Applicable

9.0 Background

10.1 Equality requirements

10.2 Financial Risk Assessment

10.3 Consultation Process

10.4 Approval Process

Supporting Documents

Supporting Document 1 Checklist for review & approval of a key document

Supporting Document 2 Equality Impact Assessment

Supporting Document 3 Financial Risk Assessment

Appendix 1 - Scholarship letter

Supporting Document 1 – Checklist for review and approval of key documents

This checklist is designed to be completed whilst a key document is being developed / reviewed.

A completed checklist will need to be returned with the document before it can be published on the intranet.

For documents that are being reviewed and reissued without change, this checklist will still need to be completed, to ensure that the document is in the correct format, has any new documentation included.

1	Type of document	Policy
2	Title of document	Policy for Secondment to Professional Training for Nurses Midwives and Allied Health Professionals
3	Is this a new document?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If no, what is the reference number WAHT-CG-636
4	For existing documents, have you included and completed the key amendments box?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
5	Owning department	Human Resources
6	Clinical lead/s	Sonya Murray, Associate Chief Nursing Officer
7	Pharmacist name (required if medication is involved)	N/A
8	Has all mandatory content been included (see relevant document template)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
9	If this is a new document have properly completed Equality Impact and Financial Assessments been included?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
10	Please describe the consultation that has been carried out for this document	Divisional Directors of Nursing/Midwifery For comment
11	Please state how you want the title of this document to appear on the intranet, for search purposes and which specialty this document relates to.	Policy for Secondment to Professional Training for Nurses Midwives and Allied Health Professionals Human Resources Section
Once the document has been developed and is ready for approval, send to the Clinical Governance Department, along with this partially completed checklist, for them to check format, mandatory content etc. Once checked, the document and checklist will be submitted to relevant committee for approval.		

Implementation

Briefly describe the steps that will be taken to ensure that this key document is implemented

Action	Person responsible	Timescale
The Ward Managers/Sisters/Charge Nurses Midwives, Senior AHP's, HCS's will ensure the policy is implemented in their areas of responsibility.	Ward Managers/Sisters/Charge Nurses Midwives, Senior AHP's, HCS's.	Ongoing

Plan for dissemination

Disseminated to	Date
<p>Trust Wide Dissemination:</p> <p>Staff may print key documents but must be aware that these are only valid on the day of printing and must refer to the intranet for the latest version. Hard copies must not be stored for use as this undermines the effectiveness of an intranet based system.</p> <p>Individuals are responsible in ensuring they are familiar with all key documents that impinge on their work and must ensure that they work within the current version of the document.</p> <p>Line managers are responsible for ensuring that a system is in place for their clinical area of responsibility that keeps staff up to date with any new key documents and policy changes.</p>	Ongoing

1	Step 1 To be completed by Clinical Governance Department	
	Is the document in the correct format?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Has all mandatory content been included?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Date form returned	
2	Name of the approving body (person or committee/s)	JNCC
	Step 2 To be completed by Committee Chair/ Accountable Director	
3	Approved by (Name of Chair/ Accountable Director):	
4	Approval date	05/04/2013

Please return an electronic version of the approved document and completed checklist to the Clinical Governance Department, and ensure that a copy of the committee minutes is also provided.

Office use only	Reference Number	Date form received	Date document published	Version No.
	WAHT-CG-636	30/04/2013	30/04/2013	2

Supporting Document 2 - Equality Impact Assessment Tool

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

If you have identified a potential discriminatory impact of this key document, please refer it to Assistant Manager of Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Assistant Manager of Human Resources.

Supporting Document 3 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document: Preceptorship Policy for Nurses Midwives Allied Health Professionals and Health Care Scientists.	Yes/No
1.	Does the implementation of this document require any additional Capital resources	No
2.	Does the implementation of this document require additional revenue	No
3.	Does the implementation of this document require additional manpower	No
4.	Does the implementation of this document release any manpower costs through a change in practice	No
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments:	No

If the response to any of the above is yes, please complete a business case which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval

Appendix 1

Worcestershire
Acute Hospitals Trust



Dear

Re: Scholarship

I am writing to confirm your Scholarship details for the period that you will be undertaking XXXXXXXXX Training at XXXXXXXX

As a Scholarship student you will remain an employee of Worcestershire Acute Hospitals NHS Trusts and therefore retain your rights as an NHS employee for the duration of your scholarship according to the terms of your employment contract.

As a student you will also have a student or learning contract with the University and be expected to comply with the terms and conditions of that contract in terms of the University expectations of students.

Whilst on a Scholarship there are certain temporary adjustments to your terms and conditions which you need to understand and agree to and these are outlined below.

1. For the duration of your Scholarship your monthly pay will be 80 % AfC Band 3 point 8 This will be paid to you by the Trust a using the same monthly BACS method currently in force.
2. Your pension contributions and income tax reductions will be adjusted according to your adjusted income.
3. For the duration of the Scholarship you will not be entitled to any travelling expenses or any other expenses associated with the course from the Trust or the Strategic Health Authority.
4. As a Scholarship student you are on a Scholarship from the Trust and therefore your Line Manager becomes the Scholarship Manager for the Acute Trust on behalf of the Director of Nursing and Midwifery.
5. Any sickness or absence from the course for whatever reason must be reported to the University as per their reporting procedures and the Scholarship Manager.

6. Any request for special leave must be approved by the Scholarship Manager prior to it being taken except for emergencies.
7. Should you need to discontinue your course of study the Trust will undertake to find you a post commensurate with your previous terms and conditions subject to the reason for discontinuation. If discontinuation from the course is as result of misconduct then as an employee you may be subject to Trust Disciplinary procedures. You should be aware that the sharing of information between the Trust and the University you are studying at is agreed, and the Trust may request a report on your progress at any time. The Trust also reserves the right to terminate your Scholarship at any time should it be thought appropriate in terms of your conduct, performance or fitness for practice.
8. On completion of your course The Trust will make every effort to find you employment suitable to the Professional qualification you have obtained either with the Trust or within the SHA Locality, subject to recruitment and selection procedures. Where this is not possible we will advise you of alternative methods of securing professional posts within the NHS.
9. Where you are unsuccessful in securing a Professional post on qualification within the NHS we endeavour will offer you a post commensurate with the terms and conditions the post you left within the Trust until such time as you are able to secure a Professional Post.
10. If upon qualification you wish to take up outside the Trust you are required to advise the Trust of this and submit notice as per the terms of your substantive contract.
11. Should you secure a post outside the NHS upon qualification then the Trust reserves the right to claim back the money the cost of the Scholarship.
12. Whilst you are on a Scholarship you are an ambassador for the Trust and are expected to comply with both your employment contract and the student learning contract of the University as well as the expectations of the NMC (Nursing and Midwifery Council) or the HPC Health Professions Council for students undertaking courses leading to a professional qualification.

Please sign below to confirm that you have understood and comply with the above or the duration of your Scholarship and return to:

Sonya Murray

Please note until this has been received by the Associate Chief Nursing Officer on behalf of the Chief Nursing Officer your Scholarship has not been agreed by the Trust.

I confirm that I have read understood and will comply with the above for the duration of my Scholarship.

Name (Block Capitals).....

Current Position:

Signature:.....

Date:.....