

# On Call Executive/Senior Manager Policy

## Shropshire and Telford & Wrekin Clinical Commissioning Groups

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## Document Control Sheet

<b>Title:</b>	On Call Director / Executive / Senior Manager Policy for Shropshire and Telford & Wrekin Clinical Commissioning Groups		
<b>Electronic File Name:</b>	Z:\Emergency Planning and Business Continuity Plan		
<b>Placement in Organisational Structure:</b>	Responsibility for this policy is with the Accountable Officers for Emergency Planning, Resilience and Response for each CCG		
<b>Consultation with stakeholders:</b>	Consultation has taken place with: <ul style="list-style-type: none"> <li>▪ SCCG and T&amp;WCCG Executive Teams</li> <li>▪ NHS England Emergency Planning Lead</li> </ul>		
<b>Equality Impact Assessment:</b>	Equality impact assessment has been carried out and there are no requirements to be made.		
<b>Approval Level:</b>	To be approved by the Chief Officers and Executive Teams of both CCGs		
<b>Dissemination Date:</b>	September 2013	<b>Implementation Date:</b>	September 2013
<b>Method of Dissemination:</b>	To all Executive Directors of CCGs via email To Executive Directors of SATH, SCHT, RJA, SSSFT, Shropdoc via email		

## Document Amendment History

Version No.	Date	Brief Description
Version 0.1 Draft	4/07/2013	Draft Policy formulated for discussion with SCCG lead
Version 2	14/08/2013	Amended following discussion with NHS England EPRR Lead.
Version 3	12/09/2013	Amended following discussion with T&W Executive Team.
Version 4	19/09/2013	Amended slightly following comments from T&WCCG Audit Committee and EPRR Lead - NHS England
Version 5	14/07/2016	Addition of Senior Managers on the 'on call rota'

The formally approved version of this document is that held on the NHS Telford and Wrekin CCG website ([www.telfordccg.nhs.uk](http://www.telfordccg.nhs.uk)) and Shropshire CCG website ([www.shropshireccg.nhs.uk](http://www.shropshireccg.nhs.uk))

Printed copies or those saved electronically must be checked to ensure they match the current on line version.

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## 1.0 INTRODUCTION

- 1.1 As commissioners of patient services, Clinical Commissioning Groups (CCGs) are required to have in place a robust process whereby providers with whom the CCG commissions services can access someone (the On Call Executive / Senior Manager) from the CCG 24 hours a day, seven days a week.
- 1.2 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 2013 that On-Call arrangements are in place to ensure a 24/7 response to significant and major incidents.
- 1.3 <sup>1</sup>The Civil Contingencies Act (2004)<sup>2</sup> requires NHS organisations and providers of NHS funded care, to show that they can deal with incidents such as extreme weather conditions, a major transport accident or outbreak of an infectious disease.

## 2.0 POLICY PURPOSE / STATEMENT

- 2.1 As part of the Shropshire and Telford and Wrekin CCGs emergency preparedness there will be a requirement for certain groups of staff to provide an on-call service outside of normal working hours to ensure a 24/7 response to significant and major incidents.
- 2.2 The purpose of this policy is to set out the role of and arrangements for the Executives / Senior Managers on-call across Shropshire and Telford and Wrekin CCGs ensuring compliance with Emergency Preparedness Resilience and Response and business continuity policies and plans in place across both CCGs.
- 2.3 This policy has been developed in accordance with the Principles for Harmonised On-Call Arrangements in Annex 3 of the NHS Agenda for Change Handbook and the NHS Staff Council Implementation Guidance.
- 2.4 NHS England North Midlands would act as Category 1 response in the event of significant and major incidents leading the incident and response on behalf of the NHS. The role of the NHS England on Call Director is to provide leadership and command resources as necessary for providers within the geographical area of the locality team area in response to a significant incident or emergency.
- 2.5 Shropshire and Telford & Wrekin CCGs are required to support this, as appropriate, as a category 2 response, providing local knowledge of location, providers etc. and business continuity intelligence This policy sets out how the CCG Executive/Senior Manager on call procedures will facilitate and support the NHS England 'on call' director.

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<sup>1</sup> NHS Commissioning Board Core Standards for Emergency Preparedness, Resilience and Response. (2013)

<sup>2</sup> The Civil Contingencies Act (2004)

- 2.6 Both Shropshire and Telford & Wrekin CCGs operate within one local health economy, and there is a developed collaborative agreement for out of hour's arrangements in place.
- 2.7 The CCGs have clear authorisation to act on behalf of each other outside of core business hours. This may include, but is not limited to, committing expenditure on behalf of the other CCG. To this end it has been agreed by both CCG Boards to facilitate this approach and the scheme of reservation and delegation of each CCG has been amended accordingly. (Appendix 1)

### 3.0 RESPONSIBILITIES

#### 3.1 The CCG Chief Officers

The Chief Officer has identified an Accountable Officer for EPRR. The Chief Officer remains accountable for the respective CCG actions and decision making.

#### 3.2 Accountable Officer for EPRR

The Accountable Officer role across both CCGs is encompassed within the remit of:

- Director of Corporate Affairs – SCCG
- Executive Nurse – T&WCCG

There is a requirement to work collaboratively to support business continuity and emergency planning where appropriate due to the synergy of commissioned providers.

There is a requirement for Officers to monitor and manage the current arrangement for "point of contact" in place with Shrewsbury and Telford Hospitals NHS Trust within the existing contract management arrangements- annually.

The Accountable Officers will ensure they share information with the CCGs that may be cascaded from NHS England in relation to EPRR.

### 4.0 PRINCIPLES

- 4.1 This policy will be communicated to staff via team meetings/team brief and will be available for staff on the intranet.
- 4.2 There will be a primary 'on-call rota' identifying the employee who is on call during the period.
- 4.3 Senior Managers participating in the 'on call' rota for the **first time** will be allocated an experienced 'deputy' on the on-call rota for the **first year** to provide support, guidance and opportunities for reflection.
- 4.4 Managers participating in the On-Call system are required to be on duty at the rostered time either from Monday 09:00 –Thursday 09:00 (inclusive) or Thursday 09:00 until Monday 09:00: Providing 24 hour support.

- 4.5 Over Bank Holiday periods, to ensure fairness, the week can be shortened and staff may be asked to provide cover for one or two days at a time.
- 4.6 During a prolonged incident, Executives/Senior Managers who are not rostered On-Call will be asked to provide support to ensure the safe management of the incident and to allow for compensatory rest as required.
- 4.7 Individuals on call should also be able to answer/return calls promptly (calls to be returned within a maximum of 20 minutes).
- 4.8 The person finishing the On-Call period is required to provide a handover to the person starting the On-Call cover, providing a written summary of what has happened. Judgement will be required as the timing as a phone call may be required initially to inform the oncoming Executive/Manager of imminent activity.
- 4.9 The Executives/Senior Managers should be familiar with the current processes in place to manage situations out of hours, such as:
- Capacity and demand surges across the health economy
  - Patient safety protocols
    - 12 Hour Trolley breaches
    - Patient handover delays policy
    - Ambulance Turnaround and divert policies
  - Interruptions to business continuity and internal plans
  - Out of Area placements
  - Communications/media enquiries
- 4.10 The Executives/Senior Managers must be contactable via their preferred communication methods 24/7 during their on call period. Details to cover such issues as variable mobile phone reception should be considered, and if necessary location and land line information shared with switchboard operators at Shrewsbury and Telford Hospitals NHS Trust (SATH).
- 4.11 Whilst the majority of calls can be dealt with remotely the Executives/Senior Managers must be available and able to respond to an incident on any site at any time during their on call period. Therefore the ability to drive or make competent decisions must not be hindered by any form of intoxication. If necessary a negotiation to change on call period should be arranged, where private, social, geographical distance engagements would compromise this position.
- 4.12 The Executives/Senior Managers would be the point of contact and escalation in the event of a major incident or emergency. This enables the NHS England Director to contact the CCG out of hours to advise of, for example, a major incident impacting the wider health economy.
- 4.13 There is a requirement that CCGs must ensure that there are effective 24/7 business as usual contact arrangements in place to escalate and mobilise the response of its commissioned services to ensure providers can contribute effectively to the wider health response as required – for example during a period of increase demand/surge.

- 4.14 When contacted the 'on call' Executives/Senior Managers should record the details of the contact and action taken on the action log sheet (**Appendix 2**). This will enable audit of actions to take place and for themes related to out of hour's incidents to be collated and considered, which may inform future commissioning intentions. At the end of the on call period the action log sheet should be forwarded to the Administrative team at Shropshire CCG for storage.
- 4.15 The Executives/Senior Managers should ensure that communication, either verbal or electronic, of incidents and issues raised out of hours is shared with appropriate managers in hours aligned to usual business processes as soon as possible.
- 4.16 The Executives/Senior Managers should ensure the Chief Officers and colleagues are briefed in a timely manner as required.
- 4.17 The Executive/Director should handover to the incoming Executive/ Director if issues arise at handover time.
- 4.18 Exemptions will be made for individuals with exceptional personal circumstances. Where an employee feels that they are unable to provide an on-call service due to exceptional personal circumstances, they can make a request in writing to their line manager.
- 4.19 For part-time employees, all terms, conditions and rotas will be applied on a pro-rata.

## **5.0 KEY POINTS**

- 5.1 A rota of Executives/Senior Managers cover for 365 days per year is prepared and disseminated to all participating Executives/Senior Managers by the Corporate Administration Team at SCCG (The Rota Manager).
- 5.2 The rota covers a period commencing Monday 09:00hrs –Thursday 09:00hrs (inclusive) or Thursday 09:00hrs until Monday 09:00 hours.
- 5.3 Action logs completed by on call Executives/Senior Managers will be stored by the Administrative Team at T&WCCG.
- 5.4 The Switchboard Operator at SATH will have access to the current rota and contact details for the CCG On Call Executives/Senior Managers and will call the Executives/Senior Managers with details of whom to contact, ensuring a log of all calls and timings is kept for reference.

## **6.0 PROVIDER STAFF**

- 6.1 Provider out of hours managers are required to follow their own internal escalation policies and processes for contacting commissioners on call outside of core business hours.

6.2 Provider staff should contact the CCG Executives/Senior Managers via the SATH switchboard service on **01743 261000**.

6.3 In the event of contact made the Provider Executive/Manager must provide the CCG Executives/Senior Managers with details of the incident/ issue and the course of action taken prior to the call.

## 7.0 REMUNERATION

7.1 Remuneration would be in the form of compensatory leave. For each week on call a discretionary leave day is awarded. (In the event of an incident occurring during the on call period that required significant time input from any manager compensatory leave would be assigned at the time in addition to the allocated leave day).

## 8.0 RELATED DOCUMENTS

The following documents contain information that relates to this policy:

- SCCG and T&WCCG Business Continuity Policies and plans
- Incident reporting policies for each CCG
- Policies for NHS England Incident Response, The national heat wave and cold weather plans, infection outbreak West Midlands Public Health England Incident response plan and guidance.
- NHS England Core Standards for Emergency Preparedness, Resilience and Response. (2016)  
<https://www.england.nhs.uk/wp-content/uploads/2015/11/epr-r-framework.pdf>
- NHS England Board Command and Control Framework (2015)  
<https://www.england.nhs.uk/wp-content/uploads/2015/06/nhse-core-standards-150506.pdf>

Telford and Wrekin/Shropshire/Powys LHSE Surge and Winter Capacity Management plan 2015/16

- Protocols for:
  - A&E Waits
  - Diversions
  - Patient Handover Delays

All related documents are stored on On Call Managers USB and within Executive shared drive. A hard copy is stored in the EPRR AOs office.

## 9.0 DISSEMINATION

These guidelines will be disseminated by the following methods:

Directors – via on call rota manager SCCG

- SATH switchboard – via email for information
- Provider Executive Teams – via email
- Published to the two CCG Websites

## 10.0 ADVICE AND TRAINING

- 10.1 Advice can be sought from the Chief Officer or EPRR Accountable Officers.
- 10.2 Training and support will be available to staff who are required to be on-call in the implementation and application of this policy. Training may include programmes such as Strategic Leadership in Crisis Course.

Executives/Senior Managers on call should have an appropriate level of training and competence to commencing this role.

## 11.0 REVIEW AND COMPLIANCE MONITORING

- 11.1 The Accountable Officer for EPRR will review the Action Log Sheets 6 monthly, or more frequently as need arises, to identify trends and themes and determine if action is required.

This policy will be reviewed every 12 months or sooner if required.

## 12.0 GLOSSARY

<b>Term / Abbreviation</b>	<b>Explanation / Definition</b>
EPRR	Emergency Preparedness, Resilience and Response
LHE	Local Health Economy

Appendix 1 –

**CLINICAL COMMISSIONING GROUP GOVERNANCE BOARD  
EXECUTIVE SUMMARY**

<b>DATE:</b>	14 <sup>th</sup> May 2013
<b>TITLE OF PAPER:</b>	CCG Director on-call – Delegated Decision Making
<b>EXECUTIVE RESPONSIBLE:</b>	██████████ – Chief Finance Officer
<b>Contact Details:</b>	Ext: 2359      Email: ██████████
<b>AUTHOR</b> (if different from above)	
<b>Contact Details:</b>	Ext:                  Email:
<b>CCG OBJECTIVE:</b> (Please see attached guidance note)	<p>To improve quality and service transformation</p> <ul style="list-style-type: none"> <li>In meeting the objectives above, to exercise CCG functions effectively, efficiently and economically, and in accordance with generally accepted principles of good governance.</li> </ul>
<input type="checkbox"/> For Information <input checked="" type="checkbox"/> For decision <input type="checkbox"/> For performance monitoring	
<i>At least one box must be ticked</i>	
<b>EXECUTIVE SUMMARY</b> (Key points in report)	<p>The Telford &amp; Wrekin and Shropshire Clinical Commissioning Groups operate a Director on call system across the county. The responsibilities of the Director on call are laid out in the Urgent Care on call Directors pack but they are principally made up of the following:</p> <ul style="list-style-type: none"> <li>To be aware of capacity pressures in the system and take action as set out in the on call pack as appropriate (i.e. escalation management)</li> <li>To follow the Incident Reporting Protocol</li> <li>To follow the 12 hour Trolley Breach Protocol</li> <li>To be the local Commissioner point of contact for a major incident (per the Emergency Preparedness Resilience and Response Plan)</li> <li>To be the out of hours point of contact when commissioning decisions are required to be made.</li> </ul> <p>As the on call rota is run across the health system arrangements need to be in place between the CCG's for delegated decision making whilst covering on call for another CCG. This relates to someone from one CCG making decisions whilst on call which effectively commit another CCG's resources (e.g. a decision to spot purchase).</p> <p>For Telford and Wrekin and Shropshire CCG's the following authority delegation is proposed:</p> <ol style="list-style-type: none"> <li>That the delegated authority to commit resources for another CCG is <b>only</b> applicable out of hours. During office hours i.e.</li> </ol>

	<p>between 9am and 5pm the Director on call should refer these decisions to the relevant CCG lead for authorisation.</p> <p>2) That the authority should only be used in exceptional circumstances and limited to situations of necessity, i.e. where it would cause risk to patient safety and/or the discharge of the CCGs statutory duties. Examples of such might include:</p> <ul style="list-style-type: none"> <li>a. Patients sectioned under the MH act where there is no local capacity to admit and the patients safety is at risk.</li> <li>b. If a major incident is declared after following all relevant escalation procedures</li> <li>c. To prevent a major incident from occurring (e.g. trust at escalation level 4)</li> </ul> <p>Should the Director on call need to commit resources from the other CCG they should communicate this by email to the relevant lead Director for the CCG affected by the end of the first working day following the decision, at the latest.</p>
<b>FINANCIAL IMPLICATIONS:</b>	<i>n/a</i>
<b>EQUALITY &amp; DIVERSITY</b>	<i>n/a</i>
<b>PATIENT &amp; PUBLIC ENGAGEMENT</b>	<i>n/a</i>
<b>LEGAL IMPACT:</b>	<i>n/a</i>
<b>RECOMMENDATIONS:</b>	<p>The Board is recommended to:</p> <p>Approve the delegation of authority to the CCG Director on call to commit resources for either or both CCGs should the situations detailed above arise.</p>
<b>Is there a need to consider inclusion in the Corporate or Executive Risk Registers?</b>	NO

Agreed Shropshire and Telford and Wrekin Governance Board.

