Organisational and Workforce Change Policy

<table>
<thead>
<tr>
<th>CATEGORY:</th>
<th>Policy</th>
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<tbody>
<tr>
<td>CLASSIFICATION:</td>
<td>Human Resources</td>
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<tr>
<td>PURPOSE:</td>
<td>To outline the policy for the management of organisational and workforce change within the Trust</td>
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<td>Controlled Document Number:</td>
<td>23</td>
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<td>Version Number:</td>
<td>9</td>
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<tr>
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<td>Executive Director of Delivery</td>
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<td>Director of Human Resources</td>
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<tr>
<td>Review Date:</td>
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<td>Distribution:</td>
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<tr>
<td>• Essential Reading for:</td>
<td>All Directors, Senior Managers, Department Heads, Managers and HR staff</td>
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<tr>
<td>• Information for:</td>
<td>All Staff</td>
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Issued:  
Controlled Document Number: 023  
Version: 009
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### Appendices

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1. **Policy Statement**

1.1 University Hospitals Birmingham NHS Foundation Trust (the ‘Trust) aims to continue to create a safe and secure employment environment. To achieve this, the Trust manages organisational change in a fair way, consistent with employment legislation and best practice.

1.2 The Trust’s Board of Directors acknowledges its responsibility in terms of creating effective communication and consultation methodologies for the benefit of all staff.

2. **Scope**

2.1 This Policy and its associated Procedure are applicable to all staff within the Trust on a formal contract. This policy does not apply to contractors, QEHB+, agency and locum workers.

2.2 The Trust is committed to ensuring that this policy and its associated Procedure are applied fairly and consistently to all staff, regardless of their age, disability, ethnic origin, gender, nationality or race, religion or belief, seniority, sexual orientation, status, union membership.

2.3 This Policy replaces all other agreements between the Trust and staff representatives on this subject, whether written or implied.

3. **Policy Framework**

3.1 This section describes the broad framework for the Organisational and Workforce Change Policy. Detailed instructions are provided in the associated procedure.

3.2 The Executive Director of Delivery shall approve all procedural documents associated with this policy, and any amendments to such documents, and is responsible for ensuring that such documents are compliant with this policy.

3.3 **Key Principles:**

3.3.1 Managers will make staff representatives aware at the earliest opportunity of plans for significant change and give staff representatives the opportunity to influence the direction of change. The Staffside chair must be made aware of any planned significant changes.

3.3.2 Information will be given to Staffside at the earliest opportunity so that representatives can study it and take advice from members and/or organisations. Staffside representatives will also be able to ask questions and make comments on the proposed change,
including receiving prompt and reasoned responses from management. The objective of this is to influence outcomes.

3.3.3 On occasions there may be issues that the Chief Executive or Executive Director of Delivery decides are subject to commercial confidentiality and therefore these arrangements may be modified.

3.4 Identifying the Case for Change

3.4.1 The staff/staff groups affected by the change must be identified by management in their relevant division or service.

3.4.2 Management must demonstrate the reasons for the proposed change and communicate these to those staff who may be affected by the change. Management must involve staff in meaningful and regular informal discussion regarding the proposed change, including drawing their attention to appropriate means of support.

3.4.3 If the change is minor, for instance without direct impact on the Terms and Conditions/Contract of Employment of the staff, and Management, after discussion with Human Resources, do not perceive that staff are likely to be concerned, there is no need for consultation with staff representatives. If at any stage staff request consultation with staff representatives, this will be arranged.

3.5 Significant Change

3.5.1 If there are significant changes which will affect staff, a formal proposal paper must be drawn up. This will include an option appraisal with timescales which will be presented to the Divisional Management Team or, in some circumstances, to the relevant Executive Directors and/or Board of Directors. Where appropriate, this may also be presented to the Trust Partnership Team (TPT). In the case of medical staff, the information will be presented to the Joint Local Negotiating Committee.

3.5.2 When there is likely to be more than 20 redundancies, the Board of Directors must be notified of this potential outcome by Management. The Board of Directors must be later updated on the final numbers of actual redundancies.

3.5.3 Once the decision regarding the proposed change has been made, the new structure and workforce plan for the services affected and details of all current posts affected will be outlined to the affected staff as well as the methodology for filling posts.
3.6 **Redundancy Consultation**

3.6.1 Where there is likely to be more than 20 redundancies, there will be a statutory collective consultation with the trade union representatives or staff representatives of the staff group(s) affected by a redundancy process.

3.6.2 The Trust will notify the Secretary of State for Business, Innovation and Skills (BIS) if it proposes to dismiss more than 20 staff. Evidence of this will also be forwarded to union representatives.

3.6.3 Irrespective of the above, the TPT will be informed of any potential redundancies. Formal consultation begins once the information required under statute is provided to the relevant trade unions. In the case of Medical staff, the Joint Local Negotiating Committee will be informed.

3.6.4 Consultation with trade unions and individuals must be carefully timed, and will commence prior to any public announcement of the redundancy programme.

3.6.5 Consultation and notification of any redundancies will begin at the earliest opportunity and in any event:

- 30 days before the first of the dismissals takes effect where between 1 and 99 redundancy dismissals are proposed at one establishment within a period of 90 days or less; or

- 45 days before the first of the dismissals are proposed at one establishment within a period of ninety days or less.

3.6.6 The Trust has a duty to make known the proposals and to consult affected staff and representatives as soon as possible, and at least adhere to the minimum periods for consultation laid down by legislation. Irrespective of the number of potential redundancies individual consultation must take place with each member of staff to ensure a fair process is followed. A one-to-one meeting will take place with all staff placed at risk of redundancy, with their line manager or departmental manager and a Human Resources manager.

3.6.7 The Trust will disclose in writing to trade unions:

- the reasons for redundancy proposals;
• the number and descriptions of staff who are likely to be affected;
• total number of staff of any such description;
• proposed method of selecting staff;
• steps to keep the number of dismissals to a minimum; and
• proposed method of carrying out redundancies, including notice period and how redundancy payments will be calculated.

3.6.8 The procedures for dealing with redundancy consultation, are outlined in the associated procedural document.

4. Duties

4.1 Executive Director of Delivery

The Executive Director of Delivery has the responsibility to ensure that the following requirements are met:

4.1.1 To approve the Procedure for Organisational and Workforce Change and any amendments to that document in response to changes in legislation or best practice, provided that they are compliant with this Policy;

4.1.2 Through the annual workforce report, assure the Board of Directors of compliance with this policy. This will include the number of redundancies made (if any). Reports will also be appropriately made to Trust Partnership Team and Divisional Consultative Committee; and

4.1.3 Receive reports from the Director of Human Resources on non-compliance with this policy as and when required.

4.2 Executive and Divisional Directors

Executive and Divisional Directors are required to ensure the following requirements are met within their areas of responsibility:

4.2.1 Ensure that all staff within their Directorate/Division who hold people management responsibilities are familiar with the Organisational and Workforce Change Policy and are trained in applying all elements of its associated procedural documentation;
4.2.2 Ensure that staff who hold people management responsibilities work effectively and consistently with Staffside representatives; and

4.2.3 Identify an appropriate lead for the particular workforce change project.

4.3 **Director of Human Resources**

The Director of Human Resources has the responsibility to ensure that the following requirements are met:

4.3.1 The provision and maintenance of an Organisational and Workforce Change Policy and its associated procedures and guidance as part of the Trust’s portfolio of controlled documents;

4.3.2 That awareness programmes appropriate to need/role for Trust staff on the requirements of this Policy and its procedural document is provided and implemented;

4.3.3 To ensure that all Human Resources Managers and relevant Human Resources staff are aware of, and competent to deliver, their responsibilities arising from these documents, providing leadership and support as required;

4.3.4 The output from cases for change in particular the selection processes and redundancy handling and will report non-compliance to the Executive Director of Delivery; and

4.3.5 To ensure the provision of management tools for the implementation of the procedural element of this Policy.

4.4 **Human Resources Managers**

HR Managers are required to ensure that the following requirements are met:

4.4.1 They are appropriately trained and experienced, and maintain their learning in order that they are able to support those with people management responsibilities competently;

4.4.2 That the Director of Human Resources’ requirements are met in terms of the provision of consistent advice to people managers in their application of this Policy and its procedural documents.
4.5 **Staff holding people managerial responsibilities**

All staff holding people managerial responsibilities are required to ensure that:

4.5.1 They are familiar with the Organisational and Workforce Change Policy and all associated controlled documents, and how these may be applied within their area of responsibility;

4.5.2 An appropriate awareness programme has been provided and they are competent to implement the Organisational and Workforce Change procedures in a consistent and fair manner and they maintain these skills via updates, ensuring that Executive and Divisional Directors have recordable evidence to that effect;

4.5.3 They work in a collaborative fashion in implementing the Organisational and Workforce Change Policy and associated procedure with Staffside representatives;

4.5.4 They ensure that they seek advice as appropriate from Human Resources;

4.5.5 They ensure that in the giving of information or advice involving the Organisational and Workforce Change Policy and its associated procedure they are sensitive to the requirements of the Trust’s equality duties in their dealings with staff;

4.5.6 They ensure that consultations with staff in accordance with this Policy and the associated procedure; and

4.5.7 When appointed as the lead for a change process, they ensure that the Organisational and Workforce Change Policy and Procedure are followed.

4.6 **Trade Union Representatives**

Trade Union representatives will be familiar with this Policy and its procedures in order to provide advice and support to their members if requested to do so.

4.7 **Staff**

Staff must recognise that organisational and workforce change can bring opportunities as well as challenges, and therefore take all afforded opportunities to contribute to and inform the application of this Policy.
5. Implementation and Monitoring

5.1 Implementation

This policy will be available on the Trust’s Intranet Site. The policy will also be disseminated through the management structure within the Trust.

5.2 Monitoring

Appendix A provides full details on how the policy will be monitored by the Trust.

6. References

Employment Act 2002

Employment Relations Act 2004

Employment Rights Act 1996

Fixed-Term Employees (Prevention of Less Favourable Treatment) Regulations 2002

NHS Staff Council Agenda for Change Staff Handbook section 16

Trade Union Labour Relations Act 1992

7. Associated Policy and Procedural Documentation

This Organisational and Workforce Change Policy and its Procedural documents must be used in conjunction with the following:

Annual Leave Policy

Annual Leave Procedure for Staff on Agenda for Change Terms and Conditions

Consultant Annual Leave

Divisional Consultative Committees Terms of Reference

Procedure for Organisational and Workforce Change

Protection of Pay and Conditions of Service Policy

Trust Partnership Team Terms of Reference
## Appendix A

### Monitoring Matrix

<table>
<thead>
<tr>
<th>MONITORING OF IMPLEMENTATION</th>
<th>MONITORING LEAD</th>
<th>REPORTED TO PERSON/GROUP</th>
<th>MONITORING PROCESS</th>
<th>MONITORING FREQUENCY</th>
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<tbody>
<tr>
<td>Awareness programme on the policy undertaken appropriate to need/role</td>
<td>Document Lead</td>
<td>Strategic Workforce Group</td>
<td>Where the policy is to be applied, awareness sessions undertaken with managers and staff to ensure all understand the policy and its application</td>
<td>As required (e.g. when the document is to be implemented)</td>
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<tr>
<td></td>
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<td>Operational Workforce Group</td>
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<tr>
<td>Monitoring output from cases for change, in particular the selection processes and redundancy</td>
<td>Document Lead</td>
<td>Trust Partnership Team</td>
<td>Verbal reports to TPT and DCC, minuted</td>
<td>Quarterly</td>
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<td>Divisional Consultative Committees</td>
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<td>Quality assurance and impact assessment of selection panel decisions</td>
<td>Document Lead</td>
<td>Trust Partnership Team</td>
<td>Decisions of selection panels and supporting documentation will be subject to a quality assurance and impact assessment by a joint management/Staffside review</td>
<td>Quarterly by exception</td>
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<td>Compliance with policy, and summary of number of redundancies</td>
<td>Document Sponsor</td>
<td>Board of Directors</td>
<td>Compliance and numbers reported within the HR Annual Workforce Report</td>
<td>Annual</td>
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