



## Rota Parameters Procedure

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## **1 Scope**

- 1.1. This procedure describes the process all colleagues should follow when carrying out rota reviews.
- 1.2. The purpose of rotas is to ensure the Trust can match demand to patient care or departmental pressures and are working in the best interests of colleagues and patients.

## **2 General Principles**

- 2.1. Colleagues working a rota must have the opportunity to participate in its design.
- 2.2. Rotas must comply with [The Working Time Regulations \(1998\)](#)
- 2.3. A rota review may be requested where 51% or more of those working it wish to do so.
- 2.4. Rotas will normally be based on a 37.5-hour working week, excluding unpaid meal breaks.
- 2.5. Colleagues working less than 34.5 hours per week who are not working on a reduced working hours rota as detailed in 2.6, will be defined as working a flexible working agreement and not occupy a 37.5 hour rota line.
- 2.6. Consideration will be given to the creation of a rota based on an average of less than 37.5 hours per week for a group of colleagues who work the same number of reduced working hours per week. This is limited to those working between 30 and 37 hours per week inclusive. Such a rota must give a balanced and fair allocation of shifts to those working it.
- 2.7. There is no requirement to have a single rota within an Operational Area This would enable one group of colleagues to work all 12-hour shifts and another group to work all 8-hour shifts.
- 2.8. Rotas need to reflect departmental demand patterns which will be shared by the Senior Manager in charge of identifying / interpreting demand for the department.
- 2.9. Relief periods may be included in rotas only where it can be demonstrated that this is required to meet business needs. The percentage of relief provided within the business area must be the minimum needed to cover abstraction requirements in order to maintain a safe level of cover.

- 2.10. The Senior Manager will email all colleagues affected by any proposed rota change inviting them to join and participate in a Rota Writing Group from the Senior Manager.
- 2.11. All colleagues working the rotas which are subject to review will be invited to attend an initial consultation with 14 days' notice. This will be led by the relevant senior manager. Where possible, this will be recorded for those who are unable to attend to view later.
- 2.12. All colleagues attending and participating in meetings associated with rota production will be entitled to claim a pre-agreed period of overtime.
- 2.13. A Rota Writing Group will be convened within 14 days of the initial meeting. The Rota Writing Group will nominate a chair and must canvas colleague opinion. It will then produce rotas within 21 days following the rota parameters as set out. These proposed rotas will then go to colleagues for voting.
- 2.14. A Rota Writing Group will consist of colleagues working the rota. They will be supported by the Scheduling Team, Leadership Team and union representatives, as and when required.
- 2.15. An Unsocial Hours payment prediction tool must be made available to colleagues before they are asked to vote for rotas. Indicative Unsocial Hours calculations must be undertaken for all rotas before being published for voting. This is to ensure colleagues are aware of any financial implications before choosing a rota.
- 2.16. Colleagues will be given 21 days to vote on proposed rotas using a transparent electronic Trust approved platform.
- 2.17. On completion of voting, the results will be published by the Senior Manager. If there is no overall majority then a subsequent round of voting must take place on the leading rotas so far identified.
- 2.18. All agreed rotas must be submitted to [rotareviewgroup@secamb.nhs.uk](mailto:rotareviewgroup@secamb.nhs.uk) using the agreed rota templates.
- 2.19. The Rota Review Panel Chair will convene a Rota Review Panel to consider rota proposals from colleagues upon receipt of the email from the Senior Manager.
- 2.20. All rotas submitted for consideration to the Rota Review Panel must be supported by the majority of colleagues that are going to work the proposed rota. The panel requires assurance from the presenting manager that full process has been followed through submission of checklist (appendix B).
- 2.21. The Rota Review Panel will be chaired by a senior representative of the Scheduling Team who will be at Band 7 or above. For quoracy, an Associate Director of the relevant directorate or

nominated deputy and representation from at least 2 of the 3 majority unions, are required. The Associate Director or nominated deputy will give assurance that the rota meets anticipated demand and needs of the business (see appendix A TOR – Rota Review Group).

- 2.22. Once approved by the Rota Review Panel, the rota may go live at any date agreed by both colleagues working the rota and the Local Management Team. This will normally be at least 8 weeks from the date of approval to allow the Scheduling Team to load the rota.
- 2.23. Rota line allocation is the responsibility of the Leadership Team who will, in conjunction with colleagues and the Rota Writing Group, inform the Scheduling Team and colleagues of who starts on which line on the given date.
- 2.24. Approved rota is to be submitted via Marvel to the Scheduling Technical Team by the responsible manager and should include where possible rota line allocation.
- 2.25. In the unlikely event that no eligible rotas are submitted within 90 days of the Trust instigating a rota review, the Trust reserves the right to give 90 days' notice of rota change being enforced.

### **3 Rota Parameters**

- 3.1. All rotas must support the appropriate skill mix at the relevant location or department.
- 3.2. Individual working patterns will not be classified as a rota. These must comply with [The Working Time Regulations \(1998\)](#).
- 3.3. Double Crewed Ambulances must have a minimum of 10-minute staggered start times per Dispatch Desk.
- 3.4. New colleagues joining the organisation may be given a rostered rest day working pattern.
- 3.5. Colleagues on training programmes may work a rostered rest day rota pattern instead of permanent relief, however rostered rest days will not be mandated.
- 3.6. Where applicable, a colleague's allocated relief shifts must cover any shifts within their rota pattern to provide flexibility to the organisation. This will appear in the rota as continuous days. Therefore, a 48 hour rest period will be required after a relief week. Before a relief week, the latest rostered shift must finish no later than 00:00 the day before the relief period starting.
- 3.7. Consecutive blocks of same type of shifts (Eg all day or all night shifts) must not exceed 48 hours in a row excluding mealbreaks. A

48-hour maximum working week (excluding breaks) must not be exceeded.

- 3.8. A 90-minute minimum change-over period for nights to days is required in all rotas. The window for this will be between 0600hrs to 0730hrs unless a majority vote of local colleagues chooses to slide the window to no earlier than 0530hrs and no later than 0730hrs. The Senior Manager and Rota Writing Group will update the colleagues affected of the window to be used.
- 3.9. Subject to 3.8 - Day and link shifts must start no earlier than the window agreed in 3.8 and finish no later than 0200hrs. Night shifts must start no later than 2300hrs and finish between 0530hrs and 0730hrs.
- 3.10. A minimum rest period of 48 hours must be given following a single night shift or the last of a series of night shifts and following a relief week.
- 3.11. Where applicable, one late link may follow a night shift. This is to support colleagues to convert back to a normal sleep pattern. This shift will be treated as if it were the same as preceding night shifts for the purposes of 3.10 (i.e., the 48-hour minimum rest period is calculated from the time at which the shift would have finished had it been the same duration as the preceding night shift).
- 3.12. With mutual agreement with the leadership team, colleagues may undertake overtime shifts starting or finishing outside of the parameters of the restrictions within paragraph 3.9.
- 3.13. Whilst meeting the needs of the Trust, colleagues who work rotas must have the opportunity to undertake a fair balance of shifts.
- 3.14. Where applicable, all rotas must also have a balance of shifts that give colleagues a fair opportunity to accrue unsocial hours in line with Agenda for Change Section 2 or Annex 5.

## **4 Responsibilities**

- 4.1. The Chief Executive Officer has overall responsibility and accountability for all aspects of unsocial hours and rota parameters, and for ensuring these are in line with Agenda for Change.
- 4.2. The senior department head (normally 8b Manager) has responsibility for rota control and is responsible for implementing the procedure.
- 4.3. All managers who have responsibility for rota parameters have responsibility for monitoring and audit.

- 4.4. The Rota Review Panel will meet as and when required, and no later than 14 days after receiving a rota from the submitting colleague.
- 4.5. The Rota Review Panel has responsibility to assure the quality of rotas in line with the Rota Parameters Procedure. It will inform the presenting manager if the rota is not compliant, provide reasons for this and raise any concerns at the Rota Review Panel meetings.

## **5 Audit and Review**

- 5.1. This procedure will be reviewed every three years or sooner where there is an introduction of new legislation, codes of practice or national standards (including changes to Unsocial Hours calculations via amendments to the Agenda for Change Handbook).
- 5.2. In line with all other procedures, the effectiveness of this procedure will be audited by the responsible Management Group at regular intervals, and initially six months after its approval and dissemination.
- 5.3. Effectiveness will be reviewed using the tools set out in the Trust's Policy and Procedure for the Development and Management of Trust Policies and Procedures (also known as the Policy on Policies).
- 5.4. This document will additionally be reviewed in its entirety if feedback from employees indicates that the policy is not working effectively.
- 5.5. All changes made to this procedure will go through the governance route for development and approval as set out in the Policy on Policies.

## **6 Equality Analysis**

- 6.1. The Trust believes in fairness and equality, and values diversity in its role as both a provider of services and as an employer. The Trust aims to provide accessible services that respect the needs of each individual and exclude no-one. It is committed to comply with the Human Rights Act and to meeting the Equality Act 2010, which identifies the following nine protected characteristics: Age, Disability, Race, Religion and Belief, Gender Reassignment, Sexual Orientation, Sex, Marriage and Civil Partnership and Pregnancy and Maternity.
- 6.2. Compliance with the Public Sector Equality Duty: If a contractor carries out functions of a public nature, then for the duration of the

contract, the contractor or supplier would itself be considered a public authority and have the duty to comply with the equalities duties when carrying out those functions.

## **7 Financial Checkpoint**

- 7.1. To ensure that any financial implications of changes in policy or procedure are considered in advance of document approval, document authors are required to seek approval from the Finance Team before submitting their document for final approval.
- 7.2. **This document has been confirmed by Finance to have no unbudgeted financial implications.**

## **8 References**

- 8.1. Agenda for Change Annex's 5 and 6 (Provisions for payments for ambulance staff).