



## Operational Overtime Authorisation Procedure

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## **1 Scope**

- 1.1. To enable the Trust to have in place a transparent and robust system for the fair allocation of operational overtime anywhere within SECAMB, offering consistent opportunities for all staff wishing to work overtime.

## **2 Responsibilities**

- 2.1. The Head of Clinical Scheduling will be responsible for ensuring this procedure is implemented within the scheduling teams.
- 2.2. The local clinical scheduling managers for all areas will be responsible for the implementation of this procedure with their respective teams.
- 2.3. It will be the responsibility of senior clinical scheduling managers to monitor this procedure and provide evidence of compliance with it as required.

## **3 Procedure**

- 3.1. All operational overtime will be authorised through Clinical Scheduling to ensure that the provided resources match the required Unit Hours (UH).
- 3.2. The SECAMB distribution team will confirm the number of required UH needed for each dispatch area through forecasting of anticipated demand.
- 3.3. Available overtime shifts will be advertised through, ProMis web, by regularly faxing operational ambulance stations, the SMS text system or by contacting staff direct via line managers.
- 3.4. Any operational staff member wishing to use the SMS text system to be notified of available overtime can do so via the clinical scheduling department. To ensure this system is used efficiently, a staff member may be taken off the SMS text system, if they do not undertake any overtime during a two month period.



- 3.5. All overtime will be allocated on a first come first served basis for all staff anywhere within the Trust. Overtime will not be protected for staff working on home stations.
- 3.6. Overtime will be allocated up to a **maximum of 28 days** in advance, to ensure that these shifts are required and no oversupply of UH is scheduled.
- 3.7. A staff member may volunteer for overtime within the **28 day period** by contacting the relevant Clinical Scheduling office.
- 3.8. Clinical Scheduling may decide not to cover some vacant shifts, if they are not needed to meet the UH requirement. However, these shifts may become available for overtime at a later date, in which case they will be advertised as described in 3.4.
- 3.9. The authorisation of overtime for the Emergency Dispatch Centres (EDCs) will be matched to the agreed minimum manning levels.
- 3.10. PTS overtime will be authorised for the required shift pattern, in liaison with the PTS operational management team.

#### **4 Audit and Review**

- 4.1. This Procedure will be audited by the responsible manager on an annual basis and any non-compliance identified will be addressed with the relevant manager or directorate to prevent reoccurrence.
- 4.2. This Procedure will be reviewed every 2 years by the responsible manager to ensure it is meeting its aims and objectives.

#### **5 Equality Impact Appraisal**

- 5.1. The South East Coast Ambulance Service NHS Trust (SECAMB) will undertake an equality impact appraisal to identify the impact this procedure may have on disparate groups, or adverse impact on any group within SECAMB.

#### **6 References**

- 6.1. There are no national guidance or external documents that are either referred to in this procedure or linked to it.