



Relief Allocation Policy and Procedure

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1. Introduction

- 1.1. This policy applies to all staff in the Trust and sets out the principles to be followed in relation to Relief Allocation.

2. Aims and Objectives

- 1.2. This policy aims to give guidance to all staff and managers on the policies and processes to be followed regarding relief allocation where applicable.

3. Definitions

- 1.3. Relief shifts are to cover vacant shifts relating to annual leave, sickness absence, general absences in the first instance and then any additional operational demand as required.
- 1.4. The Trust have set a general principle that all relief capacity will form part of the core rotas at each location, as this is seen to be the fairest way to allocate relief duties.
- 1.5. Individual staff members within the Trust can request a permanent relief pattern if they feel this best suits their personal circumstances. These working patterns will be agreed with their head of department (see Flexible Working Policy).

4. Policy Statement

- 1.6. The Trust intends to ensure that there is a robust and fair approach to the allocation of relief shifts, in order that it makes the best use of its available resources in the interests of both patient care and staff welfare.

5. Arrangements

- 1.7. The relevant Scheduling Department or responsible person will ensure that a minimum of 28 days of rotas are planned and available for staff at any one time. A further 14 days will be planned; however, these should not be considered Finalised until they are within the 28-day reference period. The 28-day reference period will be calculated from the current date forward.
- 1.8. All staff will ensure they are aware of their planned relief shifts by using the current on-line rostering tool (GRS/Injixo).



- 1.9. Planned relief duties, within the 28-day reference period, will change only with the agreement of the staff member concerned.
- 1.10. It is recognised by the Trust that changes to relief weeks at short notice has an impact on personal arrangements, therefore, the Trust will work with staff to keep these to a minimum.
- 1.11. Where it is necessary for changes to be made with less than 24 hours' notice of the scheduled duty, an unforeseen change payment will be made in accordance with the Agenda for Change Terms and Conditions.
- 1.12. Relief staff will be allocated their shifts to meet anticipated demand in support of business needs, and high-quality patient care but not compromising staff welfare.
- 1.13. In order to match the anticipated demand patterns, relief weeks can be made up of shifts of different lengths (see 5.10 below).
- 1.14. The Rota Parameters Procedure will be followed when allocating staff relief shifts.
- 1.15. If the full amount of relief hours are not used during the relief week due to the variety of shift lengths allocated, the balance of hours will be carried forward to the next relief week. Hours being carried forward should be limited to a maximum of 5 hours. If mutually agreed, these hours can be used at any point within the rota ensuring the working time directive is not exceeded.
- 1.16. Best efforts will be made to allocate relief duties in line with skill mix as per the member of staff's base rota pattern and base location. However, any shift time or length can be given within the relief period subject to the base rota type, e.g. a colleague on a no nights rota would not be given a night shift but could be given a different time shift within the window of their normal rota hours.
- 1.17. Where a staff member is required to work a relief duty off their base station, travel expenses will be paid at the appropriate rate as per Agenda for Change Terms and Conditions for any mileage in excess of their normal home to base mileage.
- 1.18. Every effort will be made to accommodate requests for specific relief duties from individual staff members. These must be received in writing, to the local scheduling team, no less than seven weeks before the required duties although these cannot be guaranteed.



- 1.19. In order to ensure that relief staff are treated fairly following the allocation of their shifts, any staff member who returns from sickness absence, cancels their annual leave, or has other general absences within the 28-day reference period may be required to undertake relief duties for the remainder of the 28-day period. If however their normal rostered shifts are vacant, they will be returned to their normal shift.

6. Responsibilities

- 1.20. The Chief Executive Officer is accountable for the effective implementation and monitoring of this policy of all policies and procedures.
- 1.21. The Heads of Department will be responsible for implementing this policy within their directorate.
- 1.22. The relevant Scheduling Department is responsible for the allocation of all relief duties.
- 1.23. The Trust will ensure that this policy is communicated to all staff.
- 1.24. Colleagues are responsible for ensuring they are available to undertake their relief duties as requested by the Scheduling Department in line with this procedure.
- 1.25. Departmental managers will work with the Scheduling Department and staff, to assist if required, in the effective allocation of relief duties. This collaborative approach will ensure that the Trust is able to provide sufficient resources to meet anticipated demand.
- 1.26. All managers and staff have the responsibility for ensuring that they comply with this policy.
- 1.27. Competence
- 1.28. All operational managers and staff must familiarise themselves with this policy and its requirements.

7. Monitoring

- 1.29. Compliance with this policy will be monitored by the appropriate 8b manager or equivalent and any issues will be raised with the responsible manager and/or the relevant directorate.



8. Audit and Review

- 1.30. All procedures have their effectiveness audited by the responsible Management Group at regular intervals, and initially six months after a new policy is approved and disseminated.
- 1.31. 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).
- 1.32. This document will be reviewed in its entirety every three years or sooner if new legislation, codes of practice or national standards are introduced, or if feedback from employees indicates that the policy is not working effectively.
- 1.33. All changes made to this procedure will go through the governance route for development and approval as set out in the Policy on Policies.

9. Financial Checkpoint

- 1.34. 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.
- 1.35. This document has been confirmed by Finance to have no unbudgeted financial implications.

10. References

- Agenda for Change Terms & Conditions.