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<th><strong>Version Number:</strong></th>
<th>V3</th>
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<tr>
<td><strong>Name of originator/author:</strong></td>
<td>Senior HR Manager - 0161 882 1080</td>
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<td><strong>Name of responsible committee:</strong></td>
<td>Workforce and Development Committee</td>
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<tr>
<td><strong>Name of executive lead:</strong></td>
<td>Director of Workforce and Organisational Development</td>
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<td><strong>Date V1 issued:</strong></td>
<td>August 2011</td>
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<td><strong>Last Reviewed:</strong></td>
<td>November 2013</td>
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<td>December 2015</td>
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<td><strong>Scope:</strong></td>
<td>Trust Wide</td>
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<tr>
<td><strong>MMHSCT Document Code</strong></td>
<td>HR03</td>
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## Recruitment and Selection Policy and Procedure

**Document Title / Ref:** Recruitment and Selection Policy and Procedure

**Lead Executive Director:** Director of Workforce and Organisational Development

**Author and Contact Number:** Senior HR Manager – 0161 882 1080

**Type of Document:** Policy  
**Broad Category:** HR

**Document Purpose:** This policy sets out the criteria and procedures for fair, timely and cost effective recruitment of staff and takes account of current legislation relating to employment, equality and diversity, data protection, rehabilitation of offenders, safeguarding children and vulnerable adults, and Department of Health guidelines.

### Scope

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### Version number

| 3 |

### Approval Committee

| Workforce and Development Committee |

### Approval Date

| 19th September 2013 |

### Ratification

| Trust Board Ratification |

### Date of Ratification

| 19/12/2013 |

### V1 Valid from Date

| August 2011 |

### Current version is valid from approval date

| December 2015 |

### Date of Last Review

| November 2013 |

### Date of Next Review

| December 2015 |

### Procedural Documents to be read in conjunction with this document:

- Disclosure & Barring Services Policy.
- Temporary Staffing Bank & Agency Procedure.
- NHSLA Risk Management Standards 2012-2013
- Policy on Procedural Documents

### Training Needs Analysis Impact

| There are no Training requirements for this procedural document |

### Financial Resource Impact

| There are no Financial resource impacts |

### Document Change History

**Changes to this document in different versions must be detailed below. Rationale for the change should also be given.**

<table>
<thead>
<tr>
<th>Version Number / Name of procedural document this supersedes</th>
<th>Type of Change i.e. Review / Legislation / Claim / Complaint</th>
<th>Date</th>
<th>Details of Change and approving group or Executive Lead (if done outside of the formal revision process)</th>
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<tr>
<td>2</td>
<td>Review</td>
<td>July 2013</td>
<td>Addition of process for handling internal applicants. Section 8.8. (Approved at JNCC 19/9/13)</td>
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<td>1</td>
<td>Legislative</td>
<td>Feb 2013</td>
<td>Updated to reflect change from CRB to DBS</td>
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### External references used in the creation of this document:

If these include monitoring duties upon the Trust for this policy the specific details should be
Policy authors are asked to consider each of the nine protected characteristics under the Equality Act 2010. We expect you to demonstrate that throughout the policy process you have had regard to the aims of the Equality Duty:

1. Eliminate unlawful discrimination, harassment and victimisation and any other conduct prohibited by the Act;
2. Advance equality of opportunity between people who share a protected characteristic and people who do not share it; and
3. Foster good relations between people who share a protected characteristic and people who do not share it.

Please provide a brief account of how you have done this, further work to be completed and any support you have had in considering the aims and working in compliance with the Equality Duty.

If you are unclear on how to do this or would like further advice and support then you may contact quality.admin@mhsc.nhs.uk.

It is the responsibility of the approving group to ensure this statement reflects the Trusts objectives and position with compliance as set out within the NHS Equality Delivery System.

The overall purpose of the Recruitment & Selection Policy & Procedure is to ensure that the Trust applies standards of best practice in the recruitment and selection of staff and that those involved with the recruitment process operate in a fair, open and equitable manner, free from bias and discrimination.

This policy sets out the criteria and procedures for fair, timely and cost effective recruitment of staff and takes account of current legislation relating to employment, equality and diversity, data protection, rehabilitation of offenders, safeguarding children and vulnerable adults, and Department of Health guidelines.

In line with the Trust values we may publish this document on our External Website. Is there any reason you would prefer this is not done? No

It is the Authors responsibility to ensure all procedural documents comply with the Trust values.

If you are unclear on any of the requirements in the document control sheet then please email quality.admin@mhsc.nhs.uk before proceeding.
### Monitoring and Compliance Requirements Sheet

For audit, Registration and NHSLA purposes all procedural documents must have monitoring requirements or key performance indicators set by the authors, Committees or Lead Directors. This allows the Trust to routinely monitor the effectiveness and impact of their procedural documents on a regular basis.

<table>
<thead>
<tr>
<th>Procedural Document Title:</th>
<th>Recruitment and Selection Policy and Procedure</th>
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<tr>
<td>Does this procedural document offer support or evidence for the Trusts registered activities and outcomes?</td>
<td>Yes</td>
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<tr>
<td>Is this an NHSLA Document?</td>
<td>Yes</td>
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If other Monitoring requirements are necessary i.e. Health & Safety Act and you should include them here and record them in the External References section

| Specify where the requirement originates | Additional Details i.e. Section number, Code of Practice |

<table>
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<tr>
<th>Minimum Requirement / Standard / Indicator to be monitored &amp; Section of document it appears</th>
<th>Process for monitoring</th>
<th>Responsible Individual / Group</th>
<th>Frequency of Monitoring</th>
<th>Responsible Group for review of results / action plan approval / implementation</th>
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<td>Section 5. The group responsible for approval/implementation is JNCC</td>
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f. How the organisation monitors compliance with all of the above

| How the organisation monitors compliance with all of the above | Other (specify) | Human Resources/Employee Resourcing Team | 6 Monthly | Workforce and Development Committee | Section 15 |

NB: If you have selected audit you should complete the required audit registration form and standards document and submit these with your expected timescales for completing the audit to quality.admin@mhsc.nhs.uk as soon as possible and no later than 4 weeks prior to the audit commencing.

The Group / Committee should also ensure the monitoring work is added to their yearly schedule of monitoring and action logs as appropriate.
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1 Policy Summary

Manchester Mental Health & Social Care Trust will develop, implement and regularly update its recruitment policy and procedures. This Recruitment & Selection Policy and Procedure is designed to ensure that the Trust applies standards of best practice in the recruitment and selection of staff and that those involved with the recruitment process operate in a fair, open and equitable manner, free from bias and discrimination.

This policy sets out the criteria and procedures for fair, timely and cost effective recruitment of staff and takes account of current legislation relating to employment, equality and diversity, data protection, rehabilitation of offenders, safeguarding children and vulnerable adults, and Department of Health guidelines.

1.1 Supporting References

In developing this policy, procedure and accompanying protocols, the following legislation and NHS guidance has been duly considered:

- NHS Employment Checks July 2010 (NHS Employers)
- The National Health Service (Appointment of Consultants) Regulations Good Practice Guidance
- Data Protection Act 1998
- Freedom of Information Act 2000
- EU Age Regulations 2006
- Fixed Term Workers (Prevention of less favourable treatment) Directive
- Gender Recognition Act 2004
- Human Rights Act 1998
- Rehabilitation of Offenders Act 1974
- The Asylum and Immigration Act 1996
- Trust Equality and Diversity Policy & Strategy
- Equality Act 2010
- Fraud Act 2006
- Bribery & Corruption Act 2010

2 Scope

2.1 This policy applies to the recruitment and selection of all staff groups within the Trust including permanent staff, staff on fixed term or temporary contracts, students, trainees, applicants to the Trust's Temporary Staffing Bank and workers supplied via agencies. Where agencies are engaged these must comply with the Government Procurement Services (GPS) and evidence that the pre-employment checks as outlined in this policy have been met for all workers provided. Separate guidance is available for the pre-engagement checks to be undertaken for volunteers and work experience placements. Certain staff groups have been identified as having additional NHS guidance in relation to recruitment procedures. These are identified in section 10.
3 Rationale

3.1 Manchester Mental Health & Social Care Trust (hereafter referred to as the Trust) has a primary duty to meet its responsibilities in providing the highest possible standard of health care to its patients. To achieve this the Trust has to attract and retain a highly skilled and productive workforce. Successful recruitment relies on finding people with the necessary skills, expertise, qualifications and personal attributes to enable them to make a positive contribution towards the aims and values of the Trust.

3.2 This policy and procedure defines the expected standards of good practice in recruitment and the supporting flowchart provides practical guidance for recruiting managers to ensure a consistent approach ensuring that the best people are appointed regardless of age, disability, gender reassignment, marriage or civil partnership, maternity or pregnancy, race, religion or belief, sex and sexual orientation.

4. Principles

4.1 Through this Policy the Trust aims to:

- Attract and retain a diverse workforce which is representative, throughout the organisational levels, of the community it serves;
- Promote its vision by enabling those involved in recruitment to attract, develop and retain the best people across disciplines, putting patients at the centre of everything that we do;
- Promote itself as an employer of choice, with a particular emphasis on recruitment from the local community. This will be balanced with a need to attract staff with the right skills and experience from both the national and international arena;
- Ensure that recruitment and selection processes are efficient, consistent, fair and transparent, within agreed timescales and committed to provide equality of opportunity for all;
- Ensure that recruitment decisions are fair, transparent and based on objective and justifiable criteria;
- Set standards of best practice and ensure adherence to these across the Trust;
- Set a corporate style for advertising to ensure consistency and recognisable branding;
- Follow efficient and effective recruitment practices ensuring new recruits are in post in the right timescales;
- Ensure legislative requirements are met.

4.2 Selection will always be a competitive process, except where staff are being redeployed for reasons of organisational change, health, disability or other similar circumstances, where consideration may be given to ‘slotting in’. Please refer to the Trust's Management of Organisational Change Policy.

4.3 Fixed term employees will be recruited using the same principles as permanent staff. Fixed term contracts will only be used where there is a genuine service need to do so which can be objectively justified and following discussions with HR and during the Establishment Control Panel process, due to the area of complex employment law.
4.4 Managers must only appoint to fixed term contracts where one of the following applies:

- It is known in advance that a particular job will come to an end on a specific date due to the available funding
- The employment is for the purpose of completing a particular task (such as a time limited project / funding / completion of agreed training period)
- The employment is for the purpose of replacing an employee who is going to be absent from work for a period of time (e.g. on maternity leave / Secondment)

4.5 The ending of fixed term and temporary contracts are classed as a termination of contracts and as such contractual notice must be given to the employee. This is specified within the employment contract / statements of particulars and is dependent on length of NHS service.

5. **Duties & Responsibilities**

5.1 The **Trust Board** has a responsibility to ensure that the recruitment and selection process is implemented to ensure the Trust meets its legal obligations together with strategic and NHS obligations.

5.2 The **Director of Workforce and Organisational Development** will:

- Oversee the introduction, operation and monitoring of the Policy; and,
- Ensure the provision of regular and accurate statistical reporting to Trust Board on an quarterly basis.

5.3 The **Recruitment & Temporary Staffing Manager** will:

- Manage the co-ordination and operation of the advertising and recruitment of staff;
- Manage the Trust’s Redeployment Register ensuring identification of suitable positions are raised with the HR Business Partners; and
- Co-ordinate the Establishment Control Panel (ECP) process;
- Monitor the recruitment and selection policy and procedure to ensure best practice guidelines and achievement of performance targets
- Audit the agencies practise to ensure that the same employment check standards are being adhered to

5.4 The **Employee Resourcing (ER) Team** will:

- Perform administration relating to recruitment and selection, ensuring all pre-employment checks are completed in line with NHS Employers guidance and in a timely manner;
- Provide advice and guidance on all aspects of the recruitment process

5.5 **Recruiting Managers** will:

- Ensure that all staff that have recruitment and selection responsibilities are made aware of the Recruitment & Selection Policy and Procedure and their obligations within it, undertaking relevant training to support this;
- Apply the Recruitment and Selection Policy within the legal requirements and current recruitment best practice guidelines;
• Communicate effectively with candidates at key stages of the recruitment process; and
• Fully utilise NHS jobs in the shortlisting process.

5.6 Applicants will:
• Complete the NHS Jobs online application form and subsequent pre-employment screening processes truthfully and in a timely fashion; and
• Ensure that they reveal to the Trust all relevant information in making their application.
• All potential NHS employee’s are expected, at all times, to be honest and act with integrity and probity, not making, permitting or knowingly allowing to be made, any untrue or misleading information, relating to the applicants circumstances, to be submitted on an application form.
• The Trust takes the issues of fraud, bribery and corruption very seriously and any suspicious activity will be referred to the Local Counter Fraud Specialist and the results of any investigation could lead to disciplinary action being taken up to and including dismissal and/or civil/criminal prosecution proceedings being instigated against the appropriate person/persons involved.

5.7 External Recruitment Agencies will:
• Adhere to the same standards of pre-employment screening and adherence to equality legislation as set out in the Trust’s Recruitment and Selection Policy and the NHS Employment Check Standards; and
• Provide assurance to the Trust of their processes and participate in internal audits as required.

6 Advertising Vacancies

6.1 All vacancies, regardless of grade/band, including secondments and acting up opportunities, will go through the Trust’s Establishment Control Process for recruitment authorisation. Further information about this process can be obtained from the Trust intranet site.

6.2 The recruiting manager is responsible for reviewing the Job Description and Person Specification and writing the job advertisement. Upon receipt of the Establishment Control Panel’s approval, the Job Description and Person Specification, KSF outline and advert for the vacancy will be forwarded to the Employee Resourcing (ER) Team for advertising internally in the first instance for up to 7 working days via the Trust’s Intranet and Staff News. When NHS Clearing House processes are in place, all vacancies must also be advertised in line with the published guidelines and for the allocated time periods.

6.3 All vacancies to be advertised externally will be placed on the NHS e-recruitment website www.jobs.nhs.uk (NHS Jobs) by the ER Team in the first instance. Printed advertising media is only used in exceptional circumstances where the tested market has failed to provide a pool of suitable candidates. (Please note in accordance with the DoH Good Practice Guidelines, all substantive Consultant vacancies must be advertised in at least one printed publication.) Where advertisements are placed in external publications, they should be brief, containing the job title, grade/band, hours
of work and salary, and signpost applicants to NHS Jobs for further information and to apply on-line.

6.4 The Recruitment Flowchart provides further in-depth information for use by recruiting managers. It is good practice to plan the timetable for the whole process at the outset, to ensure it is as efficient and timely as possible. The recruiting manager must give consideration in advance to any selection tools (see 7.2) such as presentation topic, psychometric testing, in tray exercises etc and also identify a recruitment timeline which incorporates:

- The closing date (taking into account NHS Clearing House timeframes as appropriate)
- Time taken to shortlist – 5 working days
- Notification to shortlisted candidates – between 5 to 10 working days
- Interview date – 10 working days from notification to shortlisted candidates

6.5 Where possible the interview date will be stated in the advert to ensure that prospective applicants are given as much notice as possible.

6.6 All advertisement text and recruitment material will be reviewed by the Employee Resourcing Team to ensure compliance with equality and diversity principles and legislation. In addition, equality and diversity compliance will be reviewed at both the shortlisting and selection stages of the recruitment process.

7. Shortlist and Interview Panels

7.1 Shortlisting and interviewing must not be undertaken by one person in isolation. All interview panels must comprise at least three members, one of which should be the line manager. Users and carers can provide valuable input to interview panels and recruiting managers should give consideration to the inclusion of user or carer representatives. All parties involved in the recruitment process must have attended a relevant Recruitment & Selection Training prior to participation on interview panels.

7.2 Any tests and assessments used to support the recruitment decision must be relevant to the person specification requirements and free from bias. They must only test skills and abilities relevant to the job role, e.g. presentation skills, typing test, numeracy & literacy test. Methods of selection such as use of assessment centres may be used to support and enhance recruitment decisions. Where psychometric tests are available, these may only be used after discussion at recruitment planning. These will only be administered by trained assessors. The invite to interview letter will inform shortlisted candidates in advance of any tests and assessment prior to attending the interview and enquire if any reasonable adjustments and provision/s are required.

7.3 As an Equal Opportunities Employer the Trust actively encourages applications from people with disabilities. Those who demonstrate meeting the minimum essential criteria for the job applied for will be guaranteed an interview, under the Guaranteed Interview Scheme.

7.4 All parties involved in the recruitment process must ensure appropriate questions are asked at interview to ensure that the candidate selected is qualified and competent to carry out the role. All interview questions must be based on the person specification to ensure that each of the essential criteria for the role are assessed.
7.5 All parties involved in the recruitment process agree to make accurate notes and record timely decisions adhering to the policy, procedures and guidance, seeking advice where necessary from ER Team as appropriate.

7.6 The Recruiting Manager has responsibility for effective communication with candidates after the interview to notify them of the outcome and offer feedback where requested, within a maximum of 5 working days.

8. **Pre-Employment Checks**

8.1 The NHS Employment Check standards identify six pre-employment checks which must be undertaken before any unconditional offer of employment can be made. NHS Employers has developed these standards with the Department of Health (DH) which include those checks that are required by law, those that are DH policy and those that are required for access to the NHS Care Record Service. Failure to comply with these standards could potentially put the safety and even the lives of patients, staff and the public at risk. The NHS Employment Check standards are mandatory for all applicants and staff in ongoing NHS employment. These standards are periodically subject to further amendments to ensure that are up to date with current legislation. Please refer to the following link for the latest update: [http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards/Pages/Employment-Check-Standards.aspx](http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Employment-Check-Standards/Pages/Employment-Check-Standards.aspx)

8.2 **Verification of Identity Checks**

8.2.1 The first check, which is performed at interview, is the verification of identity check. This face-to-face meeting is an essential part of the verification process. An application should not progress until the recruiting manager is satisfied that a person’s identity is proven.

8.2.2 Verification of identity checks are designed to determine that the identity is genuine and relates to a real person and establish that the individual owns and is rightfully using that identity. Applicants must provide acceptable documents containing their photograph, such as a passport or UK driving licence, and acceptable documents providing their current address. Obtaining sight of original documents enables the recruiting manager to check:

- Full name – forenames and last name
- Signature
- Date of birth
- Full permanent address.

8.2.3 The recruiting manager will record the outcome of these checks, confirming that the individual’s identity has been verified in accordance with these standards.

8.3 **Right to Work Checks**

8.3.1 The second check which is also performed at interview is the Right to Work Checks. These checks are concerned only with an individual’s right to work in the UK and must be carried out in conjunction with verification of identity checks, so the recruiting manager can satisfy themselves that the applicant is the rightful owner of the documents they present.
8.3.2 The recruiting manager must assess the eligibility of an individual's right to work in the UK by verifying specified documentation from lists A and B to ensure they are eligible to reside and work in the UK and also to meet the requirements of anti-discrimination legislation. All documents must be valid, current and original. There are three steps to confirm an applicant has the right to work in the UK:

- Request right to work documents
- Validate the documents
- Copy and store

8.3.3 Employers risk breaking the law unless they check the entitlement to work in the United Kingdom for all prospective employees before they start employment. No assumption should be made about a person’s right to work or immigration status on the basis of their colour, race, nationality, ethnic or national origins, or the length of time they have been in the UK. Under the Immigration, Asylum and Nationality Act 2006, the recruiting manager is liable to payment of a civil financial penalty of up to £10,000 per illegal worker if found to employ a person who is subject to immigration control and who has no permission to work in the UK, or who works whilst in breach of their conditions of stay in the UK. If employers knowingly employ an illegal migrant worker they could be prosecuted and receive an unlimited fine and/or a maximum two year prison sentence.

8.3.4 Where managers wish to employ a migrant worker – that is anyone from outside the EU – they must seek advice from the ER Team and refer to the Certificate of Sponsorship Guidance available on the Trust’s Intranet. This guidance covers the process for obtaining a Certificate of Sponsorship and the duties of the Line Manager and the ER Team in respect of employing any migrant worker. This document also provides guidance in respect of shortage occupations and the requirement to meet the resident labour market test.

8.3.5 Advice can be sought from the ER Team or the Recruitment & Temporary Staffing Manager where an applicant’s right to work status is unclear.

8.4 Professional Registration and Qualification Checks

8.4.1 The registration and qualification checks ensure that any prospective employees have the necessary registration with the appropriate regulatory body (i.e. GMC, NMC, HPC, GSCC) and that they have the right qualifications to do the job.

8.4.2 Any qualifications disclosed on the application form which is an essential or desirable criteria on the person specification must be checked. The ER Team will contact the awarding body directly, where possible, to confirm the applicant’s attendance, course details and grade awarded. Applicants will be requested to bring original qualification documentation to interview for verification and copying by the recruiting manager. The ER Team will check the registration details provided on the application form with the relevant regulatory body for the successful applicant. Verification of a doctor’s GMC registration and licence to practice status may be carried out through the GMC or through Electronic Staff Record (ESR). Where this check has been made it should not be necessary to verify qualifications separately.
8.4.3 Any offer of employment may be withdrawn if applicants knowingly withhold information, or provide false or misleading information, and employment may be terminated should any subsequent information come to light once they have been appointed. Once in employment, it is the responsibility of the individual to maintain their registration in accordance with the Trust’s Professional Registration Policy & Procedure.

8.4.4 In addition the ER Team will check the Alert Notices Register prior to interview. An alert notice is a way of notifying all NHS Trust’s about registered health professionals whose performance or conduct could pose a significant risk or harm to patients, staff or the public.

8.4.5 Applicants may not always have the original documentation or may have overseas qualifications. In these circumstances advice must be sought from the ER Team or the Recruitment & Temporary Staffing Manager.

8.5 Employment History and Reference Checks

8.5.1 References enable checks on the accuracy of a prospective employee’s previous employment and training history and provide assurance of an individual’s qualifications, integrity and track record through the use of the Reference Report Form.

8.5.2 The NHS Employment Check standards requires that references are obtained to cover at least three years of previous employment and/or training, ideally covering two separate employers (where possible), one of which should be from the applicant’s current or most recent employer. Where an individual has been with one employer for five years or more, one reference may be sufficient. In the case of Consultants, three references must be obtained.

8.5.3 References will be requested using the Trust’s standardised Reference Report Form requiring a company stamp or letterhead as verification. References provided in writing should state as a minimum the employment dates and position held and should be on company letterhead. Reasonable efforts should be made to check that referees are bona fide and genuine. This may include checking that the organisation exists (using the phone book, internet or business directories), and phoning or emailing the HR department to verify employment dates and information are correct.

8.5.4 Any reference, which is in the form of an e-mail or an unsigned fax, will initiate a check being made directly to the referee. This check will be made within 14 days and will ensure the authenticity of the reference.

8.5.5 Any gaps in employment history will need to be carefully explored with the applicant at interview by the recruiting manager. Information obtained through references should only be used to confirm a recruitment decision. Therefore references will only be sought after a decision has been taken and a conditional offer made. References must be cross-checked with the application form to confirm previous employment dates before an unconditional offer of employment is made.

8.5.6 Further information on other types of references, such as Executive or other Senior appointments, positions involving the management and handling of organisational budgets, applicants working overseas, self-employed or
applicants in full-time education, is provided in the Employment History and Reference Checks document.

8.5.7 Guidelines for managers who are requested to write references for Trust employees are available on the Intranet “References for Staff – Guidelines on Writing.”

8.6 Disclosure & Barring Service (DBS) Check

8.6.1 The Disclosure & Barring Service Check (DBS – formally the Criminal Records Bureau) provides access to information across England and Wales about criminal convictions and other police records to help employers make an informed decision when recruiting staff. Possession of a criminal conviction does not automatically make an applicant unsuitable for employment in the NHS. However, the Independent Safeguarding Authority (ISA) holds the power to bar people who have committed serious offences from working or engaging in regulated activity with children and/or vulnerable adults.

8.6.2 Part V of the Police Act 1997 makes criminal record checks available for positions that are identified as exempt under the Rehabilitation of Offenders Act (ROA) 1974 (Exceptions) Order 1975 (as amended). Not all staff working within the Trust will require a DBS check, but checks are mandatory for staff who work in regulated and controlled activities and who have contact with children and/or vulnerable adults. It is illegal to carry out a DBS check where the position has not been identified as exempt under the Exceptions Order.

8.6.3 Where a vacancy meets the criteria for a check, the advert will clearly state that any offer of employment will be subject to a full DBS disclosure being carried out. A disclosure will only be applied for once a decision to offer the post has been taken and a conditional offer made. Prospective employees will be advised that as the position being applied for is exempt from the Rehabilitation of Offenders Act 1974 they are required to provide a self declaration providing details of any criminal records and information about both spent and unspent convictions as part of the application process. This will be obtained by issue of Model Declaration Form A and any information given will be verified by obtaining the DBS disclosure.

8.6.4 Where the position does not meet the criteria for a DBS check, but may still be regarded as a ‘position of trust’, prospective employees will be required to complete a self declaration providing information about unspent (current) convictions only as part of the application process. This will be obtained by issue of Model Declaration Form B.

8.6.5 Any offer of employment made will be confirmed in writing by the ER Team and will confirm that the offer is provisional and conditional on the satisfactory outcome of DBS and other pre-employment checks. This offer may be withdrawn if applicants knowingly withhold information, or provided false or misleading information. Existing staff may also be subject to disciplinary action and dismissal if they have failed to disclose relevant information in relation to their criminal record.

8.6.6 Where the position meets the criteria for a disclosure and the applicant claims they have never lived in the UK before, a DBS disclosure must still be
obtained in addition to the individual’s overseas criminal records. Currently the DBS cannot access criminal records held overseas; however in a small number of cases overseas criminal records are also held on the Police National Computer (PNC) and these would be revealed as part of a DBS check. All overseas police checks must be in accordance with that country’s justice system and UK requirements.

8.6.7 Doctors on an educationally-approved training rotation should be checked, as a minimum, once every three years rather than each and every time they change rotation. The Senior HR Business Partner (Medical) will seek written confirmation from the host organisation or previous employer that an appropriate check at the correct level has been carried out within the last three years. Where assurances cannot be obtained a fresh check must be requested.

8.6.8 Applicants will only be allowed to commence in post upon receipt of a full satisfactory DBS Disclosure, except in very exceptional circumstances i.e. where there is an urgent need to appoint because of an identified risk to patient safety, or for induction purposes, subject to carrying out an appropriate risk based assessment. In this situation, approval must be obtained from the Executive Management Team and an appropriate DBS check must have been applied for and evidence of tough safeguards in place to manage that individual –such as restricted duties with no access to children or vulnerable adults, or access with full supervision – until the disclosure has been obtained. It is important to stress, that this provision should only be made in the exceptional circumstances identified above.

8.6.9 More detailed information on the DBS, ISA, Rehabilitation of Offenders Act, portability and the use, storage and destruction of Disclosures can be found in the Trust’s Disclosure & Barring Services (DBS) Policy.

8.7 Occupational Health Checks

8.7.1 Occupational health checks are the final pre-employment checks as part of the NHS Employment Check Standards, which state that pre-appointment health checks are carried out to:

- ensure that prospective staff are physically and psychologically capable of doing the work proposed, taking into account any current or previous illness
- identify anyone likely to be at excess risk of developing work-related diseases from hazardous agents present in the workplace
- ensure, as far as possible, that the prospective employee does not represent a risk to patients and that they will be doing work that is suitable and safe for them.

8.7.2 The checks will include a health questionnaire completed by the prospective employee upon conditional offer of employment, an interview with an occupational health nursing adviser, if the questionnaire answers need clarification and an onward referral to an occupational health physician, where appropriate.

8.7.3 Occupational health checks should be undertaken when a member of staff:

- takes up their first post including any training
• transfers to a new employer in the NHS
• changes jobs, where this involves a significant change of duties.

8.7.4 In addition, the conditional offer letter will also ask prospective employees to disclose any health conditions or disability which may affect their work or may require special adjustment to their work or workplace. If so then the individual would be referred directly to Occupational Health (OH).

8.7.5 Advice should be sought from the Recruitment & Temporary Staffing Manager where concerns are raised in relation to an applicant’s medical clearance.

8.8 Internal Applicants

8.8.1 Where applicants move internally within the Trust to a new job role it may not be necessary to undertake all of the above six employment checks again. The ER Team will request the current personal file and will confirm via ESR that the right to work and any professional registration is up to date. Where the new role requires additional qualifications, these must be seen and copied by the recruiting manager.

8.8.2 If a CRB / DBS check is not recorded on ESR, then another check will be undertaken, although this should not delay an internal move where the level of risk is no greater than at present.

8.8.3 A reference will be obtained from the current Trust line manager.

8.8.4 A new Occupational Health screen would only be required where the role involves a significant change of duties.

8.9 Withdrawal of a provisional offer of appointment

8.9.1 Any offer of employment will be made in writing by the ER Team and will confirm that the offer is provisional and conditional on the satisfactory outcome of the DBS disclosure, Occupational Health, Professional Registration and Qualifications, References, Right to Work and Identity checks. The offer may be withdrawn, or employment terminated, if it becomes apparent that the applicant knowingly withheld information, or provided false or misleading information.

8.9.2 Where this relates to the DBS disclosure advice must be sought from the Senior HR Manager in conjunction with the DBS guidance and NHS Employers DBS Check Document.

8.9.3 Where this relates to Occupational health clearance, no prospective employee should be refused employment on health grounds unless:
- expert occupational medical advice has been sought
- the applicant has had the opportunity to discuss issues raised with an occupational health professional
- the employing manager has discussed the reasons with HR and given full consideration to all of the facts.
8.9.4 An offer may be withdrawn where information provided within the reference brings to question the suitability of the applicant for the position. In this situation the recruiting manager should contact the referee to discuss the concerns raised and where appropriate this should also be discussed with the applicant before a final decision is made.

8.9.5 An offer may be withdrawn where it becomes evident that information cannot be provided by the applicant to prove either their identity, right to work or essential qualifications. A reasonable period of time, such as two weeks, will be granted at the recruiting manager’s discretion for the applicant to provide the relevant documentary evidence before the offer is withdrawn.

9. Bank Workers Application and Recruitment Process

9.1 Recruitment of both registered and non-registered nurses to the Bank occur from either:

- Individuals who have a current employment contract (either temporary or substantive) with the Trust but who also wish to undertake bank work.
- External applicants who do not have a current employment contract with The Trust but wish to be registered as available to undertake bank work.

9.2 Advertisements for Bank Workers will be displayed periodically on the Trust web site, NHS Jobs and placed via the local media as and when the need arises.

9.3 Individuals who have a current employment contract with the Trust and wish to undertake bank work will need to discuss their application with their line manager, who should, if supportive, complete an ESR 1A to create an additional bank position.

9.4 Interviews for external applicants will take place on a quarterly basis and be led by the ER Team supported by Clinical areas on a pro-rata basis.

9.5 The same pre-employment checks will apply for bank workers as outlined in paragraph 8.

10 Medical Appointments

10.1 Medical Appointments - Consultants

10.1.1 The NHS (Appointment of Consultants) Regulations Good Practice Guidance provides useful information to follow when making appointments to Consultant posts and details the roles and responsibilities of the interview panel members. Prior to commencing recruitment for a Medical Consultant, the job description must be approved by the Royal College of Psychiatrists.

10.1.2 It is a legal requirement for all doctors to be on the GMC's specialist register before being able to take up a consultant appointment. However, trainees may explore the possibility of post-CCST careers as soon as it is apparent that a CCST will be awarded in the near future. Consequently, Specialist Registrars will be able to apply for a consultant appointment provided the expected date of award of their CCST (or recognised equivalent, if outside the
UK) falls no more than 6 months after the date of interview for the consultant post.

10.1.3 All posts must be advertised, unless either the appointment is exempted by the regulations or the prior consent of the Secretary of State not to advertise has been obtained. A minimum of two advertisements must normally appear. These may be in nationally distributed journals or on nationally available Internet sites commonly used for similar advertisements relating to the profession concerned. At least one of the advertisements must appear in a printed journal. The advertisement should include:
   • the closing date for applications (a minimum of three weeks from the date the advertisement is placed); and
   • the date of interview.

10.1.4 The Regulations set out the provisions governing the membership of AACs. The core membership of Advisory Appointments Committees, as specified in Regulations, is set out below:
   ▪ a lay member (often the chair of the Trust or another non-executive director);
   ▪ an external professional assessor, appointed after consultation with the relevant Royal College;
   ▪ the Chief Executive of the Trust (or a Board level Executive or Associate Director);
   ▪ the Medical Director of the Trust;
   ▪ a Consultant from the Trust, from the relevant specialty;
   ▪ in the case of appointments to posts which have either teaching or research commitments or both, the committee must also include a professional member nominated after consultation with the relevant university.

An AAC may not proceed if any core member (or their appointed deputy) is not present.

10.1.5 All members of the AAC must have attended relevant Recruitment & Selection training provided for by the Trust or their own employing organisations.

10.1.6 Each member of the Committee including the lay members must have the opportunity to contribute to the selection of candidates to be interviewed. The Chair can usually agree a short list by correspondence, taking into account the views expressed by all the members of the Committee. Members should give their reasons for not short-listing particular candidates.

10.2 Medical Appointments – Specialty Doctors

10.2.1 Prior to commencing recruitment for a Specialty doctor, the job description must be approved by the Royal College of Psychiatrists.

10.2.2 The recruitment process as stipulated in section 6-8 above is followed with the addition that a formal appointment panel should be convened. The panel may include the following members however this list is not prescriptive:
   ▪ Consultant representative(s)
Specialty Doctor representative (from inside/ outside the Trust)
Management representative
HR Representative

10.3 Medical Appointments – Doctors in Training/ LAS/LAT

10.3.1 All core and higher trainees are employed by the Lead Employer, Greater Manchester West NHS Foundation Trust (GMW). All GP trainees are employed by North Lancashire Teaching PCT. GMW and North Lancashire conduct all pre employment checks prior to the core and higher trainees joining the Trust for each rotation period. The employees are placed within the Trust for a fixed period covering the duration of the rotation.

10.3.2 In the event of any vacancies arising on the rotation, the Trust may employ either a Locum Appointment for Service (LAS) or a Locum Appointment for Training (LAT).

10.3.3 In order to appoint a LAT the standard Trust recruitment procedure is followed however there are some additional steps to be followed as below:

- Deanery approval must be given for all LAT appointments
- The appointment may be from 1-12 months in duration
- The post must be advertised using a national person specification
- The post must have a clinical supervisor and an educational supervisor
- The appointee must register with the Royal College
- The appointment panel must comprise of:
  - A Consultant from the same specialty but different Trust with an interest/ involvement in education (eg: Clinical Tutor, DME)
  - Consultant form the same specialty (local)
  - HR Representative.

10.3.4 A LAS is normally recruited to cover a shorter period than a LAT as the appointment is for service and not training. To recruit LAS, approval must initially be sought from the Deanery and the post must have a clinical supervisor.

10.3.5 The recruitment panel must consist of two local Consultants.

11. External Recruitment Agencies

11.1 The Trust may, in exceptional circumstances and usually when either conventional recruitment methods have failed or whilst recruitment is in train, need to use the services of external agencies. In such circumstances, managers must use the Government Procurement Services (GPS) Framework nominated through the ER Team, which ensures that all temporary workers have been appropriately referenced, health checked, have a satisfactory DBS Disclosure and the right to work in the UK.

11.2 The Temporary Staffing Bank and Agency Procedure, available on the Trust intranet, outlines the process to be followed to engage agency workers. The Trust's
Establishment Control Panel process applies to the engagement of agency workers. Managers must not approach external agencies other than on the Government Procurement Services (GPS) Framework and with prior notification to the Recruitment & Temporary staffing Manager.

11.3 It is essential that the recruiting manager confirms the costs of such recruitment before entering into any agreement. Costs will be borne by the recruiting manager’s budget.

11.4 Any recruitment checks for workers carried out by agencies must be no less rigorous than those employed by the Trust and managers must satisfy themselves of this by having sight of a completed booking confirmation form (contained within The Temporary Staffing Bank and Agency Procedure). They will be required to provide assurance of their processes and participate in audit as required by the Trust. They will also comply with Confidentiality Agreements. Please also see section 15.2 for the audit process.

12. Candidate Expenses

12.1 By prior agreement with the recruiting manager, travel expenses at public transport rate, may be claimed for journeys to and from interview by completing the interview expenses claim form. The recruiting manager must authorise the claim form (payable from their budget) before forwarding to the ER Team for payment.

12.2 For those candidates travelling to the UK from abroad, expenses will be made from and to the port or airport of entry only.

12.3 Reasonable overnight accommodation expenses (the cost of bed and breakfast) may be claimed where it would be unreasonable to expect a candidate to travel a long distance on the interview day.

12.4 Managers have the discretion to decline to pay interview expenses where a successful applicant declines an offer of employment.

13. Equal Opportunities and Diversity

13.1 Recruiting Managers must ensure they avoid unlawfully discriminating in their recruitment processes on the grounds of ethnicity, disability, age, gender, religion and belief, sexual orientation or any other unjustifiable grounds. To avoid discrimination recruiting managers must treat all job applicants in the same way at each stage of the recruitment process.

13.2 The Recruitment & Selection Policy and Procedure should be read in conjunction with the Trust Equality and Diversity Policy & Strategy. Our statement is as follows: "The Trust affirms its commitment to actively promoting equality and eliminating discrimination in the delivery of its services and in the employment working arrangements and management of its staff. The Trust will not discriminate on grounds of age, disability, race, ethnic origin, religion, gender, sexuality or any other unjustifiable grounds. In its partnership with Manchester City Council the Trust understands that, equal opportunities involves both the recognition and acceptance that discrimination and disadvantage means that some members of the community are unjustifiably denied equal access to services or employment".
13.3 Promoting diversity embodies the principles of fair treatment for all and will as a result improve recruitment and retention. The Trust values the diversity of its workforce and Trust aims to ensure that all staff understand this commitment and adhere to the standards.

13.4 The Trust ensures that the Equality and Diversity statement is communicated to all job applicants and is promoted through the various recruitment channels in relation to all recruitment undertaken. It strives to achieve fair representation of groups across its diverse workforce.

13.5 The Trust has pledged to support the Two Ticks (Positive about Disabled People) guaranteed interview scheme. Job applicants who consider that they are disabled and have declared this on their application form will be guaranteed an interview for any post providing they evidence meeting the essential person specification criteria. Managers will be made aware of applicants in this category by the Employee Resourcing Team prior to shortlisting.

13.6 Equality and diversity monitoring data will be included in the quarterly HR Report to the Trust board, using information provided by job applicants.

14. **Data Protection**

14.1 Under the Data Protection Act 1998, individuals have a right to request sight of documents written about them. Managers involved in recruitment and selection should be aware of this and that information in documents such as interviewers’ notes could potentially be disclosed to data subjects in response to access requests. Managers should therefore ensure that all notes taken are collated and returned to the Employee Resourcing Team after selection for safe storage. Any feedback which is provided to candidates after interview should also be consistent with and supported by the documentation relating to the recruitment and selection process.

14.2 Information on applicants will be anonymised & treated in confidence and held securely in line with the Data Protection Act 1998. Information will be restricted to those involved in the recruitment process or in the production of statutory monitoring reports. Information on successful applicants is transferred into the Personal File.

15. **Monitoring Compliance**

15.1 The Recruitment & Temporary Staffing Manager will undertake a minimum of ten checks across a range of staff groups of newly recruited personal files on a minimum of a six monthly basis to ensure compliance with the service standards. The outcomes from this audit will be reported to the Workforce & OD Committee.

15.2 The Recruitment & Temporary Staffing Manager will undertake random checks of the recruitment documentation for individual staff supplied by Agencies supplying temporary and permanent workers on a minimum of a six monthly basis to ensure that they fully comply with the range and levels of recruitment checks undertaken by the Trust. The outcomes from this audit will be reported to the Workforce & OD Committee.

15.3 The recruitment process is subject to periodic audit by Internal Audit and Counter Fraud Services; the Trust Management Group receives copies of these Audit Reports.
16. **Induction**

16.1 All new employees are required to attend the Trust Induction Course where they will receive an introduction to Trust services, philosophies, aims and values, together with mandatory training and physical intervention training (where necessary), prior to commencing work. The ER Team will be responsible for booking new staff onto Induction and confirming start dates. The Learning & Development Team will be responsible for contacting new starters to confirm the specific details of their induction training.

16.2 All new employees will also receive a comprehensive Local Workplace Induction, the content of which is recorded on a Local Workplace Induction Check List and retained on their personal file.

16.3 Please refer to the Trust’s Induction Policy available on the intranet.

17. **Supporting documents**

17.1 The specific standards of the policy will be met through supporting documentation contained within the Recruitment Flowchart for Managers, which will detail the processes to be followed. [Link to Recruitment Flowchart](#)

17.2 The Trust’s Record Management Policy details the safe retention and destruction of personnel files and recruitment records.

18. **Contact Details:**

   **Employee Resourcing Team:**
   - Telephone Number: 0161 882 1073
   - Email: [resourcing@mhsc.nhs.uk](mailto:resourcing@mhsc.nhs.uk)
   - Fax: 0161 882 1033

All forms referred to in this document are available from the Trust Intranet

If you need to have this information translated into another language please contact the Mental Health Linkwork Scheme on 0161 276 5269 or e-mail [linkworkers.mentalhealth@nhs.net](mailto:linkworkers.mentalhealth@nhs.net). If you require it in larger print, Braille, audio or other formats please contact the Communications Team on 0161 882 1093 or e-mail [communications.admin@mhsc.nhs.uk](mailto:communications.admin@mhsc.nhs.uk)