

The Newcastle Upon Tyne Hospitals NHS Foundation Trust

Alert Notices Procedure

Effective: February 2010

Review: January 2013

1. Introduction

- 1.1 This procedure explains the Trust's obligations in respect of the Healthcare Professionals Alert Notice Directions 2006 which require all NHS bodies to have in place a procedure to ensure that alert notices can be initiated and/or circulated in respect of healthcare professionals. These directions replace the Health Service Circular 2002/011.

2. Scope

- 2.1 This policy applies to all employees and to individuals who conduct activities within the Trust, as an agency worker, a contractor, on an observer status or clinical access placement, and/or as an honorary contract holder.
- 2.2 This procedure applies to all professional applicants for vacancies within the Trust, including internal vacancies.
- 2.3 This procedure will apply to individuals seconded into the Trust and to those who are seconded out to another organisation.

3. General Principles

- 3.1 An alert notice is the way in which all NHS organisations are made aware of a registered healthcare professional regulated by a body listed in Section 25(3) of the NHS Reform and Healthcare Professions Act 2002 who may pose a threat to patients, staff or other users of the Trust's services and/or facilities. They cover situations where a healthcare professional that may pose a threat to patients or staff, or other users of the Trust's services and/or facilities moves or may intend to move from their present NHS employer to work elsewhere before their regulating body has had the chance to consider interim suspension or other measures. Even when such measures are in place, alert notices are intended to reduce the risk of inappropriate employment in any capacity within the NHS.
- 3.2 Alert notices relate to those health professionals who are regulated by one or more of the following regulating bodies:
- | | |
|---------------------------------|---|
| - General Medical Council | - Pharmaceutical Society of Northern Ireland |
| - Nursing and Midwifery Council | - Royal Pharmaceutical Society of Great Britain |
| - Health Professions Council | - General Osteopathic Council |
| - General Dental Council | - General Optical Council |
| - General Chiropractic Council | |
- 3.3 Alert notices are solely for use in cases where an individual is considered to be a serious potential or actual risk to patients, staff or other users of the Trust's services and/or facilities. They should not be used for any other reasons, are not part of the disciplinary policy/procedure but are an integral part of the process of NHS Pre-Employment Check Standards.

- 3.4 An alert notice will not be issued where an individual's performance or conduct is being considered by the Trust and they have been referred to the National Clinical Assessment Service (NCAS) for advice and support. However, where a doctor moves on, or could move on, before the NCAS assessment is complete consideration to the issue of an alert notice will be given.
- 3.5 In exceptional circumstances where a member of staff not covered by the professional bodies referred to in paragraph 3.2 may pose a threat to public safety, they may be subject to the alert notice procedure, e.g. where an employee falsely holds themselves out to be a healthcare professional and is seeking work in the NHS. If the Trust considers an employee to pose such a threat it will note this and may consider issuing an alert notice with regard to that individual.

4. Process for Requesting an Alert Notice

- 4.1 Where it is known that there may be concerns regarding a healthcare professional, that they may pose a threat to patients, staff or other service users, is leaving the employment of the Trust the relevant Clinical Director/ Directorate Manager/Head of Department should notify the appropriate individual as follows:
- Medical and Dental Staff : Medical Director
 - Nursing and Midwifery : Nursing and Patient Services Director
 - All other Staff Groups : Director of Human Resources
- 4.2 Communication is to be undertaken on a confidential and need to know basis only. Details of the concerns must be clearly understood and shared appropriately.
- 4.3 Should a healthcare professional leave their post prior to any disciplinary hearing or capability proceeding being concluded this procedure can still be followed. Under these circumstances all investigations, consideration of the evidence and judgements should still be completed as best they reasonably can to determine whether the concerns raised are valid.
- 4.4 A recommendation will then be made by the Medical Director, Nursing and Patient Services Director or Director of Human Resources as appropriate to the Chief Executive. Should the Chief Executive agree the Strategic Health Authority designated person will be contacted formally and asked to consider issuing an alert notice together with the name of the healthcare professional and details of the case.
- 4.5 The decision regarding whether or not to issue an alert notice is the responsibility of the Strategic Health Authority designated person.
- 4.6 When an alert notice is issued the case of the healthcare professional must be referred to the appropriate regulating body if this has not already occurred.
- 4.7 Should an alert notice be issued it will be the Trust's responsibility, as far as is reasonably practicable, to monitor the progress of any relevant proceedings undertaken by the Police, any regulatory body or National Clinical Assessment Service and to advise the Strategic Health Authority designated person as appropriate.
- 4.8 Should the Trust instigate the issuing of an alert notice it will be the Trust's responsibility to notify the individual to whom it relates that as a result of the internal investigation and subsequent findings this will be effected.

5. Process for Alert Notices Received within the Trust

- 5.1 The Chief Executive shall receive alert notices from the Strategic Health Authority designated person and forward letters to the Director of Human Resources.
- 5.2 The Director of Human Resources will circulate alert notices as appropriate to:
- Head of Human Resource Services
 - Head of Medical & Dental, Planning & Reward
 - Head of Staff Engagement
 - Nurse Bank Manager
- 5.3 A check of current staff in post records held on ESR will be carried out by the Jobshop and a database of current alert notices will be maintained. The database will be routinely referred to as part of the recruitment and selection process to ensure short listed applicants who are the subject of an alert notice are identified.
- 5.4 Should an individual be identified then the recruiting manager and appropriate Head of Human Resources must be notified. The relevant organisation for contact regarding the alert person will be contacted for further information by the relevant Head of Human Resources (see paragraph 5.2).
- 5.5 The appropriate Head of Human Resources and the recruiting manager will review the available information and take any appropriate action to ensure patient and public safety is maintained.
- 5.6 Legal advice may be taken should this be considered appropriate and consideration given to what safeguards may need to be put in place.
- 5.7 Upon receipt of notice of withdrawal of an alert notice all relevant parties will be notified and the Trust database amended.

6. Further Information and Advice

- 6.1 A copy of NHS Employers 'Safer recruitment – scheme for the issue of alert notices for healthcare professionals in England' is available www.nhsemployers.co.uk.
- 6.2 The application of this procedure does not impact upon the operation of the Trust's procedure 'Concerns Relating to the Performance, Professional Behaviour and Personal Conduct of Medical and Dental Staff' nor 'Capability Policy' (for non Medical & Dental employees). These procedures should continue to be referred to as appropriate.

7. Monitoring

- 7.1 Compliance with this policy will be monitored by the Director of Human Resources. The figures will be presented to the Heads of Human Resources Meeting on an annual basis who will identify appropriate action plans to address areas of concern and will continue to monitor the plan until its completion.
- 7.2 Monitoring will include reporting of information on the Alert Letters Database and Recruitment Information held within Human Resources for the purpose of:
- The number of Alert Notices issued by the Trust in the last 12 month rolling period.

- The number of individuals denied applying for posts within or entry into the Trust as a result of being on the Alert Letters Database.

8. Further Information and Guidance

For further information and guidance please contact the designated Human Resources Officer for the Directorate/Department and/or the HR Manager – Recruitment.

**THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST
IMPACT ASSESSMENT – SCREENING FORM A**

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	Alert Notice Procedure	Policy Author:	Miss Ceri Liddell – HR Officer Projects
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:	No	Policy applies to all employees of the Trust.. It is underpinned by Trust's overriding policy on Equal Opportunities
	• Race	No	As Above
	• Ethnic origins (including gypsies and travelers)	No	As Above
	• Nationality	No	As Above
	• Gender	No	As Above
	• Culture	No	As Above
	• Religion or belief	No	As Above
	• Sexual orientation including lesbian, gay and bisexual people	No	As Above
	• Age	No	As Above
	• Disability – learning difficulties, physical disability, sensory impairment and mental health problems.	No	As Above
2.	Is there any evidence that some groups are affected differently?	No	There was no evidence to support any group was affected differently
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	As Above
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

For advice on answering the above questions please contact Helen Lamont, Deputy Director Nursing & Patient Services, or, Christine Holland, Senior HR Manager. On completion this form must be forwarded electronically to Steven Stoker, Clinical Effectiveness Manager, (Ext. 24963) steven.stoker@nuth.nhs.uk together with the procedural document. If you have identified a potential discriminatory impact of this procedural document, please ensure that you arrange for a full consultation with relevant stakeholders to complete a Full Impact Assessment (Form B) and to develop an Action Plan to avoid/reduce this impact; both Form B and the Action Plan should also be sent electronically to Steven Stoker.

Name of Person responsible for completion of this form
and who else has been involved in the consultation process: Mrs Wendy Johnson HR Manager Projects Date . 6th January 2010
Name and Designations of those involved in the impact assessment screening: The Employment Policies and Procedures Consultative Group.

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)