HSE HR Circular 17/2013 affirms that no payment will be made for any temporary appointment that does not exceed three (3) months, which covers annual leave, sick leave, special leave or other leave, or to allow for a recruitment process, or the appointment from a panel, following a retirement or resignation. Temporary appointments in excess of three months will attract additional remuneration in line with this HR guidance document. This may be applied retrospectively in accordance with the circular.

The guidance document is in two parts; temporary appointments of less than 3 months, and temporary appointments of greater than 3 months. Patient safety is clearly a key priority and therefore it must be ensured that where staff leave the health services, local managers at all levels must be in a position to make decisions in a timely fashion, to deliver a safe service.

Managers must also consider and meet in full; the criteria outlined below and complete the appended application approval form when completing assessments as to whether or not there is a requirement to make a temporary appointment of a staff member from their substantive grade to a higher grade for a defined period of time:

a  **Current need based on circular /Needs Assessment:** There must be a clear need to fill the post/position left vacant due to short-term nature of the absence of the post-holder. In the case of posts vacated due to retirement/resignation/ reassignment:
   i. The post must continue to be a funded post and the budget holder has funding to maintain budgetary compliance arising from any additional costs associated with the temporary appointment.
   ii. There must be a management decision to fill at the grade and role performed by the previous post-holder and the need for the post continues into the future.
   iii. Need to fill based on risks associated with not filling must be based on consideration of Patient safety / front line post etc. if clinical managers’ decision to fill is overturned then the person making that decision must be identified.

b  **Redeployment of staff/Reorganisation of work.** Following the completion of a needs assessment for the post, redeployment of existing staff and/or reorganisation of existing work should be the first action, regardless of the likely duration of the vacancy. The following questions should be answered:
   i. Is there an existing post holder at the same level, or at a higher level, in the immediate functional area that can have their area of responsibility extended to embrace the vacated position without a need to seek a post holder at a lower grade to fill the vacancy on an interim basis measured against patient safety and HIQA regulations as well as skills set and the distance between facilities.
   ii. Is there an existing post holder at the same level or at a higher level, in the wider area that can have their area of responsibility extended to embrace the vacated position without a need to seek a post holder to fill the vacancy measured against patient safety and HIQA regulations as well as skills set? Consideration should also be given to the distance between facilities.
   iii. Can the tasks performed by the previous post holder be sub-divided and shared by other staff at their current grades and levels of responsibility? Measured against patient safety and HIQA regulations as well as skills set and the distance between facilities.
   iv. Is the post likely to be impacted by reorganisation or transformation agenda in the short to medium term?
A decision is then made as to whether or not a temporary appointment is required, either under Part 1 or Part 2 of this guidance document.

GUIDELINES FOR FILLING

Part 1 – Temporary Appointment of up to three months (for all staff categories)

If it is considered by management that it is necessary to fill a post left vacant on a short-term basis i.e. not likely to exceed three months the following process should apply to this temporary filling:

a. Fill based on most senior suitable, and with the required necessary qualifications and willing to take on the post. This would be reasonable for short-term absences not exceeding 12 weeks e.g. sick leave, carers leave (this list is not exhaustive).

b. A letter of appointment should issue from local management confirming the terms of the appointment i.e. requested to take on the role and responsibility of the higher grade without pay effective from date and to date. See appendix 3 for an example of a letter of appointment.

If, after one month, the vacancy still exists and local management have an expectation that it may extend for longer than three months, then approval must be sought in line with the process set out in part 2 of this guidance document. This approval process should commence not later than four weeks after the vacancy first arises.

Once the vacancy is approved for temporary appointment in excess of three months, the recruitment process should commence, as outlined below. If, at the end of the three month period, the vacancy still exists and the recruitment process has not yet been completed, the individual originally assigned the duties of the post can be paid, and payment made from the first day of the vacancy, pending the recruitment to the post through the competition process. Payment will cease, if in the event that another staff member is appointed to the post. In the event any post runs beyond 3 months, payment must be made to any person who fulfilled that post during the period, from day one.

Service/Line managers should consult their local HR as necessary prior to making any temporary appointment as above, but authority to make the appointment resides with the line manager as delegated by the relevant National Director. Retrospective payment will apply if decision made after the post is filled.

Part 2 – Temporary Appointment of more than three months duration

The time-frame for filling will be in excess of three months from time of the temporary appointment is to be made and in turn creating a liability for additional costs to the budget holder.

These appointments do not attract the provisions of 10/71 or any other preferential promotional arrangement. Appointments are made to the minimum point of the higher scale or to the nearest point so as not to financially disadvantage.

a. Process to seek approval/sanction. The line manager will complete the form; Request for approval for Temporary Appointment in excess of three months, and seek the approval of the ISA Manager/Group Hospital CEO for the temporary appointment. From there, formal sanction will be sought from the relevant
Divisional Assistant National Director, Head of Operations or equivalent, unless sub-delegated by the National Director. In the case of the staff category of management/admin, final sanction rests with the National Director of Human Resources and the Head of Operations shall forward any approved applications to the office of the National Director for final consideration. A copy of the approval form should be forwarded to the relevant RDPI Office for monitoring purposes as part of the Performance Assurance Process. THIS PROCESS WILL BE IDENTIFIED AS A PRIORITY

b. Consultant Posts. Where the post already has formal CAU approval, the filling on a temporary basis can be addressed in a similar manner through the relevant delegated process and in line with the requirements of HSE HR Circular 08/2010. If however the post falls vacant due to resignation or retirement, approval to fill, on a temporary basis, will require formal approval from the CAU, as detailed in paragraph (e) of HSE HR Circular 08/2010.

c. Recruitment and Appointment. Once appropriate divisional sanction is granted, the approval form, with the necessary recruitment order pack is forwarded to the relevant recruitment function at local or regional level for the commencement of the recruitment and appointment process. Such recruitment activity is conducted using the guidance of National Recruitment Services, Health Business Services. A step-by-step direction to local recruitment to which the recruitment process has been delegated to for their necessary compliance will be provided by NRS. See appendix 2 for the step-by-step direction when recruitment is being carried out, at local, ISA/Hospital Group or Regional level, under the remit of NRS.

d. Recruitment Codes of Practice. See appendix 2. NRS to provide necessary direction as appropriate when sub-delegating the recruitment/appointment process to local recruitment with all relevant compliance requirements identified.

e. Termination of the Temporary Appointment. It is the responsibility of the line manager to ensure the temporary appointment ceases when a permanent appointment is made or if a decision to rescind the basis for the temporary appointment is made, i.e. post holder returns to post, decision to suppress the post, or an alternative to filling the post on a permanent basis. It is envisaged that such temporary appointments should not exceed twelve (12) months, however if a decision has been made to fill on a permanent basis, the temporary appointment can remain, until that process is concluded and permanent appointment made.

f. When a temporary appointment extends beyond 12 months, pay arrangements will progress to the next point of the pay scale for the higher grade. However, such temporary appointments beyond 12 months should only be on an exceptional basis as they would run counter to the concept of temporary appointments. Incremental progression on the substantive scale remains in place to ensure no disadvantage when reverting to same.

g. HR Management Information System (MIS). The suggested approach is that the temporary change to the MIS is made to the position number of the successful appointee but is time limited to ensure it reverts to its previous configuration once the period of the temporary appointment is terminated. A monthly status report on such temporary appointments should be configured on the HR MIS and returned to the relevant line manager and to the Regional AND of HR and/or RDPI’s Office.

Miscellaneous Provisions. The following provisions will apply to both types of appointments as outlined above.

a. Clearances. As the appointee is an existing employee of the health services, no external or additional clearances are required prior to making a temporary appointment.

b. Contract Management/Letter of Appointment. A letter of appointment will be issued by local HR as requested by the relevant Service/Line Manager, to the
successful appointee and a copy placed on the relevant personnel file and on the recruitment file for the Temporary Appointment. The letter of appointment will include among others, the start date and termination date and shall be signed by the Service/Line Manager making the appointment and by the Temporary Appointee.

This guidance document is effective from the date of issue and will be reviewed within three months prior to final sign-off by the National Director of Human Resources.
# Appendix 1

**Health Service Executive – Request for approval for Temporary Appointment in excess of three months**

A form has to be completed for each individual request. Please complete form in Block Capitals/Tick or complete appropriate boxes. *Delete as appropriate.

<table>
<thead>
<tr>
<th>Division</th>
<th>Acute Services //Primary Care //Social Care // Mental Health // Health &amp; Wellbeing //Corporate // Health Business Services *</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
<td></td>
</tr>
<tr>
<td>Title of Post</td>
<td></td>
</tr>
</tbody>
</table>
| Reason for request for temporary appointment | ☐ Sick Leave ☐ Annual Leave ☐ Locum ☐ Pending permanent appointment
☐ Other – please specify |

**Details of proposed temporary appointment and of post/vacancy being covered**

<table>
<thead>
<tr>
<th>Grade Code</th>
<th>Position Number</th>
<th>(substantive post holder)**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade Code</td>
<td>Position Number</td>
<td>(post/vacancy for temporary appointment)</td>
</tr>
<tr>
<td>Date Vacant</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name of person last/currently in post: _____________________ Date Vacated: ______________
Location: ____________ Cost Centre: ____________ WTE Value: ______

**Proposed Start Date__________**

**Projected End date________**


Is vacancy intended to be filled on a permanent basis: **Yes / No**. If yes, give projected timeline to fill: ____.

**To be completed once known**

Review of Redeployment/Reorganisation options – confirm assessments after detailed examination and provide business case as appropriate

Another post holder in immediate area **Yes / No** in wider area **Yes / No**

Reorganisation option **Yes / No** Give reasons why not:

Impact on front line clinical care of not filling this post _

Risks identified with not filling this Post _

Post will not be impacted by reorganisation/ transformation within next 12 months **Yes / No**

Any other reasons why temporary appointment is required:

I request approval for a temporary appointment to be made as outlined above. I confirm a detailed examination of the post/vacancy was carried out to consider alternative and/or more flexible cross-cover arrangements and that this was not possible. It is not possible to fill the post/vacancy by redeployment/ reassignment/ reorganisation of work.

Signed (Print Name below): _______________________________________________________ Date: _____________

Requesting Manager/ISA Manager/Hospital Manager ( ) /CEO Voluntary Hospital/Voluntary Agency

Counter-signed by HR/Finance: _____________________ ______________________ Date: _____________

(Human Resources) (Finance)

I recommend/approve* the application.

Signed: ________________________________________ Title: ______________________________ Date: _____________

(Divisional Head of Operations or Equivalent) or sub-delegation by National Director

In respect of the Staff Category of Management/Admin and Consultant temporary appointments approval must be sought from the National Director of Human Resources and from the Consultant Appointments Unit.

**The form may need to be revisited subsequent to the approval decision, once the recruitment process to fill the Temporary Appointment is completed and the successful candidate is identified.**
Appendix 2

Codes of Practice

The recruitment and selection approaches by which an employee is selected to fill a temporary post of a duration in excess of three months are governed by the HSE’s Recruitment Licences and associated Codes of Practice issued by the Commission for Public Service Appointments (CPSA) under the Public Service Management (Recruitment and Appointment) Act 2004,

- Code of Practice Appointments to Positions in the Civil Service and Certain Public Bodies (01/07)
- Code of Practice Emergency Short-Term Appointments to Positions in the Health Service Executive and,
- Code of Practice Atypical Appointments in the Civil Service and Certain Public Bodies

These Codes of Practice are based on the core principles of probity, equity and fairness, appointments based on merit and best practice which should be applied to all recruitment processes. The Codes detail the action that must be taken by the HSE in respect of notifying and sourcing candidates, advertising, the selection processes, appointments and feedback to candidates in addition to the requirement to adequately document the basis of decisions made and the basis on which successful candidates are appointed.

The Codes of Practice also detail the procedure for processing requests for review or allegations of a breach of the principles of the Codes of Practice.

Step-by-step process for Local Recruitment

For guidance and advice for recruitment and appointments conducted outside of the National Recruitment Services, please see links below to the National Recruitment Service which contain the following supporting documentation:

1. Sample Application Form for confined recruitment campaigns:
2. Legislation governing Public Service Recruitment and related responsibilities:
3. Sample Interview Marking Sheet:
4. Guidelines for Confined Recruitment- Selection and Appointments:
5. Guidelines for conducting interviews:

http://hse.ie/eng/staff/Jobs/temp/

http://hsenet.ie/HumanResources/hbs/Recruitment/temp/ (HSE intranet only accessible to HSE employees)
Appendix 3

An Example of a Letter of Appointment in respect of a Temporary Appointment /Temporary Assignment to a Higher Grade and where additional remuneration is to be made.

Name :

Address :

Dear

I wish to formally advise you of your assignment to the position of CNM2 in St Josephs Ward, XXX Hospital.

You will take up duty on the ______ and you should make contact with ______ as soon as possible in this regard.

This assignment is made on a Fixed Term/Specified Purpose (delete as appropriate) basis arising from the provisions of Circular 17/2013 and will cease on the _______ , or when a permanent appointment is made, whichever is the sooner.

The appropriate rate of pay to be applied will be _______ per annum, this being the 1st point of the scale, ( or the nearest point, so as not to disadvantage financially)

The standard terms and conditions of this post will apply for the duration of your assignment. Upon completion of this assignment, you will revert to your substantive grade and to your original terms and conditions.

The Terms of the Unfair Dismissals Act or the Fixed Term Work Act 2004, as it relates to successive contracts, do not apply to this assignment, as you continue to hold a permanent contract/contract of indefinite duration (delete as required) at your substantive grade.

The HSE reserve the right, to terminate this assignment. In the event the HSE exercise this right, you will be given the appropriate notice, commensurate with your time in the position.

Signed.

*******************************************************************************

The above letter can be amended to provide a letter of appointment where no additional payment arises; e.g. less than 3 months duration, by the insertion of this paragraph in place of paragraph 4 onwards with the exception of the third last paragraph:

This assignment, being of a period of less than 3 months, will not attract additional pay.