



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

POLICY AND PROCEDURE

REDEPLOYMENT OF STAFF DURING COVID-19 INFECTION

8 APRIL 2020

1. Scope

- 1.1 This Policy applies to all HSE and Section 38 organisation employees and to all grades of staff during COVID-19. It has immediate effect and replaces all previous instructions in operation in the HSE and Section 38 organisation.
- 1.2 As a result of the World Health Organisation declaring a world pandemic and considering European Centre for Disease Control and National Public Health Emergency Team advice, the subsequent announcement today by the Government on school closures and restricted social interaction highlights the seriousness of emergency with regard to COVID 19. Both the HSE and Health Sector Unions acknowledge the scale and unprecedented nature of the current situation and the need to respond accordingly. The HSE policy on redeployment which is agreed with the Unions reflects the collaborative approach being adopted in an effort to protect the best interests and health of the citizens of the State. Normal agreed arrangements as per the Public Service Stability Agreement will apply when this crisis passes.

2. Purpose of this Document

- 2.1 Reorganisation of the health service and effective redeployment of health service employees is one of the core elements of the HSE's response to COVID-19 infection. As COVID-19 progresses all health services will come under particular strain. As the demand for health services increases, the number of HSE employees available to provide services may decrease due to absenteeism.
- 2.2 Throughout COVID-19 infection employees will be treated in a manner consistent with established human resource principles and collective agreements with respect of the core values of the health service. Nevertheless, particular co-operation from all employees will be required during this outbreak. In such circumstances the following framework in respect of identified redeployment needs will apply.

3. Redeployment of Staff

- 3.1 When forward planning for COVID-19 infection, each Hospital Group (HG), Community Healthcare Organisation (CHO) and National Directors of corporate divisions should identify and document all essential national, regional and local level activities that need to continue during the infection in line with local continuity business plans. The identification of non essential services should also be documented and all resources available for redeployment identified. This should be done as part of best practice emergency planning and reviewed if and when a national public health emergency is declared. Business continuity plans for each unit should be made available to the HG Chief Executive Officer (HG-CEO), the CHO Chief Officer (CHO-CO) and relevant National Director of corporate divisions in advance of any emergency.

- 3.2 When considering the redeployment of employees, local business continuity plans should direct the HG-CEO, the CHO-CO and National Directors and their local crisis management teams in deciding on the redeployment of staff resources.
- 3.3 In order to deal with the effects of COVID-19 infection there may be a requirement for some or all identified non-essential services to be cancelled or postponed. Employees in positions that are curtailed or temporarily suspended (non-essential services) will be deemed available to be redeployed to assist in other essential service areas that are experiencing staffing shortages.
- 3.4 Healthcare workers who are pregnant, who are otherwise immunocompromised or who have other conditions that place them at high risk of severe disease but who adhere to recommended infection prevention and control precautions are unlikely to be at greater risk of acquiring COVID-19 infection compared with other healthcare workers and do not need to be excluded from providing care to such patients. Such staff may be deployed in accordance with current occupational health advice on Pregnant healthcare workers and other healthcare workers and the risks from COVID-19 available on hpsc.ie.

4. How redeployment will be managed

- 4.1 In line with local business continuity plans, and in conjunction with service managers, local crisis management teams will lead the management and redeployment of employees. This will include consideration of appropriate skill sets and geographical redeployment limits.
- 4.2 If deemed necessary, decisions may be made to engage the services of members of staff retired during the past two years. HR Departments should be consulted in these circumstances.
- 4.3 Employees with nursing, medical, health and social care professional or other skills required during COVID-19 infection, who are employed by the HSE but no longer engaged in frontline health duties should be identified and redeployed to assist where their skills are most required.

5. Payroll

- 5.1 As a minimum staff will receive pay due to them in accordance with their existing roster at the time of redeployment up to the end of the rostered period. Details of the existing roster will need to be provided to the location to which the employee is redeployed. Any additional payments due must be notified to the substantive payroll department for return in the usual manner.
- 5.2 During COVID-19 infection redeployed employees will continue to be paid by their existing payroll department.

- 5.3 All employees will continue to be coded on their usual department timesheets regardless of where they are working or what they are doing.
- 5.4 Appropriate line manager approval must be given on all overtime requests based on priority of need.

6. Alterations to work location / grade

- 6.1 Notice requirements normally associated with alterations to the usual practice of scheduling shift changes, changes to hours of work and/or changes to work locations will be suspended for the duration of COVID-19 infection as redeployment needs will require assessment on a daily basis.
- 6.2 If necessary, employees may be required to work different hours or in a different location. In this regard redeployment will be based on need and urgency of need. Line managers will have discretion in this regard consistent with local business continuity plans.

7. Work / Redeployment refusal

- 7.1 Refusals to work or to be redeployed will be handled in accordance with the Grievance Procedure for the health service, which outlines the requirement of the employee to 'work under protest' in the event of a grievance arising relating to an instruction issued by a line manager, based on a service imperative. Line managers should consult their local HR Department for support/advice in this regard.
- 7.2 If a national public health emergency is declared an examination of staffing levels will take place. If necessary, the cancellation of annual and discretionary leave will be considered by the National Crisis Management Team.

8. Monitoring and review

- 8.1 The situation regarding COVID-19 will be changing rapidly so managers and staff should continue to check the HSE coronavirus web pages for information.
- 8.2 This policy and procedure may be subject to regular revision in light of the emerging situation concerning COVID-19.
- 8.3 In accordance with the current Government advice, a review of the policy and procedure will take place on 29 March 2020.