POLICY AND PROCEDURE

REDEPLOYMENT OF STAFF DURING COVID-19 INFECTION

REVISED NOVEMBER 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. This Policy has been revised in line with “The Resilience and Recovery 2020-2021: Plan for Living with COVID-19” and to reflect the HSE’s objective of maintaining the delivery of other essential health care services to the maximum extent possible in tandem with effectively managing and suppressing COVID-19.

1.2 Both the HSE and Health Sector Unions acknowledge the scale, unprecedented and unpredicatable nature of the pandemic and the need to respond to national or local surges of COVID-19 and changes in the levels under the Government’s Framework for Restrictive Measures as set out in Resilience and Recovery 2020-2021: Plan for Living with COVID-19. The HSE policy on redeployment, which is agreed with the Unions, reflects the collaborative approach being adopted in the ongoing effort to protect the best interests and health of patients and the public during COVID-19.

1.3 Normal agreed arrangements as per the Public Service Stability Agreement or any successor agreement continue to apply in respect of redeployments which are not related to COVID-19.

1.4 Deployment of HSE/Section 38 staff to private nursing homes is covered by a separate agreement, please refer to HSE CERS Memo 19/2020.

2. **Purpose of this Document**

2.1 Reorganisation of the health service and effective redeployment of health service employees, where necessary, is one of the core elements of the HSE’s response to COVID-19 infection.

2.2 In relation to any COVID-19 relocation, 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. The co-operation provided by employees is valued and redeployment under this policy is confined to COVID-19 related demands (HSE CERS Memo 46/2020, Appendix 1).

3. **Redeployment of Staff**

3.1 When forecast 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. 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. 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. Any redeployment
proposals emanating from those plans should be shared with the relevant Trade Unions in order to ensure reasonable engagement and consultation can take place in compliance with collective and national agreements.

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, and in response to changes in levels 1-5, there may be a requirement for some or all identified non-essential services to be cancelled or postponed. Employees whose positions are in services that are curtailed or temporarily suspended (non-essential services) will be deemed available to be redeployed to assist in other essential COVID-19 service areas that are experiencing staffing shortages. Management in the relevant services will notify the employees who are affected and their local union representatives and engage in prior consultation insofar as is reasonably practicable in light of the urgency of the situation. The reasons for the redeployment and the expected timeframe will be outlined to the employees.

3.4 The health service ‘Donating’ manager should ensure that the donating site or service will not be left short staffed.

3.6 The most recent occupational health advice regarding workers who are pregnant, who are otherwise immunocompromised or who have conditions that place them at risk must be considered before redeploying staff in such groups. The latest Occupational Health COVID-19 guidance documents are available at this link: https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/

4. How redeployment will be managed

4.1 In line with local business continuity plans, and in conjunction with service managers, Senior Management at local level will lead the management and redeployment of employees. This will include consideration of appropriate skill sets and geographical redeployment.

4.2 Any staff member subject to redeployment will meet with his/her Line Manager in advance and be advised of:

- The reasons for the redeployment
- The expected timeframe of the redeployment
- Protection of existing terms and conditions of employment during and on return from redeployment
- A commitment to review the need for ongoing redeployment or return to their base location with their existing line management if required
4.3 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.

4.4 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 contacted and redeployed to assist where their skills are most required.

4.4 As set out above and reiterated in HSE CERS Memo 46/2020, redeployment under this policy is strictly limited to Covid-19 related service needs. The need to redeploy staff is most obvious during the Level 5 phase arising from high Covid-19 related demands on the health service (e.g. high numbers requiring Testing and Tracing, high numbers of hospital admissions, high numbers of admissions to ICUs, areas of outbreaks resulting in significant numbers of staff having to restrict their movements or self-isolate due to COVID 19). It is envisaged that the incidence of local/regional outbreaks, curtailment of services and staff shortages will reduce when transitioning to lower levels of the Government Framework\(^1\) thereby reducing the need to redeploy staff for COVID-19 service needs. However, the HSE needs to be able to respond to adjustments between higher and lower levels and regional/local variations. Whilst the facility to redeploy staff needs to be retained at all levels during COVID-19 to respond swiftly to local/regional outbreaks and associated staff shortages where these arise, it will only be invoked in response to COVID-19 service exigencies and for the period of time required to address the COVID-related service imperative and the employees’ scope of practice would allow them to practise in the area to which they are redeployed.

5. Payroll

5.1 Redeployed staff shall receive payment as set out in HSE CERS Memo 13/2020 attached as per Appendix 2.

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.

5.5 Travel and subsistence for redeployed staff is set out in HSE CERS Memo 22/2020 attached as Appendix 3

\(^1\) Or any replacement of the current Framework decided upon by Government
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 In a declared national public health emergency an examination of staffing levels will continue to take place. If necessary, the cancellation of annual and discretionary leave will be considered by the National Crisis Management Team and engagement and consultation will take place with the unions.

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 as required or requested by either party (Management or Trade Union) or no later than 28th of February 2021.
To: Chief Executive Officer  
Each National Director  
Director, National Ambulance Service  
Each Assistant National Director of HR  
Each Hospital Group CEO  
Each Hospital Group Director of HR  
Each Chief Officer CHO  
Each Head of HR CHO  
Head of HR, PCRS  
Each CEO Section 38 Agencies  
Each HR Manager Section 38 Agencies  
Each Employee Relations Manager  
Each Group Director of Nursing & Midwifery

Re: Redeployment Policy  
Ref: CERS 46/2020  
Date: 21st August 2020

Dear Colleagues

I refer to the Redeployment Policy (copy attached) issued on 6 March 2020 and subsequently revised on 20 March and 21 April 2020. This Policy was agreed with the Unions in respect of specific deployments which were required at short notice as a result of Covid-19, to ensure a safe service provision across the HSE and to respond to emerging requirements. I wish to advise that the terms of this Policy are specific to the circumstances and the provisions contained therein.

Redeployments for any other purpose are subject to the normal information and consultation provisions as outlined in the Public Service Agreement.

Queries

Queries from individual employees or managers in relation to this memorandum should be referred to local HR/Employee Relations Departments. Please note that the National HR Helpdesk is also available to take queries on 1850 444 925 or ask.hr@hse.ie.

Queries from HR/Employee Relations Departments in relation to this memorandum may be referred to Corporate Employee Relations, HR Directorate, 63-64 Adelaide Road, Dublin 2.

Tel: 01 6626966, Email: info.t@hse.ie

Yours Sincerely

John Delamere, Head of CERS
To:  Chief Executive Officer  
    Each National Director  
    Each Assistant National Director of HR  
    Each Hospital Group CEO  
    Each Hospital Group Director of HR  
    Each Chief Officer CHO  
    Each Head of HR CHO  
    Each CEO Section 38 Agencies  
    Each HR Manager Section 38 Agencies  
    Each Employee Relations Manager  
    Each Group Director of Nursing & Midwifery  

Re:  Redeployment Policy – section 5.1  
Ref:  CERS 13/2020  
Date:  27th March 2020  

Dear Colleagues,  

Further to the Redeployment Policy issued under cover of HR Circular 15/2020, and with specific reference to 5.1 of that policy.

I wish to confirm that any staff member who has traditionally additional regular and rostered earnings, this should be considered, as part of that provision. This can be calculated as an average, over the preceding 6 week period, prior to the 20th March, provided that is reflective of regular earnings, this can be adjusted to take in to account a period of absence, where the figure may not be a true reflection.

It must be noted, that the HSE will not consider any loss of earnings claims, arising from increased earnings, during the current period, when staff members revert to their original location and roster. The staff side, have agreed, not to support any such claims, should they be made.

Queries  
Queries from individual employees or managers regarding these arrangements should be referred to local HR Departments/Employee Relations Departments.

HR and Employee Relations Managers may contact John Delamere, Corporate Employee Relations Services for further advice, 01-662 6966 or email susan.keegan@hse.ie

Yours sincerely  

John Delamere  
Corporate Employee Relations
To: Chief Executive Officer
   Each National Director
   Director, National Ambulance Service
   Each Assistant National Director of HR
   Each Hospital Group CEO
   Each Hospital Group Director of HR
   Each Chief Officer CHO
   Each Head of HR CHO
   Head of HR, PCRS
   Each CEO Section 38 Agencies
   Each HR Manager Section 38 Agencies
   Each Employee Relations Manager
   Each Group Director of Nursing & Midwifery

Re: Travel & Subsistence Clarification: Ref: CERS Memo 017/2020 and 019/2020
Ref: CERS 22/2020
Date: 24th April 2020
Dear Colleagues,
Further to queries on travel and subsistence to be paid during the current COVID 19 crisis, please note previous CERS Memos 17/2020 and 19/2020 on this matter. In particular:

- Travel and Subsistence will continue to be paid in accordance with the NFR05 and relevant Revenue Commissioners guidance.
- Travel & Subsistence will be paid with reference to existing base; that is, normal place of work as was prior the current COVID 19 crisis.
- Where HSE employees are required to travel to somewhere that is not their normal place of work (such as in the case of redeployment), they may claim mileage in line with normal travel and subsistence rules and guidance.

Queries from individual employees or managers regarding this matter should be referred to their local HR / Employee Relations Department.

HR / Employee Relations Managers may contact Corporate Employee Relations Services for further advice, 01-6626966, or info.t@hse.ie

Yours sincerely

John Delamere
Corporate Employee Relations