

Public Health England People Transition Policy Module 2

Factsheets

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Policy	Clinical	Estates
HR / Workforce	Commissioner Development	IM & T
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Introduction



Creating Public Health England

At the end of July 2012, we confirmed details of the Public Health England's structure¹. Published as a series of factsheets, the document set out how Public Health England will be organised to achieve its ambitions of protecting and improving the nation's health, addressing inequalities and improving the health of the poorest fastest.

It set out the structure for Public Health England on its establishment as an executive agency of the Department of Health on 1 April 2013, and has been used as the basis for transition.

Module 1 of the Public Health England People Transition Policy², which was published at the same time, set out the agreed process for transferring staff from existing sender organisations and functions to the Public Health England.

It described the process for appointment of staff to Public Health England – through a process of “lift and shift”; job matching; redeployment and – where required – open competition, in line with nationally agreed guidance.

The associated frequently asked questions³, which were published in August 2012, included a number of

questions and answers on this phase of the HR process.

Public Health England's ability to achieve its ambition will depend on its staff. The People Transition Policy will facilitate a secure transition by minimising disruption and ensuring continuity of the crucial public health services that Public Health England will deliver and maintaining and developing relationships with key partners across the health and care system.

The implementation of the people transition is now under way. The work carried out to date to look at functions which “lift and shift” and to identify job matches has confirmed that most staff working in sender organisations will transfer to Public Health England in their current roles without the need for any further HR process.

We are grateful to all those in sender organisations for the time and effort they have contributed to date in the people transition process.

We committed in July to publishing a second module of the People Transition Policy in which we would set out terms and conditions for transferring staff, together with details of Public Health England's own terms and conditions for its new recruits and the longer term.



People Transition Policy Module 2

Following the publication of Module 1, and in response to key issues raised by managers, staff and trade unions, Module 2 sets out:

- how we have reached the stage we are at now – with an emphasis on the successful partnership working to date and the underlying principles governing the transfer
- terms and conditions for staff on transfer
- terms and conditions for the future Public Health England staff
- what it means to be a Civil Servant (as all staff who work in Public Health England will be) governed by the Civil Service Management Code and, for staff in Public Health England, the Public Health England Code of Conduct
- an update on the legal basis for transfer for those not covered by Transfer Schemes under the Health and Social Care Act 2012 or Transfer Orders under the NHS Act 2006.

However, this is not, and nor should it be, the final word on the HR processes governing the establishment of an organisation as complex as Public Health England. We will continue to keep everyone involved in the process up to date on further HR developments, including through Duncan Selbie's Friday Message.

We have also recently established a regular Public Health England Transition Bulletin for HR Teams, which is being issued to HR staff across our sender

organisations but can be made readily available to any staff interested in receiving it.

Partnership working

In December 2011 we established a joint Public Health England Partnership Working Group comprising representatives of Department of Health and sender employers, and members of trade unions representing staff affected by change. The content of this module is based on the discussions with the Partnership Working Group.

As part of the transition nationally, the principles from the HR Transition Framework⁴ have been adopted. Specifically – and in agreement with the Partnership Working Group – the key principles governing the establishment of Public Health England continue to be:

- work in constructive partnership with current employers of staff moving to Public Health England, and with trade unions nationally and locally throughout the process
- maximise transfers wherever possible, and suitable alternative employment opportunities for staff not covered by “lift and shift” or “slot-in” arrangements
- keep people informed
- manage effective and transparent processes that are fair and equitable
- keep bureaucracy to a minimum but ensure HR best practice is followed, ensuring compliance with equality and employment legislation.





Partnership working with the trade unions will continue to form a cornerstone of our employee relations. We will continue to work in partnership through the Public Health England Partnership Working Group in anticipation of any new recognition agreement for Public Health England.

Additional materials

The People Transition Policy will continue to be supported by a series of frequently asked questions.

These will be updated on an ongoing basis, and will be made available on the Department of Health website⁵.

If you have any questions on any aspect of the topics covered in either of the People Transition Policy modules that you would like to raise, please email phe_hr@dh.gsi.gov.uk.

¹ <http://healthandcare.dh.gov.uk/phe-structure>

² <http://healthandcare.dh.gov.uk/phe-ptp>

³ <http://healthandcare.dh.gov.uk/phe-faqs-module1>

⁴ <http://www.hrtransition.co.uk/media/1482/hr-transition-framework.pdf>

⁵ <http://healthandcare.dh.gov.uk>



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Terms and conditions for staff transferring into Public Health England



Our approach

On day one of Public Health England's establishment on 1 April 2013, the majority of the Public Health England workforce will be staff who have transferred from over 70 different employers across the country.

Reflecting this diversity, staff who will move to Public Health England are currently employed on a wide range of contracts, each with their own variations in terms and conditions.

In line with the policy being followed across the people transition programme as a whole, and as set out in the national guidance, Public Health England will provide specific protections for the terms and conditions of staff who transfer to it through the provisions of transfer schemes or orders.

Where applicable, transfers will be effected in accordance with the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE).

In circumstances where TUPE does not apply in strict legal terms, the Cabinet Office Statement of Practice, January

2000 (Revised November 2007) ("COSOP") will be followed.

In COSOP the employees involved in such transfers will be treated no less favourably than if TUPE applied in relation to protecting statutory continuity of employment and transferring on current terms and conditions including any contractual redundancy or severance entitlements.

In addition, principles contained within the Fair Deal Annex of COSOP relating to occupational pensions will be adhered to.

Discussions on the national position on TUPE/COSOP and post transfer protections are currently ongoing.

Obligations relating to provisions about benefits for old age, invalidity or survivors in employees' occupational pension schemes do not transfer under TUPE.

However, the provisions of the Pensions Act 2004 sections 257 and 258 do apply.

In summary, if the previous employer provided a pension scheme then the new employer has to provide some form of pension arrangement for its new employees who were members of the old employer's scheme.





It will not have to be the same as the arrangement provided by the previous employer but will have to be of a certain minimum standard specified under the Pensions Act.

What this means for staff

In practice, this means that staff transferring to Public Health England who:

- are in “lift and shift” functions, or
- secure a post in Public Health England through being matched to a job, either through a straightforward “slot-in” or through a competitive slotting exercise, or
- are redeployed into suitable posts

will have their contractual pay and continuity of service protected at transition. We have also sought to maintain continuity for staff in terms of their membership of their pension scheme at transition, wherever practical, in order to minimise disruption at the point of change. Staff will move onto Public Health England’s policies and procedures for all non-contractual matters.

Following conclusions of discussions with health, education and the Civil Service trade unions, the Treasury has announced details for public sector pension schemes⁶ that are planned to be introduced in April 2015.

Current Civil Service pension schemes will be reformed with a move to a new career average scheme.

Public Health England intends, at that stage, to align the pension membership arrangements for the majority of its staff by undertaking a transfer of its workforce

to the new Civil Service pension scheme being introduced.

More detail on what this means for different groups of staff moving into Public Health England is outlined below for:

- staff who are currently on Civil Service terms and conditions
- staff who are currently on NHS terms and conditions
- staff who are on neither NHS nor Civil Service terms and conditions.

Where protection exists for groups of staff for relevant pension schemes, those protections will continue to be respected.

Staff who are currently on Civil Service terms and conditions

If you are currently on Civil Service terms and conditions and you move to Public Health England you will see no change to your terms and conditions at that point. You will remain in your current Civil Service pension scheme (Classic, Classic Plus, Premium or Nuvos) and your salary will be unchanged (as determined by current grade). For non-contractual matters you will move onto Public Health England’s policies.

If you are subsequently promoted or make a voluntary move within Public Health England then you will normally be expected to move onto Public Health England terms and conditions.

We will seek to ensure that any Civil Servants are not disadvantaged against those on NHS terms and conditions if promoted in Public Health England. We would need to address any unintended





disincentive to promotion.

The Department of Health, Public Health England and trade unions will discuss these issues and further information will be shared once discussions are concluded. Details of the new Public Health England terms and conditions are shown in a separate factsheet.

When the Civil Service Pension arrangements are reformed in 2015 your pension arrangements will be affected in the same way as applies for other Civil Servants in Department of Health. Details of the proposals can be found under Civil Service Reform⁷.

Staff who are currently on NHS terms and conditions

If you are currently employed on NHS terms and conditions you will see no change to these at the point of transfer. Your salary will be unchanged including any rights you have to contractual pay. For non-contractual matters you will move onto Public Health England's policies.

You will be able to remain in the current NHS pension scheme for up to two years following transfer.

If you are subsequently promoted or make a voluntary move within Public Health England then you would normally be expected to move onto Public Health England terms and conditions including the Civil Service Pension scheme. Details on the new Public Health England terms and conditions are shown in a separate factsheet.

However, as a transitional measure, you will be able to choose to remain in the NHS Pension scheme until 2015 if you wish. Information will be made available to staff in this position to support them to make an informed choice.

If you have not already moved on to Public Health England terms and conditions as a result of a transfer or voluntary move, you will normally move into the Civil Service pension scheme at April 2015 in line with reforms.

At that date there are planned changes both to the Civil Service and NHS pension schemes, and members of both schemes will move on to reformed arrangements.

Public Health England will provide further information to staff in good time ahead of the changes about how the transfer will take place.

There are some exceptions to this for staff in a "ring-fence" group (see the separate factsheet on terms and conditions for further explanation) who will be in Public Health England roles that attract terms and conditions analogous to those applying in the NHS, including pension arrangements.

Staff who are on neither Civil Service nor NHS terms and conditions

If you are on neither NHS nor Civil Service terms and conditions you will see no change to your pay and general terms and conditions at the point of transfer. For non-contractual matters you will move onto Public Health England's policies. If you are subsequently promoted or





make a voluntary move within Public Health England then you will normally be expected to move on to Public Health England terms and conditions.

As an executive agency, Public Health England has been given permission by the Cabinet Office to operate both the Civil Service and the NHS pensions schemes. If you are not currently in either of these schemes, you will have the option to join a broadly comparable Civil Service pension scheme operated by Public Health England under Fair Deal arrangements. There are a range of different schemes and staff in those schemes will be contacted individually concerning their pensions options.

A simple flowchart to help understand the different implications of transfer from different routes into Public Health England is shown in the separate "Transfer chart" factsheet.

Future integration of terms and conditions

Public Health England will begin with the majority of staff transferring on NHS terms and conditions, but over time, the proportion of staff on Public Health England terms will grow.

Public Health England will look at options to pursue integration of terms and conditions over time. This process will involve discussion through partnership arrangements in the usual way as stated above.

Changes to location

As part of the establishment of Public Health England, the principle is that, where possible, there should be minimal disruption from day one.

Public Health England's Shadow Executive Group has confirmed that no one will be relocated from their existing accommodation before 1 April 2013, unless they are being asked to move by their current "host" due to any disposal of accommodation unrelated to Public Health England's establishment or other circumstances.

A Public Health England estates plan is being developed with input from national Directors and Regional, Centre, Screening and Evidence and Intelligence Directors, the aim of which is the co-location of Public Health England functions in single locations, where appropriate.

This process will be undertaken in a controlled way, most likely over the next three to five years.

Where property is currently provided by a strategic health authority or primary care trust and is being disposed of because it is surplus to their future requirements, the individuals affected will be consulted concerning any move to alternative accommodation.

Any changes to location that are made either prior to or at the point of transfer will normally be made under the employee's current terms and conditions, and if the paragraph above applies, would





mean that any relocation or excess fares policies that might apply would be the current employer's.

Working patterns

Public Health England will continue to operate flexible working policies in line with those adopted across the Civil Service. In terms of on-call arrangements, we do not expect that any significant changes to working patterns will be required for the great majority of staff transferring to Public Health England,

bearing in mind most will move in "lift and shift" functions.

However, if a need for a change to working patterns is identified prior to transfer then it will be discussed with the staff affected and administered under the sender employers' arrangements taking account of necessary consultation as required.

⁶ <http://www.civilservice.gov.uk/pensions/reform>

⁷ <http://www.civilservice.gov.uk/reform>



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Terms and conditions for Public Health England staff



Our approach

As an executive agency, Public Health England will be part of the Department of Health and all staff will be Civil Servants who are governed by the Civil Service Management Code.

However, as a delivery organisation with a specific operational focus, Public Health England will have a diverse and specialist workforce. This means that it needs terms and conditions that support its business, recognising that people will join Public Health England through a wide range of different routes in future, and will have differing career paths.

We have therefore developed a tailored terms and conditions package for Public Health England staff which has been discussed in the Public Health England Partnership Working Group. The key features of this are:

- “core” Public Health England terms and conditions will be based on Civil Service terms for pay and pensions. Most staff joining Public Health England in new roles in April 2013 and in future will be on these terms
- a number of “ring-fenced” posts in Public Health England, which meet specific criteria, mean they are considered to be “NHS-facing”. The terms and

conditions for these posts will be analogous to NHS terms and conditions. Staff recruited to those posts will be on terms and conditions which are equivalent to those applying in the NHS and have membership of the NHS pension scheme

- a number of the “non-pay” terms and conditions, such as working hours; annual leave and sickness pay will be initially in line with current Agenda for Change terms to align terms, given most of the workforce will transfer on NHS terms. However, the Civil Service Reform Plan⁸ and *Proposals on changes to the Agenda for Change agreement*⁹ (published in November 2012) set out plans to review some Civil Service and Agenda for Change terms and conditions respectively. These reviews are not complete and firm proposals for change have not yet been agreed. This People Transition Policy sets out the proposed Public Health England terms and conditions and would be subject to change.

These terms and conditions will be offered when appointments are made to Public Health England posts through open competition, or in future when a Public Health England employee makes a voluntary move to another post, eg promotion or request to transfer. However, as explained above, staff promoted or moving voluntarily before





April 2015 will have the option to retain membership of the NHS pension scheme until April 2015 as a transitional measure.

These terms and conditions will not normally apply to staff transferring in under COSOP arrangements. However, should any staff transferring in wish to transfer to Public Health England terms we will develop arrangements to facilitate this post transfer.

Core terms and conditions: Pay and pensions

Pay will be in line with Civil Service pay grades and terms and conditions.

Public Health England's pay and grading structure will be based on the current Department of Health pay grade ranges, shown in the table overleaf.

In addition, for business reasons, we intend to implement an Administrative Assistant (AA) grade. We will develop an appropriate pay structure for AA in discussion with the Partnership Working Group, considering usage across other government departments as an initial benchmark.

Inner London rates will apply to those staff whose permanent base is an office location in London (within the boundary of the M25). Outer London rates will apply within a further 40 mile radius outside of the M25. Offices outside the 40 mile radius of the M25 will have the national pay rates.

The target date for salary reviews to be implemented is 1 August each year.

Senior Civil Service

The current Senior Civil Service (SCS) pay ranges will be those used across the Civil Service and are reviewed on 1 April each year.

Salary review is subject to Treasury pay limits and funds being available each year and the outcome of annual negotiations. Salary reviews also subject to a performance related pay (PRP) scheme.

Performance-related pay

Under Civil Service pay policy, annual pay awards are made through a performance-related pay scheme run by departments. As an executive agency of the Department of Health, Public Health England will need to develop an appropriate scheme for its staff.

We will work with the Public Health England Partnership Working Group and with sending organisations and functions to ensure that the scheme we develop is fit for purpose and practical to operate. We will outline details of the scheme in the New Year so that it can be implemented in Public Health England's first year of operation.

Pensions

Staff on core Public Health England terms and conditions will normally join the Nuvos pension scheme, which is the standard pension scheme for new joiners to the Civil Service.





National pay range: August 2012 (New staff)				
Grade	Minimum	R&D ceiling	Upper rate	Maximum
AA	tbc			
AO	£17,459	£18,507	£20,567	£20,567
EO	£21,438	£22,724	£25,436	£26,775
HEO	£26,492	£28,082	£32,125	£33,816
SEO	£33,675	£35,696	£40,156	£42,269
Grade 7	£45,299	£48,017	£55,552	£58,476
Grade 6	£57,075	£60,500	£67,958	£71,535

Outer London pay range: August 2012 (New staff)				
Grade	Minimum	R&D ceiling	Upper rate	Maximum
AA	tbc			
AO	£19,209	£20,362	£21,817	£21,817
EO	£23,188	£24,474	£27,186	£28,525
HEO	£28,242	£29,832	£33,875	£35,566
SEO	£35,425	£37,446	£41,906	£44,019
Grade 7	£47,049	£49,767	£57,302	£60,226
Grade 6	£58,825	£62,250	£69,708	£73,285

Inner London pay range: August 2012 (New staff)				
Grade	Minimum	R&D ceiling	Upper rate	Maximum
AA	tbc			
AO	£20,959	£22,217	£23,567	£23,567
EO	£24,938	£26,224	£28,936	£30,275
HEO	£29,992	£31,582	£35,625	£37,316
SEO	£37,175	£39,196	£43,656	£45,769
Grade 7	£48,799	£51,517	£59,052	£61,976
Grade 6	£60,575	£64,000	£71,458	£75,035

Posts which will attract NHS terms and conditions in Public Health England (the "ring fence")

Some roles in Public Health England will need to be performed by specialist staff who will normally have a career

pathway in the NHS. We have therefore agreed that flexibility to offer terms and conditions analogous to NHS terms would be appropriate for this group. In order to qualify for this "ring fence", a role would need to satisfy the following criteria:

- a clinical qualification and professional





registration is essential for the role

- the role would have a career pathway which had included training which would have been in a publicly funded health service
- the role would have a career pathway where any further likely promotion or professional development would remain in a publicly funded health service
- the role has regular patient or population contact.

Staff in these roles will be employed on the relevant NHS terms and conditions and will not have the option to move onto Public Health England terms and conditions. This will ensure staff performing comparable roles are rewarded consistently.

Public Health England's intention is to keep the terms and conditions applying to this group of posts aligned with terms in the NHS.

It is important to note that the NHS terms are attached to specific posts in Public Health England, not to individual members of staff. By way of example, if a member of staff is recruited to a NHS

identified role then makes a voluntary move later to a "generalist" role, that individual would be expected to move to core Public Health England terms and conditions rather than retaining the right to the NHS terms and conditions.

Roles which meet these criteria are mainly public health and dental consultant roles and nursing roles, although some others may do so. The medical and dental consultant contract will remain unaltered within this "ring fence".

The operation of this flexibility will be evaluated and reviewed by Public Health England before the end of 2015.

Other terms and conditions

Public Health England will reflect Agenda for Change terms for a number of non-pay terms and conditions. These are set out in a separate factsheet.

⁸ <http://www.civilservice.gov.uk/reform>

⁹ <http://www.nhsemployers.org/SiteCollectionDocuments/Proposals%20on%20changes%20to%20the%20Agenda%20for%20Change%20agreement%209%20NOV%202012.pdf>



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Working in the Civil Service



Public Health England will be an executive agency of the Department of Health. Staff will be governed by the Civil Service Management Code¹⁰, and for staff in Public Health England, the Public Health England Code of Conduct for Staff.

Public Health England will be an organisation whose culture and values will demonstrate scientific and analytical rigour, dedicated to providing impartial and objective advice, evidence and expert judgement and taking action on the basis of the best available evidence.

Through discussions with staff and HR functions in sender bodies, we have identified three areas where working in the Civil Service is likely to be different for individuals who currently work for NHS employers.

These are not exclusive but the following sections outline:

- the Civil Service Code
- the employment of staff from outside the European Economic Area (EEA) in Public Health England
- the Outside Business Appointment Rules.

The Civil Service Code of Conduct

As Civil Servants, staff in Public Health England will be expected to carry out their roles with dedication and will be

bound by the Civil Service and its core values: integrity, honesty, objectivity and impartiality.

These are defined as follows:

- “integrity” – putting the obligations of public service above your own personal interests
- “honesty” – being truthful and open
- “objectivity” – basing your advice and decisions on rigorous analysis of the evidence
- “impartiality” – acting solely according to the merits of the case and serving equally well governments of different political persuasions.

These core values support good government and ensure the achievement of the highest possible standards in all that the Civil Service does. This in turn helps the Civil Service to gain and retain the respect of ministers, Parliament, the public and its customers.

The values set out in the Civil Service Code will be fundamental to PHE’s operation. Public Health England will develop its own Code of Conduct for Staff to help them understand what this means for them in their work.

A number of concerns have been expressed about how people can undertake their professional duties (particularly in the medical and scientific





professions) while complying with the Civil Service Code, and what the Code means in practice for such staff.

To help give clarity on this we have set up a small working group comprising the British Medical Association (BMA) and the British Dental Association (BDA) to help develop the Public Health England Code of Conduct for Staff and ensure that it covers issues clearly for professional staff.

The Public Health England Code of Conduct for Staff will be contractual and will apply to all staff in Public Health England including the “ring fenced” staff. We aim to make this available in December 2012.

The employment of people from outside the European Economic Area and outside the Commonwealth in Public Health England

A small number of people who are in scope to transfer into Public Health England are affected by the rules relating to employment of non-UK and non-Commonwealth nationals in the Civil Service. We are seeking to work through these issues in a way which will be straightforward for the staff concerned.

There is a general prohibition in UK law on the employment of non-UK nationals in the Civil Service except in specific circumstances set out in law.

Special arrangements apply for those from commonwealth countries and also people from the European Community and European Economic Area who have rights under European treaties.

The rules affect only a very small proportion of individuals who are in scope to transfer into Public Health England. Individuals affected would need to apply for exemption to the rules to be able to work in Public Health England.

The Public Health England transition team is currently working with senders to ensure all such staff are identified, and to provide support and guidance to enable applications for exemption to be made.

The Outside Business Appointment Rules

As Civil Servants, Public Health England staff will be bound by the Outside Business Appointment Rules.

These rules apply to Civil Servants who intend to take up an outside appointment or employment after leaving the Civil Service.

The approval process for applications under the rules differs depending on the applicant's seniority. The rules continue to apply for two years after the last day of paid Civil Service employment.

These rules are designed to uphold the core values in the Civil Service Code. It is in the public interest that people with experience of public administration should be able to move into business or other bodies outside central government, and that such movement should not be frustrated by unjustified public concern over a particular appointment.

It is equally important that when a former Civil Servant takes up an outside appointment there should be no cause





for justified public concern, criticism or misinterpretation.

Before accepting any new appointment or employment, whether in the UK or overseas, which they intend to take up after they have left the Civil Service, all serving/former Civil Servants must consider whether an application under the rules is required. If it is required, they should not accept a new job offer before it has been approved.

The process for giving approval differs depending on the applicant's seniority. The operation of these rules is overseen by the independent Advisory Committee on Business Appointments¹¹, which considers the most senior cases.

¹⁰ <http://www.civilservice.gov.uk/about/resources/civil-service-management-code>

¹¹ <http://acoba.independent.gov.uk>



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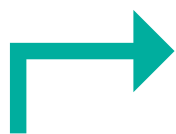
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The legal basis for the transfer for those not covered by the Health and Social Care Act



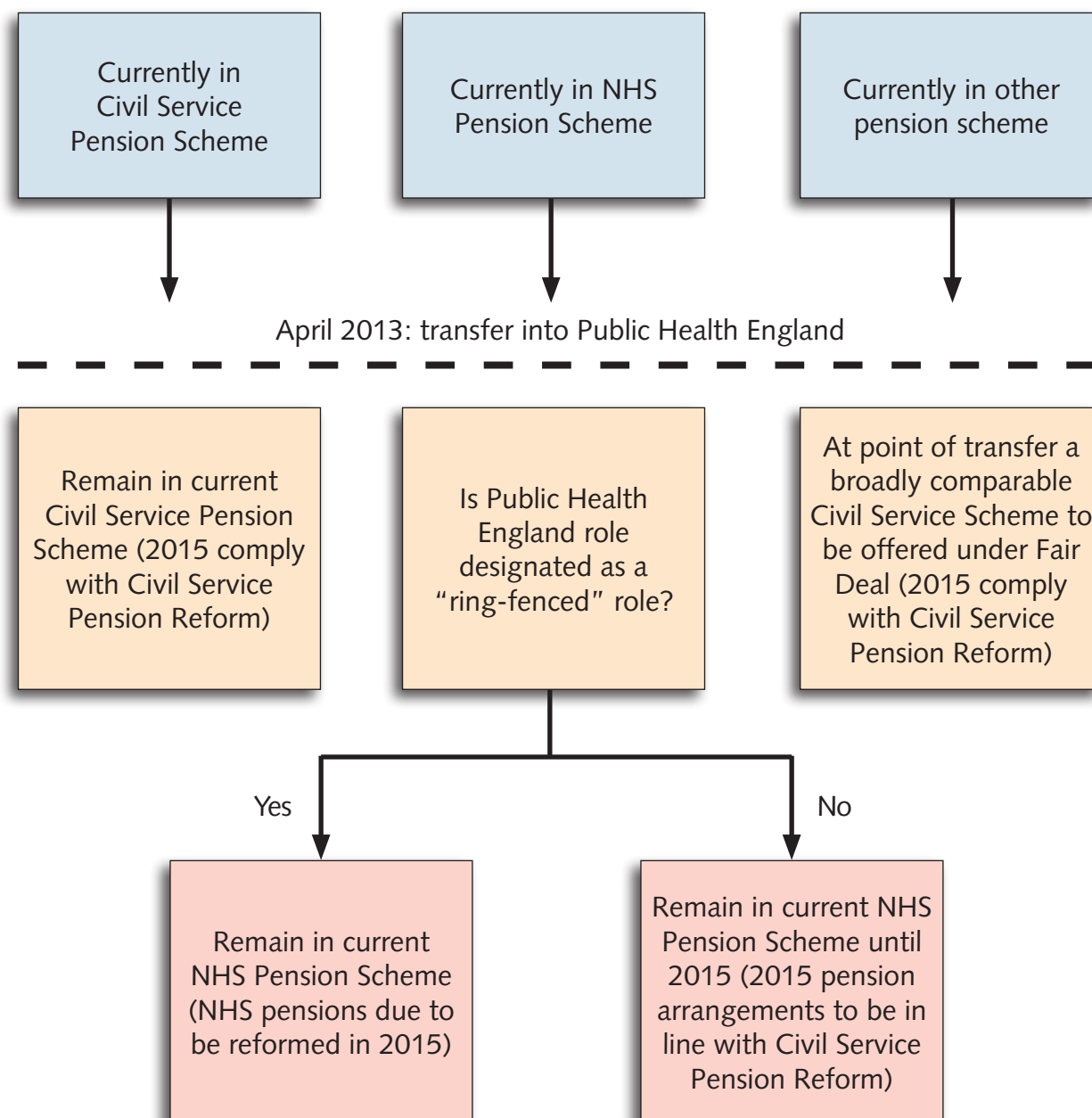
There are organisations (eg universities, NHS trusts and foundation trusts) that are not included in schedule 23 of the Health and Social Care Act 2012 nor are they organisations covered under the NHS Act 2006.

For the purposes of the transfer, these organisations are not covered by transfer

schemes or orders. There are a number of options currently being considered for how these transfers can be effected.

We expect to make information available to staff shortly on the proposed way forward.


Transfer chart



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Public Health England non-pay terms and conditions



These terms and conditions are those that will apply to future staff in Public Health England. They do not apply to staff in the “ring-fenced” group.

The Civil Service Reform Plan¹² and Proposals on changes to the Agenda for Change agreement¹³ (published in November 2012) set out plans to review some Civil Service and Agenda for Change terms and conditions respectively. These reviews are not complete and firm proposals for change have not yet been agreed.

This People Transition Policy sets out the proposed Public Health England terms and conditions and would be subject to change.

Annual leave

The annual leave entitlement for Public Health England staff is set out in the following table.

Length of service	Entitlement
Less than 5 years' service	26 days per annum annual leave plus additional 8 days that cover bank holidays and privilege days
More than 5 years' service but less than 10 years' service	28 days per annum annual leave plus additional 8 days that cover bank holidays and privilege days
Over 10 years' service	32 days per annum annual leave plus additional 8 days that cover bank holidays and privilege days

As Civil Servants, Public Health England staff will also be granted one day's holiday in recognition of the Queen's Official Birthday on either the Friday preceding or the Tuesday after the Spring Bank Holiday.



Hours of work

Public Health England staff will be contracted to work an average of 37.5 hours per week.

Overtime

Prior authority for overtime working must be given by the appropriate budget holder/line manager. When overtime is performed by Public Health England staff in grades below Executive Officer (EO), it should normally be directly supervised by a manager at EO level or above. Overtime rates for new recruits to Public Health England are based on basic pay alone.

Public Health England staff may, if they request, be given time off in lieu of payment at management discretion up to the actual numbers of hours worked.

No monetary compensation is paid to staff required to attend on a privilege holiday, but they may be allowed time off in lieu up to the actual number of hours worked.

On-call arrangements

Pay enhancements for on-call cover are paid. The value of the enhancements is a percentage of basic pay and payment is determined by the frequency of the on-call commitment. The Health Protection Agency's addendum to on-call payments effective from 1 October 2012 will be used as an interim policy on the establishment of Public Health England. This is included as an appendix at the end of this factsheet.

Public Health England staff called in during an on-call period receive payment for the work done, including travel time, at the overtime rate.

Sickness

Maximum sickness benefits for PHE staff will accrue with service as shown in the following table:

Length of service	Sickness entitlement
1st year of service	1 month full pay then 2 months half pay
2nd year of service	2 months full pay then 2 months half pay
3rd year for service	4 months full pay then 4 months half pay
4th and 5th year of service	5 months full pay then 5 months half pay
6th year of service and greater	6 months full pay then 6 months half pay

Sickness reporting process and other sickness matters will be published in the Public Health England sickness policy that will be available prior to the organisation's start.

Maternity leave

Public Health England will offer the following benefits to its staff for maternity leave.





Public Health England staff with more than one year's continuous service 11 weeks before the baby is due:

Staff returning to work

- up to 52 weeks leave
- contractual maternity pay for the Civil Service must allow a woman member of staff paid maternity leave of at least three months and one week for monthly-paid staff.

Staff not returning to work

- Ordinary Maternity Pay (OMP) = nil
- Statutory Maternity Pay (SMP) = six weeks at 9/10th of average weekly pay plus 33 weeks SMP.

Staff with less than 52 weeks but at least 26 weeks' service by the qualifying week:

- up to 52 weeks' leave
- OMP = nil
- SMP = six weeks at 9/10th of average weekly pay plus 33 weeks SMP.

Staff with less than 26 weeks' service by the qualifying week

- OMP = nil
- Maternity allowance may apply.

Paternity leave

Public Health England will offer the following benefits regarding to its staff for paternity leave.

Public Health England staff with less than 26 weeks' service will be entitled to 10 working days leave (three days paid and seven days unpaid). Civil Service terms do not require departments to pay salary for paternity leave where there is less than 26 weeks' service.

Once 26 weeks' service has been achieved ending with the 15th week before the baby is due Public Health England staff will be entitled to two weeks' paid leave at full pay.

For a part-time worker this will be based on the number of days they are contracted to work, eg two days per week then two weeks will equate to four days.

Public Health England staff may also have a legal entitlement to Additional Paternity Leave.

Additional paternity leave

Additional paternity leaves allows employees to take up to 26 weeks' leave to care for their new child once the mother or primary adopter has returned to work.

The earliest that this leave can commence is 20 weeks after the date on which the child is born, or 20 weeks after the date of the placement of the child for adoption, and it must end no later than 12 months after that birth/placement date. It can only be taken where the mother or primary adopter has returned to work.

Employees may qualify for Additional Statutory Paternity Pay for some of the Additional Paternity Leave Period. If employees qualify for Additional Statutory Paternity Pay this will be payable for the remainder of the mother or primary adopter's untaken 39 weeks statutory pay period. Any leave taken after the 39th week of the statutory pay period will be unpaid.





Notice periods from Public Health England staff

One month's notice is required from Public Health England staff in grades AO to SEO. Three months' notice is required from Public Health England staff above Grade 7.

Notice periods from Public Health England

As Civil Servants, Public Health England staff do not have a right to a period of notice when their employment is terminated. In practice Public Health England will apply at least the statutory minimum periods of notice.

The following periods of notice as specified in the Civil Service Management Code are the minimum that will be given to staff who:

- a. retire on age grounds; or
- b. are dismissed on grounds of inefficiency; or
- c. are dismissed as a result of disciplinary proceedings in circumstances where summary dismissal is not justified; or
- d. have their probationary periods terminated.

Continuous service for	Monthly paid staff
Up to 4 years	5 weeks
Over 4 years	1 week plus 1 week for every year of continuous service to a maximum of 13 weeks

Medical early retirement

Staff who are retired on medical grounds will be given the period of notice set out above subject to the following minimum periods:

- a. five weeks during probationary service. This may be extended by up to a further three weeks if the officer (or the appropriate trade union) is considering an appeal; or
- b. nine weeks in other cases, unless a shorter period is agreed.

Compulsory termination of appointment

Staff are entitled to three months' notice (or period equal to the unexpired part of their fixed period of employment specified in their contract, where this is less) unless staff have a contractual right to a different period. This does not apply to:

- a. flexible and approved early retirement and voluntary redundancy, where the date of termination is agreed.
- b. summary dismissal which is the result of disciplinary proceedings or which is otherwise justified at common law, or
- c. certain staff over age 60 who, if made compulsorily redundant, will be given 12





months' notice if they have less than 10 years' service or nine months' notice if they have 10-25 years' service, provided that this notice does not extend beyond their 65th birthday.

Voluntary termination of appointment

Staff are entitled to three months' notice (or period equal to the unexpired part of their fixed period of employment specified in their contract, where this is less).

Honorary contracts

Honorary contracts have been a necessary feature of the NHS system and for the Health Protection Agency in order to facilitate joint working on research and

other projects as well as access to NHS conditions of employment and facilities.

A policy for Public Health England is under review to take account of required working relationships in the new public health system. We will provide an update on progress in the New Year.

¹² <http://www.civilservice.gov.uk/reform>

¹³ <http://www.nhsemployers.org/SiteCollectionDocuments/Proposals%20on%20changes%20to%20the%20Agenda%20for%20Change%20agreement%209%20NOV%202012.pdf>



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**Appendix: Health Protection Agency
Addendum to On-Call Payments
Agreement for Staff Employed on Agenda
for Change Terms and Conditions:
Provisions for a minimum payment for on
call work (effective from 1 October 2012)**

*1. Payment for on-call work for
employees not required to attend a work
place outside the home during a Standard
On-Call Period*

1.1 It is recognised that there are Health Protection Agency staff delivering on-call services who are not required to return to their normal workplace in order to respond to a call or alert. Typically, this work would involve a combination of telephone advice, remotely accessing computer-based information, drafting guidance and associated activities. In some circumstances, this could involve a considerable volume of work over a number of hours causing significant disruption for the individual concerned.

1.2 Employees providing such services will be required to keep a record of calls received together with the period spent working in response to each call. In addition to the basic on call payment entitlements, such individuals will then be able to make a claim for an overtime payment for any hours worked and the claim must be authorised by the appropriate line manager.

1.3 In all circumstances, (no matter the period taken), the minimum claim for the first call only during a single on call period will be payment for 30 minutes. For example, a working period lasting 20 minutes would be rounded up to 30

minutes and the individual can claim 30 minutes in response to that call.

1.4 Individual call outs that last more than 30 minutes (for that first call) will be paid accordingly. Call time should be rounded up to the nearest 15 minutes. For example, working time lasting 40 minutes will be rounded up to 45 minutes and overtime claimed for 45 minutes.

1.5 Subsequent calls should be measured in actual length of work and totalled at the end of the on-call period (see section 3).

*2. Payment for on-call work for
employees required to attend a work
place outside the home during a Standard
On-Call Period*

2.1 Employees who are called into work during a period of on-call will receive payment for the period of time they are required to attend, including any travel time. The "period" is defined as the time from when an "alert" or call is received by the individual to the time the individual returns home.

2.2 In all circumstances, (no matter the period taken), the minimum claim for the first call only during a single on call period will be payment for two hours. For example, if travel time plus the time for completing the on-call work is 55 minutes, the individual can claim two hours in response to that call.

2.3 Individual call outs that last more than two hours (for that first call) will be paid accordingly. Call time should be rounded up to the nearest 15 minutes.





For example, working time lasting two hours and 20 minutes will be rounded up to two hours and 30 minutes and overtime claimed for 2.5 hours.

2.4 Subsequent calls should be measured in actual length of work and totalled at the end of the on-call period. (See section 3),

2.5 Travel time associated with on-call commitment will be paid at the same rate as that applicable to the work done up to a maximum of normally 45 minutes each way, to the normal work place.

2.6 Employees providing such services will be required to keep a record of the period of time spent working in response to each call, including travel time.

3. Multiple call outs in one standard on call period

3.1 Multiple call outs during the standard on-call period is aggregated and claims paid for the total period that an individual is required to work on call. Note: a minimum 30 minutes (for payment for on call work for employees not required to attend a work place) or two hours (for payment for on-call work for employees required to attend a work place) will apply. This minimum payment only applies to the first call in any on-call period.

3.2 Examples are as follows for each on-call scenario: (that will form part of a future Q&A document).

On-call frequency (eg one in four) as described by reference to a defined period, for example, an on-call (out of hours) period from 5pm to 9am the following morning.

Table 1. Payment for work to employees not required to attend a workplace within a defined on-call period (for payroll purposes a claim in minutes is paid as a decimal equivalent for time to be claimed less than 60 minutes).

Record of calls	Time spent working in response to a call	Claim for payment
Call one	20 minutes	30 minutes (rounded up to 30 minutes and paid as 0.50h).
Call two	35 minutes	35 minutes (paid as 0.58h)
Call three	45 minutes	45 minutes (paid as 0.75h)
Total claim	110 minutes (claim is for one hour and 50 minutes) paid	