



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive



National Ambulance Service (NAS)

Workforce Support Policy

Capability

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1.0 POLICY STATEMENT

1.1 The National Ambulance Service (NAS) will at all times endeavour to ensure that employees achieve and maintain a high standard in their work. To this end it will ensure that standards are established, performance is monitored and employees are given appropriate training and support to meet these standards. When it is apparent that an employee is not capable of achieving the required level of performance, the Service will deal with the situation in a reasonable, compassionate and competent manner.

1.2 All employees therefore must:

- A. Be advised by their Supervisor/Manager as soon as their performance falls below expected standards
- B. Understand the standards required, the reasons for any action and the implications of not achieving an improved performance
- C. Be informed by their Supervisor/Manager of progress at all stages of the formal Procedure and be advised when they may be represented by a work colleague or trade union representative.

1.3 In addition, any supervising Supervisor/Manager must:

- A. Investigate all the facts
- B. Advise the employee of the concerns
- C. Give the employee a period of time during which (s)he has a chance to improve performance
- D. Take all reasonable action to assist and support the employee during the above period
- E. Maintain a complete, written record of all discussions, actions and review periods throughout the process.
- F. Ensure that the NAS has fulfilled its obligations to provide regular training, updates, support and where appropriate counselling to the employee.

2.0 PURPOSE

2.1 To detail the provisions available and the procedure to follow where an unacceptable level of performance is due to capability.

2.2 To address clinical performance issues not encompassed by Policy - NASCG003 - Variations in Clinical Practice and Clinical Competence

3.0 SCOPE

3.1 This policy applies to all NAS staff.

3.2 This policy does not cover situations appropriate to be dealt with under the following procedures:

- A. Deliberately/wilfully ignoring instructions or producing sub-standard work - the HSE Disciplinary Procedure will apply.
- B. Below standard level of attendance or ill-health capability - HSE Managing Attendance Policy should be followed.
- C. People with disabilities, or who become disabled, whose performance standard is connected with their disability.

4.0 LEGISLATION/OTHER RELATED POLICIES

- A. Duties and Responsibilities (relevant job description)
- B. HSE Disciplinary Procedure
- C. HSE Managing Attendance Policy
- D. HSE Code of Standards and Behaviour
- E. Policy - NASCG001 - Clinical Effectiveness
- F. Policy - NASCG003 - Variations in Clinical Practice & Clinical Competence
- G. Policy - NASCG004 - Clinical Supervision
- H. Policy - NASP002 - Control Quality Assurance System
- I. Policy - NASP004 - Advice, Counselling and CISD
- J. Policy - AMBP013 - Training and Development Framework
- K. Policy - NASP016 - Professional Code of Conduct
- L. Procedure - NASBS004 - Staff Induction Procedure
- M. PHECC Clinical Practice Guidelines
- N. PHECC Code of Conduct
- O. International Academy of Emergency Medical Dispatch - Accreditation

5.0 GLOSSARY OF TERMS AND DEFINITIONS

5.1 Capability, as defined in this policy, implies that there is no element of choice in the employee's failure to measure up to the required standards. This may be due to an innate lack of ability, skill or experience or to a lack of adequate training and/or supervision. In these cases, employees will be given all reasonable help and encouragement to reach a satisfactory level of performance, as detailed in this policy, before any formal action is considered.

5.2 Negligence, in contrast, normally involves a measure of personal blame or wilful conduct or misconduct. The employee's performance will be inadequate due to a lack of interest or attention. In all matters of conduct or misconduct, including negligence, disciplinary action as detailed in the HSE Disciplinary Procedure will be taken.

2.1 Where a Supervisor/Manager is unclear as to which is the appropriate procedure to apply in any specific circumstance they are advised to discuss the matter in confidence with an Operations Performance Manager.

6.0 ROLES AND RESPONSIBILITIES

6.1 The Workforce Support Manager, Education and Competency Team, Control and Performance Manager and Area Operations Managers have joint overall responsibility for the implementation of this policy.

6.2 All those persons referred to within the Scope of this policy are required to adhere to its terms and conditions.

6.3 Individual Supervisors/Managers are responsible for ensuring that this policy is applied within their own area of responsibility. Any queries on the application or interpretation of this policy should be discussed with an Operations Performance Manager prior to any action being taken.

7.0 PROCEDURE

7.1 INFORMAL MANAGEMENT PROCESS

7.1.1 Where a Supervisor/Manager establishes that an employee's performance is unacceptable, (s)he must not wait until an Appraisal meeting, (where applicable), before addressing the issue. Instead, a structured discussion will be held immediately with the employee under the terms of this policy.

7.1.2 The aims of this discussion will be to:

- A. Explain clearly the shortfall between the employee's performance and the required standard
- B. Carefully assess the situation in order to identify if the failure to meet expected performance levels is due to external factors, employee/employer negligence, idleness or attitude or whether it is due to a basic incapability. (If the reasons established are due to the employee's negligence, idleness or attitude, the HSE Disciplinary Procedure must be used)

- C. Identify the specific cause(s) of the incapability and determine what remedial action can be taken. This should include further training, retraining or closer supervision and support
 - D. Obtain the employee's commitment to reaching the required standards
 - E. Set a reasonable period of time for the employee to reach the standard and agree on a monitoring system during that period. This will vary according to the aspect of poor performance
 - F. Tell the employee what will happen if these standards are not met i.e. the Formal Procedure (as detailed in Section 7.2) will be invoked.
- 7.1.3 Should the discussion result in a decision that the standards are not reasonably attainable, the standards will be reviewed.
- 7.1.4 Should the discussion establish that the performance problems are related to the employee's personal or domestic life, the necessary counselling/support will be offered.
- 7.1.5 If it is decided that the poor performance emanates from a change in the NAS's standards or working practices, those standards or working practices will be explained to the employee. Any necessary supervision, training or retraining will be offered to obtain conformity with the standards or to achieve the required skill level.
- 7.1.6 The content agreed action and the outcome of this discussion must be recorded in writing to the employee concerned and a copy retained in his/her personal file.
- 7.1.7 At the end of the review period a further meeting will be held between the Supervisor/Manager and the employee.
- 7.1.8 The outcome of this second meeting will be to establish:
- A. If the required improvement has been made, the employee will be told of this and encouraged to maintain this improvement, or
 - B. If some improvement has been made but the standard has not yet been met, the review period will be extended, or
 - C. If it becomes apparent that the employee might not be capable of achieving the required level of performance, alternative solutions to the problem should be discussed, for example transferring to other employment within the Health Service Executive within the capability of the employee, early retirement or leaving the Health Service Executive's employment. However, at this stage in the process, this is not obligatory for the employee.

- D. The final decision must rest with the employee as to which solution may be followed. At this point the employee must be offered the opportunity to be represented by their trade union representative or to be accompanied by a work colleague
- E. If there has been no discernible improvement and no alternative solution has been agreed upon, the Supervisor/Manager will explain to the employee that (s)he has failed to improve and that the Formal Procedure (see section 7.2) will now be invoked.

7.1.9 The outcome of this second meeting will be recorded in writing to the employee concerned and a copy retained in his/her personal file.

7.1.10 Where the employee is prepared to accept an alternative solution, such as transferring to another position or leaving the Heath Service Executive, this must be actioned as quickly as possible as such periods of uncertainty are demotivating for the individual concerned and for those around them.

7.1.11 Where an alternative solution has been agreed upon, the employee will be referred to a member of the relevant HR Department within 3 working days in order to commence counselling and to explore any necessary arrangements.

7.1.12 Unless there are special circumstances, employees should not remain in their current situation for longer than is necessary.

7.1.13 During the period between the initial discussion and the resolution of the problem, the employee will be seen by their Supervisor/Manager at least once a week until they are re-deployed to an alternative position or a leaving date is established.

7.1.14 Where required and as appropriate, training/development arrangements will be made by the NAS or termination arrangements will be finalised in conjunction with the relevant HR Department.

7.2 FORMAL PROCEDURE

7.2.1 If at the end of the review period, described in Section 7.1.2 above, there has been no discernible improvement in the employee's performance and no alternative solution has been agreed upon, it may then be necessary to implement the HSE Disciplinary Procedure. In this event, the procedures outlined in the HSE Disciplinary Procedure must be followed.

7.2.2 The employee concerned will be informed, in writing, of the above and will be asked to attend a disciplinary hearing where (s)he will have the right to be represented by a work colleague or by their trade union representative.

7.2.3 Having completed a review process as outlined in Section 7.1.8, Stage One of the disciplinary procedure will not apply. Should disciplinary action become necessary following the implementation of the provisions of this policy, it will be dealt with at Stages 2, 3 and 4 of the HSE Disciplinary Procedure

8.0 IMPLEMENTATION PLAN

8.1 This Policy will be issued to staff side representatives 14 days prior to implementation.

8.2 On approval, this Policy will be circulated electronically to all Managers, Supervisors and Staff

8.3 This Policy will be available electronically in each Ambulance Station for ease of retrieval and reference

8.4 Each Operational Support Manager will ensure that the Manager/Supervisor responsible for updating Policies and Procedures will return the Confirmation Form to NAS Headquarters to confirm document circulation to all staff.

9.0 REVISION AND AUDIT

9.1 This policy will be reviewed on an ongoing basis or when necessary following changes in clinical, legislation or governance arrangements

9.2 Revisions, amendments or alterations to the policy can only be implemented following consideration and approval by the Director, National Ambulance Service following consultation with key stakeholders.

9.3 The application of this policy may be subject to audit to establish compliance and any procedural deficits

9.4 Non compliance will be addressed through the HSE Disciplinary Procedure

10.0 REFERENCES

None Applicable

11.0 APPENDICES

Appendix I - Policy - Acknowledgement Form