

Working Arrangements Group Q & A v 3.1

	Question	Answer
1	What is WAG?	The Working Arrangements Group is a joint staff side and management group established as a sub group of the Blood Donation Committee. Proposals have been drawn up in partnership, and endorsed by the Staff Partnership Committee) (SPC) which is NHSBT's national partnership group
2	I am currently on a weekly contract. Moving to a fortnightly contract will affect my earnings. Will I receive pay protection?	If it can be demonstrated that there is a loss of earnings as a result of this change then short term protection would be applied. You will need to bring this to your line manager's attention within 4 months of the change taking place.
3	Will moving to a fortnightly contract change the number of shifts I work each week?	There is no intention to change your normal work pattern as a result of this change. However we may need to discuss the best way of ensuring that you are working your contracted hours
4	I am a Donor Centre Administrator. Do I also need to move onto a fortnightly contract?	Yes. The expectation is that DCA staff will move to fortnightly contracts just like nurses and donor carers.
5	What if a session is cancelled or finishes early due to an exceptional problem outside of the team's control- what do the team claim in terms of hours for that day?	In this situation your manager will authorise the team to claim the hours that were planned and may or may not be able to redeploy the team to other duties, depending on the circumstances.
6	How will the change to rounding rules affect my pay?	Under the current arrangements, sometimes your total worked hours each day are rounded up, and sometimes they are rounded down. There is no way to assess the net impact of this for every individual. In future you will be paid for the hours you work and claim- with no rounding. We do not expect anyone to experience any financial loss as a result of this change
7	Most of our session days (elapsed days) are longer than 10 hours. This means that as a result of moving to the new Mobile Subsistence Allowance I am likely to lose earnings. Will I receive pay protection?	We do not expect staff to suffer any financial detriment as a result of this change. If, following a reasonable period following implementation of the new allowance, an individual can demonstrate a financial loss solely as a result of this change rather than as a result of any other Business As Usual reasons, then earnings protection will be explored further if required.
8	I am a session nurse who has historically claimed Agenda For Change subsistence allowances when working on session. Why am I not able to continue doing this? What if I lose money as a result of this change - will I be	We want to move all staff onto a single harmonised set of pay and allowance rules and arrangements as this is both fair, and will support the intended future move to automated resource planning tools (e.g. rostering tools which link to our payroll systems). We are also concerned that if challenged at some future point, it is possible that those nurses who currently make these claims could not demonstrate full

	protected?	adherence to all of the AfC criteria for claims. Agenda For Change Subsistence allowances are not subject to pay protection as they do not constitute earnings.
9	If staff are picked up on the way to session or meet at session, and do not meet their contracted hours, will they have to make up the time?	As now fortnightly contracted hours would be paid despite any shortfall in hours worked, however additional hours/overtime would not be payable until the contractual hours had been worked. Should a regular pattern emerge of someone undershooting their contractual hours as a result of how they travel to session, then their manager will need to discuss this to identify a suitable solution to resolve the issue.
10	If I walk or cycle to session what travel time can I claim?	You can claim the actual travel time, capped to a maximum of the team travel time.
11	I prefer to travel direct to session using public transport. What travel time can I claim?	Again, you may claim actual travel time, capped to a maximum of the team travel time.
12	I am a donor carer that prefers to travel direct to session. How is actual travel time determined? Is a computerised travel system used, or do you trust me to accurately record time taken.	NHSBT trusts its staff to accurately record their travel time and they may claim this up to a maximum of team travel time. As now line managers who are responsible for authorising claims can use a combination of local knowledge or other resources to seek to verify travel time claims. Any queries would always be raised with individual members of staff to identify if special circumstances had influenced the travel time. Existing NHSBT policies and procedures are already in place to deal with suspected fraudulent claims, and would be applied as appropriate.
13	Are the East and West Regions going to be merged?	WAG does not make any proposals for change to Regions. The appointment of the Assistant Director for Operations in the South will result in some boundary changes which will be notified separately
14	What will happen to non VP staff?	It is proposed that all staff will be required to undertake VP by 2020. Discussions will take place at an appropriate point with National staff side and relevant individuals
15	Do Donor Carers get paid mileage if they do extra sessions? And does this mean that someone driving to session could get paid more than someone who gets picked up?	Under AfC staff may claim mileage if working additional shifts. What people get paid depends of their contracted hours and the hours they actually work
16	What happens if your team doesn't have a minibus?	It is recognised there are a small number of exceptions – e.g. the City Team. These will be picked up in local discussions and are already covered by specific agreements around d travel time which will remain in place.
17	Does the 50% allowance account for Holiday?	The 50% driving requirement is a commitment- and is based on the principle of an averaged frequency. If a DC is on holiday they are not rostered to work, and therefore cannot be expected to drive. If a manager needed to ascertain whether an individual had met their commitment then they would do so by looking at the number of shifts worked and driven. It should be borne in mind that the commitment is to work UP TO 50%. That does not mean that everyone will have to drive 50% of their shifts. Similarly, some colleagues may be

		happy to drive more frequently
18	Could someone refuse to drive if they have done over 50% already?	Under these arrangements you can only be expected to drive up to 50% of your contractual shifts. It may be possible to do more if mutually agreed. In a very small number of cases existing drivers may currently drive in excess of the 50% level, but wish to reduce their commitment to 50%– in these exceptional cases this may need to continue in the short term, but the Area Manager will be required to prepare an action plan for the relevant Head of Region which details the steps to be taken to bring all drivers down to a maximum 50% level. This issue will only arise on teams with substantially fewer drivers than needed which we will work together to address as quickly as possible.
19	If Donor Carers refuse to update their skills by 2020 could this lead to individuals being taken down the capability process?	There are a few staff that currently do not meet the skills requirement, and we would expect that number to be even smaller by 2020. Individual discussions will be held with affected staff in advance of the 2020 deadline date.
20	Are accredited union reps on official union work able to claim MSA on the same basis as staff attending training?	No, NHSBT's Partnership Agreement sets out arrangements for subsistence for accredited union reps on official union work.
21	Unsocial hours pay, will this continue?	There is no change to the enhanced (unsocial) hours pay which is defined in NHSBT's Unsocial Hours Remuneration Agreement.
22	Will changes relevant for DC's be held off until nurse harmonisation has been resolved?	The queries regarding nurse working arrangements that were referenced in the RPC briefs have been resolved. Changes to nurse mileage claim arrangements have now been removed from the WAG proposals, and are being discussed outside of this forum, but other changes are now included within the 'Handbook' and will be implemented.
23	Have HMRC indicated they need to see subsistence receipts?	The MSA will be subject to tax and NI Contributions – as AfB is now – so receipting is not currently required.
24	Do we know who are already on fortnightly contracts?	A small number of staff are on weekly or 4 weekly contracts and will be aware if this affects them.
25	If we have people who do not want to be contacted outside of work, do we still contact them via text message under the new electronic rostering system?	This issue is not specifically related to WAG. There will be a lot more discussions before we are even close to implementing electronic rostering systems with this capability
26	If we have someone with an appointment in a months' time, will they be rostered on with the new electronic system?	This issue is not specifically related to WAG. Normal conversations should take place with your manager on such matters. Should be able to express that preference upfront to stop people being rostered if they have requested not to work on that day. There is no new electronic system as yet, so no one will be rostered electronically as part of these changes.
27	If someone based on a mobile team is asked at short notice to work in a donor centre, will they still have mobile subsistence allowance?	Yes, this will not change.

28	If I agree to work an additional shift over and above my fortnightly contractual requirement can I claim home to base mileage for that shift?	In these circumstances you can be reimbursed. Mileage in your own car will be reimbursed at the normal business rate and is subject to income tax and national Insurance. Lease car drivers claiming reimbursement relating to home to base mileage should be aware that such mileage reimbursement is classified by HMRC as private mileage.
29	What happens if I am asked to change shift and move to cover a shift on a team which does not operate out of my home base. Can I claim mileage and travel time to session.	In these circumstances you could claim actual travel time. Donor Carers may claim mileage, although home to base mileage will be deducted in line with AfC terms and conditions. Nurse mileage arrangements remain as existing as of 1 st November 2016 – i.e. you may claim mileage and the expenses system will automatically deduct 5 miles each way.
30	If I am a nurse who has been asked to travel outside of my Area to support a session, do I still need to arrive on session at the same time as the team or can I arrive on session 30 minutes before opening time as currently.	This should be an occasional and exceptional occurrence, so precise arrangements should be agreed with the relevant Senior Sister or Charge Nurse. NHSBT is clear that the presence of the nurse on session when the team arrive is critical in ensuring the day is set up for success and runs smoothly. However, where an individual is travelling from another area in order to support a session then detailed arrangements can be agreed on the day to reflect factors such as increased travel time.
31	What about people working pre-2004 who could still get rostered for up to 3 days a year, even if they only do 2 days a week, - the same as someone who works full time?	Bank holidays do not specifically form part of the WAG proposals. However, the BD Committee will be made aware of all queries raised regarding Bank Holidays.
32	Do Bank Holiday commitments also apply to weekends?	See above.
33	Are there any rules about how many pick up points you can have?	No there aren't – these need to be reasonable for those driving to session and for the staff on the team. All pick ups must be en route. Ordinarily you would not expect more than 1 or 2 en route pick ups on each journey as the overall journey time should not be unreasonably extended. These should be agreed with your Senior Sister
34	Can the lorry pick up staff en route as well as the minibus?	The minibus is the vehicle provided by NHSBT to transport staff to session. The lorry is provided to transport stock and equipment to session. The lorry is more vulnerable to delays and lengthened journey time, and the priority is to ensure that the lorry reaches session in the first instance. For this reason, it is expected that the minibus undertakes any session pick-ups/ drop offs. Any exceptional circumstances that require deviation from this principle should be discussed locally.
35	How will this work in terms of rosters; how do we know whether people are travelling to base alone or at a defined pick-up? The rostering we have at the moment would not allow us to do this.	Staff need to agree in advance with their Senior Sister/Charge Nurse whether they are travelling direct. Pick Ups will be allocated specific pick up times based on journey planning software and local knowledge and will be agreed with your manager..

36	If staff were to be financially penalised from these changes, will they be pay protected?	If individuals can demonstrate that they have been financially disadvantaged by these changes, pay protection will be explored on an individual basis.
37	What is included within the 40 minutes longer allocated for a driving shift	This incorporates the core driver activities such a vehicle checks/refuelling etc. Precise activities may depend on factors such a vehicle driven and local circumstances. Drivers may need additional time to be allocated for other non-driver duties – e.g. transporting blood to processing/ refuelling etc . This should be agreed locally as necessary.
38	I am a donor carer, but it has been suggested I undertake 'stores' as a means of making up my contracted hours. I thought stores were only an agreed contractual activity for donor carer drivers.	There is no specific role of 'Donor Carer Driver'. Stores is an activity routinely carried out by DC staff nationally, some of whom are drivers and some of whom are not. Of course, if this is a new activity then it should be discussed with the individual and appropriate training offered.
39	Are the driver rates shown in the handbook and presentation correct for 2016/17 pay rates	No. The correct rates are: 3% £674 5% £1123 8% £1797
40	If I go home sick part way through a session what M.S.A do I claim?	In these circumstances you claim the team planned hours and the planned M.S.A for the session
41	Why are pre-2003 DC expected to undertake at least 2 key skills? How does this differ to post 2003 staff?	We have changed the language and swapped the terminology – between key and core skills. We want all pre- 2003 staff that do not VP to consider taking up this skill by 2020. Otherwise there is no change to the expectation of the number and type of skills staff need to undertake.
42	Will there be any protection or offers of redundancy for nurses with long home to base travel times?	No.