

**UROLOGY SERVICES INQUIRY**

**USI Ref:** Notice 102 of 2022

**Date of Notice:** 9<sup>th</sup> May 2022

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**Addendum Witness Statement of: Zoe Parks**

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I, Zoe Parks, wish to add an addition to my response to S21 Notice Number 102 of 2022 to explain the development of Trust Guidelines for re-engaging retired consultants.

1. During 2018-2019, there were increasing numbers of consultants indicating they were considering early retirement. At this time, we were also starting to receive more queries from consultants around possibilities for retire and return options, which would not have been commonplace in the past. I believe this changing trend was influenced by government rules around pension taxation at that time. It was always our position that returning to work after retirement was not an entitlement and generally only considered in exceptional circumstances (such as hard to fill areas) and only then, if agreed, with the Associate Medical Director and Director of Service.

2. I recall a telephone conversation with the Head of Employer Relations from the British Medical Association, Mrs Christina Neely sometime in 2019. She mentioned that they had recently agreed guidance via the local negotiating committee in the Western Trust around re-engaging retiring consultants and asked if I would be willing to consider this – as it would be advantageous to have a consistent approach across Trusts. I agreed that this would be very helpful. The Assistant Director of HR within the Western Trust provided me with a copy of their guidance, which they had agreed on 14 November 2019.

3. I emailed Mrs Vivienne Toal, Director of HR, Mrs Siobhan Hynds, Deputy Director and copied to Mr Malcolm Clegg on 3 January 2020 stating the following: *“I would be*



## Urology Services Inquiry

*grateful to discuss the attached **draft document** when you get a chance. We have an increasing number of retiring consultants some of whom enquire if they can return and/or their service manager is keen to retain them post retirement. We always had a very draft document ensuring there was some process around this but it was never formalised. Western Trust recently got LNC agreement and this Draft reflects their document. Christina Neely shared it with me to see if we could agree on something similar."*

4. On 27<sup>th</sup> January 2020 at 08.09am, Mrs Vivienne Toal responded by email saying:

*"Zoe – apologies for taking so long to read this and comment on it. Interestingly we have been talking about this for other grades of staff and the need to document something. I hadn't seen your email when we were talking about this a couple of weeks ago at senior leadership meeting. (sharing with ADs for information – while the general one could look something like this it is probably best to keep them separate documents, as the solution for non-medical staff may be slightly different, and it will probably hold yours up Zoe if we wait to do one document) I have added two comments on this for your consideration. Happy for you to proceed to link with Christina Neely. DDs and ADs – if you wish to comment can you forward anything through to Zoe please? Thanks Vivienne"*

5. Mr O'Brien contacted Mr Malcolm Clegg by phone and email on 13 February 2020 to indicate that he was considering retirement. He requested the relevant application forms for his retirement. I understand from speaking to Mr Clegg recently, that during the conversation there was a brief discussion on whether he could return to work, post retirement. Mr Clegg advised that this would not be automatic and have to be discussed and approved by the Associate Medical Director. HR had no further involvement in these discussions at that time.

6. I received a phone call from Mr M Haynes sometime early June 2020. He asked me to provide him with a form of words to allow him to respond to Mr O'Brien to advise that the Trust would not be willing to re-engage him following retirement. I advised him of our guidance and provided the following via email on 9 June 2020:



## Urology Services Inquiry

*"As discussed yesterday, I can confirm that when you resign/retire from the Trust, your contract of employment ends at that time. We discussed your request to be re-engaged and confirmed that in line with our normal practice, your request has been considered. I have discussed this with the Director of Acute Services and we have decided that we are not in a position to re-engage given the outstanding MHPS/GMC processes that have still to be concluded."*

7. On 16 July 2020, the chair of the Local Negotiating Committee of the BMA at that time, Dr Sara Landy advised they were in agreement with the guidance. She apologised for the delay given a very close family bereavement and advised she had talked to Christina (Neely) and they both felt this was a sensible guidance which they were happy to agree. I then forwarded the final guidance document to all the HR members to advise them that our guidance had endorsement from the LNC.

Please see:

1. *SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020 - Agreed LNC July 2020*
2. *Email from Zoe Parks dated 3 January 2020*
3. *Email from Zoe Parks dated 16 July 2020*

### NOTE:

**By virtue of section 43(1) of the Inquiries Act 2005, "document" in this context has a very wide interpretation and includes information recorded in any form. This will include, for instance, correspondence, handwritten or typed notes, diary entries and minutes and memoranda. It will also include electronic documents such as emails, text communications and recordings. In turn, this will also include relevant email and text communications sent to or from personal email accounts or telephone numbers, as well as those sent from official or business accounts or numbers. By virtue of section 21(6) of the Inquiries Act 2005, a thing is under a person's control if it is in his possession or if he has a right to possession of it.**



# Urology Services Inquiry

## Statement of Truth

I believe that the facts stated in this witness statement are true.

Personal information redacted by the USI

Signed: \_\_\_\_\_

Date: \_11/05/2023\_\_\_\_\_

**S21 102 of 2022****Addendum witness statement of: Zoe Parks****Table of Attachments**

<b>Attachment</b>	<b>Document Name</b>
1	SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020 - Agreed LNC July 2020
2	Email from Zoe Parks dated 3 January 2020
3	Email from Zoe Parks dated 16 July 2020

## **Re-engaging Retired Clinicians**



### **Guidelines for re-engagement of Retiring Clinicians**

**Agreed with Southern Trust LNC (BMA) July 2020**

**Introduction**

In order to continue to deliver services to patients there may be occasions when the Trust will need to continue to engage the services of a retiring clinician (primarily but not exclusively consultant and SAS) in a post-retirement position. This document sets out the arrangements for this to happen. There is no obligation on any clinician who is retiring to continue to provide services to the Trust, and equally clinicians do not have an automatic right to re-engagement. These guidelines do not apply to anyone who has already retired from the Trust.

**Management activities on receipt of notice of retirement**

The Service Director will assess the overall situation with regards to the clinical needs of the service area. This may involve seeking the advice of the Associate Medical Director and the Director of the Service area to establish if there is a need to consider re-engagement, and subsequently a senior HR manager with responsibility for Medical HR should this be required. The following alternatives to re-engagement should be considered as part of the decision making process:

- Doctors who may wish to act-up into the role until it can be permanently recruited for
- Trainees who are completing their training and are eligible to apply for the post
- Review of existing job plans of the remaining clinicians
- SAS doctors.
- Opportunity through International Recruitment Initiatives

**Process of re-engagement**

Having considered all of the alternatives, the Service Director may conclude that there is no alternative but to ask the clinician if s/he is willing to be re-engaged, following their retirement. This conversation must take place while the clinician remains in the employment of the Trust and arrangements put in place prior to their retirement date.

Before proceeding to re-engage a retired clinician the Service Director should, in conjunction with a Senior HR Manager responsible for Medical HR, consider the following:

- That there are no outstanding or unresolved concerns regarding the clinician's overall performance and conduct.
- The clinician is medically fit to perform the role having demonstrated an acceptable level of attendance (subject to Disability Discrimination Act requirements).

The assumption must always be that the Directorate will recruit a replacement as normal however in circumstances where it is clear the delivery of the service would be put in jeopardy by the loss of the individual, the Service Directors can, with the prior approval of the Medical Director, Director of Human Resources and Service Director, offer the individual Clinician a fixed term appointment (normally for up to 12 months). This

arrangement can be reviewed and extended where considered essential to the service area and by mutual consent. In some circumstances there may be a shorter time period before a new appointee would be available and in these cases shorter contract offers will be appropriate. The date of return to active clinical duties will be agreed between Service Director and individual clinician and will take account of the clinician's personal circumstances however the contract must be in place prior to retirement.

In all circumstances the re-engaged clinician will be employed on Medical & Dental Terms and Conditions of Service.

As described above, these arrangements must be agreed in advance, and concluded, while the clinician remains an employee of the Trust. In these circumstances it will not normally be necessary to undertake further pre-employment checks.

### **Time commitment**

There are some limitations on the amount of time an individual can work after retirement and it will be for the individual clinician to ensure they are aware of the arrangements pertaining to their re-engagement based upon the particular HSC Pension Scheme to which they belong.

The following is a general guide only to these provisions.

- All staff should have a 24 hour break in service
- For the first calendar month after retirement staff cannot work more than 16 hours per week

(If either of the above rules are broken the member's pension will be suspended)

- After one month doctors who hold MHO Status, and are members of the 1995 Pension Scheme, and retire less than 60 years of age are not permitted to earn more with their pension and "post pension" HSC earnings than they earned before they availed of their pension
- Clinicians are advised to seek advice from the HSC Pensions or Independent Financial Advisor before entering into any agreement under this protocol

Clinicians retiring after the age of 60 have no limit on their earnings after retirement. Further information on Pensions and earnings should be sought at

<http://www.hscpensions.hscni.net>



**From:** [Parks, Zoe](#)  
**Sent:** 21 April 2023 11:26  
**To:** [Parks, Zoe](#)  
**Subject:** FW: DRAFT SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020  
**Attachments:** [DRAFT SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020.pdf](#)

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**From:** Parks, Zoe <[Personal Information redacted by the USI]>  
**Sent:** 03 January 2020 15:49  
**To:** Toal, Vivienne <[Personal Information redacted by the USI]>; Hynds, Siobhan <[Personal Information redacted by the USI]>  
**Cc:** Clegg, Malcolm <[Personal Information redacted by the USI]>  
**Subject:** DRAFT SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020

Hi Viv/Siobhan,

I would be grateful to discuss the attached **draft document** when you get a chance.

We have an increasing number of retiring consultants some of whom enquire if they can return and/or their service manager is keen to retain them post retirement. We always had a very draft document ensuring there was some process around this but it was never formalised. Western Trust recently got LNC agreement and this Draft reflects their document. Christina Neely shared it with me to see if we could agree on something similar.

[Personal information redacted by USI]

**Zoë Parks**  
Head of Medical HR  
The Brackens, Craigavon Area Hospital

Tel: [Personal information redacted by the USI]

Mob: [Personal information redacted by the USI]



<http://sharepoint/hr/ms/SitePages/Home.aspx>

## Re-engaging Retired Clinicians



### Guidelines for re-engagement of Retiring Clinicians

January 2020

**DRAFT**

## **Introduction**

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## **Process of re-engagement**

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The assumption must always be that the Directorate will recruit a replacement as normal however in circumstances where it is clear the delivery of the service would be put in jeopardy by the loss of the individual, the Service Directors can, with the prior approval of the Medical Director, Director of Human Resources and Service Director, offer the

individual Clinician a fixed term appointment (normally for up to 12 months). This arrangement can be reviewed and extended where considered essential to the service area and by mutual consent. In some circumstances there may be a shorter time period before a new appointee would be available and in these cases shorter contract offers will be appropriate. The date of return to active clinical duties will be agreed between Service Director and individual clinician and will take account of the clinician's personal circumstances however the contract must be in place prior to retirement.

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**From:** [Parks, Zoe](#)  
**Sent:** 21 April 2023 11:28  
**To:** [Parks, Zoe](#)  
**Subject:** FW: SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020 - Agreed LNC July 2020  
**Attachments:** [SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020 - Agreed LNC July 2020.docx](#)

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**From:** Parks, Zoe <[REDACTED]>  
**Sent:** 16 July 2020 17:01  
**To:** Clegg, Malcolm <[REDACTED]>; O'Hanlon, Niamh <[REDACTED]>; McNeice, Andrea <[REDACTED]>; Morrison, Stephen <[REDACTED]>  
**Subject:** SHSCT GUIDELINES FOR RE-ENGAGING RETIRED CLINICIANS 2020 - Agreed LNC July 2020

For information - Agreed with LNC today.

Zoe

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