

Oifig an Stiúrthóra Náisiúnta, Acmhainní Daonna Feidhmeannacht na Seirbhísí Sláinte Ospidéal Dr. Steevens' Baile Átha Cliath 8

Office of the National Director of Human Resources Health Service Executive Dr. Steevens' Hospital Dublin 8

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Memorandum

To: Each Member of Leadership Team, HSE

Each Regional Director of Performance & Integration Each Assistant National Director, Human Resources

Each Employee Relations Manager, HSE

Each CEO / HR Manager Voluntary Agency / Hospital

From: Barry O'Brien, National Director of Human Resources, HSE

Date: 17th December 2013

Re: Targeted Voluntary Redundancy (VR)

Colleagues,

In order to contribute towards the reduction in the number of staff employed in the public health sector required under the Employment Control Framework [ECF] as well as a corresponding reduction in expenditure, the Department of Health directed by the Minister for Health has authorised the Health Service Executive [HSE] to activate a Voluntary Redundancy [VR] Facility in the HSE and in organisations funded by the HSE under Section 38 of the Health Act 2004, in accordance with HSE HR Circular 022/2013 [attached]. This facility will be made available from the 1st January 2014 and is one of a number of options that will allow services be re-structured and reconfigured while delivering essential cost savings and further reductions in headcount in line with our ECF.

VR is a facility which will give managers greater flexibility in implementing the measures needed to remain within reduced budgets and staffing ceilings. It will also be an enabler to facilitate forthcoming major reforms. It will be implemented on a targeted basis as areas, functions and / or employees surplus to current and future business needs are identified in the context of health reform. It will be a matter for the relevant employer initially to determine specific organisations, locations, units, services or staff to be proposed for VR.

The HSE and Section 38 organisations (in conjunction with the HSE), will determine how the required savings will be identified and delivered in their area / organisation and how they will be facilitated, either by the use of VR or the increased capacity resulting from the implementation of Haddington Road Agreement [HRA].

It must be emphasised that this is <u>not</u> a scheme and there is no automatic right to VR; staff may be offered VR in the context of current and future business needs and service provision priorities. There is no provision to facilitate individual applications for VR from employees.

It is envisaged that the grades, services or locations offered VR will differ from area to area e.g. a small local hospital may offer VR to different grades to those offered VR in a large acute hospital etc. However HSE Regional Management / Section 38 Agencies should ensure that redeployment, in accordance with the terms of the Public Service Agreement, is utilised to maximize VR uptake where volunteers are not available in a



targeted area. In addition opportunities for cross-organisational re-deployment must be explored in order to maximise VR uptake.

The Department of Health has directed that all operational aspects in relation to the implementation of VR including the offer and payment process will be determined and developed by the HSE. The process flows and accompanying illustrations attached set out how VR will operate in the HSE and in Section 38 organisations.

The purpose of VR is to enable the HSE and Section 38 providers to facilitate the reform process and to achieve a permanent reduction in both costs and numbers employed while delivering the agreed level of service. Therefore, it will be a matter for the employer to operate VR in a way that will deliver on this requirement. HSE National Directors will give final approval to VR in all instances to ensure consistency with the Government's reform programme and employment policy.

Departures from the health service on VR should take place in a manner that maximises organisational savings following identification and approval of VR in individual instances by the employer and approval of the HSE centrally.

The HSE is required to ensure that the maximum level of VR is facilitated and that full information regarding the numbers and types of staff approved for VR is provided to the Department of Health. Each organisation is required to keep a register of relevant information in relation to the posts and employees offered and accepting VR as well as details of cost and savings.

As the purpose of VR is to achieve a permanent reduction in the numbers employed and to reduce expenditure, persons availing of VR may only be replaced by redeployment. They should not be replaced by recruitment, acting up arrangement, overtime or through agency/contract working.

Requests for clarification regarding the reform and reorganisation of services and subsequent offers of VR, from Section 38 providers as well as local/regional HSE management should be directed to the relevant HSE National Director.

Queries from Service Managers regarding the operation of VR should be directed to HSE Corporate Employee Relations Service [CERS], email $\underline{info.t@hse.ie}$. Queries regarding the processing of VR should be directed to local HR departments in the first instance.

Barry O'Brien

National Director of Human Resources

Encs:

HSE HR Circular 022/2013 Process Flow HSE Statutory Bodies Process Flow Section 38 Organisations.

