



Stephen Brown (Chief Officer)
Orkney Health and Care
(01856) 873535 ext: 2601
OHACfeedback@orkney.gov.uk

Agenda Item: 10

Joint Staff Forum

Thursday 3 March 2022

11.00am – 12.30pm

MS Teams / Virtual

Meeting Notes

Present:

Stephen Brown, Chief Officer, OHAC – **CHAIR**
Alison Skea, Corp Learning and Development
Manager, OIC
Martha Kirby, Unite Representative
Danny Oliver, Service Conditions Officer
UNISON
Ryan McLaughlin, Branch Secretary UNISON
(NHS Staff)
Jenny Fraser, Chair of Local Negotiating
Committee BMA
Fiona MacKellar, Regional Rep Chartered
Society of Physiotherapy

Lynda Bradford, Head of Community Care,
OHAC
Maureen Firth, Head of Primary Care Services,
OHAC
Martha Gill, RCN Representative
Wendy Adams, UNISON Representative
Pat Robinson, Chief Finance Officer, OHAC
Karen Watson, UNITE Representative
Caitriana McCallum, British Dietetic
Representative
Craig Walker, Senior HR Adviser to OHAC, OIC

Rachel Oliver – Notetaker

1. Welcome and apologies

Apologies from: Kathleen McKinnon, Dawn Moody, Maureen Swannie, Jim Lyon, Wendy Lycett, Ingrid Smith, Steven Phillips

Stephen welcomed all to the first IJB Joint Staff Forum, and introductions were made.

2. Minute of Previous Meeting

Not applicable.

3. Matters Arising

None raised.

4. Workforce Update

It was acknowledged that services stretched due to impact of Covid.

This agenda item is an opportunity to update all on workforce and service changes between the 2 organisations that we would otherwise be unaware of, and also an opportunity to raise any areas where recruitment is an issue, and we are struggling to fill posts.

It was noted that any NHS changes have to go through APF firstly due to legislation – workforce implications etc can be discussed here but only after discussions have first been held at APF.

OIC do not have a specific forum for consultation between Trade Unions and the employer – previously there were 2 separate Council meetings that were held back-to-back but these haven't taken place for some time. A Council section has been added to this agenda – should it be required.

OHAC has a Trade Union based service forum so there is an existing structure within the Council within each of the service areas with Trade Unions, and has been so for a number of years – it was agreed that each organisation has its own internal procedures for dealing with consultations / engagement and staffing matters etc – and noted for clarity.

The points were acknowledged and whilst there are certain agreements that won't be 'ripped up' it is hoped this meeting over the next 12-18 months will be shaped to 'best fit' all services – Stephen is willing to discuss with Danny and Craig further and acknowledge the APF procedure to Fiona.

Ryan raised concerns re Occupational Therapy fixed term contracts and secondments, there are members that are in fixed term contracts that haven't been given statutory notice or placed on the redeployment register. Ryan will contact their HR dept to ensure OHAC Managers are aware of this. Maureen raised a recent similar situation and confirmed HR are cited on this.

Wendy confirmed Ryan's comments and that staff are unsettled by this, and reiterated that this needs resolving for the staff concerned – Stephen agreed it is unacceptable for staff to be in this situation, they should have notice and we should be following due process.

Danny raised Homecare concerns - recruitment efforts recently were welcomed, however only 2 were recruited and staff are struggling to cope – understaffed and lack of training. Danny will be picking this issue up outside this meeting but wanted all to be aware of this.

There are also difficulties with people being assessed in communities for packages that cannot be provided, again due to lack of staffing.

It was also raised that the Children and Families Social Work staff team are significantly down and are currently being 'plugged' by agency and staff from other teams where possible.

Fiona commented that audit needed to see how many were on fixed term contracts or on redeployment to see where the gaps are. This will be raised at this month's APF and going forward this should be incorporated with additional narrative added to ensure duty of care and due process for staff.

The sharing of available resources for staffs' health and wellbeing was raised as being of value at this meeting going forward.

Covid query regarding post 31 March funding was raised – the position re Covid costs is expected to be finalised shortly. Scot Gov have stated there will be funding continuing into September 2023.

Martha suggested a written overview for across OIC and NHS may be useful for reporting / feeding back to other groups of staffing on any workforce issues or updates. Stephen agreed, but more thought would need to go into this as to how we put it into a meaningful and practical operation – for e.g., do we have right people in right places, do we have right establishments created, do we have the right methods of recruitment and retention etc – any ideas are welcome. It was suggested that ideas could be linked into the strategic plan.

Fiona, Danny, and Stephen will consider any comments that come forward.

5. Structure

Stephen gave background into the review and the drivers behind it, one of which is the significant deficit - financial sustainability is a piece of work that is currently being addressed.

Councillors have agreed some additional investment, and it is hoped before the end of this financial year they will agree to further investment.

Stephen had hoped to share structure charts today but due to the need for aligning with the rest of the Council there is a delay – confident that structures will now be shared Monday next week (7 March). Posts are being added into the structure which is complex due to the crossovers in our areas.

Structure will be tabled at APF on 15 March, papers will be shared prior to this – Stephen is happy to have conversations after this date to address any queries or concerns – this is about maximising our potential and to have a clearer structure going forward. Work with staff who will be affected will be scheduled. Where changes are being proposed processes will be followed to ensure these are done safely and effectively.

Danny queried what level the structure charts are aimed at, what level of management do they address down to – Unison have had concerns over restructure, it has been chaotic in some areas and the pace has been lacking. Would there be opportunity to meaningfully input before it is submitted for the Council deadline/s.

Stephen confirmed the investment has been built into the structure charts – level 2 was at Director level and didn't include any other elements of OHAC, we will be part of phase 2 and have been looking at where the gaps in services are – particularly around management and front-line staff, for e.g., we didn't have anyone specifically dealing with FOIs / SARs / Complaints or data management. We have now recognised those gaps and are hoping we will be able to address them – we have worked hard to identify and prioritise the areas of work. There will be some changes that will no doubt leave people anxious, but we will work through it to enable successful transitions. If someone has concerns, we will look at adjusting and adapting and will be as supportive as possibly can be.

Martha welcomed the positive comments re approaching change, if frontline staff are included in the process, then there will be greater 'buy in' from staff going forward; but queried how we can address the speed of changes - what processes can we embed that build in a 'sense check' from frontline staff and unions to ensure better decisions to enable greater 'buy in' from staff.

It was suggested that a plan on paper that we could feed into would be helpful – staff so far have fed back they are aware of changes but haven't seen anything they can feed into, there is not enough transparency.

Stephen acknowledged this, the issues are understood, it has been driven by the recent inspection reports and direct feedback and / or discussions with staff who have raised areas of disconnect.

Starting point will be the proposals and what are concerns / queries, what we will have to put in place to help with transitions etc – happy to have any comments or suggestions.

We have the evidence as to why we need to do this, now need to have the discussions around this which will involve those who are directly affected, and we will be thinking of how we can engage staff in this.

Managers will be speaking directly to staff using the structure charts and will be feeding back any comments. There may be some areas of change, and we will be focusing on these efforts. Stephen confirmed a paper will go to APF re the structure charts and the rationale behind the proposals to give APF the opportunity to feed into the process.

Fiona reminded the forum that in any service redesign process the status quo 'stays on the table' until all negotiations are complete – until work is completed with Trade Unions on the proposals the status quo exists.

Fiona reiterated that for NHS colleagues, if there are discussions with staff re conditions of employment and their roles (if they are changing), then staff have to be made aware they can have representation if they choose to do so, also in wider negotiations the Trade Unions have to be present. Fiona also raised that professional leadership representation has to be considered should the professional leads be involved in this process in order to ensure nothing is missed – it is important that professional oversight / overview is engaged in this process to ensure clinical governance.

Stephen acknowledged this, but raised the challenges in getting representations, and emphasised there is no change proposals to terms and conditions or peoples roles, with 2 exceptions at a senior level, and work is underway on these and Trade Unions will be involved. For the rest of the staff, it will not make a difference to their terms and conditions.

The delay was acknowledged but it has been more complicated to pull together than previously anticipated – Stephen apologised for the delays, which have not been deliberate.

Fiona emphasised the need for communication with staff, lack of communication is not good for staffs' levels of anxiousness and overall mental health.

Danny raised concerns re the significant changes to the structure that will need to be taken into account and gave examples of posts that had been removed previously without being part of any restructures at all. There are areas of concern that urgently need more resources, a lot of staff will have clear ideas as to where funds need to be spent – what is actually on the proposed restructure might be different to the ideas staff have - will there be any scope to try to 'marry these up'. Ideally union members should be able to put forward proposals as to where resources are needed.

Ryan added that everyone understands why this is being met with suspicions at best, but welcomes commitment for better communication and engagement with colleagues around the table. If we are getting it right, we need to work on the structure by talking to the frontline staff first and foremost to help us address where investment is needed.

Stephen acknowledged the frustrations in services and confirmed we will be looking at how we can best align our services – much of the background work to date has already been driven by frontline staff. If all goes to plan an additional £500k of investment will be coming into Health and Social Care which wasn't there before. This is being done with the best of intentions to get us to a position of strength, it is our prerogative and responsibility to try to address the gaps, hopefully when structures are shared it will be clear why decisions were made in those service areas.

Fiona reflected that if we don't have the right staff on the ground then it all bounces back to areas such as Primary Care who are then 'firefighting' unnecessary admissions etc for example, which also impacts on the GP workforce too – impacts are felt across services.

Jenny asked that GPs and Dentists are included in discussions, as they tend to not be included in communications across the service – this was acknowledged by Stephen.

6. Strategic Plan

Stephen gave brief outline of Strategic Plan work, the update of which is due next month (April). Consultations / pieces of work have taken place with partner organisations and members of the community, and these have been fed back into this piece of work.

Stephen recommended that all take a look at the Joint Strategic Needs Assessment as it is a valuable read about Orkney and its demography.

Reoccurring 5 themes have been chosen for the Strategic Plan, as follows:

- Mental health and wellbeing
- Carers (specifically unpaid carers)
- Older people (in particular areas such as dementia and end of life care)
- Community led support and engagement
- Prevention and early intervention

It is anticipated that these themes will be shared more widely moving forward.

Stephen is keen to hear from people as to whether these priorities feel right or if there are any gaps.

Fiona agreed with priorities but there is the generation that are working carers which we also must bear in mind, with regard to their health and wellbeing and good quality employment practices to keep them well at work, otherwise the care system may be impacted should they become unwell.

Stephen is clear that inequalities should be recognised going forward, in particular with the increasing number of people in work who are facing financial difficulties. There is a Community Plan Partnership looking at peoples' terms and conditions and job opportunities and how to strengthen this, along with looking at carer friendly policies across OIC and NHS – these are issues we need to think of moving forward.

7. Structure and Membership of the JSF

Not discussed.

8. Terms of Reference / Membership

It was noted that the ToR has been circulated to all prior to today's meeting, this can be referred back to after a number of these meetings have been held to see if it is still fit for purpose.

Stephen is content with the ToR that have been shared in light of discussions that have taken place today - they will be reviewed on a regular basis.

9. AOCB

None raised.

10. Date and Time of Next Meeting

Date TBC for next IJB JSF meeting.