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UNISON COMMENTS ON THE INTRODUCTION OF A HOME CARE REABLEMENT SERVICE

Introduction

Existing Home Care staff have questioned why they were not involved in and consulted on the development of the proposals for this service. They are at the front line, carrying out the work with service users, and they already provide a Reablement service. Therefore, they may well have had useful knowledge that could have improved the proposals.

Management have been keen to state that this is not a "restructure" of the Home Care service; rather, that it is the closure of that service and the introduction of a new one. This has then been used in an attempt to suggest that some current Home Care staff may not be "suitable" for the "new service" and to justify creating barriers to them applying for posts within it. We do not believe that this is backed up by the available evidence. During the consultation, Home Carers made clear that they already carry out Reablement work within their current roles – that is, working intensively for short periods with people who have come out of hospital in order to maximise their independence, with a view to trying to ensure that they no longer need long term care support when the period of input has ended. The Home Care page on Haringey Council's website states that *"The Prevention and Enabling Team provides short-term intensive rehabilitation and support so that older people can regain skills to remain independent."* The council's service user guide for Home Care states that all staff receive specialist training in rehabilitation and enabling. Although the word "reablement" is not used, this is clearly what is being referred to here.

The Domicilary Care National Minimum Standards state that support is provided to help people to *"maximise their own potential and independence."* The standards dealing with Autonomy and Independence state: *"Care and support workers carry out tasks* with *the service user, not* for *them, minimising the intervention and supporting service users to take risks."* There is reference to the *"need to maintain and promote independence wherever possible, through rehabilitation and community support."* A further extract states: *"The purpose of the provision of personal care to people who are living in their own home is to sustain and whenever possible improve their independence. As well as ensuring their involvement in all decisions relating to their care this also means involving them and supporting them to assist in the care activities themselves rather than increasing dependence by taking over and doing everything for them."* The standards contain other references to promoting independence, and also refer to *"a short period (normally no longer than six weeks) of intensive rehabilitation and treatment to enable service users to be able to return home following (or to avoid) hospitalization, or to prevent admission to long term residential care."* This is basically a summary of what Reablement is. It should be noted that this document was written in 2003

One of the features of the “new service” is that long term cases, those where support is needed after the six-week Reablement period, will be passed to private sector agencies. Our understanding is that this already happens in the current service, further undermining the claim that this is a “new service”.

A study by researchers at the University of York, *“Home Care Re-ablement Services: Investigating the longer-term impacts”*, states that Reablement is *“a particular approach within Home Care.”* Reablement is clearly an integral part of Home Care, and it already takes place within the current Home Care service in Haringey. More generally, the concepts of Reablement – intensive rehabilitation to prevent the need for further input, maximising independence, trying to support people to do things for themselves, flexibility to respond to changing needs - are firmly embedded within the existing concept of Home Care, and have been for some time, as shown by the extracts from the National Minimum Standards. The change that management are proposing is a narrowing of the current service, from providing Reablement plus other forms of Home Care to providing Reablement only, and a reduction in staffing levels. This is not the closure of Home Care and the opening of a completely new service; it is a reorganisation of the current Home Care service.

This leads to the question of why management have been so keen to try and claim that this is a “new service”. This is perhaps linked to management putting what amounts to barriers in the way of current staff applying for posts in the Reablement service. Those barriers include the requirement to be a car driver, a lack of flexibility for staff in terms of working hours, and the proposal for a written test as part of the selection process. Management are fully aware that these issues will put some people off applying or simply make it impossible for them to apply. In addition, management rhetoric during the consultation has clearly been designed to put staff off applying; for example, there have been repeated pronouncements that “some staff may not want to work in this way” and at one meeting staff were told that “we can’t base the service around your child care responsibilities.” Management have also spoken about “needing the right people for the job”, which suggests that some of the current staff may not be “right.” This is an unfair attack on a highly skilled, committed and experienced group of staff.

The fact is that the current workforce would be more than capable of carrying out the requirements of the new roles. We will not accept any of them not being successful in applying due to failing to meet unnecessary requirements, or because management do not consider them to be “right” for the service, an extremely vague concept that is open to abuse. We sincerely hope that management are not attempting to use this situation to get rid of staff they do not want. If any staff have capability issues or training needs, then these should have been addressed before now. Reorganisations of services (which this is, despite what management say) are not opportunities to address these issues by pushing staff out.

In the study referred to above, all five Reablement services that were looked at retrained their existing Home Care workers to take on new roles.

Ringfences

Details of who is in what ringfence have not been provided, despite the fact that this information is essential to any consultation. This should be provided as soon as possible. We also need confirmation of how many posts there will actually be, rather than just the number of full time equivalents.

There is some confusion over whether the ringfences for the Community Reablement Worker and the senior are open or closed. The documentation states that they are open, but management have said at consultation meetings that they are closed. We are concerned that there is a fundamental misunderstanding of what open and closed ringfences are. The only justification for having an open ringfence would be the proposed change in working patterns. Indeed, when faced with Home Carers' protestations that they already carry out Reablement work, this has been the only justification that management have been able to come up with for describing this as a "new service." Other than a proposed change in working patterns, the skills that will be needed for Reablement are essentially Home Care skills. It is true that the roles will involve staff carrying out some tasks that they are not currently expected to do, but training should be provided for these. It will also be the case that the new roles will require more of an intense focus on certain skills than others, particularly with regard to encouraging people to do as much as possible for themselves. However, the skills still sit comfortably within the term "Home Care."

Also, it is an unfortunate fact that some people who come out of hospital are not going to be able to regain the skills they had, and sadly some may not improve to any significant extent. For these people, staff will mainly just be providing personal care rather than Reablement, therefore some of what could be described as the more "traditional" Home Care skills – doing things for people who can't do them themselves – will still be relevant. The University of York study found that workers in Reablement services were still doing a significant amount of "traditional" Home Care.

Existing Home Carers are a highly skilled and committed group of staff who would be entirely suited to working in the Reablement service, particularly as they do such work already to some extent. If any additional skills are needed in the new role, then we believe that current staff could develop those skills with training.

Regardless of whether the ringfences are actually open or closed, we expect all the posts to be filled by existing Home Care staff, as the jobs are not substantially different to what they do now. We will not accept any Home Carer not being given a job because they do not drive, they need some flexibility in their working hours, or they have some literacy issues.

Selection process

The documentation states that selection will be by interview and a written test, and that there will also be an application form. As I have stated, staff are already carrying out Reablement tasks to some extent, and this is not an entirely new service. Therefore, staff should not have to complete a written application form. This is simply management putting up an extra barrier to prevent staff from applying. Staff should merely have to express an interest in the posts. If there are sufficient jobs for the number of people applying, then there should not be a selection process and staff should be slotted into the posts, as they are not substantially different from their current roles. In this situation, what may be appropriate would be for management to have a discussion with individual staff members about hours/working patterns, training needs, the requirements of the senior role, etc. This should not be a formal interview. The only reason that a selection process should be used is if there are more people applying than there are posts.

In terms of interviews, the proposal is that they will be *"based on the new job requirements and commitment for participating in furthering the aims of the new service."* This is unacceptable. The jobs involve working in a Reablement service, so the interviews should be about that. *"Commitment for participating in furthering the aims of the new service"* is

vague and ill-defined and therefore difficult for staff to demonstrate or for management to measure objectively. This is open to abuse, and there is a risk that this will be used to exclude people who management have already decided that they do not want in the service, or that staff will be prevented from being successful because they are deemed to not have the right “attitude”, a particularly nebulous concept. Interviews should only be used to pick the best candidates from those who have expressed an interest, on the understanding that all the candidates have the ability to do the job and there are simply too many people applying for the available posts.

In terms of the written test, our members have made clear that they do not accept this as a valid form of selection, and they overwhelmingly rejected it the last time it was proposed. A written test is not acceptable for a practical job such as this. We are concerned that there is a prejudiced assumption here that Home Carers will have literacy problems. There was a recent restructure of Care Management, where the roles require a much higher level of literacy, but there was no written test; why should Home Carers be treated differently? The fact is that Home Carers have to read and write in their job now; we accept that the new jobs may involve a larger element of reading and record keeping, but not to a substantially higher level than currently, and staff will still mainly be carrying out practical tasks. Also, management have claimed that most (if not all) staff have NVQ level 2; completing this would require a reasonable level of literacy, which further undermines the case for having to test Home Carers’ literacy before they take on new roles.

Management have openly claimed during the consultation that literacy is an issue for some staff. If management are aware that some staff have difficulties with literacy to the extent that it affects their ability to do their job, then these issues should have been addressed by now. Managers should have sensitively raised this, and offered a literacy assessment and then training through a Skills For Life programme. This training is free and readily available, and joint union/management Skills For Life work has taken place successfully with other employers in both the public and private sector. UNISON has tried for several years to get the council to take this seriously, with only partial success. In Adults, interest from management seems to have been minimal. Therefore, if it is being claimed that some staff do not have the required literacy levels to work in Reablement, we would say that this means that management have failed in their duty to ensure that staff have the necessary skills to do their job, they may have put both staff and service users at risk, and they have done so despite the fact that through Skills For Life there is a well-established way of addressing these issues.

Given that this is a management failure, no member of staff should end up without a post in the new service due to possible literacy issues. What we are suggesting is that management consider offering literacy training to staff now, in advance of the Reablement service being set up. This can be a contentious and upsetting issue for people, so it needs to be handled extremely sensitively and it needs to be emphasised that this is not about capability or being punitive. The union would be more than happy to provide support in explaining the benefits of Skills For Life training to staff.

Therefore, we are formally stating our objection to a written test being part of the selection process.

Flexibility

Staff have expressed deep concern at the proposed working hours and patterns. Some staff currently have certain work patterns due to caring responsibilities or other commitments. Some work part-time and have second jobs, which they need in order to make a reasonable living. The proposal is for all staff to be working shifts on 30 hours a

week contracts in a service that is provided between 7.00am and 10.00pm. This will be impossible for many staff. In addition to causing major difficulties to those who care for dependents, working 30 hours a week will mean that some staff will not earn enough to survive, yet it will be difficult for them to have a second job. Management said to staff during the consultation that "we can't run the service around your child care needs." Other inappropriate comments made by management include "nobody is forcing you to apply" and that staff should "sort out their child care arrangements" in advance of the service starting. The comments are unacceptable, especially to an almost entirely female group of workers, they show a lack of understanding of flexible working and they have caused a great deal of anger amongst staff. They feel that they are being asked to show flexibility whereas management are showing none. Many longstanding, skilled and committed staff may find themselves unable to work in the service due to this rigidity from management, and it would be a significant loss if such staff were prevented from taking on the new roles.

We do not expect the service to be run around the needs of staff. All we are asking is that management offer some flexibility as well as demanding it, and that they realise that in the modern world, good employers are offering working patterns that allow staff to have a positive work/life balance, recognising that this boosts morale and productivity. Legislation in recent years has also promoted greater flexibility at work. There is a level of agreement between unions and employers' organisations on the benefits of flexible working, and even the coalition government seems to be intending to extend workers' rights in relation to flexible working. In 2011, it is simply unacceptable to say to a group of almost entirely female workers "this is how we require you to work, take it or leave it" without looking at other options. Management have stated that their proposed working patterns are similar to those used in residential care, which is correct. However, even in those services I am aware that some staff have a variety of flexible working arrangements without affecting service delivery.

We will not accept staff being denied posts in the service because they require a flexible working pattern or they need to work less than 30 hours a week, without some effort being made to see if these requirements can be met. Therefore, we are asking for management to enter into a negotiation with staff to find out what their current working arrangements are, and whether these or an acceptable variation on them can be accommodated in the service.

Transport

The management report states: *"In order to minimise travel time between service users, where at all possible, it is proposed that Community Reablement Team workers will be car drivers, or have alternative modes of transport to enable them to move between service users with maximum efficiency. Routine use of public transport will be discouraged for that reason."* This does refer to "alternative modes of transport", but in reality what this amounts to is a requirement for staff to have a car and be able to drive. This is an unreasonable and unnecessary requirement. Management have also said that they will only pay casual car allowance, when staff would clearly meet the criteria for the essential allowance. Haringey is a relatively small, urban borough with comprehensive public transport links. The proposal is to split the borough into East and West areas, as happens currently, with these being subdivided in smaller geographical areas. Although I assume there may be occasions when staff may need to cross boundaries, they will not routinely face having to travel from Tottenham to Highgate, for example. Therefore, the distances that staff will have to travel, which will normally be within one section of the East or the West, should be manageable by public transport. Traffic jams do affect buses and cause delay, but they affect cars in exactly the same way, and car drivers also face the added

problem of finding somewhere to park, which can take time. Having a parking permit does not always alleviate the problem of actually being able to find a space.

The council is committed to the green agenda, which includes reducing car use due to the damage that this causes to the environment, and promoting use of public transport instead. Given this, it is extremely difficult to see why management would come up with a proposal that contradicts this unnecessarily.

We are concerned that this is a further issue that will have the effect of putting some staff off from applying for posts in the service. This requirement is unnecessary and unfair and should be removed.

Seniors/management responsibilities

The service will have what management have described as a “chargehand” system, where a senior worker at the front line will have responsibility for checking that all tasks are covered, checking work standards and alerting Team Leaders to any issues. We would like to know what evidence there is for this being a good way of running a Reablement service. Although it is difficult to say at this point, we are concerned that there may be a lack of management support for both the Reablement Workers and the seniors.

Monitoring will be needed to ensure that the tasks that these staff will be expected to do are appropriate to their grade, and that we avoid a situation where tasks that should be carried out by managers are simply delegated to seniors. If this happens, and/or if seniors face excessive workloads, both staff and service users could be put at risk.

It is proposed that seniors will carry out work with service users in addition to having the extra responsibilities. The balance between the two needs to be reasonable and realistic. Please confirm what percentage of the seniors’ time will be spent on front line work and on supervisory responsibilities.

We are concerned about the number of seniors (12 FTE) compared to the number of Reablement Workers (14 FTE), and we believe that this needs to be reviewed. This would mean that almost half of the front line workforce would have some supervisory/management responsibilities. If the balance between these responsibilities and front line duties is wrong, and seniors have less time for the latter, then this may lead to excessive workloads for Reablement Workers and/or capacity issues in the service. Also, current Home Carers will not have any supervision/management experience, and therefore may be put off applying for these roles, leading to unnecessary redundancies and the loss of excellent and committed staff. On this point, some further explanation of what the role will actually involve may help to avoid this happening.

There is reference to the Community Reablement Officers "directing their own work" and also to front line staff meeting "to co-ordinate day to day service provision and client priorities." I think there needs to be clarity on what the responsibilities of front line staff will be. These staff will need to have proper support, direction and supervision from a fully accountable manager, and sufficient managers will need to be provided for this.

Other issues

1) We will need more details on any proposals to require staff to, in effect, clock in and out of service users' homes to generate performance data etc. This may constitute excessive and unreasonable monitoring of staff.

2) It is not reasonable to require staff to have a clear CRB check, and this is not council policy. In particular, such a requirement may lead to discrimination or other unfairness. What matters is whether a caution or conviction etc. is relevant to the post. If it is not relevant, then it should not prevent appointment.

3) There is mention of staff working split shifts and long days. We will need to have further discussion if this is a serious proposal. Shift work generally can have major health and safety implications for an individual, and these can be significantly exacerbated by working split shifts or long days.

4) The facilities for breaks will need to be suitable.

5) We need to see an Equalities Impact Assessment for the issue of requiring workers to be car drivers, which is what the management proposal on transport amounts to.

6) Consideration needs to be given to allowing service users longer than six weeks of input if it is reasonable to believe that they will benefit from this. In the University of York study referred to above, all five services that were looked at allowed for this.

7) Staff have pointed out that there can sometimes be delays in delivering equipment to service users, which can delay their recovery. An example was given of someone who was struggling at home and was fine once a grab rail was fitted, but had to wait three weeks for it. It seems that quick delivery of equipment will be key to this service.

8) Management have claimed in consultation meetings that this is a closure of what is an extremely important and valued service. Consequently, the decision on this should be taken by Cabinet, not an individual Cabinet member.

9) If this proposal goes through, the result will be that most service users will receive Home Care from private agencies rather than the council. Although some individual workers used by them may be skilled and committed, private agencies generally have a reputation for poor wages and working conditions, not vetting or training staff, cutting visit times, high staff turnover and generally delivering poor quality services. UNISON objects to the move towards making greater use of private agencies in the provision of Home Care, and believes that it should be provided by in-house services, which are usually of higher quality.

Job description/candidate specification comments

Community Reablement Worker

NVQ2 in care or equivalent essential, NVQ3 an advantage – Council guidelines on candidate specifications state that there should only be a requirement for a qualification if this is a statutory or otherwise genuine requirement. Previously, there was a requirement for employers to train all care staff to a minimum of NVQ level 2, but this has now been removed from the new national minimum care standards. UNISON supports the reinstatement of this requirement, but at this point it no longer exists. The council should offer a commitment to train all staff to NVQ level 2, and perhaps it would be better to say that staff should either already have the qualification or be willing to obtain it, rather than saying that having it is essential in order to even be considered for the job. In terms of NVQ level 3, staff have been asking to do this and have been refused. This is certainly not an essential requirement for the job, so it should be removed from the candidate specification. No staff member should be prevented from applying for a post because they

do not have NVQ level 2. Any staff who do not have this qualification should be offered the opportunity to obtain it as soon as possible.

Senior Community Reablement Worker
The job description is almost exactly the same as for the Community Reablement Worker. Although a job description does not have to list every last detail of what is involved in a post, perhaps some further explanation of what extra tasks are involved in this role are required, particularly so that staff can make an informed choice about whether to apply for it.

Team Manager
To have overall responsibility for leading a team of Reablement Workers to ensure that a high quality individualized reablement service is provided, with the overall goal of ensuring service users have regained full independence within 6 weeks – It is clearly not going to possible to "ensure" that all service users regain full independence within 6 weeks, so perhaps this should be expressed as "aiming to ensure." (This also applies to the Team Leader post).

A good standard of general education – Vague requirements such as this are unhelpful. What constitutes a "good standard of education" and how is this measured? This may discriminate against some people who have not had full access to formal education or the opportunity to benefit from it. A requirement such as this should be expressed in terms of the skills needed; form example, if management want someone to be literate and numerate, they should simply say that. (This also applies to the Team Leader and Administrator posts).

Administrator
To develop and implement administrative systems for the enhancement of the service, including the collection and analysis of data for quality management purposes – Please clarify to what extent the postholder will be expected to develop such systems.

To carry out any other duties that may be delegated by managers and which are consistent with the basic objectives or duties of the post – Any such duties should also be consistent with the grade of the post.

Ability to devise and maintain accurate electronic/manual record keeping systems – Please clarify to what extent the postholder will be required to devise such systems.

Recognized typing, word processing and spreadsheet qualifications would be useful – Please see earlier comments regarding council guidelines on when it is appropriate to ask for qualifications. Are qualifications for these duties really necessary? Perhaps it would be better to state the skills needed, e.g. Ability to use Excel spreadsheets.

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