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Dignity and Respect through Personal Service

Dear Chris,

Management Response to the Trade Union Comments on proposed new reablement service, received via e-mail dated 30 August 2011

In general, setting up a Reablement service enables the Council to improve service and reduce non contact 'down' time. The model is based on best practice from elsewhere and development work carried out last year with CSED. The purpose of the consultation exercise is, in part, to obtain feedback from staff on the initial proposals and to adjust them where possible, especially where those comments are felt to improve the model. There have been some adjustments to date following comments received, and that process will continue into the future.

The biggest change for future staff in the new Reablement Service, as opposed to current staff in the Homecare Service, is that, due to the nature of Reablement, we need to employ staff to cover patterns of work that enable us to provide reablement tasks at times that are relevant for service users as well as spreading work across the day in a more even manner. By bringing in the new working arrangements we are not only able to achieve this aim but at the same time avoid the significant amounts of non-contact 'down' time which is currently experienced in Homecare due to the mismatch of required service user contact times with the contract hours and working arrangement for home carer workers. There are occasions where the home care service has had to refuse hospital discharge referrals as a consequence. You will see the wide range in available contracted hours in the table below, which makes the rostering task extremely difficult.

Current Homecare working hours

Number of	Number of	Total	
Hours	Staff	Hours	
36	2	72	





413.75	63	1514.75
12	1	12
14	1	14
15	3	45
16	3	48
20	12	240
24.25	1	24.25
25	31	775
25.5	1	25.5
28	1	28
30	1	30
30.5	1	30.5
33	2	66
34	1	34
35	1	35
35.5	1	35.5

A sample rota of how Reablement Workers would be required to work in the new service is as follows.

Sample rota for reablement service

Name	Mon	Tues	Weds	Thurs	Fri	Sat	Sun
Anne (S)	7-2	3-10	8-3	7-2	3-10	off	off
Fred	8-4	7-2	off	off	3-10	2-9	7-2
Jane (S)	3-10	7-2	7-2	off	off	7-2	3-10
Olu	2-9	8-3	8-3	3-10	7-2	off	off
Mary (S)	8-4	2-9	7-2	off	off	3-10	7-2
Monika	a/l	off	2-9	2-9	off	8-3	8-3
Rita	8-4	off	3-10	8-3	8-3	off	3-10

(S) = Senior reablement worker

Flexibility

Given the above, we do understand that some staff will not feel able to undertake the proposed new working arrangements in the reablement service: where this is the case and where we are unable to redeploy these staff into other positions, a redundancy situation will exist.

We have taken on board the points that you have made and will continue to plan these changes in order to obtain a better understanding from staff as to what hours, days and times they can and cannot work. We can then make individual decisions with them on working arrangements, in the wider context of the Councils flexible working arrangements. However, these will have to take into account the needs of the whole service rather than centre on meeting individual needs in individual cases. This will enable us to take a balanced view on all the individual requests, meeting them were possible and thus avoid more redundancies than are necessary.





We have also reviewed the suggested contract hours and are no longer tied to the requirement of all front-line staff having to work 30 hours per week. We are willing to consider employing staff in the new service that are able to work 6 or 12 or 18 or 24 or 30 hours per week, provided that when we look at the totality of the coverage we are in a position to cover the period from 7am to 10pm, 7 days a week (our calculations show that this will mean that we will have available the equivalent of 17.8 'lots' of 6 hour shifts over any one day to provide service to an average of some 46 service users at any one time) and we will continue to work with staff to gather the information to assess how to achieve this. This adjustment is in direct response to the comments that you have made.

Staff will have their rotas issued in advance and will have the facility to request specific days off in advance and to swap shifts with colleagues as currently works well in residential care. Managers will be expected to be as flexible as possible to that end.

However, there will be constraints on our ability to agree individual working patterns. If we are unable to agree individual working arrangements staff will need to understand that this could lead to their redundancy. As a consequence, staff will need to review what they can and can't do very seriously and realistically in the light of this. We will do our best to communicate this as effectively as possible so that staff can make well informed choices regarding their future.

Ringfence

Given the above the most significant change is to the contracted working arrangements, it is for this reason we cannot consider these as a closed ring fence. Home care workers are well trained and come with a proven track record and we will be positively looking to appoint as many of these staff as possible, provided they can cover the required hours.

Selection Process

We currently employ 63 home care workers. It is not possible at this stage to say how many staff are likely to be able to fulfil the new working arrangements as that will be an individual decision on their part, and they have therefore been requested to express initial interest so we can scope the potential size of the selection pool.

Once we gather that information from staff, if we can see that it is the case that there are less staff than there are posts we can review the method of selection; however if it is the case that we have more staff who are able to work the new rota arrangements than there are posts available, then we will have to make evidenced selection decisions and for this reason is it important to facilitate this, albeit in a proportionate way.

If that is the case, staff will not have to complete a full application form; however they will have to complete the form that is contained in the reorganisation procedure. We will send out clear instructions as to how to complete this and advice will be available should that be required. We will be looking for factual bullet points rather than long paragraphs. We will be assessing people's ability to evidence the requirements of the new roles as part of the selection procedure, which will include their ability to write short incident reports. This will be tested by conducting a very short written test.

There is no assumption that these staff have literacy problems; if literacy had been an organisational problem for individual staff, this would have been addressed previously. It is simply a question of being in a position of being able to evidence decisions and to justify appointing some people as opposed to others, should there be more applicants





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than there are posts, a situation which could lead to some staff being made redundant and managers having to justify why some staff were selected over others.

In summary, if we can reach the position where there are fewer applicants than posts we can potentially avoid a formal selection process, using the redeployment processes instead; however, where there are more applicants than posts we will not be able to do so.

Transport

We have noted your points and can confirm that being able to drive and having a car are not essential selection criteria.

Seniors/management responsibilities

There will be 2 patches, East and West. Each patch will have just under 9 staff on duty per day, some on the morning shift and some on the evening shift. At any one time the service as a whole will be working with 46 service users on average. This is based on 400 discharges per year and averages a potential input of 2.3 hours/person/day, not allowing for varying amounts of travelling time between clients.

There will be at least one Senior Reablement Worker on each shift and they will be working as a full member of the reablement team. The Seniors are workers in their own right and it is estimated that their time will be split approximately 95%/ for direct reablement tasks and 5% for early alert of front line problems/difficulties to the Team Leaders in the office where it not possible for them to resolve the problems themselves. In such a situation, the Team Leaders in the office will be expected to respond to the alerts, in liaison with the Senior

This system will work if the staff that are appointed to the Senior posts possess the necessary skill set and the ability to make decisions, as evidenced in their having achieved NVQ3 in care or equivalent. Where staff do not possess the NVQ3, they may still be appointed to a Senior post but will be expected to have undertaken and achieved the NVQ3 qualification within eighteen months.

Other Issues

Point 1

We will provide more details on electronic systems as they become available, and should it be decided to use them.

Point 2

The current procedure with regard to CRB checks will be applied. Where a CRB check is not clear, a management decision will be made in each case as to whether the matter of concern is relevant to the job the individual is doing.

Point 3

There is no plan for there to be a requirement to work routine split shifts or long days. In very specific circumstances this could present as a possibility, however once again we would stress this is not planned as a feature of the rota pattern. If and when this ever does become necessary on one-off occasions, we would seek volunteers.

Point 4





Facilities for breaks will be suitable. Each team will work from a central sheltered housing block on their patch which will have toilets and facilities for making hot drinks available.

Point 5

It is not a requirement for staff to be car drivers in the new reablement service

Point 6

Service users will be <u>only</u> given longer than 6 weeks input (maximum 8) if managers are confident that the additional period of input will result in them not requiring any service at the end of the extension.

Point 7

It is agreed that prompt assessment and delivery of equipment is key to an efficient reablement service. We are hoping to train the Senior Reablement Workers as 'trusted assessors' with regard to provision of basic equipment such as bath seats, chair raisers etc. Hospital discharge clients, which will comprise all the reablement service clients, already get priority for the provision of items such as grab-rails, which can be fitted within 5-7 days

Point 8

Noted

Point 9

Noted

Comments on Job Description/Candidate Specification comments

As a general point, the Job Descriptions for all roles will be amended to reflect comments received during the consultation from staff, the trade unions and other key stakeholders, before they are finalised. They will then be scrutinised to ensure such changes do not affect the current grade.

Reablement Worker

To the best of my knowledge, the vast majority of staff in the current home care service have already achieved NVQ2 in care. We will ask for the formal qualification where it is justified or for the willingness and ability to train for it where it not a justifiable requirement for staff to have this in the first place. Please see earlier comment about evidencing and justifying selection decisions.

Senior Reablement Worker

An estimated 95% of the work of the Senior Reablement Worker will be the same as the Reablement Worker, hence the similarity in job descriptions. The extra tasks and roles are outlined in the job description and relate to the early alert/liaison role with Team Leaders which is referred to earlier.

Team Manager

We will make the change that you have suggested.

Administrator





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The systems to which you are referring are manual, electronic filing and other systems and are intrinsic to any administrative role. They are commensurate with the job evaluated grade and will be carried out under the direction of the Team Manager.

Thank you for your comments which we have considered and used to adapt our plans, so far as we are able to.

Your comments and this response will be appended to the report to be considered by the Cabinet Member, Cllr Dogus, who will be dealing with the home care and reablement proposals as a Cabinet member sign-off. When we obtain the final decision, I will let you know.

Yours sincerely,

Len Weir Head of Service



