Welcome & Apologies

Apologies were received from Sheena Craig, Jessie Farquhar, Alison Graham, Derek Leslie, Lynn Marsland, Bill McKerrow, Ken Proctor, Hamish Stewart, Philip Walker and Ron Ward.

Minutes of Meetings Held on 18 February and 15 April 2005

The Pay Modernisation Board approved the Minutes.

Matters Arising

3.1 Agenda for Change Progress and Planning Report

On the point raised, Donald Shiach advised that the Progress and Planning Report in respect of Agenda for Change was submitted to the Project Team and stated that this could also be submitted to the Area Partnership Forum (APF).

The Pay Modernisation Board Noted the position.
3.2 Waiting List Initiative

Susan Eddie advised that she would furnish the Chair with a copy of her letter to the Scottish Executive Health Department (SEHD) regarding the above subject. Susan advised that SSU were working toward providing extra capacity in two services in particular, including plastic surgery to eliminate as soon as possible payments for Waiting List Initiative working outwith normal hours. Chris McIntosh confirmed that this meant no further payments to staff outwith the Whitley arrangements.

In relation to elimination of those additional payments, Ray Stewart stated that as this related to equity for staff; representatives should have been involved in discussions. In some cases staff were already working at weekends without additional reward.

The Pay Modernisation Board otherwise Noted the position.

3.3 Job Matching Process

In response to Chris McIntosh, Donald Shiach advised that the Workforce Planning Group had subsumed this work commissioned by the PMB. He confirmed that a report could be submitted from this Group to the Pay Modernisation Board (PMB) as appropriate. Anne Gent advised that the Group should report to the Staff Governance Committee with a report to the PMB for information purposes.

Ray Stewart suggested that the Workforce Planning Group be opened to Staff representation.

The Pay Modernisation Board Noted the position.

4 DELIVERING THE BENEFITS OF PAY MODERNISATION – IMPACT OF THE MODERNISATION PLAN

There had been circulated report detailing proposed way of working in relation to identifying those roles in the organisation that could need to be changed as a result of service modernisation. Lynn Marsland had written to all project leads asking them to identify where there would be an opportunity to influence role development. After meeting these project leads a plan would be developed to redesign the roles identified and benchmark this against the Workforce Baseline. Helen Spratt stated that the discussions held would relate to defining new roles in the organisation. This would allow the continuation of the mapping exercise and consequently allow clarification of the existing position for roles where tasks not integral to posts were being undertaken. In this regard both Clinical Directors and Staff Representatives would be involved.

Adam Palmer expressed concern that the advice given to his members was that Job Descriptions for AfC had to be based on the position as at 1 October 2004 and not what might be the case in the future. Donald Shiach advised that this interpretation was correct, however, there were people who were undertaking duties, without the support of Managers, which were not integral to their posts. In these circumstances the additional tasks should not be included in the Job Description and was an issue for the relevant Managers. All descriptions must relate to agreed job demands as at 1 October 2004.

Ray Stewart advised that interpretation of guidance on completion of Job
descriptions was crucial and agreed that this was not an opportunity for staff to add to or delete from their list of agreed tasks or duties. At this time the consequences of AfC, such as grade compression, required consideration prior to identification of new roles. Christopher Smith commented that staff were entitled to have their job description reviewed at any time, not just in terms of AfC, and that this happened regularly when vacancies were advertised. Hamish Johnston confirmed that the circumstances of staff being reluctant to sign off Agenda for Change job descriptions were monitored by the Project team as a matter of course. Regarding the workforce planning activity currently being undertaken by Lynn Marsland he said that this was prospective and did not directly affect people currently in post or current roles.

In conclusion, Chris McIntosh stated the requirement of the PMB was to ensure that appropriate systems were in place to help deliver the benefits of pay modernisation. In this respect the mapping process would be crucial and it was likely that some unique situations would be highlighted as a result. She expressed satisfaction with the work undertaken to date.

**The Pay Modernisation Board:**

- **Noted** the proposal for using the Modernisation Plan as a focus for benefits realisation.
- **Noted** the progress to date, and the issues raised regarding Agenda for Change job descriptions.

5 **CORPORATE OBJECTIVES – ROLE DEVELOPMENT AND PAY MODERNISATION**

Anne Gent advised that this matter had been remitted to herself, Chris McIntosh and Derek Leslie. The Modernisation Plan now related back to the Corporate Objectives and the task now was to look at Benefits Realisation in the same way. She said that this work linked to that being undertaken by Lynn Marsland in relation to Benefits of Pay Modernisation, and she recommended that the two assignments be integrated into a single one.

**The Pay Modernisation Board:**

- **Noted** the position.
- **Agreed** to integrate the work previously delegated separately to Lynn Marsland and to Anne Gent/ Derek Leslie/ Chris McIntosh.

6 **CONTRIBUTION OF NEW EMPLOYMENT CONTRACTS TO SERVICE MODERNISATION**

There had been circulated a report outlining the way in which the new employment contracts could contribute to and realise benefits for service modernisation; and the main contract features that would allow this to be achieved.

In terms of both Local and NHS Strategic Objectives, Hamish Johnston advised that the new contracts would allow Boards to consider different ways of delivering services and that effective implementation of Agenda for Change would be the first step in this process. Hamish further advised that contracts would operate as levers to allow changes to services, e.g. with Consultants’ job plan reviews being linked to activity targets thereby giving the machinery for the
re-prioritisation and transformation of services in tandem with changes facilitated by the GMS contract. In terms of GMS contracts, the Quality and Outcomes Framework (QOF) switched rewards from inputs to outcomes, and Enhanced Services could be contracted to general practices as required. As the Kerr Strategy sought to provide more services in primary care more control was offered through the tools in the GMS contract. Salaried GPs and the ability to contract with practices, not individual GPs now brought a range of professions into the equation. Agenda for Change, once implemented, provided an opportunity to create and reward training for new roles in this environment.

Chris McIntosh stated that the report would be a useful document that helped staff see what was driving the new contracts, and how they could be used together. Chris Smith suggested that for technical reasons the title of the paper should be changed to “Contribution of New Contractual Arrangements...”

The Pay Modernisation Board Noted:

- How the new employment contracts could contribute to and realise benefits for service modernisation.
- The main contract features through which this could be achieved.

Helen Spratt left the meeting at 10.50 am.

7 SSU COST RELATED EFFICIENCY SAVINGS

The Pay Modernisation Board Agreed to consider this Item in light of the nature of the subject, as raised by Susan Eddie, SSU General Manager.

Susan Eddie advised that having been requested to find a range of cost related efficiency savings within SSU amounting to £2.8m, with minimum associated impact on patient care; she had pinpointed two areas relating to PIN Policies that she thought needed consideration. These related to the application of the Parental Leave and Carers Leave Policies. Whilst Staff Governance was an important issue, the overriding priority at that time was to meet financial imperatives. In bringing forward these suggestions there was a desire to be open and transparent when considering difficult decisions. To date discussion had been held with management teams but not staff representatives.

Susan thought that Parental Leave was proving to be a policy that was difficult to sustain given the backfill arrangements required for front line staff. While there was no data available on the number of days allocated to date there had been a definite impact. Susan suggested that in the circumstances there be a deferral of all paid Parental Leave for 2005 and that a minimum service provision be applied prior to granting future leave. For Carers Leave, the arrangements should be tightened, with support from Trades Unions, to ensure that this was only granted in times of emergency as originally intended.

Chris McIntosh advised that as the Policies were already in place and a framework for their implementation agreed that there would be a requirement for formal negotiation if there was to be departure in terms of implementation. She stated that the PIN policies were “best practice” for managers and representative of NHS Highland as a good employer. The Policies should be taken as a whole and should there be discussion in relation to these then that should take place at the Area Partnership Forum to allow full consideration. Staff required to be part of any discussions and be given the opportunity to present solutions, especially given that Policies had been in place since 2002. Given that some staff were at
present working outwith guidelines in terms of, for instance, Working Time Regulations it was important not to lose the goodwill that existed. Chris advised that managers should be asked for data relating to the number of days that had been granted for these elements as it had been anticipated that the organisation would have been over the initial rush in terms of applications.

Anne Gent advised that this issue had been raised previously by the Chief Executive and stated that she would like to establish whether CHP Managers and the Corporate Directorate wished to hold a wider debate. She advised that whilst she understood that staff would not expect such discussions to take place, an atmosphere of idea sharing must be maintained and thus should be welcomed. That said, she said there was a need to establish factual information as to whether the financial implications of the proposals would be significant in contributing to CRES, as part of a range of options, and whether more effective solutions existed.

Gill McVicar stated that the PIN Guidelines had been implemented without the appropriate level of funding and as such large demands were being placed on services without the resources to cope adequately. If there was going to be consideration of deferral of Parental leave then extreme cases would need to be considered in isolation so as to ensure fairness. In terms of applications for Parental Leave it was clear that the rush had not passed and publicity of the Policy meant that it was very much a current issue for managers. Nigel Small confirmed that all options for savings would have to be considered, by all staff, and that it was likely that difficult decisions would need to be considered. Adam Palmer questioned the financial impact of the suggestions.

Malcolm Iredale welcomed the fact that options were available to discuss such issues and stated that there was a duty on staff to identify issues that could benefit the organisation. Managers were acutely aware of the pressures that existed on a range of matters and whilst it would be an uncomfortable situation it was important that decisions be open to challenge. It was important to remember that any impact would be not only on the individual concerned but on the relevant team as well. The overriding principle was to reduce the cost base of the organisation without affecting patient services wherever possible and the outlining of financial impacts was needed for an informed decision to be taken. Caroline Parr suggested that a range of ideas would be required; not only the suggestions made today.

During discussion, Christopher Smith stated that the PIN Guidelines in question were Staff Governance Policies and that introduction of a minimum service period would cause issues where staff had transferred from one Board to another. He advised that backfill had proved to be an issue across the organisation but not discussed in these terms. The Parental Leave Policy had, in any case, such elements as a 21 day notice period and the opportunity for managers to introduce a three month deferral. Given these points he suggested that management of the system needed to be discussed. Ray Stewart suggested that the impact of the Policy was not as serious as had been portrayed and stated that he was aware of inequalities in implementing this across the Board, which was more of a concern to staff representatives. These Policies were a contract entitlement and it was incongruous that these suggestions were being brought forward by managers when some were not implementing them appropriately in the first place. Any move to change the Policy for Parental Leave was likely to cause great concern. Adam Palmer suggested that restricting Parental Leave was equivalent to the removal of annual leave.

John Huband expressed concern at the suggestion of inequalities in
implementing PIN Guidelines and advised that this had to be addressed before considering the question of deferral of leave. He was aware, however, that in some cases leave had been granted that was not appropriate in terms of the Policy. Nigel Small advised that he would investigate any situation where it had been felt that there was an inequality in implementation of the policy within his CHP. Iona McGauran emphasised that a balance had to be struck, that inequality was an issue and that no matter how the matter was raised it was likely to involve difficult decisions.

In conclusion, Chris McIntosh stated that there was a need for education regarding the PIN Policies and that the issue of consistency needed to be investigated, especially as these formed part of the Terms and Conditions of staff contracts. There already existed the option of deferral of Parental Leave. She suggested that there was a need for information from local managers as to the impact of the Policy and in this respect it would be of interest to know if there was any correlation between applications and staff sick leave. With regard to a suggestion that Highland should benchmark the Policies with other Boards, Anne Gent advised that Highland were further ahead than most in terms of implementation and as such that would be difficult. As continuous improvement was the aim there was a need to reinforce the message that the opportunity existed for local ideas to be aired. Anne suggested that CRES issues be discussed in detail at the next meeting of the APF to be held on 22 July and in the meantime she would look into the question of appropriate data collection.

The Pay Modernisation Board:

- **Noted** the issues raised in relation to the implementation of the Parental and Carers Leave Policies, and the reasons for the proposal to limit this leave.

- **Agreed** that there should be a broader consideration, on a partnership basis, of way of achieving required CRES targets at the next meeting of the Area Partnership Forum.

8 PRESENTATION ON WORKFORCE BASELINE REPORT AND PAY MODERNISATION

Hamish Johnston gave a presentation to the Pay Modernisation Board in relation to the Workforce Baseline Report and its relationship to the recently published Kerr Report as well as Pay Modernisation. There were a number of areas of common ground between the Kerr Report and the Baseline Report, with Pay Modernisation supporting both. He advised that the demographics shown by the Baseline Report would be important when explaining to the public the rationale behind changes in service delivery.

In the next twelve years the Highland population would decline, but become disproportionately older, with fewer people of working age being available. This would cause a number of issues for NHS Highland in terms of the services needed in the future, and in terms of staffing. Within this general picture there were significant variances between the CHP Areas. The Baseline Report had indicated that 20% of existing Nursing/Midwifery staff would be eligible to retire by 2007, with this figure increasing to 37% by 2013. As a consequence of population profile changes the Scottish Executive had asked Boards to consider scrapping the existing compulsory retirement age. The report provided, in addition, information on staff turnover as this was also important when considering policies for recruitment and retention of staff in the future.

Hamish advised that a number of lessons had been learned from the Baseline
Report as follows:

- The need to forecast morbidity and demand patterns for the Highland Area.
- The need to question the validity of future projections.
- The need to plan a workforce that reflected a projected smaller supply pool.
- The need to remodel service delivery in Highland.
- The need to recruit and train in-area.
- The need to consider and utilise non-workforce solutions such as eHealth.

Hamish advised that the Kerr report had recommended that the future of Health Services in Scotland be based on sustainable, safe local services in the community. It would be on the basis of preventative care and integrate all parts of the care system. New technology was to be implemented to improve standards and new skills would be developed. All changes were to be patient focused. There were similarities with the lessons of the Workforce Baseline Report.

In conclusion, Hamish advised that the Highland Workforce Baseline Report would be a useful resource for managers and planners when considered in concert with the Kerr Report on future service delivery and relating to Realisation of the Benefits of Pay Modernisation. The next stage was to ensure effective implementation of Agenda for Change and the new GMS and Consultant’s contracts. There was a need to link Workforce and Service Planning considerations and enhance the workforce awareness of managers and service planners. There was also a need to involve staff in future service planning and improve the recruitment and retention of that staff.

The Pay Modernisation Board;

- Noted the content of the presentation.
- Noted that the presentation would be presented to other Groups.
- Noted Hamish Johnston had reverted to part-time working and that Anne Gent was now responsible for the contribution of Workforce Planning aspects.

9 AGENDA FOR CHANGE

Donald Shiach advised that in order to meet national timetables, and due to the large increase of separate jobs presented for matching (c.2,400) capacity was being increased so that the Matching panels could process twice as many job descriptions as was currently the case. Approximately 700 had been through the system. Some 10% of national profiles had still to be finalised and this had a knock on effect on the matching process. He advised that with the bulk of frequently found jobs matched the Matching panels were now meeting issues that were harder to deal with, thereby slowing down the process. Job analysis procedures had now been initiated and in this respect job demands were the paramount feature of consideration.

In relation to KSF, Judith McKelvie advised that this was well advanced at this stage and had been well supported. There was a need for the fundamentals of KSF to be understood in order to equip managers to produce and then apply KSF outlines. She advised that the process had brought staff together from different areas of the Board and had been very successful.

Chris McIntosh stated that here had been a great contribution to the matching process from management and staff, especially with regard to the Panels and it was important that this aspect be monitored from a time management
The Pay Modernisation Board Noted the position.

10 DATE OF NEXT MEETING

The next meeting will be held on 19 August at 10.00 am in the Board Room, Assynt House, Inverness.

The meeting closed at 12.25 pm.