

Employment Conditions Committee: 20th February 2007
Report of the Corporate Director - Opportunities

Adult Services - Budget Implications – Update on Progress on the Home Care Service

Background

1. On 12th December 2006, the Employment Conditions Committee considered, a report ‘*Adult Services Budget Implications*’ which provided an update on the action taken to progress the Executive Business Meeting Report of 12 October 2006 on “*Adult Services Budget Implications*”.

The report outlined the work of the Task and Finish Group and it was resolved that the Group would focus on the workforce issues, including terms and conditions, arising out of the reconfiguration of the Home Care Service and that a further update would be in February 2007. This report updates the Committee on the progress of this work.

Issues

2. At the Task and Finish Group meeting on 24 November 2006, it was agreed that the primary objective of the Group was to prepare a draft Business Case for the Reconfiguration of the Home Care Service, to include revised Job Descriptions, Person Specifications and Structures and that this would be circulated to all members of the Group prior to its scheduled meeting on 16 January 2007. This information was circulated on 5th January 2007. At the Task and Finish Group meeting on 16 January 2007, the Draft Business Case for the service was discussed.

The focus of the Business Case was the vision for future service provision and the range of services that would be provided, namely:

- | | | | |
|-------|--|---|----------------|
| (i) | Short Term Intervention Service (STIS) | | |
| (ii) | Complex / Specialist Case Management | | |
| (iii) | Night Visiting Service | | |
| (iv) | Elderly Care Assessment Service (ECAS) | } | Joint Services |
| (v) | Reablement Team | } | with Health |
| (vi) | Outreach Service | } | |

3. Trade Union colleagues requested further clarity and information on the following and asked that these issues be made clear in the Business Case:
 - (i) Hourly rate cost for the in house service provision
 - (ii) Identification of reported inefficiencies in the service
 - (iii) Justification for the weekly number of care hours that would be lost

- (iv) Expansion on the partnership working with the health service in relation to hospital discharges

It was agreed that these areas would be expanded upon in the Business Case. A copy of the revised draft Business Case is appended to this report.

- 4. In relation to the proposals, it was also requested that further dialogue be arranged on the following issues:

- (i) Changes in job descriptions and respective pay scales
- (ii) Upgrading of duties and responsibilities
- (iii) Hours of work
- (iv) Pay Scales and Terms and Conditions
- (v) Redeployment and Training
- (vi) VER – selection criteria and timescales, pension implications
- (vii) Numbers of staff required to deliver the service

It was agreed that a small sub group be established to discuss the detail of the reconfiguration in respect of terms and conditions of service. The Sub Group would meet before the scheduled Task and Finish Group meeting on 1 February 2007.

The minutes of the Task and Finish Group meeting of 16 January 2007 are attached to this report.

- 5. Two meetings of the Sub Group were held on 22 and 29 January 2007. At least two representatives from each Trade Union attended both meetings.

- 6. The agenda for the first meeting covered the following:

- (i) Business Case Part 4
- (ii) Management Structure
- (ii) Home Care Structure
- (iv) Terms and Conditions and Spinal Column Points
- (v) Agreement of Next Steps

- 7. The outcomes of this meeting were:

- (i) In principle agreement for the vision of the service subject to the terms and conditions on which staff would be employed
- (ii) Agreement to review existing terms and conditions and to develop an all inclusive rate which would mirror the existing career grade in situ in Residential Care
- (iii) A career path through the service which would enable staff to be considered for progression to managerial posts
- (iv) Development of the Implementation Plan, which would recognise that this is an evolving process for the 2007/2008 financial year with completion during 2008/9

- (v) As previously reported, it is likely that the number of staff required to deliver the reconfigured service will be substantially less than existing resources. Redeployment and voluntary severance will be available to try and achieve the required level of savings, but if this cannot be achieved, other avenues may need to be explored. Consequently, whilst every effort will be made to reduce the impact of any proposed changes, there can be no guarantee that Voluntary Severance or Redeployment will be sufficient.
- 8. At its meeting on 1 February 2007, the Task and Finish Group resolved that this detailed work on the implementation of the proposed vision for the Home Care Service needed to be undertaken within the normal consultative and working arrangements within Adult Services. It was proposed that the sub group continue to progress this work and that further meetings be arranged in the next few weeks.
- 9. As the Task and Finish Group had produced the Draft Business Case and received an “in principle” agreement to the reconfiguration of the Home Care Service, it was considered that the Task and Finish Group had concluded its work.

Proposals

- 10. It is proposed that:
 - (i) The work of the Task and Finish Group be concluded
 - (ii) Further progression of the Reconfiguration of the Home Care Service is achieved through the recognised Adult Service consultative and working arrangements through a specific work programme. This programme will work on the recommendations detailed above.
 - (iii) The Chief Officer takes responsibility for progression of the work necessary to develop the structure and resourcing of the reconfigured Home Care service and in particular to reach agreement with the Trade Unions on an appropriate pay and conditions framework.
 - (iv) The Chief Officer takes responsibility for reporting on progress to this Committee at its meeting in April 2007.

Legal Implications

- 12. The Council has a number of existing policies and procedures for consultation with the Trade Unions on employment and workforce matters and these will be followed as necessary in the reconfiguration of the service.

Financial Implications

- 12. It is too early at this stage to identify the financial implications arising from the proposals for the reconfiguration of the Home Care Service. These will become clear as further work on the reconfiguration progresses and will be reported to a future meeting of this Committee. The process of change however will be gradual and no savings arising from the reconfiguration are anticipated in 2007/08.

Human Resource Implications

- 13. It has been identified that the Reconfiguration of the Home Care Service will result in a different organisational and staffing structure being required to focus on the priorities identified by the Service Area and the Council for the future provision of this service. Continued Trade Union and Human Resources involvement, through the work of the Sub Group, in developing an appropriate payment and terms and

conditions structure for staff in the service, together with consultation at each stage of the process to achieve the required staffing levels, is essential.

The Service Area Joint Consultative arrangements include a formal meeting of the Service Area Joint Committee on a quarterly basis and an informal monthly meeting with Trade Unions. It is proposed that the work of the Sub Group is reported to these meetings.

Trade Union Comments

14. The Trade Unions note the recommendations and indicate that they are content to now progress these matters through the Service Area consultative and communications framework.

They will have an input into future reports, including any updates to this Committee. However, they felt that there were still some outstanding issues that need to be addressed and these would be fed into future Service Area consultative meetings.

RECOMMENDATION(S)

15. It is recommended that: -
- (i) The work undertaken to progress the Task and Finish Group is noted.
 - (ii) The Draft Business Case, job descriptions, person specifications and structures for the Home Care Service are noted.
 - (iii) The ongoing work of reconfiguring the Home Care Service is progressed through the recognised Adult Service consultative and working arrangements.
 - (iv) That the work of the Task and Finish Group is concluded.

Neelam Bhardwaja

CORPORATE DIRECTOR- OPPORTUNITIES

Date: 5th February 2007

Appendices:

- A. Draft Business Case for the Home Care Service
- B. Job Descriptions and Person Specifications
- C. Structure Chart
- D. Minutes of the Task and Finish Group of 16th January 2007

Documents Referenced:

- 1. Adult Services - Budget savings 12th October 2006
- 2. Employment Condition Committee of 12th December 2006, Report '*Adult Services Budget Implications*' – updated on actions agreed at the ECC meeting held on 16th October 2006.

APPENDIX A

Draft Business Case Proposed Reconfiguration of the Home Care Service

***Final Draft
6 February 2007
Susan Schelewa***

1.0 Introduction

- 1.1 At its meeting on 12th October 2006, the Executive received a report on “*Adult Services – Financial Matters*”, from the Corporate Director, Opportunities. The Executive considered a range of measures to manage the Adult Services budget position which is currently projecting an overspend of £7m for 2006/2007.
- 1.2 This report considers the issues relating to those measures proposed for the reconfiguration of the in-house Home Care Service. It should be noted that the Home Care Service has not directly contributed to the current financial position and this has been recognised by the Corporate Director. However, the Service has been the subject of review over the past three years due to the Drivers for Change described below.

2.0 Background – Drivers for Change

2.1 Joint Review 2002

- 2.1.1 Following the Joint Review in 2002 it was determined that there were too many providers of domiciliary care for adults in Cardiff which led to difficulties in safeguarding quality and resulted in unnecessarily high transaction costs.
- 2.1.2 A tendering exercise was undertaken which resulted in 4 organisations being awarded ‘block’ contracts for the provision of domiciliary care for older people and people with physical disabilities across the City. It was anticipated that most domiciliary work for these service user groups would go to the block contractors and that over time there would be fewer organisations providing this service on a ‘spot’ contract basis, i.e. a care package commissioned for an individual on a case by case basis.
- 2.1.3 At this time, discussions took place with both staff and Trade Unions about the opportunity for the Home Care Service to develop and reconfigure to offer a more responsive service which was best placed to work with people with the most complex needs. It was planned that changes to the structure of the workforce would take place through natural wastage and through the voluntary redeployment of staff that did not wish to work within the new service model.

2.2 Domiciliary Care Regulations and Standards 2004

- 2.2.1 The implementation of these Standards in 2004 necessitated a review of working practices in the Home Care Service to ensure compliance with the Regulations. This has resulted in increased expectation on how information relating to service users and staff is maintained, evidence of appropriate supervision and training, including the setting of NVQ targets. The Service is also required to evidence that it

operates in a way that helps service users to regain and maximise independence.

2.3 Department of Health Eligibility Criteria for Fair Access to Care Services (FACS)

2.3.1 Given demographic trends and the potential to care for increasingly frail people in their own homes, Cardiff Council, like many other local authorities, identified the importance of targeting its resources at those with the greatest level of needs.

2.3.2 The FACS eligibility criteria” are defined as: -

1. **Low Level Risk** – where there is need for minimal help including the provision of information
2. **Medium Level Risk** – someone beginning to struggle to meet their needs, perhaps requiring some help or managing with difficulty
3. **Substantial Risk** – someone who is not able to manage a need without some assistance
4. **Critical Risk** - someone for whom there would be extremely serious consequences if a need was not met

2.3.3 Consequently, in January 2005, the Council introduced a higher level of eligibility criteria for access to care services to those with substantial and critical needs only, which became effective from April 2005 for new service users. Transitional protection was offered to existing service users, which meant that they would continue to receive the same level of care for one year. The transitional protection was lifted in April 2006.

2.3.4 Over the last three years, there has been a gradual shift in Home Care provision from a traditional ‘low level’ service to a service that supports those with the most complex and challenging needs. This shift has been in response to the Drivers for Change described in paragraph 2 above.

2.3.5 In addition, short-term intervention and rapid response teams have been created to prevent hospital admission, facilitate and support discharge from hospital and to maximise independence. These aspects of service delivery enhance joint working with healthcare partners, in particular around Delayed Transfers of Care (DToCs).

3.0 Current Service Provision

- 3.1 Following the implementation of higher eligibility criteria from 1 April 2005, the in house Home Care Service has seen a reduction in its service provision of some 600 hours per week.
- 3.2 The Home Care Service is currently providing approximately 5500 hours of care to 596 service users. These weekly hours can be broken down as follows: -
- 550 hours through ECAS / Reablement
 - 450 hours by Short Term Intervention
 - 2200 hours complex cases
- 3.3 In addition, there are approximately 2300 hours of traditional 'maintenance' home care, which could appropriately be referred to external providers, at a lower unit cost. These care packages have yet to be reviewed. Within this figure it is estimated that approximately 70 service users in receipt of 140 hours of service could be reviewed out of any ongoing service provision because they do not meet the eligibility criteria for access to care services.
- 3.4 This would enable more effective deployment service delivery in the key areas of work the Council is required to undertake.
- 3.5 Consequently, the hourly unit cost for the in house service, which is already higher than that of external providers, has significantly increased and is currently calculated at £22 per hour. The basis for this calculation is the total Home Care budget divided by the number of care hours delivered.
- 3.6 The average unit cost of the existing block contract providers is £12.59 per hour, using the same calculation as above.
- 3.9 In regard of the 2300 traditional care hours referred to above, the annual cost of providing those hours within Home Care can be costed at approximately £2.63 million. It is anticipated that a number of these care packages could be reduced when they are assessed against the eligibility criteria. However, the cost of providing them as they stand by the block providers would cost approximately £1.5 million. This is an estimate, notwithstanding some transaction costs and subject to the potential re-tendering of the domiciliary care contracts.
- 3.10 The current employment contract inhibits the flexible deployment of staff and the long-standing payment of weekend enhancements contributes to the high unit cost of the service.

4.0 Proposed Profile of Services

- 4.1 The vision for the Reconfigured Home Care Service, consisting of 4 geographical teams and 2 City-wide teams, stems from the wish to build on the well-established working partnerships with commissioning and health colleagues. That is to say, the Service already has joint schemes with Health and is well respected by social workers who commission care on behalf of service users.
- 4.2 The service seeks to work on the basis of maximising the potential of service users and reducing dependence on services.
- 4.3 This is of particular importance in the provision of services, which help to prevent hospital admission and which facilitate hospital discharge.
- 4.4 Additionally, it has proved difficult to commission care for very complex situations and with its skilled and trained workforce, the Home Care Service has been very successful in its role as a service of 'last resort' for very complex cases. The proposal is that there will be 4 geographical teams, to cover complex and specialised cases and the remainder of the work would be managed by Citywide teams.

4.5 The new shape of the service would be as follows -

- 4.5.1 **Short Term Intervention Service (STIS)** - will take all new domiciliary packages for a period of up to 6 weeks. During this time the service user will be supported to become as independent as possible and ensure that the ongoing care package is stabilised. This service is proving very successful in reducing dependency levels on services and currently over 70% of service users are supported back to full independence.

Those people that continue to need domiciliary care after 6 weeks will be transferred to the most appropriate ongoing provider when the care package is stable, but not complex. If the service user's needs or circumstances are complex or challenging, they will be retained by the in house Home Care Service.

- 4.5.2 **Complex / Specialist Cases** - these can include situations where there is: -

- Challenging behaviour
- Dementia and mental health
- Drug or alcohol abuse
- Complex family circumstances eg children with behavioural problems
- Severe communication problems eg deaf/blind
- Complex manual handling requirements
- Significant lack of motivation of the Service User
- Terminal illness

- Protection of Vulnerable Adult (POVA) Issues

The medication administration scheme (CARMAS) within Home Care has been referred to in Welsh Assembly Government Document - The National Service Framework for Older People - and is recognised as good practice.

4.5.3 Night Visiting Service - This service currently comprises a team of 2 carers visiting service users who need turning, toileting etc at night. It operates between 9.30pm and 7am and supports the input of the Short Term Intervention Service. The service is closely integrated with the Community Alarm Service and is based at the Community Alarm centre. This service is already operational and has been since April 2005.

4.6 Joint services with Health

4.6.1 Elderly Care Assessment Scheme (ECAS)

This team operates out of Rookwood Hospital. It is a healthcare led service with significant input from in-house home care. Older people who are at risk of being admitted to hospital have a multi disciplinary assessment from a social worker, a physiotherapist, an occupational therapist, a consultant and a dietician and if appropriate, are offered up to 10 days follow up care/support.

At present, it is estimated that up to 14 hospital bed days are saved for each individual service user.

At the end of 10 days, they are re-assessed for their suitability for a period of reablement or for transfer to an ongoing domiciliary care provider.

4.6.2 Reablement Team /Stroke Outreach Service

These healthcare led services, again supported by a team of home carers, provide up to 6 weeks reablement following discharge from hospital, with the aim of maximising independence.

The support package is defined by therapists and the home carers work to that plan – supporting people to do things for themselves – with a particular focus on motivating and encouraging and helping people regain their confidence.

Those people who continue to need domiciliary care after 6 weeks will be transferred to the optimum ongoing provider where the care package is stable, but not complex. If the service user's needs or circumstances are complex or challenging, they will be retained by the Home Care Service.

5.0 Options Appraisal

- 5.1 **Option 1 - Maintain the status quo** – it is believed that this would inhibit the refocusing of services. The retention of current levels of work, including traditional packages of care, would limit the transfer of staff into the new areas of work on which the service needs to focus. In addition, failure to review terms and conditions would not address the issue around the inefficient deployment of staff and the high unit cost of the service.
- 5.2 **Option 2 – Reduce the number of staff, but retain existing terms and conditions** – as above, this would fail to address the inefficiencies (e.g. staff not working contracted hours but being paid for them), within the service and would not address the issue of the high unit cost.
- 5.3.1 **Option 3 – Reduce the number of staff and review terms and conditions** – it is believed that this is the best option to enable the service to refocus and fully engage in the support of those with the most complex needs, while working appropriately in an enabling way to maximise independence. It will also address the issues around inefficiency and high unit cost.

6.0 Proposed Structure

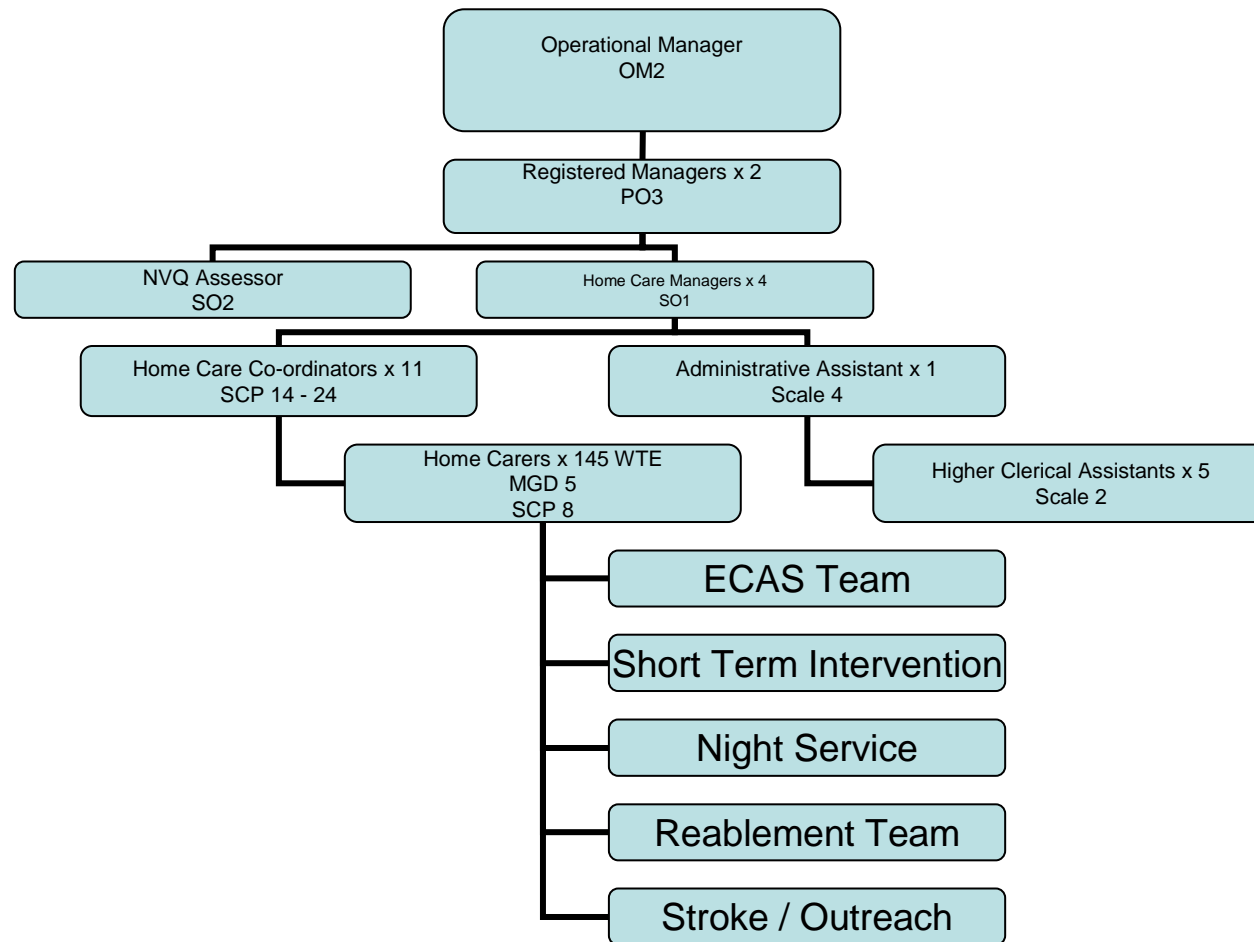
- 6.1 The analysis of service delivery indicates that the Home Care Service would need approximately 3700 care hours per week to provide services to Service Users with Critical and Substantial needs.
- 6.2 Based on an estimate of existing and future demand and in line with the estimates of care hours required, it is anticipated that 60-80 staff would be utilised in the “front line” services – ECAS / STIS / Reablement.
- 6.3 The remainder of the workforce would be split into geographical teams and provide care and support to those service users with greatest ongoing needs.
- 6.4 It is acknowledged that this may appear a simplistic assessment of the number of staff to be retained. Further analysis will take place to more clearly quantify requirements.
- 6.5 To support this activity there would be a need for 6 Home Care Managers (including 2 Registered Managers), 11 Home Care Co-ordinators, an NVQ Assessor and 6 administration staff.
- 6.6 The current structure of the Home Care service is shown at Appendix 1.
- 6.7 The proposed structure for the service is shown at Appendix 2.

- 6.8 In order to achieve the reconfigured structure, the Council has invited staff in the Home care service to express an interest in Voluntary Early Retirement / Voluntary Severance. There would be a phased implementation of this exercise to an agreed timescale.
- 6.9 It is acknowledged that there may be some staff that do not wish to work within the new service. In such cases, there would also be the possibility for redeployment to posts either within Adult Services, Children's Services or to other service areas in the Council.

7.0 Terms & Conditions

- 7.1 As individual service users cease to receive a service because they no longer satisfy the eligibility criteria, gaps have been created in the work schedules of home carers. These gaps are largely at 'off peak' times, due to the loss of low-level work such as housework and shopping. Therefore it is often not possible to fill the gaps, as this low level work is no longer undertaken.
- 7.2 The implementation of the eligibility criteria has led to increasing inefficiencies in the payment of home carers. Existing terms and conditions entitle staff to be paid their weekly contractual hours, even when due to the reduction in service levels, they are unable to work them. If staff do not fulfil their contractual hours because there is no work for them, if they then work additional hours above their contractual hours they can claim additional payment.
- 7.3 In order to deliver the service as cost effectively and as efficiently as possible, and to ensure the longer term viability of the in house provision, it will be necessary to review the existing terms and conditions of staff in the Home Care service.
- 7.4 One clear option would be for staff to be paid an all inclusive rate of pay for weekday and weekend working and that a development structure is introduced which would enable staff to move through the structure. There would be a qualification bar point, above which staff could progress once they have attained their NVQ Level 2. This would give staff the incentive to undertake more training and take on new ways of working, irrespective of which days of the week they may work.
- 7.5 The enhancement for regular night working as part of their normal working pattern would be unaffected and would be paid in accordance with the NJC rates. Staff who do not work nights as part of their regular working pattern would be paid in accordance with NJC rates.
- 7.6 The current Home Carer Job Descriptions and Person Specifications (Appendix 3) have been updated to reflect the needs of the service and the revised Job Descriptions and Person Specifications are attached at Appendix 4.

Proposed Home Care Structure



ADULT SERVICES TASK & FINISH GROUP WITH TRADE UNIONS

ACTION

16 JANUARY 2007

Present:

Transport & General Workers Union - Mike Formosa

UNISON - Ryan Williams; Linda Webb-Thornton; Ann Harrington; Mark Turner

GMB – M Hayward; Ken Daniels; Suzanne Harvey

AMICUS - Mike Love; Andy Gardener

Neelam Bhardwaja, Corporate Director – Opportunities

Michael Murphy, Chief Adult Services Officer

Philip Lenz, Human Resources

Dawn Thomas, Human Resources

Brian Johnson, Human Resources

Paul Byers, Scrutiny Change & Efficiency

Susan Schelewa, Adult Services

Stuart Young, Adult Services

NB advised that the discussions at the meeting would be to consider and make comments on the Draft Business Case, Proposed Structures and Job Descriptions for the proposed Reconfiguration of the Home Care Service.

1 : MINUTES

It was noted that a number of persons had still not received the papers prior to the meeting, even though they had been e-mailed well in advance. It was agreed that comments on the Minutes of 24 November 2006 should be forwarded to NB by the following day. Subject to the inclusion of any comments received the minutes were agreed.

Matters Arising

- (i) With reference to the last sentence contained in (ix) of the minute on page 4 relating to clarification on the position relating to the disclosure of information, it was requested that a legal representative should be present at the next meeting of the Task and Finish Group to provide an explanation as to why information on the numbers of persons expressing an interest for voluntary severance could not be disclosed.
- (ii) Distribution of Papers – A number of representatives had again not received e-mailed papers. It was confirmed that papers for all future Task and Finish Groups would be sent in hard copy to Andy Gardner, Mike Love and Ken Daniels as they are not on e-mail.

Administration

2 : DRAFT BUSINESS CASE

Following a brief introduction of the report, NB invited comments and views from the Group on the Draft Business Case document, following which a number of issues were raised:-

- Paragraph 3.5 - Concern was expressed about the method of calculating the cost for the in-house service.

The Group was advised that the basis for the calculation was the total Home Care budget divided by the number of care hours delivered. This calculation was also used for existing block contract providers.

- Paragraphs 3.5 and 3.9 - The Unison representative requested that more detailed information be provided by the Finance Department as it was their view that the figures had been overestimated in respect of the In-House provision and it was their opinion that this was not a true reflection of the Home Care service.
- Paragraph 3.1 – Concern was raised that this information appeared to be in relation to transfer to block providers. It was confirmed that the eligibility criteria had prompted a review in respect of the hours lost to the Home Care Service; the exact breakdown was not known but the majority was due to the changes to the eligibility criteria.

Finance
Mike Murphy

AGREED: That greater detail would be included in the report to fully explain the issues outlined in Paragraph 3.1

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- Paragraph 5 – The options set out under Paragraph 5 of the report were discussed. Officers were asked to explain what effort had been made to explore Options 1 and 2; it appeared from the report that Option 3 was the only way forward; The TU had therefore raised concerns on behalf of its members and requested further information about the proposal, it was not just about the details in the proposal that had been reported to ECC. The TU would like to work in partnership to explore other ways of providing a service that would not involve losing so many jobs, and such a drastic change in conditions. The TU were concerned that nothing appeared to have been done to explore possible alternatives.
- The document emphasises the decision already made to re-configure Home Care.
- Paragraph 5.2 (Option 2) states that it would fail to address the inefficiencies within the service but there is nothing to identify where the inefficiencies are.
- It was pointed out that a number of staff had voluntarily changed their work patterns such as in the provision of night service, and that this was happening without incurring massive job cuts. It had also not been confirmed how many people were still to be reassessed.
- Reference was made in the report on the need to lose a number of care hours a week but this must be justified. Officers were asked to provide further information on where the hours had been lost.
- The service has been changing and evolving, however, Officers were advised that the TU did not accept there are inefficiencies. In response it was explained that it was about moving the service into the future; to achieve this, a number of proposals had been put forward and this was one of the service changes proposed.
- Concern was expressed that the service would be outsourced – it

was emphasised by the Officers that this was not the case.

NB advised that although the Adult Services budget was being re-aligned but the service area was still being asked to identify savings that could be made. It was reiterated that it was not a question of any one service area being asked to identify savings, this was the case across all service areas of the Council to identify areas that it could make more economical and whether it could achieve the same service for less cost elsewhere.

- Reference was made to the proposed structure that showed a loss of 222 Home Care jobs; the TU were concerned that when they were consulted on the restructuring the proposal did not include the loss of 222 Home Care jobs. The agreement was that better training would be provided to enable the staff to undertake more complex duties; everything the Unions had agreed to sign up to had been adhered to, they did not agree to the proposed realignment or to outsourcing.

NB advised that she accepted what the TU were saying but stated that consideration must also be given to the budgetary implications not only for service areas but also for the whole Council. If the service can be provided cheaper outside that meets the needs of the service this would have to be a consideration.

- The TU stated that costs would obviously be higher for in-house provision due to the terms and conditions of the Council.
- Unison confirmed that they had asked their membership to consider how they could adapt to meet the target but more information was needed on how savings would be made. Unison were not convinced there was a need to reduce Home Care jobs by 222.
- It was requested that more detail be included in the report on Partnership working with the Health Service in respect of hospital discharges.

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Home Care Structures

Discussion took place on the Current Home Care Structure and the Proposed Home Care Structure.

The Group were advised that the direction for the Home Care Service was at discussion stage with TU. If can get across about the journey for the Home Care Service within this Organisation there will be opportunity for discussions in respect of:

- (i) Numbers of Staff required
- (ii) Salaries
- (iii) VER – the current position is that no more than expressions of interests have been invited at this stage.

If agreement can be reached in respect of the model of service, things could move forward. Aiming to get to the point of agreement with the TU.

The following issues were raised in respect of the proposed new structures:-

- More detail was requested in respect of the service profile in order that a valued judgement could be made by the TU to consult with their members to explain the reason for the changes and then can respond further.
- With Reference to the proposal set out in Section 4 – in view of the complex and specialised nature of the service, if the staff were unable to sign up to the proposals, what options would be available if they did not wish to take up the option of VER.

In response the TU representatives were advised that the option of re-deployment and re-training would be explored but in certain circumstances there may be situations where redundancies would occur, the staff would be given all the options.

- In the event of the service being provided by an external provider, TU asked whether there would be an undertaking provided to staff involved in any transfers? The Council has a responsibility to

SY/SS

HR

retain as many staff as possible within the service area – the TU has a responsibility to protect its members' terms and conditions; the TU representative asked whether this had been considered by the Council. It was confirmed that this would be investigated.

- TU representatives advised that this should have been considered when introducing block contracts. Arising from the discussion it was clarified that the re-tendering process must take place every 3 years but that the proposals were in respect of existing contract and not new ones.

AGREED – That advice would be taken in respect of the matter.

Options Appraisal and Proposed Structure

NB stated that the question being posed in Section 4 was about the new profile and the new shape of the service; the TU representatives were asked whether there were any issues to be raised.

The TU representatives emphasised the need to have a clear understanding of the proposed changes, in particular that further dialogue was needed to clarify following issues:-

- Changes in job descriptions and respective pay scales
- Upgrading of duties and responsibility
- Hours of work
- Pay scales and Terms and Conditions
- Redeployment and training
- VER – Selection criteria and timescales, pension implications
- Number of staff needed to deliver the service
- Partnership working

NB accepted the points raised but stated that an ‘in principle’ agreement was needed from the TU on the proposed changes in order that further dialogue could be entered into regarding the details of how this would be taken forward.

The TU representatives advised that before this was agreed ‘in principle’, their members would need to be consulted, in any event staff

would need to know all the options available to them on the re-configuration of the service.

The date of the next meeting is 1 February 2007 it was suggested that if a broad agreement was reached, the details would then be discussed in full at the meeting on 1 February 2007; it was confirmed that the next meeting of the ECC was scheduled for 20 February 2007 and therefore the meeting on 1 February 2007 would be a good opportunity to work through the detail prior the meeting of the ECC.

Phillip Lenz asked for agreement to set up a smaller group of representatives from each Trade Union to attend the meeting on 1 February 2007 to take part in detailed discussions on the proposals for the reconfiguration of the Home Care Services and the issues raised. The meeting would be co-ordinated by Stuart Young.

The representatives from Unison advised they would be unable to put forward a representative as they were all engaged in training on 1 February 2007. The Unison representatives were advised that all the other TU representatives were available for the meeting and it would be difficult to change the date. It was suggested that the information would be provided separately to Unison should they be unable to attend.

AGREED:

- (1) That two representatives from each Union would form the Sub-Group unless otherwise instructed.
- (2) That advice would be sought on the position in respect of terms and condition and would be reported to the meeting on 1 February 2007.
- (3) That the information relating to the arrangements for the Sub-Group be sent in hard copy to Andy Gardener, Mike Love and Ken Daniels as they were not on e-mail.

Service Area: Adult Services

Division/Section: Domiciliary Services

Job Title: Home Carer – Short Term Intervention Service
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Post Ref No: Elderly Care Assessment Scheme Reablement

Grade: TBC

Hours: (Permanent Conditions)

Special Conditions Applying:

Car allowance

Grading conditions

Special working arrangements

Enhanced CRB Disclosure

Reporting arrangements:

Home Care Manager

Job Purpose: To provide the highest quality service, that puts the service user first, assisting them to maximise their independence and improve their quality of life

Duties and Responsibilities**Job Specific**

1. To provide prompt support to service users and encourage them to regain, maximise and develop their independence
2. To encourage and promote the independence of service users through empowering them to exercise informed choice, taking into account any risk involved
3. To contribute to the ongoing review of service user needs to ensure that appropriate levels of service are offered
4. To work as required with other professionals to ensure needs are appropriately met

Generic

1. To provide high quality care and support for service users to maximise outcomes detailed in the care plan and the service delivery plan
2. To support people in the taking of medication, in accordance with the Authority's Medication Administration Policies
3. To carry out all tasks with sensitivity to the wishes/choices of the service user, ensuring at all times that dignity and privacy are maintained
4. To respect the diversity and different cultures and values of service users
5. To monitor the wellbeing of service users and report any changes to the Home Care Manager/Home Care Co-ordinator

6. To maintain Health and Safety standards and follow procedures in all aspects of the job, including manual handling, accident reporting, food hygiene
7. To work at all times within the guidelines of the National Minimum Standards for Domiciliary Care, the Codes of Practice for Social Care Workers and the policies and procedures of Cardiff Council
8. To undertake training as required to maintain and enhance personal performance, as identified through a process of supervision and appraisal and to commit to undertake the NVQ Level 2 qualification
9. To maintain accurate records as required by procedures

Corporate

1. To participate actively in supporting the principles and practice of equality of opportunity as laid down in the organisation's Equal Opportunities Policy
2. To take reasonable care for the health and safety of yourself and other persons who may be affected by your acts or omissions and to comply with all health and safety legislation as appropriate.
3. As a term of your employment you may be required to undertake such other duties and/or times of work as may reasonably be required of you, commensurate with your grade or general level of responsibility within the organisation

(DATE COMPLETED

AGREED BY:

Date Received by Post holder:

Signature of Post holder:

[See Notes for Guidance](#)

Person Specification

Designation of Post: Home Carer

Post No:

THE PERSON SO APPOINTED MUST FULFIL THE FOLLOWING REQUIREMENTS:

	<i>Essential</i>	<i>Desirable</i>
Education & Training	Ability and commitment to achieve NVQ level 2 in Care	NVQ level 2 in Care or equivalent
Experience	Experience in a caring role	Previous paid or voluntary experience in a health or social care environment
Skills and Abilities	<p>Effective communication skills – verbal and written</p> <p>Ability to follow instructions and adhere to care plans to meet the specified outcomes</p> <p>Ability to work as part of a team and to use initiative when working alone</p>	Knowledge of Health & Safety issues relating to the provision of Home Care
Personal Attributes	<p>Intrinsic caring skills and an empathy for the needs of service users</p> <p>Genuine respect for the values and cultures of others</p>	
Special Circumstances	<p>Flexible approach to working arrangements, including evenings, weekends and Bank Holidays.</p> <p>Availability to work between 7am-11pm on a rota basis</p>	Full valid driving licence and use of a car

[See Guidance Notes](#)