

HMR/ABB

5 September 2012

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Dear Sir/Madam

INTEGRATION OF ADULT HEALTH AND SOCIAL CARE IN SCOTLAND – CONSULTATION ON PROPOSALS – MAY 2012

The Society of Personnel and Development Scotland (SPDS) welcomes the opportunity to respond to the consultation on the proposals to integrate adult health and social care in Scotland.

The Society is a professional institute that represents the views of senior HR officers in councils throughout Scotland and advises COSLA on workforce matters.

SPDS recognise the need for public sector reform and specifically supports the principle of integrating adult health and social care services.

In general terms, as a Society we endorse the approach to public sector reform and adult health and social care integration as promoted by COSLA and outlined within COSLA's own response to the consultation.

Accordingly the purpose of this response is not to replicate views already expressed by COSLA but to concentrate on specific organisational and workforce issues which are associated with the consultation proposals.

Specifically:

- We consider that local partnerships should have flexibility to design organisation arrangements which best meet local need and the local approach to integration.
- We consider that the jointly accountable officer (JAO) is one of the key components to determining the overall success of the partnership. While national guidance on the role of the JAO (including the relationship with the chief social work officer) would be welcome we consider it should be for each local partnership to determine the exact role, including the managerial authority of the JAO for council and health board staff.
- Again, while national guidance would be welcome, we consider that determination of salary, conditions of service and the recruitment process should rest at a local partnership level.
- We consider that the development of a properly integrated and skilled workforce is another key component to ensuring high quality outcomes for service users and carers.

The preparation of joint working protocols and workforce development plans covering issues such as leadership and management development, deployment of resources, HR policies, are therefore crucial to successful integration.

Flexibility is important in this regard and we have a concern that the different industrial relations cultures between councils and health boards may inhibit this and therefore adversely impact upon

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successful integration – one example of this is the operation of a no compulsory redundancy policy across health boards.

We are of the view that the local government model in which each council is an individual employer and the bulk of terms and conditions of employment and staff policies are developed locally is one which would provide the flexibility needed to meet local needs and to fully embrace new integrated working arrangements. We recognise the challenges this presents however given the current health model.

- We are concerned that there may be equal pay risks to both councils and health boards with employees working in integrated teams in comparable roles and consider that legal opinion should be sought on this at a national level rather than leaving it to individual employers to seek such advice.

We look forward to the publication of draft legislation in the near future and welcome the opportunity to engage with others and contribute to the range of workforce development issues arising from the integration of adult health and social care.

Finally, I confirm that SPDS are agreeable to our comments being published.

Yours faithfully

A handwritten signature in black ink, appearing to read 'Hugh Robertson', with a large, stylized flourish above the name.

Hugh Robertson
SPDS President