

**SCOTTISH GOVERNMENT HEALTH DIRECTORATES****IMPLEMENTATION OF CEL 23 (2010) – MANDATORY STANDARDS AND CODES  
FOR HEALTHCARE SUPPORT WORKERS****ACTION OFFICER'S NETWORK MEETING****MONDAY, 15 NOVEMBER 2010, 13.30 – 15.30****SCOTTISH HEALTH SERVICE, CENTRE,  
CREWE ROAD, EDINBURGH****NOTES OF MEETING****Present:****Audrey Cowie (Chair) (ACo), Scottish Government**

**Karen Adams (KA), deputising for Linda Harris - NHS Education for Scotland**  
**Stuart Baird (SB), National Services Scotland**  
**Anne Campbell (ACa), KSF Lead - Scottish Government**  
**Margo Christie (MC), NHS Dumfries and Galloway**  
**Debbie Donald (DD), NHS Tayside**  
**Susan Dunne (SD), NHS Lanarkshire**  
**Deanne Gilbert (DG), Western Isles**  
**Liz Jamieson (LJ), NHS Education for Scotland**  
**Michelle Jamieson (MJ), NHS24**  
**Lorna Kenmuir (LK), NHS Ayrshire and Arran**  
**Janice Laing (JL), NHS Borders**  
**Lyndsay Lauder (LL), NHS Greater Glasgow and Clyde**  
**Shona MacMillan (SMacM), deputising for Elaine Barr, Golden Jubilee Hospital**  
**Morag McLaren, (MMcL), NHS Forth Valley**  
**Lynn Marsland (LM), NHS Grampian**  
**Val Mutch (VM), deputising for Linda Lynch, NHS24**  
**Donald Shiach (DS), NHS Highland**  
**Rhona Waugh (RW), NHS Fife**  
**Tony Wigram, Scottish Ambulance Service**  
**Helen Wisdom (HW), deputising for Andrew Glen, NHS Shetland**

**Apologies:**

**Mary Parkhouse, NHS Lothian**  
**Julie Nicol, NHS Orkney**

**In attendance: Ann Pullar (AP) (secretariat)**

<b>Item</b>	<b>Topic</b>	<b>Action By:</b>	<b>Due Date:</b>
<b>1.</b>	<b>Welcome and Introductions</b>		
	ACo welcomed members to the second meeting of the Action Officer's Network and round table introductions took place.  Apologies and substitutions were recorded as above.		
<b>2.</b>	<b>Minutes of 16 August and Action Points</b>		

	<p>Minutes from the last meeting were confirmed as a true record with the exception of two amendments:</p> <p>An addition was required as Lynn Marsland was in attendance at the first meeting.</p> <p>LJ highlighted a change required in the bottom paragraph on page 3 - instead of 'healthcare support worker toolkit' it should read 'healthcare support worker Learning and Assessment Framework'.</p> <p>There were no matters arising that were not on the agenda.</p> <p><u>Action Points</u></p> <p>The first and fourth bullets of the Action Points circulated required an update. The sixth, seventh and eighth were taken forward in the agenda.</p> <p>With regard to the first bullet concerning National Partnership involvement in policy development, ACo confirmed that this had been discussed with Michael Fuller, staff-side Co-Chair of SWAG, who is content that local partners with an interest can be invited to meetings. SWAG Committee was provided with an update on Friday 20 August 2010 and SWAG Secretariat have had input since, on Friday 24 September 2010. There are currently no outstanding issues requiring to be addressed at National Partnership level.</p> <p>Regarding the fourth bullet, concerning terminology and the use of titles for HCSWs, ACo commented that there are still challenges associated with titles for certain HCSW roles and resulting transparency issues for the public. ACo confirmed that there is a legal definition in CEL 23 (2010) which may be helpful to employers in Boards for naming conventions.</p> <p>ACo highlighted that the current version of CEL 23 (2010) will require to be amended in light of pending UK Government decisions regarding regulation of future healthcare professions, as this will impact on groups required to be included in the definition of healthcare support worker.</p>		
<b>3</b>	<b>Membership</b>		
	<p>ACo highlighted an amendment required to the Borders' Executive Sponsor – this has changed from Sheena Wright, Nurse Director to Rav Roberts, Director of Workforce and Planning.</p>		
<b>4</b>	<b>Feedback on NES Workshops</b>		
	<p>LJ apologised to the group for not supplying a written report, this was due to severe IT difficulties that had been experienced at NES. LJ will forward papers in due course</p>	<b>LJ</b>	

<p>to AP who will distribute to the group.</p> <p>NES have held five workshops, with a total of 122 attendees. They included representatives from all NHS Boards and Special Health Boards.</p> <p>The three aims of the workshops were:</p> <ol style="list-style-type: none"> <li>1. To improve confidence in implementing the learning and assessment framework that supports the standards</li> <li>2. Explore the roles of the workplace assessor and focus on action planning, problem solving and networking</li> <li>3. To explore what the attendees' expectations of the workshops were. It was consistently felt that at the end of each of the five workshops these had been met.</li> </ol> <p>From feedback on the days and from the online survey, the main themes were:</p> <ol style="list-style-type: none"> <li>1. Concern with the 'workplace assessor' wording, the majority preferred the title 'reviewer' – this will now appear in the guidance and workbooks</li> <li>2. Questions and concerns from all workshops regarding the timeframe for meeting standards linked to the hours of employment as part-time workers' hours can range from four to thirty hours, with a further implication for bank staff who have a zero hour contract</li> <li>3. The implications for services contracted out within Boards</li> <li>4. Need for consistent messages linked to pre-employment recruitment selection processes, to the public and to non HCSW staff groups – is there some communication materials that can be provided nationally to ensure consistency?</li> <li>5. Quality Assurance of assessment processes and assessors – how to assure this, and could it be something that Action Officers share within their networks for consistency across Scotland</li> <li>6. The record on SWISS and whether that is transferrable across NHS Boards</li> <li>5. What happens if the new clinical HCSW is not a new employee but change posts?</li> <li>6. What happens if the HCSW is not meeting the standards?</li> <li>7. Questions around whether there had been national partnership involvement.</li> </ol> <p>NES had also asked for specific, in-depth feedback on the guidance for the 'reviewers' and workbooks for the HCSW.</p> <p>Six main messages came from the Workshops:</p> <ol style="list-style-type: none"> <li>1. The need to streamline information – resulting in shorter, more user-friendly documents</li> <li>2. Review the language used, with less jargon</li> <li>3. Add worked examples where possible</li> <li>4. Change title from 'assessor' to 'reviewer'</li> </ol>	<p><b>AP</b></p>	
---	------------------	--



	<p>presentation on behalf of the group to assess its fitness for national use. Once comments have been made and it has been finalised AP will forward to all Action Officers. It was also suggested that national leaflets would be useful for local customisation for distribution to staff, acknowledging budgetary constraints for development costs.</p> <p>LJ informed the group that NES had been charged with designing a formal Acknowledgement of Achievement of Standards Certificate, she suggested that their designer place a NHSScotland logo on it with Boards adding their individual logos. Members agreed that this would be useful.</p> <p>The group agreed that the term ‘assessor’ would be changed to ‘reviewer’ for communication purposes. NES will change the title on workbooks and guidance to ‘reviewer’, with a footnote saying ‘For the purposes of this document this is a term which equates with workplace supervisor / assessor’ for read across to other documents.</p> <p>Regarding the issue of consistent messages relating to recruitment processes, LJ highlighted that every workshop had a representative from staff involved in recruitment. The issue regarding the transferability of HCSW achievement between Boards was raised. If a HCSW had met the standards in one Board through induction and complied with the Code of Conduct, this should be transferrable across NHSScotland. DD highlighted this is where a NHSScotland logo rather than individual Board’s Logos on the Certificate would be beneficial. MMcL queried whether the SWISS identification number would be transferrable also and whether SWISS could produce guidance for Boards on recording achievement on SWISS. ACo will invite Steven Williamson from SWISS to the February meeting to clarify all issues, and in the meantime will get a definitive answer from SWISS regarding the identification number.</p> <p>ACo clarified that if a HCSW was not meeting standards then normal HR capability procedures would apply.</p> <p>MC raised a query regarding the challenges around supporting reviewers with training. A number of Action Officers shared information on their approaches.</p>	ACo	
<b>5</b>	<b>Feedback from Third Annual Regulation Event</b>		
	<p>ACo gave a brief update on the CEL 23 (10) presentation at the Regulation Event. She highlighted that Bridget Hunter, UNISON, spoke on behalf of National Partnership to reassure delegates that National Partnership had been involved in the policy making from the beginning. ACo confirmed that there had been useful presentations where experiences with preparations for implementation were shared by Yvonne Cannon from NHS Lanarkshire, DD and LK.</p>		

<b>6</b>	<b>Frequently Asked Questions</b>		
	ACo asked Action Officers to check that the existing version covered all potential questions, and should there be anything not addressed, to inform her so that the FAQs could be updated and the revised version put on the HCSW website on SHOW.	<b>ALL</b>	
<b>7.</b>	<b>Priority Action Plan</b>		
	<p>This item was brought forward in the agenda to allow KA to attend another meeting.</p> <p>It was acknowledged that the discussion on communications and marketing was relevant here.</p> <p>KA highlighted that NES are at the stage of finishing off resources around the assessors guidance and workbook with assessors' comments.</p> <p>She highlighted that Health Facilities Scotland, with NES' support, are providing workbooks relating to new workers in catering, portering, linen services and security. An additional chapter to incorporate induction standards is currently being developed. If HCSWs successfully complete these sections in the workbook, they will have met the requirements of the induction standards. It is hoped that this work will be completed by the beginning of December.</p>		
<b>8.</b>	<b>Sharing Information on Progress Towards Implementation – Discussion</b>		
	<p>ACo thanked those who sent in contributions from their Boards. The main issues that arose were:</p> <ol style="list-style-type: none"> <li>1. Assessment methodology</li> <li>2. NES framework availability for use</li> <li>3. Consistency</li> <li>4. Timeframes</li> <li>5. Assessors / Reviewers terminology</li> <li>6. Application to Bands – some reports highlighted that this applied to Bands 1 – 4 on Agenda for Change. ACo clarified that the requirement applies according to definition of HCSW rather than to either AfC band or career framework levels.</li> <li>7. Challenges around the infrastructures for non-clinical HCSWs</li> <li>8. SWISS links and the drive to get 100% reporting – helpful to get guidance from SWISS</li> </ol> <p>ACo suggested that a more structured approach to reporting may be useful to Action Officers and members agreed. ACo will liaise with Robert Girvan to draw up a reporting template and circulate to Action Officers. Progress reports are still due from Orkney, State Hospital, and Tayside. Golden Jubilee Hospital provided a verbal update and will follow up with a written report: The main challenges facing GJNH are: getting a definitive list of who falls within the definition; deciding who the assessor/reviewer should be with a lean towards the KSF</p>	<b>ACo/RG</b>	

	<p>reviewer. GJNH has set up a short-life working group to engage as many managers as possible.</p> <p>A discussion regarding the recruitment process of HCSWs ensued, where some Boards shared their approach to introducing new starts to the expectations relating to the standards and codes. ACo highlighted page 7 of CEL 23 (10) which relates to the sample paragraph for inclusion in the contract of employment.</p> <p>The group shared individual Boards' approaches to who is covered by the Standards and Codes. ACo highlighted that the legal definition is covered in CEL 23 (10), this covers the minimum requirement for Boards' for inclusion, however, if Boards choose to do more than this, they are entitled to do so. LJ highlighted the need to be careful not only to look at present roles within Boards, but also any new roles in the future, and to be careful regarding language used.</p>		
<b>9.</b>	<b>Plans for Next Meeting – Revisit ToR</b>		
	<p>The group reflected on the Terms of Reference. ACo briefly outlined current state of play for each term.</p> <ol style="list-style-type: none"> <li>1. Provide a point of operational contact within Boards for Scottish Government - Achieved</li> <li>2. Represent the interests of Boards and Executive Sponsors within the Network - Achieved</li> <li>3. Share information on proposed models of implementation across NHSScotland - Group beginning to do this now</li> <li>4. Focus on rapid integration with existing structures and processes and mainstreaming of requirements within Boards - Getting there, the reporting template will help for next time</li> <li>5. Agree a six-month action plan for rapid integration / mainstreaming - Group will be focussing on this at the next meeting</li> <li>6. Consider integration of the requirements within Board architectures for learning &amp; development, KSF, HR processes, job descriptions and so on - Comes into point 5</li> <li>7. Make the links across to complementary policy such as the Quality Strategy, Patient Rights, Care Governance, etc - Discuss at next meeting</li> <li>8. Participate in a six-month evaluation of the transitional stage within Boards, including assessment of resource implications - Important to inform other UK Countries how this is going to work for Scotland</li> <li>9. Consider other matters of importance to implementation as they arise - Doing this on an ongoing basis.</li> </ol>		
<b>10.</b>	<b>Any Other Business</b>		

	<p>ACo asked the group for contributions. HW queried what central support from NES will there be for training assessors / reviewers. LJ highlighted the discussions held at the workshops regarding the whole aspect of making explicit the links to KSF and the KSF processes within the Boards and not being seen as a separate element of work.</p> <p>There was no other business so ACo thanked members for their attendance and closed the meeting.</p>		
<b>10</b>	<b>Next meeting: Monday 28 February, 14.00 – 16.00, Scottish Health Service Centre, Carrington Suite. Video-conferencing will be available to facilitate attendance by Island and remote Boards.</b>		