



# OT Stewards' Briefings

## Service reviews: a guide for Occupational Therapy stewards

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### Introduction

Service reviews are a very powerful tool in examining current performance and identifying how to secure improvement in service delivery. If used properly they can provide the means for a UNISON branch to engage actively to promote an alternative to cuts or to outsourcing services.

While UNISON branches and local BAOT stewards may not be resourced to become experts in service reviews it is important to understand the steps that should be involved, ask for information on the review plan and timescales and request copies of all documents and reports produced in relation to the review. This briefing aims to introduce the main steps of a service review and give some pointers on what you and your local UNISON branch can do to influence the process.

For guidance on coping with restructuring and service changes please see BAOT/UNISON Employment Relations briefing no. 104: *"Guidance for Occupational Therapy stewards and managers facing restructuring"*. This briefing is available to download from the BAOT website at: [ww.baot.org.uk](http://ww.baot.org.uk)

### The main steps of a service review

#### Step One: Establishing a frame of reference

The objectives of the exercise should be clearly established at the beginning. Objectives could range from gathering information on how well the organisation/employer is performing, through to seeking to ensure that services are operating at optimum efficiency.

What outcome is expected from the review?

At its most general level this will usually be the achievement of the organisation's policy objectives at minimum cost to the public.

#### Step Two: Collecting information on the services

The next stage is to collect baseline data on the current service which includes:

- What does the service do?
- Why does it do it?



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- How much does it cost?
  - How many people does it employ including those that are brought in on a temporary basis through an employment agency or as consultants?
  - How does the service gauge whether it has done what it says it is going to do?

### Step Three: Evaluating the evidence

The next stage is an analysis of what the evidence suggests about how the service is performing.

- *Collection and use of performance data:*  
Can the service demonstrate that it contributes to the delivery of the organisation's overall corporate policy objectives/outcomes?
- *Analysis of business processes:*  
Is the service able to describe its main business processes in a way that is clearly understandable?  
Does the service benchmark its processes against other providers?
- *Continual improvement:*  
Can the service demonstrate continuous improvement over the last three years in terms of economy, efficiency and effectiveness to reflect the balance between the three elements required at a strategic level?

Evidence will include:

- increased outputs
- improved outcomes
- meeting short term targets and moving towards long term targets
- demonstrable service impact
- efficiency savings

- *Professional standards*  
Will service delivery and standards allow OT staff to practise in accordance with the guidelines set out in the COT Code of Ethics and the Health Professions Council (HPC) standards of conduct, performance and ethics?

- *Views of service users and staff:*  
What are the views of service users expressed through customer care systems and community organisations?  
What are the views of staff and trade unions and their commitment to service improvement?  
What are the implications of options for jobs, terms and conditions?

- *Corporate policies and priorities:*  
How does the service contribute towards improving sustainable development?  
What is the contribution of the service to equalities, diversity and community wellbeing?

What overall agreements determine the service provision? For example: contract specifications, public agreements (e.g. NHS Constitution), good practice guidelines (e.g. World Class Commissioning guidelines)

**Key Action Points for OT Stewards and UNISON Branches**

- Ensure that you are aware of service review techniques and consider training UNISON and/or BAOT stewards to take part in reviews
- Get members involved in a service review. They are best placed to identify weaknesses and problems and suggest ways services can be improved
- make sure that UNISON reps are fully involved in the review process, receive all documentation and are also involved in any subsequent options appraisal
- Ensure that participation does not compromise the ability of UNISON to put its case effectively – make sure proper protocols are in place at the outset
- Communicate effectively with all staff affected by a review and ensure that their views are taken into account
- In all circumstances where procurement is proposed and services have not been reviewed, put the case for carrying out a service review
- Remember that UNISON's policy is to support service improvement process as a tool to keep services in-house and avoid the active procurement stage.

**Step Four: The outcome of the review**

At the end of a service review process there are a number of possible outcomes:

- The service meets the necessary performance standards and requirements of the service users and the employer and an in-house service improvement plan is put in place to drive continuous improvement in the service until the next review. This approach further avoids a costly and resource hungry procurement exercise.
- The analysis shows that there is a weakness in service performance and further action is considered. This could involve:
  - a. retention of the current service in-house supported by a three-year service improvement plan
  - b. procurement exercise with an in-house bid
  - c. procurement exercise without an in-house bid.

Where the outcome of the review points to service weakness, an options appraisal would normally be carried out. Firstly however, the authority should consider the development of a service improvement plan (SIP). Service improvement should be the first step before any further procurement options are considered unless there are other circumstances that would prevent such an approach such as the service is not viable without access to external investment. This should however, have been identified as part of the service review process.

**Service Improvement Plans (SIPs)**

Service Improvement Plans (SIPs) have a vital role in providing evidence for, and substantiating in-house provision. They should combine a vision for the service with strategy and a programme, which sets the course for the service over a three-year period.

The SIP must convey to executive and non-executive members of NHS organisations or local authorities, service users, staff and inspection bodies that an in-house option has clarity and is sustainable.



A SIP is in effect a commitment to improve the quality of the service and sets out the activities and action required to achieve improvement. It is vital that UNISON and BAOT members play an active role in shaping and developing the SIP. The union should harness the knowledge and expertise of members through regular meetings and working groups.

It is also a tool to hold management accountable for progress, to build staff support, facilitate wider community engagement and enable scrutiny to review and assess the improvement programme.

### Key Action Points for OT Stewards and UNISON Branches

- ensure that UNISON and BAOT members are involved in the development of a SIP and that the agreed actions are communicated effectively to members
- where the SIP will involve changes to staff working practices and/or terms and conditions ensure that this is subject to proper consultation and negotiation in accordance with agreed procedures
- ensure Equality Impact Assessments are undertaken
- ensure that UNISON is involved in monitoring and reviewing the outputs and outcomes of the SIP
  
- where a successful SIP is put in place make sure that the lessons learned from the process are incorporated into the branch strategy and information and intelligence is fed back to the regional office of UNISON so that the success can be publicised and learning opportunities for UNISON maximised.
- if the improvement plan leads to a procurement process, make sure that an in-house bid is always one of the options being considered and request that clauses are included in any contracts or tendering documents that protect current workplace policies and staff terms and conditions. You may want to ask your regional office to run UNISON's Procurement and Commissioning training (materials available online: [www.unison.org.uk/activists/procurement](http://www.unison.org.uk/activists/procurement))

### Consultation

Your employer should issue guidance on how departments can participate in service reviews. The Cabinet Office has issued a Code of Practice on Consultation, which was last updated in July 2008. Although the code does not have legal force, it should be regarded as binding on government departments unless there are exceptional circumstances.

A copy can be found at the following web address:

<http://www.berr.gov.uk/files/file47158.pdf>

There are six consultation criteria which your employer should take into account.

1. *Consult widely throughout the process, allowing a minimum of 12 weeks for written consultation at least once during the development of the policy.*
2. *Be clear about what your proposals are, who may be affected, what questions are being asked and the timescale for responses.*
3. *Ensure that your consultation is clear, concise and widely accessible.*
4. *Give feedback regarding the responses received and how the consultation process influenced the policy.*



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5. *Monitor your department's effectiveness at consultation, including through the use of a designated consultation coordinator.*
  6. *Ensure your consultation follows better regulation best practice, including carrying out a Regulatory Impact Assessment if appropriate.*

Although not a strict test, if any of the above criteria have not been followed, this could be evidence that the consultation has not been properly carried out. You should therefore look carefully at what has been proposed, consider the above criteria and see whether or not the consultation can be challenged. If a situation arises where it appears that the requirement to consult has not been complied with, legal remedies may be available to delay matters until the consultation is carried out. In these circumstances, urgent legal advice should be sought so that crucial deadlines are not missed.

### **Making the case for OT services**

Work together with your fellow BAOT members to identify the key issues. Remember, the best results are achieved when managers and stewards work together in partnership. And make sure to seek support and advice from your local UNISON branch and regional office. Together with your colleagues, use the review as an opportunity to articulate the value of occupational therapy services.

Here are some questions you may want to think about:

- Who are the key decision makers?
- Who are your likely allies and how can you work together?
- What is the benefit of having an OT service for patients/clients?
- What is the benefit of having an OT service for the local authority/health provider?
- How will patients/service users be affected by any proposed changes? e.g. health inequalities, lowering standards, unmanageable caseload, patients/service users put at risk, level of patient engagement in decisions about the service.
- Could the changes jeopardise good clinical governance? e.g. access to competent clinical supervision, appraisals carried out by trained staff, resources and protected time for training and CPD, effective workforce planning, staff input into professional groups and forums
- Could the changes impact on health and safety of staff? e.g. lone working, heavy lifting, safe record keeping, increased workload, morale, stress, staff leaving the service
- Have the proposals undergone a thorough equality impact assessment? (See Equality section for more information)

When gathering your evidence you might want to consider:

- COT 'killer facts', for example: "10 High Impacts where OTs add value to health and social care outcomes" (available from [www.cot.org.uk](http://www.cot.org.uk))
- locally collected info on the effectiveness of the service, e.g. statistics on readmissions, testimonials from services users
- profession-based research, e.g. BJOT, WFOT
- COT guidance and best practice. Useful documents at [www.cot.org.uk](http://www.cot.org.uk) include:
  - Competences in Occupational Therapy (Briefing 22)
  - Definitions and Core Skills in Occupational Therapy (Briefing 23)
  - Code of ethics and professional conduct for occupational therapists.
  - Professional standards for occupational therapy practice.
- Linking your evidence to the organisational priorities described in relevant service frameworks (i.e. the priorities or objectives set out by your organisation or by local or national government strategies).



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### **Effect on your duty of care and professional standards**

All occupational therapy staff have a duty of care to ensure their practice is safe. If you are concerned that plans to restructure services may have a negative impact on safety or patient care then you should refer to UNISON's popular Duty of Care handbook (revised 2011, available at: [www.unison.org.uk/healthcare/dutyofcare](http://www.unison.org.uk/healthcare/dutyofcare)). The handbook aims to help all health and social care staff to maintain the duty of care to patients/service users, colleagues and the public, particularly when there is pressure on services.

### **Scrutiny bodies**

Local decisions regarding health and social care services are overseen by independent scrutiny bodies which gather information on public need and gauge the opinion of service users and the public. These are sometimes known as scrutiny committees or advisory councils and are usually hosted by health boards or local authorities. An important part of their role is to promote the inclusion of patients, communities and other stakeholders in the planning and delivery of health and social care services, including scrutinising any proposals to change services. There are also local patient/service user involvement networks which provide a mechanism for patients and clients to be involved in the scrutiny and oversight of services. You may want to get in touch with your local scrutiny bodies if you are concerned about proposed changes to your health or social care services.

### **Equality**

Public authorities are legally bound to carry out equality impact assessments on all new and existing policies, including proposals for restructuring, cuts and redundancies. It is their legal responsibility to ensure that no staff groups or groups in the community are disadvantaged as a result of an organisation's policies and procedures. Equality Impact Assessments should be used to assess the relative impact of proposals on the terms and conditions of the relevant target groups with respect to: gender, race, disability, sexual orientation, religion or belief and age. You have the right to challenge your organisation/employer if you feel that they are not undertaking a thorough and systematic analysis of a policy to ensure it is not discriminating against any particular group.

UNISON equality guidance is available at [www.unison.org.uk/equality](http://www.unison.org.uk/equality). This includes guidance on how to ensure employers are fulfilling their obligation to undertake a full equality impact assessment on a proposed course of action.

### **Ask for information from your employer**

Check to see what information is available from your employer. Ask for detailed information on their plans and the evidence they are using to make their decisions.

If reports or documents that you have requested from your employer are not forthcoming, then, with the support of your local UNISON Branch, you may wish to consider using:

- The ICE Regulations [www.unison.org.uk/acrobat/B1462.pdf](http://www.unison.org.uk/acrobat/B1462.pdf)
- The Freedom of Information Act. [www.unison.org.uk/acrobat/B1959.pdf](http://www.unison.org.uk/acrobat/B1959.pdf)

### **If you don't have an OT steward already, then elect one.**

Every workplace should have a BAOT/UNISON Steward to represent the views and needs of occupational therapists. If you don't have a steward in your workplace then maybe you could raise this issue at one of your team meetings. All OT Stewards are given accredited training and time off to carry out their duties. Please contact [baotstewards@unison.co.uk](mailto:baotstewards@unison.co.uk) for more information.