29 August 2018

Lewis Macdonald
Convener, Health & Sport Committee
Scottish Parliament

Dear Mr Macdonald,

The Governance of the NHS in Scotland

I am writing to you in my capacity as Health & Social Care spokesperson for COSLA, the representative voice of local government in Scotland.

In its recent report, “The Governance of the NHS in Scotland”, the Health and Sport Committee makes the following statement and recommendation:

“137. We are pleased to learn that the NHS staff governance principles are gradually being adopted across a number of Integration Authorities. Integration Authorities are now into their third year of operation and we believe there is merit in ensuring these principles are embedded across all Integration Authorities. If the integration of services across health and social care is to be achieved there must be consistency in the values and treatment of staff across both the health and social care sectors to ensure there is a collegiate and united approach. We expect parity of treatment for all staff and that creating a single Staff Governance Standard across health and social care would greatly assist in meeting this objective. We ask the Scottish Government to work with local authorities, NHS boards, trade unions and Integration Authorities to establish such a standard and to focus on how its delivery would assist in meeting the wider aim of integration of health and social care services.”

COSLA members have significant responsibilities for, and interest in workforce matters: our members collectively employ 245,000 people who deliver a range of services, often in partnership with other organisations in the public, independent and third sectors. More than 62,000 local government employees work in social care, which equates to over 30% a third of the entire social care workforce; the remainder is employed in the independent sector (41%) and the voluntary sector (28%).

I was therefore disappointed that the Committee made a recommendation that has significant implications for councils as employers without having taken any evidence from COSLA, individual councils or the trade unions that represent our workforce. Neither does there appear to have been any consideration of the role of the independent and voluntary sectors as employers of the social care workforce, and whilst COSLA does not speak for them, they are key partners for local government in delivering services.

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1 Scottish Government: Public Sector Employment in Scotland - Statistics for 1st Quarter 2018
The point here, is that Integration Authorities are not themselves employers and it is simplistic to make a recommendation that suggests that uniform application of the NHS staff governance standard would be desirable given the variety of employers delivering social care. Given that the Committee did not have the benefit of evidence from a representative range of bodies, COSLA does not accept the premise of the recommendation which ignores the existing effective employee relations environment in local government which applies to all our employees, not just those in social care.

The drive for consistency in managing workforces across the integrated health and social care sectors must not become an end in itself. It should only be pursued where there is robust evidence of improved outcomes. Indeed, we would argue that good staff governance should incorporate flexibility to facilitate local issues being dealt with locally, without over-reliance on ‘one-size fits all’ or top-down approaches. A locally tailored approach to staff governance and trade union relations also supports the democratic accountability of Local Government and IJBs.

We also refute the assertion of the health service Unison representative, quoted in the body of the report, that local authorities are “a complex beast” which “does not necessarily have at its heart that commitment to staff governance”. Local government is not a single entity, but collectively there is a strong commitment to good staff governance underpinned by a combination of detailed local and national arrangements including:

- National recognition of eight trade unions.
- Four national negotiating councils.
- Joint consultative and negotiating committees in every local authority.
- Staff representatives on local bodies e.g. Education Committees, IJBs.
- Strong partnership working and supportive employee relations agreements

That is not to say that integration does not create some challenges for staff governance for all employers, and we remain keen to work constructively with the NHS, IJBs, TUs, SG and other stakeholders to ensure timely and transparent engagement with such issues.

The Committee’s report is now published, but I would ask that this letter is shared with members, as a reminder that the integration of health and social care is taking place in a ‘mixed economy’ and whilst that brings its complexities it can facilitate innovative approaches: there must be openness to, and respect for different approaches and it should not be assumed that any single model is the only right one.

Yours sincerely,

Cllr Peter Johnston
COSLA Spokesperson, Health & Social Care

cc: SJC Joint Secretaries