

The newsletter of the Healthcare People Management Association

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HPMA Excellence in HRM Awards

The HPMA Excellence awards are delighted to announce a new category - **Innovation and best practice using ESR** - in this year's programme, sponsored by The NHS ESR Programme and the Department of Health Workforce team.

Now with just eight weeks to go until the competition deadline, it's a good time to think about suitable project, which categories offer the best-fit and planning some time to spend on your entry submission.

It's never been more important to celebrate achievement and success in the HR function: these awards are a national platform to highlight your excellent examples of good practice. You can join the ranks of HR's very best and brightest by entering the 2009 HPMA Excellence in HRM Awards.

Will 2009 be the year that HR colleagues across the UK celebrate your professional achievements?

We invite entries across eleven categories, take a look at the awards programme flyer for more details on each category:

Supporting medical staff
sponsored by BMJ Careers



**Organisation development
and learning**
sponsored by *goodpractice.net



Know more. Do More. Achieve more.

Diversity and equality
sponsored by Beachcroft



**HR building capacity for
organisational improvement**
sponsored by
SOLACE
Enterprises



**Excellence in improving
employee health and wellbeing**
sponsored by
NHS Plus



Innovation in HR
sponsored by
Capsticks



**Best management
practice in tackling
workplace stress**
sponsored by HSE



**Innovation and best
practice using ESR**
sponsored by The NHS
ESR Programme and
DH Workforce



Partnership working
sponsored by Social
Partnership Forum



**HR Team of
the Year**
sponsored by
all four UK
Health
Departments



**HR Director of the
Year 2009**
sponsored by HPMA
and West London Mental Health
NHS Trust



We will also present an **overall winner** award sponsored by The NHS Institute for Innovation and Improvement at the ceremony itself.

To enter, follow links on the HPMA website www.hpma.org.uk to download an entry form and simply complete your project details and email back to our awards team (crisrina@chamberdunn.co.uk) - it couldn't be easier. And if you have any further questions call our helpline on 020 8334 4530.

Entries must be received by Thursday 26 March 2009 - GOOD LUCK!

Kelvin Cheatle
President

HPMA head office
Gothic House, 3 The Green
Richmond TW9 1PL
Tel: 020 8334 4530
Fax: 020 8334 4531
Email: admin@hpma.org.uk

Word from the branches: The HR world in Health and Social Care in Northern Ireland



Jacinta Melaugh
HPMA NI Branch Chairperson

Within Northern Ireland we have a system of integrated health and social care. Since 2007, Health and Social Care organisations have gone through a period of unprecedented change following a Review of Public Administration in Northern Ireland. Prior to April 2007 we had 19 Trusts providing services with 4 Boards commissioning services. We have reorganised into 6 Trusts (including the Ambulance Service) and are moving to 1 commissioning organisation in April 2009.

The HR function faced significant challenges in that it was required to support the management of change in the merger of 19 Trusts to 6 at the same time as achieving a 25% reduction in HR costs (all while we continue to implement Agenda for Change). In addition we are in the first year of a 3 year Comprehensive Spending Review where the service is required to shed 3% efficiency savings each year.

In support of the new larger organisations the HR function moved to various versions of the Ulrich/Brockbank model of HR Business Partner.

In general the Business Partners join the operational directorate senior team meetings and are the first port of call on strategic human resource issues. The Business Partner also provides support to directorate senior teams on generic human resource issues.

In support of their directorate management teams, the HR Business Partners concentrate on the following key result areas;

- Supporting and leading effective change management

- Developing good Induction and supportive management
- Managing temporary staffing costs
- Promoting staff health and managing sickness absence
- Promoting job/service redesign
- Developing and implementing performance management/appraisal systems
- Involving staff and working in partnership
- Promoting good people management practices

Support from HPMA

The Northern Ireland Branch of HPMA was established in the early 1980's. The Branch has developed significantly since then and has full Corporate Membership from the 6 Trusts and a number of the smaller Health and Social Care agencies within Northern Ireland.

The Branch aims to ensure that the views of the HR profession in Northern Ireland and issues affecting the Health and Social Care Sector are appropriately represented at regional level. It aims to provide education and training activities that complement other regional initiatives and which particularly address gaps identified at the middle and junior levels of HR.

It is in times of significant change that we tend to overlook the development needs of, in particular, our HR practitioners. The HPMA Branch recognise this trend and has put particular effort into ensuring that it plays a role in supporting HR colleagues and is organising 4 workshops this incoming year in addition to our annual conference planned for May 2009.

Ask the HPMA Membership is back!

The HPMA launched the Ask the membership initiative back in 2006 to encourage the sharing of knowledge and expertise, this month commercial members Lane4 pose the question.

Contributions will inform the understanding, and approach to, the performance and leadership challenges healthcare staff face.

To take part simply click on either survey link:

www.lane4performance.com/Understanding-Performance-Environments-Have-Your-Say.html?page=1
www.surveymonkey.com/s.aspx?sm=r8ZbU9oj6l_2bSEKnwuLaLCQ_3d_3d

All those taking part will receive a copy of the research report and a complimentary copy of *The Lane4 Journal of Excellence: Perspectives on Change*. Members should also look out for Lane4's follow-up article in *Network* exploring the findings and implications for the sector.

If you have a question or query for your colleagues in the HPMA membership, contact Lauren Crawford by email (lauren@chamberdunn.co.uk).

European Court clarifies law on annual leave and long-term incapacity

For many years employers and judges alike have been grappling with the issue of how the annual leave entitlement under the Working Time Regulations applies to someone on long-term sickness absence. Following a series of conflicting judgments from UK courts, the House of Lords asked the European Court of Justice (ECJ) for guidance in a case now known as *Stringer* (previously *Ainsworth*). The case was heard by the ECJ in November 2007, along with a similar case referred by a German court. On 20 January 2009 the ECJ gave its long-awaited ruling.

Can workers take annual leave when off sick?

One of the questions the ECJ was asked was whether workers can take paid annual leave during a period of sickness absence. This issue commonly arises when an individual has exhausted their sick pay entitlement and wants to 'convert' unpaid sick leave into paid annual leave.

The ECJ ruled that it is up to individual member states to decide whether workers should be allowed to take annual leave during a period of sickness absence. In the UK that seems to mean workers can take paid annual leave whilst on sick leave unless a workforce agreement says otherwise or an employer lawfully restricts when leave is taken.

Can workers carry forward untaken leave?

What if the employer does not allow workers to take annual leave during sickness absence? The ECJ said that where a worker is unable to take their annual leave due to sickness absence they must be allowed to carry it over into a subsequent leave year.

What the ECJ's ruling is not clear on is when someone will be treated as 'unable' to take their leave. If a worker has an unrestricted right to take annual leave during sickness absence but chooses not to do so, can he or she carry forward their untaken leave? Unfortunately we shall have to wait for the House of Lords to decide this point when the *Stringer* case returns there later this year or in 2010.

What about payments in lieu of leave when employment ends?

One point that the ECJ was clear on is that annual leave does accrue during sickness absence. What is more, contrary to what has been said by the Court of Appeal, when employment ends a worker who has been on sick leave is still entitled to a payment in lieu of their untaken leave. This presumably would include a payment in lieu of untaken leave carried over from a previous leave year. Again we can expect the House of Lords to confirm this point, though not for some months to come.



Shirley Wright, partner,
Eversheds LLP
shirleywright@eversheds.com

Associative Disability Discrimination - Increase in Carers' rights

The scope of those protected by disability discrimination laws has effectively been widened following the decision in *Coleman v EBR Attridge Law (ET230374/2005)* to include people who are not themselves disabled but who are "associated with" a disabled person, for example, as a carer.

Facts

Mrs Coleman, who has a disabled son, worked as a legal secretary for Attridge Law. She brought a claim against Attridge Law alleging that she had been treated less favourably and given less flexibility in her working arrangements than colleagues with non-disabled children.

The matter was referred to the European Court of Justice (ECJ) which held that someone associated with a disabled person may bring a claim for associative disability discrimination under European Law. Following this decision, the Employment Tribunal (ET) held that current UK disability legislation can also be read to include a person associated with a disabled person. Mrs Coleman's claim will be considered at the ET in 2009.

Impact on employers

Employers should note that this development will benefit carers of the disabled and may also extend to carers of the elderly. Carers of the disabled are already entitled to limited time off to deal with emergencies affecting dependants and have the right to apply for flexible working. Now, carers can rely on the Disability Discrimination Act 1995 (DDA) if they are treated less favourably in connection with their caring responsibilities. Employers should consider carefully all requests for flexible working.

However, carers will only succeed in their claims if they can show that the disability or age of the person they care for was a factor in the treatment they received. Furthermore, the ECJ did not rule that employers must make reasonable adjustments to the working arrangements of employees, like Mrs Coleman, to place them in the same position as a disabled employee.

It is likely that as a result of the ECJ decision, the DDA and Age regulations will be amended to formally include associative discrimination.

Bevan Brittan



Helen Clarke
Solicitor, Bevan Brittan LLP
For further details, please contact
Helen on 0870 194 7711 or email
helen.clarke@bevanbrittan.com

A word from the President: Do we get the leaders we deserve?



Kelvin Cheatle, president,
Healthcare People
Management Association

Nobody but the most cynical could fail to be moved by the inauguration of President Obama this past week. In such difficult times we appear to reach out for inspiration and leadership.

But amidst the celebrations in freezing Washington I admit to feeling a little sad and wistful. Sad because it seems one of the inexorable laws of public life that the new President will leave office less popular than he is today; wistful because it struck me that we had our own Obama moment 12 years ago with the election of Tony Blair ...and we all know what happened to him don't we?

Politics aside I must be part of a shrinking group who thought Blair was a fine leader. I didn't agree with every decision (who does?) but he set the tone, took tough decisions, displayed integrity (debatable I know, but all Governments spin) and stayed the course for over a decade. Yes, he did take a controversial decision to support George Bush in Iraq, but aren't such decisions all part of the job for a top leader?

But in an age when increasingly we seem to have trial by media, no sooner than our leaders are cheered in on a wave of euphoria than it seems we

are trying to dismantle them, layer by layer. Those of us in senior NHS jobs have some insight into what it must be like to exist in such a high-octane world. Conflicting demands, never enough time or resource, pressure for delivery ...it all feels remarkably similar.

Am I alone in thinking that the way the tabloids demanded the blood of those involved in the Baby P case was nothing short of a lynch mob? Yes, this was a horrific case and it may be that it was justified that heads should roll. But I'd much rather judgements be made in a calm and rational way, in full knowledge, than by the baying of the crowd.

So what has this got to do with HR and HPMA? Well I think it's our job, as senior HR professionals, not only to identify and nurture the talent, but to preserve it too. If we really believe our senior leaders are good enough, it's part of our role to advocate calm reflection and objective assessment when things go wrong. The true qualities of leaders come to the fore when things are difficult: if we are going to discard them every time that happens then I think we will fatally dilute quality - and get what we deserve.

Time to change

Do you include mental illness among the areas that you cover in your equality strategy? Soon we will be seeing press advertisements featuring celebrities who have experienced mental illness as part of a new campaign to tell the public that it is no longer acceptable to discriminate against people who have mental health problems.

Ruby Wax, Stephen Fry and Alistair Campbell are among the high profile people who have given their active support to the campaign *Time to Change*, which is funded by Comic Relief and the National Lottery. The campaign's website www.time-to-change.org.uk includes information about how to run a local campaign.

People with mental health problems work in the NHS; and people with physical illness who also have mental health problems are cared for and treated throughout the health and social care services. But do our non-MH staff have sufficient awareness of what it means to have a neurotic or psychotic disorder, to self-harm or suffer from substance misuse or dementia?

Our training division GateHouse has just introduced a course on mental health awareness aimed at health professionals in hospitals and community who feel they need a better understanding in order to give more effective care. If you would like to find out more, go to www.GateHouseCourses.com or call us on 020 8334 4525.

Alison Dunn

Editor in chief, Chamberlain Dunn employment reports



Commercial membership

Commercial membership of the HPMA is open to any consultancy, service or supplier to healthcare HR. Membership fees start at £75 for a single handed consultant, rising to £500 (organisations employing 2 - 250) and £1,000 (organisations employing over 250).

As a member you can contribute to Network, attend branch meetings and also work with branch chairs to sponsor and contribute to regional events.

Call Lauren on 020 8334 4530 to discuss benefits for your organisation or simply download a membership form now at

www.hpma.org.uk

Organisational Resilience: Thriving Through Tough Times

Healthcare organisations face a multitude of challenges. Rising expectation, public and media scrutiny, advances in treatment, the changing nature of disease and evolving expectations of health in the workplace make patient-centred leadership a priority.

These factors make an organisation's ability to cope and survive in difficult times extremely challenging. During these periods, it is resilience that will define an organisation's success or failure.

Organisational resilience is a dynamic process through which organisations react positively and adapt when faced with adversity - it is not just about survival. It is being able to manage change effectively and thrive on the transition period in order to improve performance.

From a performance psychology perspective, the ability to turn adversity into a competitive advantage is a significant theme. In this way adversity and change can become a catalyst for progress and resilience is the process individuals and organisations can use to capitalise on these opportunities. The outcome of organisational resilience is a sustainable healthy, high performing organisation.

Lane4's research indicates that organisations must focus on four types of resilience to ensure long-term sustainable performance:

A **collectively resilient** organisation has highly inter-connected networks and avoids areas of vulnerability in terms of connections and resource. This will include 'mentally tough' individuals who can

perform at consistently high levels during personal and professional pressure. These individuals will not operate in silos, but draw on strong social networks and capital within the organisation to allow learning to take place despite difficult times.

A **strategically resilient** organisation is forward-looking and innovative. Strategies will be adapted easily to meet changing demands and opportunities. This will include anticipating and adapting to environmental change, the capability to flex strategy to accommodate shifting requirements and an experiential mindset to provide future solutions that avoid strategic decay.

An **operationally resilient** organisation will have flexible systems and processes to deal with the fast pace of change. This will include effective change management to mobilise people and resources, strong formal internal communications to provide direction and flexible systems and processes that allow for better adaptation than rigid bureaucratic environments.

An organisation with strong **performance resilience** faces reality head-on and continues to achieve through difficult times. It will focus on reality and avoid blind optimism, outlining clear performance expectations for employees. Relationships with external suppliers will allow for flexibility and collaborative working practices. 'Inventive tinkering' or bricolage will be vital too so that individuals use their resources, skills and networks to provide creative solutions to unpredictable change.

Lane4
Engaging People. Delivering Performance.

Lane4's health care group is focused on developing patient-centred leadership to create resilient organisations that can continually improve patient services in changing and challenging environments. To find out more about Lane4's experience and expertise please visit www.lane4performance.com

Letters and contributions

Network is your membership newsletter so we always welcome comments, articles and news from any of our members.

You can send contributions directly through to the production team (lauren@chamberdunn.co.uk) or call 020 8334 4530 for an informal chat first.

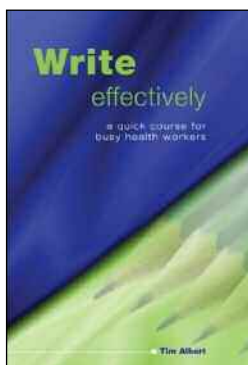
The newsletter is published every month and circulated to all HPMAs members so it's a great way to share success, ask for help or get colleagues thinking.

2009

**HPMA Excellence
in HRM Awards**

Closing date for entries in all categories 26 March 2009

Common writing problems - and how to start solving them



Many people find writing difficult, for all kinds of reasons. In 16 years of running courses for health professionals I came across all kinds of problems - but some appeared more frequently than others. Here are some of them - plus some tips on how to get them under control.

1. 'I don't have enough time to write'

This was very common. The NHS culture seems to view writing as an add-on, so relatively few of us allocate enough time; making sure you do so would be one of my main tips. Others would be to be absolutely clear what you are writing before you start (that makes it easier and quicker), write in short bursts rather than long periods of (mostly wasted) time, and of course be absolutely ruthless about what you write and what you can either delegate or talk through instead.

2. 'I find it hard to write for different audiences'

Most health professionals can write fairly easily for their peers, but find it really difficult to write for others (even though they don't have trouble talking to them!). The answer is simple: picture whom you are writing for and then use the language they would be comfortable with. Of course this is impossible if you are having to write for several different audiences at the same time, so I recommend you don't. Split the writing up, so that you have one document for one group and another - say the executive summary - for another, and a third - a press release for instance - for yet another. It may sound like extra work, but it usually turns out to be easier, quicker - and more effective.

3. 'I often get stuck in the middle of a writing project'

You could be bored, in which case you should take a break. More commonly, you have come to a halt because you don't know what you are doing. Go back and revisit what you are writing, for whom, and why.

4. 'My writing comes back full of corrections from other people'

Actually it doesn't. They can't all be right (especially when they conflict with each other or even change their own mind over time), so strictly speaking we should not talk of corrections but changes. Getting out the red pen and making as many marks as possible seems to be part of the culture, and the main 'solution' is to be aware of what is going on - and refuse to be cowed by it. You can humour your critics by putting in their suggestions (some, at least) - and negotiate only when it is clear that what they are suggesting is going to undo all your hard work.

5. 'I don't know what is meant by good writing'

Again a common admission, which is a little frightening: why bother editing your own work if you don't know if it is getting better? For the kind of writing we are talking about (which is not to be confused with literature) there is an easy definition that happens to be both author-friendly and reader-friendly: good writing can be measured by whether you succeed in what you set out to do. If you want a grant, and get the money, that is good writing. Stick to the big picture and don't get bogged down by detail.

Tim Albert's book *Write effectively: a quick course for health workers* (Radcliffe Publishing 2008) is available to readers at a 20% discount when you order through www.radcliffe-oxford.com and quote the reference WRITEFF1

<http://www.radcliffe-oxford.com/books/bookdetail.aspx?ISBN=1846191351>

Are your HPMA colleagues getting eNetwork?

If you or any of your colleagues have experienced problems downloading, viewing or receiving the latest issues of the electronic newsletter please email

Lauren@chamberdunn.co.uk
at Chamberlain Dunn Associates.

BRANCH MEETINGS

Meetings at branch level take place usually on a bi-monthly or quarterly basis. They typically include speakers, presentations, social gatherings, workshops or educational activity and many branches run regular employment law updates.

Contact HPMA administrator Lauren Crawford on 020 8334 4530 or admin@hpma.org.uk for details on your local branch.

Headlines from Personnel Today

HR departments are still reporting skills shortages despite increasing unemployment and a rising numbers of job applications.

Personnel
today

A survey of over 350 HR directors by recruitment firm Randstad found that 55% said they were still receiving applications from candidates who lacked key managerial, operations and IT skills.

A further 70% claimed the UK still had a long-term skills problem caused by weak links between the education system and employers.

Flexible parental rights should be extended to parents of children who are aged 18 and under, said a Tory peer who has introduced a private bill on equality issues into Parliament.

Currently only parents and carers who have children aged six or under have the right to request flexible working though the government plans to raise the age limit to 16.

Baroness Morris of Bolton included the proposal in her Equal Pay and Flexible Working Bill which had its second reading in the House of Lords last week. The Bill also calls for employers that pay women less for the same work as men to be forced to carry out equal pay audits.

The HR jobs market is expected to hold up well during 2009 despite the gloomy economic climate, according to research by recruitment firm Robert Walters.

The Robert Walters *Annual Salary Survey* predicts that while organisations' resourcing strategies would remain cautious in the year ahead, the growing prominence of HR in overall business strategy will mean that recruitment in the sector should remain relatively stable in 2009.

DATES FOR YOUR DIARY

- **HPMA awards**
Closing date for entries in all categories **26 March 2009**
Judging day - main categories **12 May 2009** Beachcroft Law Offices, London
Awards ceremony and black tie dinner **25 June 2009** Royal Garden Hotel, London
- **HPMA Welsh Branch Conference**
Maximising the power of people
7 May 2009 All Nations Centre, Cardiff
- **South East Branch HPMA meeting** Kent & Medway Room, York House*
7 May & 3 September 2009 09:30-14:00
* Venue is subject to change if expected numbers exceed room capacity
- **HPMA Northern Ireland branch conference**
14-15 May 2009
- **NHS Employers annual conference and exhibition**
3-5 November 2009 Birmingham ICC