

Dear Russell George MS,

Thank you for your recent request made on behalf of the Senedd Health and Social Care Committee seeking additional comments about *A Healthier Wales: our workforce strategy for health and social care*.

As you will be aware, UNISON Cymru Wales submitted a thorough response at an earlier stage of the consultation process. Therefore, the below response will not repeat comments and points previously submitted but will instead address the specific questions raised in your correspondence.

As always, UNISON is keen to engage throughout this consultation process and we would be happy to participate in any further oral evidence sessions or support the facilitation of a roundtable event with workers from the health and social care sector.

Thank you once again for contacting UNISON on this important matter.

Yours sincerely,

Alastair Gittins

# UNISON Cymru/Wales response: A Healthier Wales – A Workforce Strategy for Health and Social Care

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## 1. How effectively does A healthier Wales: our workforce strategy for health and social care address staff wellbeing?

1.1 UNISON Cymru Wales has submitted a thorough response to the strategy at an earlier stage of the consultation process and we guide members of the Senedd Health and Social Care Committee to the response for a full answer to the question posed above.

1.2 In terms of additional commentary to that already submitted, UNISON is broadly supportive of the strategy, however, the key element to a healthier workforce will be in the implementation of the strategy.

1.3 It is UNISON's view that the only genuine way to achieve the ambitions set out in the strategy is to ensure partnership working and employer engagement with trade unions across the board. Sadly, this is far from being realised – particularly in privatised elements of the social care sector there are too many examples of hostile employers and a lack of recognition of trade unions.

1.4 Trade unions are not and should not be viewed as separate entities – trade unions are the workers, and the worker voice must not be ignored.

## 2. What are your views on current approaches to assessing staff well-being? Are surveys as a standalone tool sufficient to provide an accurate picture of the wellbeing of the health and social care workforce? Are there other measures that you believe should be adopted?

2.1 UNISON disagrees that surveys alone are insufficient as a standalone tool to provide an accurate picture of the wellbeing of the health and social care workforce. Whilst surveys can be useful, they should not be the only measure used to assess wellbeing.

2.2 Worker wellbeing goes beyond how an individual worker feels on any given day. Worker wellbeing includes, but is not limited to, good work, the values and principles of the employer, health, collective and social issues, personal growth, physical activity, financial wellbeing.

2.3 with each of these themes of wellbeing, there will be various measures that can be utilised to build a more holistic assessment of wellbeing across the health and social care workforce.

2.4 Taking the theme of health – this can relate to physical health, physical safety, and mental health. Assessment might include the levels of sickness within the workplace, the regularity of health safety assessments, the workplace policies in place, ability to access employee assistance programmes, referrals to occupational health, and many other examples. All these measures, and more, can help assess the overall wellbeing of the workforce.

2.5 Good work can be reviewed using various means including through the consideration of the work environment, the line management, the workplace policies available, change management processes, work demands, pay and reward, and autonomy. Access to a trade union is a major factor in determining good work – a unionised workplace is an indicator of the value the employer places on their employee's wellbeing. Good employers have nothing to fear in terms of allowing their workers to access trade unions and they clearly recognise the value of a strong worker voice. The benefits of unionised workplaces are well researched and includes staff wellbeing.

2.6 Values and principles can include the inclusion and diversity of an organisation and the ethical standards of that organisation. An audit of the diversity of an organisation can indicate the inclusivity of that organisation – an important feature of worker wellbeing.

2.7 The employee voice is integral to a healthy workplace – a unionised workplace is key, but in addition there must be genuine dialogue between employers and employees which should be supported by robust workplace policies. Involving workers in decision making is an essential part of developing strong and positive relationships and can support wellbeing in the workplace. An audit of current employer practices and policies will contribute to the broader picture of wellbeing.

2.8 Workers must have scope and opportunity for personal growth in the workplace. This may be through career development opportunities or lifelong learning. An absence of career development opportunities and lifelong learning demonstrates a lack of focus on wellbeing.

2.9 Financial wellbeing is integral to overall wellbeing. All workers deserve fair pay and just reward for their work, as well as fair work policies, retirement planning services, and employee financial support. Overall wellbeing can't be maintained without fair pay.

2.10 Other measures that can be used to monitor worker wellbeing include staff turnover, data around sickness absence, data on referral rates to occupational

health, the number of staff who have flexible working arrangements, whether there is a wellbeing strategy.

2.11 As identified, one tool alone cannot properly assess the wellbeing of a workforce and numerous measures and tools should be employed to gain a holistic perspective of workforce wellbeing.

### 3. In your view, are the partnership forums referred to above by HEIW operating effectively?

3.1 UNISON agrees the NHS Wales partnership forum is broadly effective. This forum has been long established and well-practiced but can be slow. The forum is a good policy making tool, but the operational implementation of the policies can be complex, and it is difficult to assess how well connected the forum is at health board level.

3.2 In some ways the social care fair work forum can be considered successful. Social care stakeholders have been brought together and found common interests. There is definite potential for the delivery of fair work in the social care sector.

3.3 However, the forum lacks transparency in terms of decision making and driving the work forward. Much of the decision-making appears to occur within an inter-Ministerial group, with little detail of who sits on this group and how it operates.

3.4 Furthermore, whilst the forum may be able to unite around issues such as the payment of the real living wage across the sector, there is no clarity on how this will be taken forward including scarce detail on how it will be funded.

3.5 Whilst the initial remit of the forum was to consider wider possibilities around fair work and collective bargaining, the forum has become consumed by trying to deliver the real living wage. Whilst UNISON welcomes the real living wage for care workers, we are clear it is only a starting block for fair pay in the sector and this alone will not resolve the issues across the sector and will not ensure worker wellbeing. Despite these caveats, the forum seems unable to move past this issue and since April, the forum has only actively pursued a task and finish group on pay and no other factor has been considered.

3.6 For clarity, UNISON is supportive of social partnership working and we believe there is enormous potential for the social care fair work forum, but the problems identified above need to be addressed.

4. To what extent is there sufficient staff capacity to ensure that workloads are manageable and that staff are able to take breaks, annual leave, access wellbeing support and undertake training and professional development? Is the picture improving or deteriorating, and do staff feel they are sufficiently supported in this respect by their organisations' leadership and management?

4.1 It is well documented that NHS and social care staff alike are under enormous, sustained, unacceptable pressures. There is not sufficient staff capacity, it is more common for health workers to miss their breaks rather than be able to take them, there are long-term staff vacancies across both the health and social care sector.

4.2 Many workers are struggling to find the time to take their annual leave without detrimentally impacting the rest of their team. Only this week (w/c13 Dec 2021) we have heard from the Health Minister that health workers will be asked to cancel annual leave to support the rollout of the vaccine booster programme. This comes in addition to the relentless pressure health workers have experienced since the start of the pandemic.

4.3 Waiting list pressures continue to grow and health workers are now faced with another gruelling winter ahead with a new unknown COVID variant on top of the usual winter pressures experienced in the sectors.

4.4 UNISON believes the situation is deteriorating with many experienced members of the workforce retiring early and acquiring work outside of the sectors because of the ongoing pressures.

4.5 Whilst the pandemic initially ignited a desire for some to work in the health and social care sector as a part of the effort against the virus, this does not appear to have translated on the ground – which is demonstrated by the ongoing long-term vacancies.

4.6 Under such sustained pressures, it is extremely hard to support workers properly in the workplace.

4.7 It is difficult to full appreciate the magnitude of the problems experienced by health and social care workers and we would urge the committee to seek oral evidence from key workers to gain a fuller understanding of the issues. UNISON can help facilitate this work.

5. What are your views on the pilot approach to assessing staff's digital skills, capabilities and training needs? Is a self-assessment tool sufficient to identify where there are skills gaps across health and social care, and what further action is needed to ensure the health and social care workforce have the digital skills required?

5.1 The self-assessment tool should not be the only mechanism for identifying skills gaps across the sector but should instead form part of a wider discussion. Discussion with manager or digital leaders should also play a part. It is not reasonable to place the full onus for assessing digital skills on the individual worker. It should be a joint process between the employer and employee.

5.2 UNISON believes digital champions should be considered to allow people to seek peer-to-peer support. Workers can also access digital training and development through the Wales Union Learning Fund projects.

5.3 These tools should complement the usual development review processes and a digital skills policy. Workplace development should be undertaken in partnership between the worker and employer.