Second Partnership Agreement
between
London Ambulance Service NHS Trust
and
the Staff Council Trade Unions

Finding Solutions Together

2007-2010

UNISON
T & G
amicus
GMB
1. Introduction

London Ambulance Service NHS Trust has enjoyed a close working relationship, through arrangements for joint consultative committees, with its recognised Trade Unions for many years.

This relationship was enhanced and augmented in 2002 by the introduction of a formal Partnership Agreement. Partnership working is now accepted by all parties as a key aspect of the work and development of London Ambulance Service, and this was clearly evidenced in the generally positive and successful approach to joint working on the Service Improvement Programme.

To build on this, and in view of the agreement of the Trust’s Strategic Plan (2006 – 2013), it is therefore felt appropriate to renew and refresh these principles and arrangements by way of a new Partnership Agreement between London Ambulance Service and the recognised unions:

Unison
GMBTU
TGWU
Amicus

(TGWU and Amicus are in the process of merging. This process will be complete by November 2008 when they will be formally replaced by a new single union, “Unite – the Union”.)

This builds on the previous Partnership Agreement (2002 – 2005) which committed management and trade unions to working together to improve joint working across all areas of the Service to modernise and improve services to patients and to improve the working lives of all staff.

This Partnership Agreement fully endorses the LAS Vision and supports the values of the Service which underpin that vision (attached).

2. Benefits of Partnership Working

Effective partnership working has the potential to produce important benefits for all parties, including:

- delivering improved services to patients/users
- improved mutual understanding
- an opportunity for partners to contribute their experience and ideas to the development and implementation of the workforce implications of policy on health and social care
- more effective implementation of policy
- ensuring high standards of employment practices
- providing a transparent and streamlined structure for Trade Union, employer and staff engagement.
3. Aims, Principles and Objectives

The principles of this agreement and its processes and structures are consistent with those agreed to govern partnership working arrangements at the national level.

These are set out in the formal “Partnership Agreement between the Department of Health, NHS Employers and NHS Trade Unions”. Aspects of this agreement are taken directly from that overarching statement of principle, linked to the partners’ shared goals and objectives.

The agreement outlines how the partners will work together to promote effective partnership working on the workforce implications of policy and sets out agreed working arrangements/principles for a revised consultative committee structure.

The agreement recognises that each individual staff member is part of the LAS and has an important role to play in its future development; that everyone should be empowered and responsible for decisions in their roles; and that everyone should focus their efforts on helping to achieve the initiatives outlined in the LAS Strategic Plan 2006-2013.

The key aims are to:

- To recognise the role that staff and their representatives have in contributing to service development, service delivery, and improving patient care by constant review of policy, working practices and procedures
- To promote effective communications between the partners
- To promote joint ownership and acceptance of issues, concerns and solutions
- To recognise the importance of Trade Unions in providing a voice for staff and their shared responsibility for active and effective communication with staff.

4. Roles and Responsibilities

To enable effective operation of these partnership arrangements, all parties agree to recognise and respect each other’s roles and functions, which are distinct but complementary.

In particular, this agreement recognises explicitly that:

- The Trust Board and Senior Managers and all staff of London Ambulance Service NHS Trust have a responsibility to manage the delivery of ambulance services to the capital that provide high standards of clinical care, contribute to improvements to public health, and are managed within budgetary constraints.

- Trade Unions have a responsibility to represent, and act in the interests of, their members.

- There is a shared commitment to deliver a service that is accountable to Commissioners and provides high quality and integrated health services for patients and service users.

- There is a shared commitment to continuous improvement, including access to high quality services and delivering value for money to the public.

- There is a shared commitment to the promotion of good practice in all areas of staff management, including equality and diversity, and staff development.
• There is a shared commitment to security of employment and the adoption of a collective approach to support staff who may be affected by service changes.

• Other stakeholders will also have legitimate views which must be considered and taken into account.

5. Principles of Effective Joint Working

In accordance with the national Partnership Agreement between the Department of Health, NHS Employers and the NHS Trade Unions, it is accepted that to deliver partnership working successfully it is important to develop good formal and informal working relations that build trust and share responsibility, whilst respecting difference.

To facilitate this, all parties commit to adopt the following principles in their dealings with each other:

• build trust and a mutual respect for each other’s roles and responsibilities
• openness, honesty and transparency in communications
• top level commitment
• a positive and constructive approach
• commitment to work with and learn from each other
• early discussion of emerging issues and maintaining dialogue on policy and priorities
• commitment to ensuring high quality outcomes
• where appropriate, confidentiality and agreed external positions
• making the best use of resources
• ensuring a no surprises culture.

6. Working Arrangements

These Partnership arrangements will be supported by a revised joint consultative committee structure, and will be regularly monitored and reviewed by the Joint Secretaries to the Staff Council.

The Staff Council is the senior joint forum within the organisation. Its membership comprises Directors and other senior management representatives, and senior Trade Union representatives. The Joint Secretaries consist of the Chairs, Secretaries and Assistant Staff Side Secretary of the management and trade unions sides. The joint secretaries will meet monthly or as necessary, and the Staff Council will meet quarterly.

At present, the management side Chair is the Director of Human Resources and Organisation Development, and the management side secretary is the Assistant Director, Employee Support Services.

The Staff Council will consider matters relating to:

• Trust strategy
• Operational and financial performance
• workforce and business planning
• commissioning and funding
• terms and conditions of service
• policy development.

This list is not exclusive.
It will also receive reports from constituent sub-committees, including the Trust Negotiating Forum, the Terms and Conditions Sub-group, and corporate operational joint committees. It will consider, as appropriate, implementation of policy ratified by the Trust Board, and agree policies to be submitted to the Trust Board for approval.

Further joint operational committees will operate at Area and local (station etc) levels.

All joint meetings will be recorded and notes/minutes published.

The membership and terms of reference of the Staff Council and the joint consultative committees are currently under review, and further details will be published in due course.

7. Evaluation and Review

As a matter of good practice these arrangements will be subject to annual review, by the Joint Secretaries in the first instance, specifically to consider whether arrangements can be improved.

The Joint Secretaries will make recommendations to the Staff Council where such improvements are identified.

Signed:

Caron Hitchen  Eric Roberts  
Director of Human Resources and Assistant Trade Union Staff-side Secretary  
Organisation Development  
London Ambulance Service NHS Trust  
On behalf of Management On behalf of the Trade Unions

1 December 2007
Appendix A

London Ambulance Service NHS Trust Values

Clinical Excellence
We will demonstrate total commitment to the provision of the highest standard of patient care. Our services and activities will be ethical, kind, compassionate, considerate and appropriate to patients’ needs.

Respect and Courtesy
We will value diversity and will treat everyone as they would wish to be treated, with respect and courtesy.

Integrity
We will observe high standards of behaviour and conduct, making sure we are honest, open and genuine at all times and ready to stand up for what is right.

Teamwork
We will promote teamwork by taking the views of others into account. We will take a genuine interest in those who we work with, offering support, guidance and encouragement when it is needed.

Innovation and Flexibility
We will continuously look for better ways of doing things, encourage initiative, learn from mistakes, monitor how things are going and be prepared to change when we need to.

Communication
We will make ourselves available to those who need to speak to us and communicate face to face whenever we can, listening carefully to what is said to us and making sure that those we work with are kept up to date and understand what is going on.

Accept Responsibility
We will be responsible for our own decisions and actions as we strive to constantly improve.

Leadership and Direction
We will demonstrate energy, drive and determination especially when things get difficult, and always lead by example.

Appendix B
Service Improvement Programme 2006-2013 – Initial Suggested Areas of Partnership Work

• Additional Complex operational response

• Review of operational cover and working patterns, including relief arrangements

• Community and first responders

• Managing frequent callers

• Automatic despatch of ambulances

• Dynamic deployment

• FRU staffing levels and deployment

• Increased solo responders

• Administrative handover at hospitals

• Increased referral pathways

• Skill mix – including White Work and A&E Support

• Urgent care Workload

• Job cycle times

• Control Services restructure

• Re-engineering of call handling