


INFLUENCING A BRIGHTER FUTURE

HEALTH & WELFARE DIVISIONAL STRATEGY
2022 – 2024

**FORSA**

At the heart of Health & Welfare





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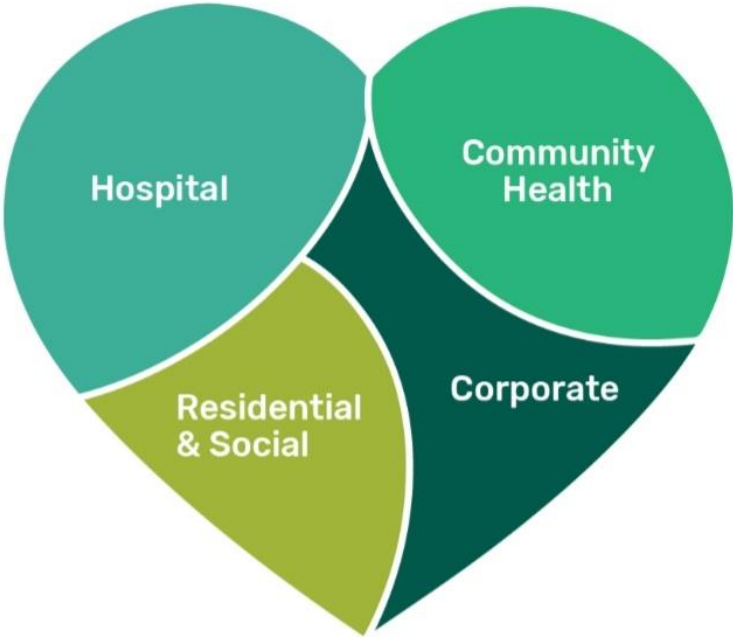
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Influencing a Brighter Future

Health & Welfare Divisional Strategy 2022 – 2024

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FOREWORD – ÉAMONN DONNELLY

The Fórsa Strategic Plan 2021-2025 sets out a range of objectives, challenges and actions which are aimed at growing Fórsa’s influence as the leading public sector union and a leading influence across the trade union movement. The plan sets out 5 core strategic objectives to which the union is committed;

- Organising to create a stronger more powerful union
- Delivering for members
- Campaigning and influencing
- Building an efficient and effective union
- Futureproofing Fórsa for the challenges ahead

The Health and Welfare Divisional Executive Committee, in synergy with the objectives set out in the Fórsa Strategic Plan, has developed its own strategy for 2022 to 2024. The strategy concentrates on how we can meet the challenges and pursue better outcomes for the variety of workers we represent in the health and welfare sector. Some of the challenges are ambitious, and rightly so. With the collective will, we can strive forward as a more cohesive and confident block of workers with a clear focus on what needs to be achieved. This will only occur if we measure our progress against our ambition.

I wish to thank the HWDEC for its commitment to setting out the strategy, in particular, cathaoirleach Clodagh Kavanagh, for her continued drive to have the strategy document completed. I say thanks also the staff on the National Health Office Team (Chris Cully, Catherine Keogh, Gary Hearne and Adam O’Maolagáin) for their huge contributions and inputs into the strategy.

Best Wishes



Éamonn Donnelly
Head of Health and Welfare Division



FOREWORD – CLODAGH KAVANAGH

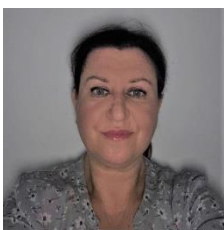
Our Health and Welfare Divisional Strategy for 2022 – 2024, in line with key strategic objectives set out in Fórsa’s Strategic Plan 2021 – 2025, establishes our goals and vision for the Division and encompasses the following categories:

- Health & Social Care Professionals
- Community and Voluntary Sector (S39 and S56 Agencies)
- Clerical and Administrative Grades

Our strategy is YOUR strategy, you our 30,000 members. It is developed and underpinned by the motions you sent to our Divisional Conference in 2020; by your engagement in our Divisional Councils; and your engagement in your Branches and Committees. It also sets out ambitions and goals in anticipation of the challenges that are likely to arise over the next couple of years. This Committee is elected to represent you and this document outlines the work we will undertake on your behalf in this term.

I wish to thank the Health and Welfare Divisional Executive Committee for their tireless representation of our members, and their valuable time and input into this strategy. I would also like to thank the National Health Office Team for their assistance in developing this strategy and for their continuous efforts on behalf of our members.

Take care,



Clodagh Kavanagh
Cathaoirleach Health & Welfare Divisional Executive Committee



A. STRATEGY FOR HEALTH & SOCIAL CARE PROFESSIONS

1. Assertively promoting the importance of union membership for HSCPS including the CORU related services provided by Fórsa

In November 2020 Fórsa launched its Strategic Plan 2021-2025. The first objective of this plan is to organise to create a stronger, more powerful union.

Specifically, section 1.6 called on Fórsa to begin “Identifying strategic growth areas; implementing organising strategies in target sectors, consolidating membership through infill organising in unionised workplaces, grades and professions.”

The National Health Team has identified the recruitment of HSCPS (Health and Social Care Professionals) as a priority objective in this context. HSCPS provide an optimum opportunity for the recruitment of a potentially strong and influential cohort within our public health system. Increasing Fórsa’s density within these professions will enhance the union’s ability to ensure that HSCPS are at the centre of service planning, delivery, management and leadership. This will enable the union to develop these professions by improving their career structures, and this is the primary aim of Fórsa’s HSCP National Professional Committees.

The Health and Welfare Division will achieve this through:

- Increased Fórsa visibility in the workplace
- Develop a targeted join/induction pack to include a visual route-map of the who, what, where when and how of accessing union services
- Targeted roadshows showcasing benefits of union membership placing particular emphasis on the enhanced benefits in relation to CORU registration
- Targeted information sharing and gathering meetings, both online and virtual, in various geographical areas, linked to service development and organisational change e.g. Slaintecare, Network Learning Sites, Progressing Disability Services.
- Structured and frequent engagement with branches and National Professional Committees with a focus on identifying common issues and supporting them to organise and co-ordinate around these
- Develop initiatives to connect with students and graduates to ensure awareness of Fórsa and its services to HSCPs prior to entry into employment. Possible initiatives to include: -
- Fórsa student membership scheme
- Promotional literature for use in universities advising of union services and benefits
- Autumn and Spring targeting of students on work placements
- Developing links with tutors to enable access to the students
- Develop link with student unions
- Develop a working collaboration with Fórsa's strategic organising unit on above initiatives

2. Secure the appointment of HSCP policy advisor in the Department of Health

It is accepted, beyond question, that HSCPs will play a pivotal role at front and centre of a healthcare model which removes pressure from the acute hospitals sector in favour of community led treatments and processes.

Fórsa has been in previous discussions with the Department of Health regarding the need for the appointment of a Health & Social Care Professional (HSCP) Policy Advisor within an autonomous stream, rather than as a professional subset of the Nursing profession, which had previously been proposed. The issue was raised directly with the Minister for Health in August 2020 and in recent times we have been seeking to develop cross-party political support for the appointment sought. The need for an autonomous HSCP Policy Advisor has never been more absolute based on:

- The plan to develop and implement 96 Community Health Networks contained in the Winter Plan to 2022.
- The plans contained in the Health Sector Building Momentum Sectoral Action Plan to establish the community health structures and reporting arrangements which moves towards the model recommended in the Sláintecare Report.
- The recently published Sláintecare implementation strategy.

It is, therefore, vital that the Department of Health has in place, an autonomous advisor at the appropriate level to best advocate and lead out on stated government policy. Fórsa will continue to lobby Government and Opposition Party TDs to achieve this vital development role. This issue will be highlighted through an agreed communications strategy with National Professional Committee input, considering all avenues available to Fórsa to achieve this aim.

3. Create a working synergy with policy and programme makers: Placing HSCPs at the centre of all aspects of clinical design, planning, management and leadership at all levels in the Health Service

The second objective of Fórsa’s overall Strategic Plan 2021-2025 focuses on delivering for members by “standing up for quality public services.”

Fórsa HSCPS have taken a central role in highlighting systemic deficits that inhibit the successful provision of crucial public services. Fórsa has worked to bring attention to many service issues, including unacceptable waiting lists, the controversy between preliminary team assessment and the Assessment of Need under the Disability Act, safer caseloads for social workers, appropriate structures for clinical management and governance structures as well as operational management and governance for HSCPs, and the lack of development of clinical specialist and advanced practitioner roles. Investment in these grades would develop the Irish health service, address recruitment and retention challenges, reduce waiting lists and deliver key outcomes for patients. HSCPS’ professional knowledge and understanding of optimum systems of public service delivery (and delivery deficits) is a crucial asset to Fórsa’s objectives in this context.

A strategic guidance framework launched by the HSE - HSCP Deliver 2021 - 2026 – a framework for achieving our collective potential - is designed to enable HSCPS, managers, leaders and policy makers to deliver and implement services that best support local action on local priorities.

As a policy document it directly reflects a significant number of strategic aims expressed by HSCPS to Fórsa’s Health and Welfare division in recent years. The DEC, in conjunction with HSCP NPC’s, has developed a clear view that in order to achieve the aims of our members, HSCPS must be at the centre of service

planning, delivery, management and leadership in a modern healthcare system. The HSE document states that it is vital that “HSCPs... are included in all aspects of clinical design, planning and leadership at all levels in the health system,” and Fórsa will ensure that a central role for HSCPs is sustained and enhanced.

The Health and Welfare Division will achieve this by working with HSCP colleagues to ensure:

- Health Sector employers understand and realise the full value HSCPs bring to the health and social care system
- Health Sector employers enable and create opportunities for HSCPs to lead to their full potential at all levels in the system
- Health Sector employers provide equity and fairness of competition to HSCPs for career opportunities at senior managerial level within the organisation
- Health Sector employers provide greater investment and creation of more frontline HSCPs posts at various grades across all operational Divisions and Care Groups to ensure the provision of safe, effective and quality public services
- 'Health Service employers continuously develop and improve services by providing HSCPs with access to supports such as relevant, up to date and evidenced based research and practice, metrics, ehealth digital technologies and assessment and therapeutic resources to ensure safe, effective and quality service provision in the decades ahead
- 'The full implementation of HSCP Deliver 2021 - 2026 – a framework as a matter of priority

4. HSCP Career Pathway Review

The strategic objectives explored above require the successful completion and implementation of the HSCPs Career Pathway Review. The completion of the review unlocks the full potential of HSCPs within our health services and creates a sturdy foundation upon which the recruitment and working synergies described above can be established.

The agreement to conduct a review of HSCP Career Pathways, in the context of a changed working environment, arose from the WRC Agreement on CHO Community Health Networks in September 2018.

Mr Robbie Ryan was appointed as an independent facilitator to conduct the review. Fórsa's National Professional Committees were invited to make submissions to the career pathway review process on behalf of their profession. In December 2020, on request from the parties, Mr Ryan made an advance interim recommendation on the conversion of staff grade to senior grade posts on completion of sufficient validated competent service. The remainder of the process, which includes creation of clinical specialisms and advanced practice, will continue throughout 2022

Remaining steps to be taken are as follows:

- Pursue completion of the staff grade to senior grade within primary care area. Conversions have already taken place or are being processed. The roll-out for all staff grades with sufficient service is to be completed.
- Monitor and review the consistency and outcomes for the newly established appeals process in respect of staff grade therapist who are deemed not to have passed the competency check.
- Agree procedure for staff development to enable those who have not passed the competency check to reach the standard required.
- Conclude discussions on the extension of the staff grade to senior grade conversion in all other areas beyond primary care to include disabilities and mental health. Discussions commenced on 7th February 2022.
- Ensure outstanding In Charge III claims are fully concluded through the independent appeals process with Mr. Pat Brady.

- Conclude discussions on a suitable system to process In Charge III claims as they arise in future.
- Convene a plenary meeting with the independent facilitator Robbie Ryan in respect of the remaining aspects of the career pathway report with specific emphasis on the advanced practitioner, clinical specialist, roles associated with policy making and service planning, delivery, management and leadership.
- Pursue a strategy to ensure that the outcome of the career pathway report and recommendations are fully adopted across all settings, statutory and voluntary, across the health and welfare sectors.
- Throughout the progression and achievement of these steps meaningful and regular engagement with the NPCs is recognised by the Health & Welfare Division as vitally important



5. HSCP career development and progression

HSCPs are the second largest clinical group in the Irish Health Service, making up 25% of the clinical workforce in all care settings. They are passionate about maintaining and improving the quality and safety of patient care and improving outcomes. HSCPs are committed to continuing their development personally and professionally to deliver the highest standard of care.

However, opportunities for HSCPs in terms of continuing professional development, and access to formal academic programmes to develop skills and competencies needed for service delivery, are limited with minimal resources available. It is generally seen as a “luxury” rather than an entitlement despite the mandatory CPD requirements place on HSCPs through CORU. This is in stark contrast to other clinical colleagues who have enjoyed access to dedicated CPD funding for many years.

In 2016 the HSE signed up to an EU wide Joint Declaration between EU Public Service Employers and European Public Services Unions to provide CPD and Lifelong Learning for all health workers in the EU. It states that “CPD is a joint responsibility of the employee and the employer where employers, given their legal responsibility for good quality care delivery, should provide the required infrastructure and facilitate sufficient and adequate training possibilities.”

The Health & Welfare Division will press for the full implementation of commitments made in this joint declaration as follows:

- Build on already established links with the National HSCP office regarding CPD
- Press to secure dedicated funding for training and development programmes for HSCPs in line with what is available to clinical colleagues in other professions.
- Secure protected time to enable HSCPs engage in CPD
- Seek to ensure that HSCPs are strategically aligned and involved in the design, planning and delivery of training to HSCPs

6. Building working relationship with clinical leads and decision makers in CHO's, Hospital groups and throughout the Health Sector

It is vital that the Fórsa Health & Welfare Division forges effective working relations with clinical lead and decision makers across the HSE and wider Health Sector both within the National Clinical Care Programmes and Community Health and Hospital Groups.

In achieving this Fórsa will: -

- Ensure that HSCPs have input into decisions made by clinical leads about service planning, delivery, management and leadership so as to influence a service design which encompasses HSCPs and their vital role within all areas of healthcare delivery
- Ensure that clinical lead decision makers are fully aware of the wealth of skills and innovation that HSCPs bring to the health service.
- Ensure that the HSE's very own strategy "HSCP Deliver" and the many HSCP innovations set out therein are rolled out and adopted nationwide
- Ensure and insist that HSCPs are not an afterthought in service development but rather that all relevant HSCPs have their profession represented on all clinical care programmes to guarantee the provision of holistic quality services to the population of Ireland.

The Health and Welfare Division will achieve this through:

- Making direct contact with key clinical leads at national level with a view to further developing some pre-existing relationships and forging new relationships where none exist
- Seeking to establish more formalised regular engagements at national level (as is currently the case for nursing and medical unions)

7. Research and development

Under the fifth objective of Fórsa's Strategic Plan: Futureproofing Fórsa for the challenges ahead, the union has made a commitment to ensure internal processes are in place to monitor and analyse economic, social and cultural trends, for effective strategic and operational risk management. Furthermore, as part of the plan to resource strategic foresight, Fórsa will establish a working group to focus on future challenges and long-term strategies, to assist the union to make well-informed, proactive decisions, guided by expert opinion and research. The National Health Team and HWDEC considers it vital that this expert opinion and research includes specific bespoke pieces of research into areas both of concern and interest to Health and Social Care Professionals e.g., the impact of Brexit on workforce planning.

The Health and Welfare Division will achieve this through:

- Making contact with UK unions and relevant EPSU unions in relation to existing research and compiling a database of same
- Explore opportunities to collaborate with other unions on appropriate research.
- Build on the learning from the recent research carried out by Maynooth University into the area of Section 39 funding with a view to exploratory discussions on future research
- Establish a working group on the issue of research and development and seek nominees from each NPC to same

8. Media and Communications

- Audit of current degree of media engagement on HSCPs: Examining the nature and volume of media coverage of HSCPs. Most coverage likely to focus on service delivery problems, waiting lists etc. With HSCPs expert guidance, Fórsa has the potential to situate itself as an authoritative voice on optimum service delivery. This approach requires a high level of cooperation between HSCPs vocational groups, the national health team and Fórsa's communications officer, with whom this strategy has been developed.
- Each professional committee should elect a communications officer / PRO to link with the Fórsa national office and communications unit. The national health team proposes a series of introductory meetings with Fórsa's communications officer. This is in order to establish and implement an ongoing communications strategy, defined by proactive, prepared communications, placing the expert voice of HSCPs at the centre of the approach, helping to maximise coverage and situate Fórsa as a trusted voice on public health.
- Ultimately, the same communications strategy's objective will be to improve the visibility and understanding of the work of HSCPs. To make the work of HSCPs and their proposed solutions to service delivery blockages easier to understand to key audiences, chiefly service users (especially those subject to waiting lists for services), political actors including Government and also the Dept of Health and the HSE.

B. STRATEGY FOR COMMUNITY AND VOLUNTARY SECTOR (S39 AND S56 AGENCIES)

The 5 pillars of Fórsa's Strategic Plan are:

1. Organising to create a stronger, more powerful union
2. Delivering for members
3. Campaigning and influencing
4. Building an efficient and effective union
5. Futureproofing Fórsa for the challenges ahead

1. *Organising to create a stronger, more powerful union*

- Develop a bespoke organising strategy in collaboration with the Strategic Organising Unit for the Sector in conjunction with officials and branches that will capitalise on Fórsa's involvement in the ICTU 'Valuing Care' campaign.
- Target large employers in the Sector that are acting as lead agencies in the delivery of the new Progressing Disabilities Model

2. *Delivering for members*

2.1 Standing up for quality public services. Advocate for the delivery and funding of quality public services

- Continue to lobby Government to adequately fund services
- Take part in National Strike in the Sector in 2nd half of 2022

3. *Campaigning and influencing*

- Fórsa is a lead participant in the ICTU National Campaign 'Valuing Care' Work collaboratively with Fórsa's Campaigning Unit and the network of Branch Campaigning Officers in the Health and Welfare Division to maximise the success of the ICTU National Campaign 'Valuing Care'
- Build on the political lobbying system in place in the Health Division
- Build alliances with other stakeholders in the Sector to build a common platform (The Wheel etc)

4. *Building an efficient and effective union*

4.1 Delivering effective communications at all levels.

- Work with the Communications Unit to develop a Communications strategy for the sector
- Identify workplace representatives in the sector and provide communications training and advice to order to be consistently and constantly prepared to generate publicity around the vital services provided by our members

5. Futureproofing Fórsa for the challenges ahead

Fórsa's Health and Welfare Divisional Executive Committee is acutely aware of the disparity in terms and conditions between those members working in the HSE and Section 38 agencies and those working in Section 39 and Section 56 funded agencies.

The 5th pillar of Fórsa's Strategic plan commits the union to futureproofing Fórsa for the challenges ahead. In particular 5.2 of that plan calls for qualitative research to assist our work *'Resourcing strategic foresight within Fórsa. Review how we resource strategic foresight and support forward planning, addressing the need for qualitative research to assist in preparing for future developments.*

Thus, in September 2021 Fórsa launched a report A New Systemic Funding Model: The voluntary and community sector in the 2020s, which examined the need to rebuild and refinance the voluntary and community sector with a more sustainable and appropriate funding model. This report was written by researcher Brian Harvey who was commissioned to update the report Caring at What Cost? Rebuilding and refinancing the community and voluntary sector by Chris McInerney and Cian Finn, originally published by Fórsa (then IMPACT) in 2015.

The report focussed on the situation faced by our members working in Section 39 and Section 56 agencies and in particular the implications of the continuing disparity in employment terms between health workers in the community and voluntary sector and those directly employed by the HSE and Section 38 agencies.

This report underpins and guides the HWDEC strategy in relation to this sector. The report clearly demonstrates the need for multi annual funding for the sector in order to bring about job security and wage parity for our members. In order to achieve this, aim the HWDEC will carry out the following actions under each of the 4 remaining pillars of the strategy.

C. STRATEGY FOR CLERICAL AND ADMINISTRATIVE GRADES

In the public Health Services, there are more than 12,000 clerical and administrative and related grades (III to VII), based on the 11% share in the staff whole time equivalent census. Since the formation of Fórsa in 2018, the expanse and potential influence of the clerical and administrative block across the wider civil and public service, has yet to be capitalised upon fully in terms of a broader strategic industrial relations agenda designed to achieve better outcomes and thus ensure a brighter future for workers. The actions below are set out in this context.

- There is an absolute need to resist complacency in terms of recruitment and organising of clerical and administrative grades. No longer is it safe to assume that our union density is at the traditional levels of 70% plus across the health services. Mapping of union membership, therefore, is an immediate priority. The outcome of such mapping should then synergise with a programme of targeted recruitment and issue-based organising. This will require a collaborative approach with the union's strategic organising unit.
- The clerical and administrative job evaluation scheme, even allowing for obvious faults in terms of queueing time etc, is the jewel in the crown of meaningful outcomes for workers in those grades. Government departments resisted allowing a re-open of the scheme for 9 years and it required an intent for all out-strike action to secure the scheme's opening. Since its re-opening in 2018, the scheme has withstood rigorous audit and a 9-month pandemic pause. The union must continue to work collaboratively with the HSE to strive for excellence in the scheme in terms of fairness, transparency, probity and efficiency. This will require a clear understanding that the scheme is the sole mechanism for upgrading of posts outside of promotional competitions. There is also a requirement to train more assessors both for assessment and quality assurance. An increase in the number of staff provided by the HSE at the job evaluation unit should also be pursued.

- The division must explore all mechanisms available to it in order to secure the restoration of the job evaluation scheme at Túsla.
- The liability for discussion on broadened fields of competition above entry level is set out in the last number of successive pay agreements. It is inevitable that there will be some movement on these given developments across the public sector. The division must ensure that fair and reasonable opportunities for promotion remain and that existing workers are treated as a primary resource in this context. The division
- The division should also set out to achieve the implementation of previously agreed arrangements on internal competitions prior to field broadening.
- The division must strive to ensure that health workers are treated fairly and equitably in the application of Blended Working arrangements which will apply across the wider civil and public service.
- The Division will continue to promote the often unseen but crucial work carried out by clerical and administrative staff through its structured engagement with politicians and through targeted communications initiatives.



Engagement across the wider Fórsa union

- The division will ensure that its representation and influence on the Fórsa Equivalent Grades Committee is proportionate to its scale and size. The EGC has the potential to co-ordinate a strategic industrial relations agenda in order to achieve more beneficial outcomes across the civil and public service given the size and positioning of its representative block. The division should be in consultation with other divisions with regard to the future threats to clerical mainstream working posed by automation and digitalisation through the possibility of the creation of a working group which could feed into engagement with employers, so as to ensure that we are ahead of the challenge, rather than be reactive when it is simply too late.
- The division should also play a leading part in designing a strategic industrial relations agenda for the civil and public service in order to achieve better outcomes on issues such as Shorter PayScale's and Shorter Working Time Arrangements and Bereavement Leave.
- The Division, in conjunction with the Communications Unit, should devise a targeted communications strategy based on the objectives set out above.



Influencing a Brighter Future

Health & Welfare Divisional Strategy 2022 – 2024

Hospital

Acute hospital services, Community Hospitals.

- Audiological Scientists
- Audiologists
- Biochemists
- Catering Officers
- Clerical and Admin grades
- Clinical Engineers
- Clinical Measurement
- Contact Tracers
- Dieticians
- Estate Management Officers
- Hipe Coders
- ICT staff
- Librarians
- Occupational Therapists
- Orthoptists
- Perfusionists
- Pharmacists
- Pharmacy technicians
- Physicists
- Physiotherapists
- Podiatrists
- Procurement and logistics officers
- Psychologists
- Senior managers
- Social Care Workers
- Social Workers
- Speech and language therapists
- Surveillance Scientists
- Technical Services Officers
- Ward Clerks

Community Health

Primary Care, Social Care & Disability Services (children) Disability Services (older people), Mental Health Services (children & adolescents), Adult Mental Health Services, Health & Wellbeing, Counselling & Therapy Services.

- Ambulance management
- Audiologists
- Children's Disability Network Managers
- Clerical and Admin grades
- Community Health Network Managers
- Contact Tracers
- Counsellor Therapists
- Dental Hygienists
- Dental Surgery Assistants
- Dieticians
- Environmental Health Officers
- Family Support Practitioners
- Health Promotion Officers
- Home Help Coordinators
- ICT staff
- Librarians
- Occupational Therapists
- Orthoptists
- Peer Support Workers
- Pharmacists
- Pharmacy technicians
- Physiotherapists
- Podiatrists
- Psychologists
- Senior managers
- Social Care Workers
- Social Workers
- Speech and language therapists
- Vaccination Support Officers
- Workshop Instructors (disability services)

Corporate

Finance, Human Resources, Employee Relations, Support Services and Ancillary Infrastructure, Infrastructure for Hospital & Community Sectors.

- Ambulance management
- Auditors
- Civil Registrants
- Clerical and Admin grades
- Communications & Information Officers
- Contact Tracers
- Early Years Inspectors
- Educational Welfare Officers
- Emergency Management Officers
- Environmental Health Officers
- Estate Management Officers
- Fire Officers
- Fire Safety Officers
- Health Promotion Officers
- ICT staff
- Procurement and logistics officers
- Senior managers
- Surveillance Scientists
- Technical Services Officers
- Vaccination Support Officers

Residential & Social

Social Care & Disability Services (children)/ Disability Services (older people) /Mental Health Services (children & adolescents)

- Catering Officers
- Clerical and Admin grades
- Counsellor Therapists
- Dieticians
- Family Support Practitioners
- Occupational Therapists
- Physiotherapists
- Psychologists
- Senior managers
- Social Care Workers
- Social Workers
- Speech and language therapists



At the heart of Health & Welfare



