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Michael Matheson Cabinet Secretary for NHS Recovery, Health & Social Care Scottish Government <u>cabsechsc@gov.scot</u>

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Dear Cabinet Secretary

As a result of the budget set by Glasgow City Integration Joint Board on 22nd March 2023, NHS Greater Glasgow & Clyde management have advised UNISON of a cut to the community staffing establishment of 62.96 WTE, all without first going through any meaningful Partnership or Organisational Change consultation process.

UNISON sees these cuts as substantively wrong, but also sees the procedural approach of the employer as a break with agreed procedures and established Partnership working norms.

UNISON is requesting your urgent intervention to:

- (i) Ensure these pernicious cuts to frontline community health services are reversed, supporting the full resourcing of vital community services in Glasgow
- (ii) Defend the Scottish Government's established approach to Partnership working in the NHS, ensuring NHS Greater Glasgow & Clyde fully adhere to the letter and spirit of agreed policies and procedures on Organisational Change

These cuts do not just mean a permanent reduction in staffing but a reduction in services provided to the people of Glasgow. The cuts impact in Alcohol and Drug Rehabilitation Services (ADRS), the Health Visiting service, on Treatment Room staff, on Older People's services and rehabilitation, all services which are vital if the Scottish Government are to achieve their aims of reducing drug deaths, reducing delayed discharges and investing in proactive measures to improve health and reduce pressures on acute settings within the same health service.

Cuts to these services mean that the persistent, life-limiting health inequalities experienced by the population of Glasgow in comparison to elsewhere in Scotland will grow. The government's Medication Assisted Treatment (MAT) Standards, designed to improve care to some of the most vulnerable in our society and ultimately reduce drug deaths, are already putting huge pressure on ADRS staff in Glasgow. Staff Side representatives have been working in partnership for almost two years to find a resolution to the staffing challenges this service faces. To permanently remove posts from this area just locks in staffing shortages and jeopardises the achievement of the Scottish Government aim to deliver consistent, safe and high quality care to people and families across Scotland. These cuts come at a time when so many of our members tell us NHS services are 'on their knees'. Staff are exhausted as a result of COVID pressures, morale is at rock bottom, and we remain in the midst of a recruitment and retention crisis with most teams working short staffed. While these cuts are to vacant posts, the message this sends to staff is things are not going to get better, they will get worse: staff in these areas will be expected to continue to work short staffed and under severe pressure. This will no doubt impact on staff health, retention and attendance, reinforcing a vicious circle. In addition, those staff who are working will not be able to offer the quality of care they should, and the people of Glasgow will get substandard service. The risks to the service, to the patients and to Scottish Government objectives have also been clearly set out by the Chair and Vice-Chair of the IJB.

Since the IJB decision, UNISON has attempted to address these matters with the Chief Executive of NHS Greater Glasgow & Clyde, but we have been given contradictory messages by the employer. At the Area Partnership Forum, the board's leadership have told UNISON and the wider staff side that this matter should be dealt with "in full partnership", but have also told us in writing that they see these cuts as a fait accompli, effective from 1st April 2023. For Partnership working and Organisational Change processes to have any meaning, these decisions must be downgraded to proposals, all subject to a serious and exhaustive process of discussion and consultation with UNISON and the wider Staff Side. Continuing unilateral action by the employer risks an official dispute.

UNISON would be happy to meet with you to discuss these matters, and again seeks decisive intervention to protect services, patients, staff and positive industrial relations in Scotland's NHS.

We are looking forward to hearing from you.

Yours sincerely

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