

**ANNUAL REPRESENTATIVE CONFERENCE 2019
COUNCIL RESPONSES TO 2019 ARC RESOLUTIONS**

STRATEGIC OBJECTIVE 3:

Fulfil the potential of physiotherapy to empower individuals and communities to maximise independence and live long and live well

MOTION 1

Equality, Diversity & Inclusion in the pre-registration curriculum

This conference is concerned with the reported paucity of training received by pre-registration physiotherapy students in relation to awareness of issues concerning equality, diversity and inclusion, specifically how this can affect long-term condition management.

Currently, education is condition specific and can neglect issues, such as: prevalence of certain conditions amongst certain populations; how experiences may differ; and challenges to access to healthcare in relation to protected characteristics. The ability to recognise and address these issues is integral to ensure a stronger approach to health service delivery in terms of population health supported by the NHS Long Term Plan to reduce health inequalities successfully and improve outcomes for all.

The CSP's quality assurance for qualifying programmes states that programmes should enable students to provide patient-centred care that respects and promotes diversity, however it does not suggest how this is to be achieved.

This conference asks the CSP to champion that all accredited programmes demonstrate how equality, diversity and inclusion is a common thread throughout the current and future changes to their curriculum on long-term condition management.

LGBT+ Network

COUNCIL RESPONSE

We are already committed to working with higher education institutions (HEIs) to ensure the current and future physiotherapy workforce recognise, and proactively engage in reducing, the health inequalities for people with long term conditions.

All accredited programmes are required to demonstrate how module content, assessment, placement opportunities, and the course as a whole develops a graduate with the skills to support people with long term conditions in a person-centred way, including to:

- Reflect on the needs of local, national and global populations
- Work flexibly across care contexts and be prepared to meet challenges associated with population trends and shifting demographics
- Deliver effective services that are centred around whole-patient care across the lifespan and spectrum of health and well-being, illness/disability and end of life care
- Develop skills to identify and implement best practice

The CSP monitors how programmes demonstrate inclusion within the curriculum. In 2017/18 we explicitly focused on cultural competence, looking at how programmes develop students' ability to interact effectively with people of different cultures and address health inequalities, in ways that take account of their beliefs, behaviours and needs. A composite report highlighting best practice is available via CSP website for all members to see <https://www.csp.org.uk/publications/annual-quality-review-uk-pre-registration-physiotherapy-education-201718>

Additionally, the CSP supports programme teams within HEIs to embed good practice through a series of webinars and round table events – most recently looking at social models of care, the inclusive curriculum/'othering', and supporting students to develop a person-centred approach through

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the use of simulation. We also encourage HEIs to work with local providers to seek suitable placements that support students' consolidation of these skills within a practice setting.

As part of our ongoing commitment, we are also looking to formally reconnect with the three CSP networks– BAME, LGBT and Disability via their executive meetings and events to raise their awareness of how this activity occurs and encourage joint working.

MOTION 2

Mental Health Care in the pre-registration Curriculum

Mental health care and support is a priority for the government, however, at the present time, this is not replicated in pre-registration training for physiotherapists. At present, limited teaching regarding mental health is present at a pre-registration level and is often seen as a distinct condition, rather than being integrated across all specialisms.

Conference therefore calls on the CSP to include comprehensive mental health training in all pre-registration courses, focusing on clinical relevance across all specialisms.

London North Stewards & Safety Representatives

COUNCIL RESPONSE

We are committed to this activity.

Since 2010 all courses accredited by the CSP are required to demonstrate how module content, assessment, placement opportunities, and the course as a whole develops a graduate with the skills to support people with physical and mental health conditions and continues to promote that mental health is present throughout the curriculum. While there is always more to be done in terms of ensuring that students understand when they are being taught something, it is difficult to quantify where issues like mental health are 'taught' because so much of the learning is presented in an integrated way throughout the three years. Additionally with a focus on patient centred-care most programmes deliver their teaching via cases and problem-based learning, thereby expecting students to recognise the impact mental health would have on an individual, their family and wider society within these cases.

The CSP encourages HEIs to work with local providers to seek out suitable placements that support students' consolidation of these skills within a practice setting and encourage placements in mental health settings. As part of its expectations for accredited programmes, CSP monitors how programmes demonstrate issues such as these within their curriculum. 2020/21 quality enhancement theme will be two-fold – explicitly focusing on the teaching of mental health, looking at how programmes teach mental health and how the programme teams support students to take care of their own physical and mental wellbeing.

We are committed to updating 'Into Physiotherapy: welcoming and supporting disabled students' resource. We recognise that not only should programmes be equipping students to understand mental health, but they should also be ensuring that students are supported to attend to their own

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mental wellbeing. We intend to include more guidance and support for mental health for HEIs, Students, educators and practicing Physiotherapists. We expect that by bringing to prominence the message that students should practice good mental wellbeing this will translate into their practise with service users and their carers. We have already offered to work with the proposer(s) of this motion to be part of the focus group and/or contribute case studies to the resource.

MOTION 3

Obesity

Currently, obesity is estimated to affect 1 in 4 adults and 1 in 5 children aged 10-11 - and with this comes risk of a number of serious, life-threatening and life-limiting conditions.

We support the current efforts of the CSP including campaigns such as “Love Activity”, but feel more needs to be done to highlight the many components needed to tackle obesity, such as eating habits and mental wellbeing.

Many members feel it is challenging to start these difficult conversations with patients and the public and feel this is an area in which members would benefit from further education.

With most material being aimed at the public, there is a lack of education for therapists, which could increase effectiveness of patient contacts. We are fully supportive of the drive to put physiotherapists at the forefront of public health and feel this is a key area we as a profession need to be active in.

Therefore conference calls on the CSP to:

1. Create educational / training material for CSP members on how to have conversations with our patients about tackling obesity; and
2. Create public health awareness material to highlight the issues of obesity and ways to tackle it.

South Central Regional Network

COUNCIL RESPONSE

Motion failed – no further action required

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**STRATEGIC OBJECTIVE 4:
Represent the interests of our members at work**

MOTION 4

Mental Health & Wellbeing at Work

Conference is concerned that members continue to face increasing pressure to perform their duties, often with limited resources, whilst working to unrealistic or unachievable targets, as highlighted in the CSP's 'Pinpoint the Pressure' campaign. This has led to rising levels of stress and is having serious implications for members' Mental Health and Wellbeing.

Chapter 4 of the NHS Long Term Plan is entitled 'NHS staff will get the backing they need'. This chapter makes much of supporting employees in an environment that promotes their mental health, and cites the NHS Health and Wellbeing Framework.

By providing support and resources on Mental Health and Wellbeing for its members, the CSP can help them to become more aware of their own mental health and develop strategies to help identify causes of stress, whilst also becoming more resilient.

Conference calls on the CSP to:

1. Work with Stewards and Safety Representatives to develop resources and campaign to help members better manage their mental health;
2. Develop an e-Bite on supporting members with Mental Health issues;
3. To invest in its members by signing up to the app 'Headspace', and offer access as a member benefit; and
4. To work collaboratively with employers and the other healthcare unions to promote structures and processes within the workplace which support mental health and wellbeing, including access to a variety of mental health resources.

North West Stewards & Safety Representatives

South West (South) Stewards & Safety Representatives

South Central Stewards & Safety Representatives

COUNCIL RESPONSE

The CSP has been tackling the issue of members' stress and mental health for some time, most recently through our organising campaign on over-work (*Pinpoint the Pressure*). We monitor feedback from reps and members in order to review our existing resources and strategies when considering how best to support members at work. Our approach is to focus our finite resources on what is most effective and this requires our primary focus to be on challenging and changing bad work practices i.e. the underlying causes of members' deteriorating mental health.

Employers hold the primary duty of care for members' health, safety and wellbeing at work. The CSP's role, working with members, is to lobby employers to deliver the pastoral and other care to members that is requested in this resolution.

The CSP's organising activities focus on increasing members' understanding of employer responsibilities and of the benefits of working collectively with others in the workplace to prevent practices that undermine staff mental health wellbeing.

The CSP provides a range of resources to members suffering from work related stress and ill-health, including the following:

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- A practical graphic pamphlet/poster produced in partnership with the CIPD, offering top tips on how to deal with pressure and to be healthy and happy at work. There is also a Welsh language version available. Link to resource is below:
- <https://www.csp.org.uk/publications/under-pressure-leaflets-and-posters>
- Training for safety reps & stewards which has received very positive feedback and aims to raise awareness and knowledge on how to support members with mental health problems
- The Trades Union Congress offers a comprehensive training package for union reps on this topic, covering representation and supporting members as well as campaigning and organising around mental health in the workplace
- The CSP intends to review and update our own training resources during 2020
- Stress at Work Advice sheets for members, with each of these six advice sheets dealing with a particular cause of stress
<https://www.csp.org.uk/publications/stress-work-advice-sheets> This popular series is due for review and updating later this year.
- Advice sheet for stewards, titled: *Supporting you to support members* – includes an important section on what to do when dealing with highly distressed members.

For both capacity and specialist expertise reasons it is not appropriate for the CSP itself to produce an e-Bite in this area, as it would at least partly be a personal support/counselling resource. However as a member of the TUC, the CSP is able to access the TUC online e-NOTES training resource 'Mental Health in the Workplace'

The CSP can signpost members to various Apps and other resources that they might find useful, of which Headspace is one. However, there are several other similar Apps/resources and this raises the question of whether it is appropriate for the CSP to promote or provide one App option over others. Headspace and most of the other similar Apps also offer free versions, albeit that these are sometimes more limited in scope. Funding a paid-for App from member subscriptions would mean reducing another member benefit in order to do so, or raising membership fees. Signposting to freely available versions is a more cost effective option and also one that allows members to choose the App that best suits them.

MOTION 5

Pregnancy Discrimination

Welsh Board welcomes all of the work that the CSP has done to date to prevent discrimination against pregnant women in the workplace. This has included an article in Frontline, a motion at Women's TUC, a Fringe meeting at ARC 2017 and training of the safety reps and stewards.

Despite this, there is ongoing discrimination against pregnant women and examples include not being funded for CPD courses, not being informed about job vacancies and a loss of opportunity to develop in the workplace as a direct consequence of being pregnant. Conference is extremely concerned that discrimination against pregnant women may be unknown and therefore unrecorded.

This conference calls on the CSP to continue to promote equal opportunities for pregnant workers, and to increase the awareness of all CSP members to pregnancy discrimination. This issue needs the CSP to provide an ongoing campaigning strategy, to empower all CSP members to recognise pregnancy discrimination, to act on it and ultimately to remove it from the workplace.

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Welsh Board

COUNCIL RESPONSE

The CSP has a longstanding commitment to promoting all aspects of equal opportunities in the workplace and to fighting all forms of discrimination, including on the grounds of pregnancy.

The rights and fair treatment of pregnant workers and new mothers is a particular CSP priority and has recently been a central focus of our 'Building a Better Balance' campaign, promoting access to, and benefits of, flexible working.

We also work on this issue with other health union colleagues at national level across the UK and in our dealings with Government as well as employers. We will also continue to work with relevant external partner organisations such as Maternity Action.

We will establish the depth and breadth of this type of discrimination by seeking information and examples from the reps networks and from members directly where possible. In addition, we will continue to raise levels of awareness of members' rights through a variety of routes and review the need for updated training for reps once we have established the extent of the issue. We will also measure the impact of any action taken.

MOTION 6

Recording Gender Identity

This conference is aware that the NHS Electronic Staff Record (ESR) system used by 99 per cent of NHS organisations does not provide monitoring options for gender identity other than binary, male and female. We are aware that a large proportion of the trans community does not identify as binary. Therefore the current monitoring systems are not inclusive, nor do they allow the ability to monitor this valuable information on a national or local level to enable appropriate support for all our staff.

This conference asks the CSP to lobby the Department of Health, who commission ESR, and NHS ESR Central Team to review their gender identity monitoring to ensure appropriate and inclusive options are available.

LGBT+ Network

COUNCIL RESPONSE

The CSP is fully supportive of a wider range of options for monitoring gender identity to be available for staff across the NHS in England. We believe that accurate, responsive and sensitive monitoring will lead to higher levels of completion of monitoring information and consequently will contribute to better policy and practice in this area across the NHS.

The CSP believes that the best way to effect change in this area is to work in conjunction with fellow unions and professional bodies across the health sector. In order to do this, this issue will be raised nationally in three ways. Firstly, the discussion will be added to the workplan for the England Social Partnership Forum. Secondly, the issue will be raised within the NHS Staff Council, through its Equality, Diversity and Inclusion Group (EDIG). Finally, the

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request for change will be taken to the NHS Equality and Diversity Council. CSP members and ARC will be kept updated as to progress with these discussions.

In addition, the CSP will write to the NHS Electronic Staff Record team to request this change and explain the reasons behind it and benefits of it.

MOTION 7

Hot weather guidance

This Conference is concerned by the increasing temperatures CSP members and other healthcare workers are expected to work in during the rising temperatures of the UK summer.

We are concerned that members' health is being put at risk through employers not doing enough to tackle this problem that the healthcare in the UK has not faced before. Furthermore, we fear that patient care is being compromised through inefficiency during these heat waves.

This Conference therefore calls on the CSP to:

1. Engage with Safety Representatives to survey which trusts have Hot Weather policies and how they are implemented at a local level; and
2. Work collaboratively with the other healthcare workers and the Health and Safety Executive (HSE) to produce a national guidance on working conditions during periods of hot weather.

East of England Stewards & Safety Representatives

COUNCIL RESPONSE

The CSP understands the issues and challenges for members working in excessively hot workplaces.

We recently updated CSP safety reps on the issue of excessive high temperatures, with advice on how to tackle the problem in the workplace. We also included information on developments at political level to review and improve NHS premises in recognition of over-heating problems. In particular, the Care Quality Commission in England (CQC) was asked to start investigating providers performance on this issue.

The Care Quality Commission's role as stated on their website is to inspect quality and safety, which includes the safety and suitability of premises. They advise: *Our quality assessments of health and care services focus on the importance of people experiencing a safe environment that is responsive to their personal needs. This includes considering the building temperature....*

All NHS organisations are required to produce plans for their local population on heatwave preparation based on Public Health guidance. The HSE already provides guidance based on employers' current general duty under safety law to protect staff from hazards, including excessive heat. Where

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local members identify hot weather and temperature control as a workplace issue, the CSP is able to support members and reps to raise and address the problem.

The CSP already offers reps an advice sheet on temperature control and how best to organise members in getting employers to take action. Based on recent developments in the NHS, this advice sheet will be updated to include guidance on the role and responsibilities of the CQC, and other relevant NHS authorities as outlined above.

The National Group of Regional Safety Reps (NGRSR) will consider whether a regional training package on this topic would be a potential priority for 2020. There are, however, a number of other workplace H+S issues that also need addressing at training days.

MOTION 8

Zero-hours Contracts ban

This Conference believes that the CSP should be doing more to put an end to insecure work and to campaign for a ban on zero-hours contracts.

New TUC analysis published shows that zero-hour workers are having a tougher time than those in secure employment on a range of measures including not having access to basic rights such as sick pay, holiday pay and paternity/maternity pay.

This conference calls on the CSP, alongside the TUC, to campaign to influence the government to:

1. Ban zero-hours contracts;
2. Introduce a reasonable notice period for shifts, and payment for cancelled shifts;
3. Increase enforcement of workers' rights; and
4. Enable trade unions to access workplaces to tell workers how joining a trade union can improve their life at work.

East of England Stewards & Safety Representatives

COUNCIL RESPONSE

The CSP works with the TUC on many campaigns and is active within the structures of the TUC.

The CSP's position is one of opposition to 'exploitative' zero hours contracts, including where the benefits are for the employer only, not by choice of the worker and where zero hours arrangements are used avoid the accrual of a range of employment rights.

The CSP has not developed a policy of complete opposition to zero-hours contracts. This is due to the fact that we have previously surveyed members on this issue and there is a group of CSP members who choose and value their zero-hours arrangements and some on whom fixed guaranteed hours could impact adversely on other benefits eg. housing benefit.

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We will, however, campaign alongside the TUC and other affiliated unions against exploitative use of zero-hours contracts.

Campaigning on a reasonable notice period for shifts, payment of cancelled shifts, increasing enforcement of workers' rights and enabling trade unions to access workplaces to tell workers how joining a trade union can improve their life at work can only be beneficial to CSP members and potential CSP members.

MOTION 9

International Labour Organisation

Conference notes that this year marks the 100th anniversary of the International Labour Organisation (ILO), the tripartite UN agency, which brings together governments, employers and workers of 187 member States, to set labour standards, develop policies and devise programmes promoting decent work.

Conference welcomes the work that the ILO has done to protect and advance workers' and trade unions' rights, and affirm that the core labour standards of the ILO - covering child and forced labour, discrimination at work, freedom of association and collective bargaining - are not just trade union rights but human rights.

The ILO not only works on labour standards but much of its work is also on improving the health and wellbeing of the world population, including conventions on social security minimum standards and universal access to HIV/AIDS treatment.

Conference calls on the CSP to:

1. Promote and mark the 100th anniversary of the ILO;
2. Raise awareness of the ILO amongst CSP reps and other members; and
3. Support the TUC campaign to call on the UK Government to ratify and implement all ILO conventions and make sure that they abide by the standards in current ratified ILO conventions, especially on the freedom of association and the right to organise.

North East Stewards & Safety Representatives

COUNCIL RESPONSE

Although the CSP has not had explicit policy on the ILO before it has supported the international work of the TUC and thereby indirectly the TUC's work at, and with, the ILO. For example, the CSP supported the TUC complaint to the ILO on the Trade Union Bill/Act.

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We recognise that if the UK leaves the EU the importance of the ILO Labour Standards will significantly increase, as the standards would be an essential part of any trade agreements.

The CSP delegation at the 2018 TUC Congress supported a motion to celebrate the centenary of the ILO and put this into action at the May National Group of Regional Stewards meeting, where the UK representative on the ILO Governing Body spoke on the work of the ILO.

The CSP submitted a successful motion on the ILO to this year's TUC Congress which links to the new ILO Convention and Recommendation to combat violence and harassment in the workplace. This is the first new Convention agreed by the International Labour Conference since 2011 and gives trade unions an opportunity to campaign for its ratification and also raise awareness amongst members of the ILO.

In response to this resolution, the CSP will:

- Continue to support the work of the TUC on the ILO and international labour standards;
- Work with the TUC to get the UK Government to ratify the new Violence and Harassment Convention, 2019 and Violence and Harassment Recommendation, 2019;
- Promote the work of the ILO to stewards via stewards' news and safety reps bulletin
- Promote the Global Labour University/ILO free MOOC on "International Labour Standards: how to use them", which explores the ILO's International Labour Standards and how activists can use them to promote and defend workers' rights worldwide

MOTION 10

Caseworking Records for CSP Reps

Conference, as stewards we are constantly dealing with the collection of, storing, sharing and deleting data and information.

Anecdotally stewards are reporting increasing casework and challenges associated with managing the information generated by those cases.

With the General Data Protection Regulations (GDPR) coming into effect in May 2018, the management of data has become even more important with stringent rules relating to data protection and information security.

The Royal College of Nursing (RCN) has developed a successful case management system which supports their stewards in the management of member cases and the associated information and requires and enables them to receive the right level of support and supervision from full-time officers.

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Conference calls on the CSP to develop its own similar case management system which will support our stewards to continue with the valuable work that they undertake whilst ensuring the data we manage is appropriately stored and accessible.

East Midlands Stewards & Safety Representatives

COUNCIL RESPONSE

Following CSP staff discussion with the proposer, the proposer has identified a need to provide a case management system which, at a high level, provides the following functionality:

- Browser based and accessible from a smartphone app
- Identify that the member was in benefit to receive service.
- Ideally list members who work for that trust
- Be a safe place to store confidential material. At present a lot of this is paper documentation stored in locked filing cabinets.
- Would be a repository for all email correspondence relating to that case
- Would act as a repository of the history of the case for succession planning and for CSP Staff to view. Succession planning may be the bigger issue in this environment as staff move out / on more frequently.
- Take in scanned images of paperwork as there will be some paper documents

If developed with these principles in mind, the proposer felt that it would save a significant amount of time overall for them and importantly it would streamline the process of managing casework.

Whilst we cannot commit to an implementation at this time, the needs identified in this motion will form part of the scope of a wider review of our Customer Relationship Management and Subscription systems that will be concluded in 2020. The scoping work should result in a business case with costs and timelines for FRAC/Council approval.

**MOTION 11
HCPC Fees**

This conference is extremely concerned by the detrimental impact of the recent 18% increase in HCPC fees despite 90% opposition by CSP members. This has resulted in an almost 40% increase in fees since 2014 despite the loss of pay in real terms over this time and possibly in the future with the new 6% pay deal.

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This conference calls upon the CSP to campaign against any further increases and lobby for a freeze in HCPC fees for a substantive amount of time.

South Central Stewards & Safety Representatives

COUNCIL RESPONSE

The CSP will not campaign for a HCPC fees freeze as it does not believe this is appropriate as it usually results in a larger hike to 'catch up' in later years.

We have sought and received assurance from the HCPC that it will not repeat its decision in 2018 which saw an 18% increase in fees. The CSP will continue to raise this matter and seek assurance at our regular meetings with the Chair and CEO at the HCPC. The CSP will keep members informed of any developments.

**STRATEGIC OBJECTIVE 5:
Help physiotherapy networks and communities to organise themselves to influence on behalf of the profession**

MOTION 12

Collaborative working between the Professional Networks and the CSP

This conference is concerned with the recent decision by the CSP to abolish capitation fees used to fund the Professional Networks (PNs). The capitation fee provides funding that allows the PNs to undertake valuable work on professional issues on behalf of and in association with the CSP. The removal of this funding is likely to limit the ability of all PNs to continue this work, the vast majority of which is undertaken by volunteers.

Many of the PNs are concerned about the lack of consultation and involvement regarding the decision to abolish the capitation fee. The subsequent grant process that has been implemented is an onerous task that creates a great deal of work for the PNs with limited transparency being provided on the likelihood of successful funding being achieved.

This Conference calls on Council to:

1. Review the decision to abolish capitation fees for PNs;

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2. Ensure that the involvement of PNs in CSP structures, committees and events is optimised through collaborative working and accessibility; and
3. Ensure the CSP is fully supporting and facilitating communication with and between the PNs.

Musculoskeletal Association of Chartered Physiotherapy (MACP)

The Physiotherapy Pain Association for Chartered Physiotherapists (PPA)

Association of Chartered Physiotherapists in Sports & Exercise Medicine (ACPSEM)

Chartered Physiotherapists Working with Older People (AGILE)

Association of Chartered Physiotherapists in Orthopaedic Medicine and Injection Therapy (ACPOMIT)

COUNCIL RESPONSE

The CSP acknowledges the importance of collaborative working between the professional body and the CSP Professional Networks (PNs), which the organisation considers a mutually beneficial and highly regarded relationship.

The CSP engages regularly with PNs and provides a range of support:

- CSP staff speaking at PN conferences and events
- A CSP Professional Adviser and Admin Support Staff assigned to respond to PN enquiries
- Collaboration on research projects
- Opportunity to contribute to Physiotherapy UK programme content
- Shared engagement with NICE consultations, guideline development groups etc.
- Shared development of guidance for members (e.g. private practice, splinting guidance, CASE sonography training standards, Leadership resource (currently in development).
- PNs working with the press & PR team to provide media comment
- PN consultation in shaping of CSP campaigns
- PN officers representing the CSP at external stakeholder meetings, government roundtable events, and provision of expert evidence

Professional Network Funding

The change from capitation fees to an application process for funding of specific pieces of work was undertaken collaboratively over two years. Networks were contacted formally in May 2018 to reaffirm that the capitation fee process would cease in 2019. The stages for implementation included:

- co-design of the new grant application process and criteria with representatives from each of the six alliances (that were formed in 2013 to bring groups with similar issues together) In Quarter 3 2018.

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- virtual sharing of a draft of the process and criteria to the wider PN community for consultation (Quarter 3 2018) followed by comments and suggestions being included.
- full implementation of the new process for all networks (Quarter 1 2019)

The CSP considers that there was increased collaboration between the responsible Professional Adviser and the PNs during this process. Care was taken to make the process as accessible to PNs new to preparing bids as to those more experienced, with a process Guidance produced and examples of successful bids included. It is envisaged that the new grant process, linked to a defined project, will provide an enhanced opportunity for CSP/Professional Network engagement and support.

In the first round of funding applications, eight applications were made, with four awarded funding:

- Association of Chartered Physiotherapists in Respiratory Care (ACPRC): Enhancing access to respiratory-related education for both ACPRC members and non-members
- Musculoskeletal Association of Chartered Physiotherapy (MACP): Mentorship: maximizing the opportunities for personal and professional development
- Association of Chartered Physiotherapists in Neurology (ACPIN): The development of Clinical Guidelines for the use of Functional Electrical Stimulation to support walking
- Pelvic Obstetric and Gynaecological Physiotherapy (POGP: Pessary Use for Pelvic Organ Prolapse)

Recent discussion

As part of the process of responding to this ARC motion a conversation was had with the motion proposer prior to CSP Council discussion.

General CSP/PN collaboration

The CSP is in the process of developing a “How to” guide for Professional Networks, that clarifies the current relationship, sets out communication methods and supports development of new networks that may form in future. This can also provide support to PNs considering merging. It will also include an explanation of the application for funding process.

All established collaboration will continue.

The Council believe it is too soon to assess the outcome of the changes and will continue with the planned evaluation of the awards of monies to PNs to fund projects that support the CSP strategic priorities in Quarter 4 2019.

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MOTION 13

Supporting Diversity Networks

Conference believes CSP is not doing enough to address needs of its Diversity (BAME, Disability, LGBT) networks. Members feel a lack of support from CSP and have difficulty accessing it.

Conference believes that CSP Workplace Reps could be mobilised more positively to support Diversity members. Conference calls on CSP to improve the visibility of the Diversity networks and training/information provided to some CSP Stewards.

Conference calls on Council to:

1. Improve visibility of Diversity networks;
2. Review training/information provided to CSP Workplace Reps;
3. Develop a briefing paper to aid CSP Workplace Reps; creating links and contacts with workplace diversity networks and signposting to other local/national resources.
4. Ensure this issue is raised at CSP Stewards' and Safety Reps' training; and with ERNs, Country Boards and Student Societies;
5. Review all CSP promotional material, ensuring there is a positive message regarding support for Diversity, listed as a member benefit;
6. Produce an A5 leaflet aimed specifically at the benefits of Diversity network membership and joining details for BAME potential members, distributed at events e.g. PUK;
7. Update CSP's Equality and Diversity Toolkit (2012); and
8. Widely promote/act on the WCPT's first-ever policy statement on Diversity and Inclusion, due May 2019.

BAME Network

COUNCIL RESPONSE

The CSP recognises and supports the critical importance of its three diversity networks, as we approach the 25th anniversary of their inception. They provide a forum for discussion, sharing experience, progressive policy formation and campaigning, as well as mutual support.

They have grown substantially in both size and profile/influence over time but we recognise that there is always more to do.

1. Plans are already in place to address this through various CSP channels, including discussing options involving the relaunched Frontline. Diversity network convenors will be invited to a workshop on this issue and the wider topic of network visibility, including at CSP events such as PTUK

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2/3/4. The CSP is committed to reviewing needs and then developing an informed organising plan linking CSP workplace reps with the diversity networks. Due to current staff changes this will not take place before the middle of 2020

5/6. The relevant CSP staff will discuss options to address these two points. However, there are a number of other competing priorities for specific reference on CSP promotional material and relating to provision of specific separate leaflets. There may also be alternative ways rather than leaflets to have greater impact and these will be explored too.

7. This is work underway and the diversity networks have been invited to contribute by reviewing the relevant sections relevant. This work will be completed by the end of 2019

8. The relevant CSP staff across the organisation will discuss the various options to promote this amongst the broader membership and work with the diversity networks.

MOTION 14

Championing Diversity in the Workplace

This conference recognises and thanks Council for their commitment to championing diversity within the CSP and our profession, noting the work they have already started and their engagement with our diversity networks.

Workplaces are reliant upon their diversity networks to provide safe spaces and effective conduits for staff partnership, without which the experiences and insight of those within minority groups would remain invisible to those in strategic positions. The increase in monitoring through the Workforce Race Equality Standard (WRES), Sexual Orientation Monitoring (SOM) and forthcoming Workforce Disability Equality Standard (WDES) highlight the increasing focus on working towards true equality, and success with these cannot be achieved without staff engagement.

Yet individuals are expected to run their networks and participate in partnership working with no allocated time or resources.

Unfortunately, with the current economic climate, workplace pressures continue to increase and individuals are finding it increasingly difficult to continue to carry out their vital staff network roles.

This conference therefore calls on the CSP to:

1. Highlight and celebrate the works of its members as part of workplace and CSP diversity networks;
2. Promote the effectiveness and role of workplace staff networks in progression towards true equality and diversity; and
3. Campaign for reasonable time and facilities for fulfilment of these vital roles.

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Disabled Members' Network

COUNCIL RESPONSE

Council recognises that championing, recognising and developing all aspects of diversity will make both the CSP and the physiotherapy profession stronger and more successful. Diversity networks, both for members within the CSP and within workplaces are a vital part of that.

Council also recognises that additional voluntary roles such as within diversity networks come under pressure when services are under-staffed and individuals are overworked.

The CSP recognises the call to highlight and celebrate the work of the diversity networks. In common with responding to Motion 13, plans are being put in place to address this through various CSP channels, including discussing options involving the relaunched Frontline. Diversity network convenors will be invited to a workshop on this issue and the wider topic of network visibility, including at CSP events such as PTUK. The diversity networks have also provided suggested written content for pages on the CSP website.

The CSP recognises that almost all network members who work for an employer take annual leave to attend network events in their own time. Members have expressed the need to have evidence to present to their line managers to support their request for paid time off to attend to network business.

The CSP commits to developing an evidence-informed case for members to explain to employers why participation in diversity networks is important and how it can benefit organisations. This should be useful both for CSP diversity network members and also for members of staff diversity networks, many of whom face similar issues in taking paid time off to engage in diversity network business. The CSP will also explore other feasible ways to address the issue of time off.

MOTION 15

Supporting Associate Membership

Conference calls for the CSP to look at their physiotherapy Associate membership and to work on ensuring this workforce feels more engaged with the CSP and that CSP membership is worth the financial cost. The use of Associate members in the workplace has grown over recent years and will continue to do so.

If the CSP does not actively find ways to recruit this area of the workforce to its membership, then we risk disengaging them and losing their voices within our trade union and governing body.

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Many of us know Associates working in practice who are not members of the CSP. When asked why they are not members of the CSP, the response is often cost, being unaware of the CSP having Associate membership options and a general feeling of “what’s the point?”.

Therefore we call upon the CSP to create and promote a series of training / learning tools such as e-bites, which are aimed specifically at Associate members, and actively use this to advertise Associate membership.

South Central Regional Network

COUNCIL RESPONSE

The CSP does not consider that it should act as a training provider per se. Other bodies should and could be committing to this, given the broad recognition of the importance of the growth and development of the health and care support workforce. We are, and will continue to be, active in lobbying for this for physiotherapy support workers.

However, the CSP recognises the potential value of increasing its learning and development resources specifically for Associate members. We have plans to commission a scoping exercise early in 2020 to consider the feasibility, options and costs of developing an Associate member CPD package.

The scoping will be limited to how the CSP can build on existing work with professional networks to produce content for e-learning resources. Following this exercise a report will be provided to the Leadership Team and Council to fully inform further decisions and actions on this proposal.

STRATEGIC OBJECTIVE 6

Build life-long relations with members

MOTION 16

Social & International Policy

This Conference believes the CSP should take an active stance on socio-economic issues within the current political environment both locally and internationally. Currently the CSP does not have a clear policy on international and social issues but plans to develop a policy in future.

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**STRATEGIC OBJECTIVE 6
Build life-long relations with members**

Social policy reflects the way we as human beings across the world meet basic needs for work, education, safety as well as health and wellbeing.

The aim of the policy would be to address how the CSP responds to changes and challenges - both locally and internationally - to support organisations to highlight, question and raise awareness about these important matters. The inequality displayed worldwide in view of social, demographic and economic factors must be minimised.

Conference therefore calls on the CSP to provide an active voice and stance in regards to social policy by using ARC to facilitate a debate to gauge member opinion on this matter. The aim of the debate would be to inform Council in their discussions about the CSP strategy on social policy and international support.

National Group of Regional Stewards

COUNCIL RESPONSE

Council will ask the ARC Agenda Committee to make time available at a future ARC for discussion of social, environmental and economic issues. The precise format will be decided by the committee.

MOTION 17

CSP Environmental Impact

Conference is aware of the increasing need to consider the impact we as individuals and organisations have on the environment. Conference is concerned at the usage of single-use plastics during CSP-related events, such as food trays, cutlery, cups and bottled water.

With 57,000 members and various networks that meet regularly, conference believes that the CSP could make a significant impact in reducing the single-use 'footprint' of the society by making changes.

Conference calls on the CSP to encourage members to reduce their usage of single-use plastics at CSP events, through bringing refillable drinks bottles and by using mugs rather than disposable coffee cups for example.

Conference also requests that, when holding meetings at CSP HQ and elsewhere, these are held 'plastic free' through encouraging members to use reusable items and not routinely providing single-use plastic items at meetings and events.

Welsh Board

COUNCIL RESPONSE

The Society takes its corporate social responsibility (CSR) very seriously and is delighted to see this motion brought before members. It allows an opportunity to highlight the work we currently undertake, reaffirm our commitments and look for ways to improve.

Current CSR Initiatives include but are not limited to -

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- We are members of the Camden carbon alliance and were awarded a commitment to sustainability award in 2018 at a local event hosted by the deputy Mayor of London.
- Waste, Recycling Action Plan (WRAP) campaign started in September 2018 to increase awareness of environmental impact of the Society and staff
- Removal of all paper cups, plastic plates and cutlery from CSP HQ and regional offices and replaced by china mugs and crockery for both staff and visitors
- Dedicated mixed recycling stations introduced at CSP HQ reducing waste to landfill sites
- Recycling of all paper and card through a closed loop recycling scheme with our current stationers
- Photovoltaic (solar) panels on the roof of Jockeys Field – in place for over 6 years
- Corporate travel business sites for the purchase of trains, air travel, hotels etc. for both staff and members and the data used to calculate our carbon footprint
- Implementation of Zoom video conferencing suite across meeting rooms at the Society creating opportunities to reduce travel needs
- The purchase and use of environmentally friendly only cleaning products with COSHH statements provided to ensure minimum impact to the environment
- An agreed initiative with our current catering supplier to reduce plastic and only supply food in paper products, which is then recycled
- Water saving products added to WC's to reduce the amount of water used
- Hand dryers in all WC's to reduce the need of paper towels

What next?

- Removal of plastic one use cups at water vending machines at HQ
- Receipt of all in house catering on crockery, discussions currently taking place with supplier

Where can we improve?

- Third party venues – we will look to define a clear strategy and encourage the use of sites for meetings / training events that are able to provide a plastic free environment
- Ensuring our commitment to sustainability is visible to both staff and members
- Provision of multi use plastics. Whilst a plastic free society remains a goal, it is reasonable to assume step changes to get there. The CSP will therefore look into the use of refillable drinks bottles for cold beverages to aid the move to glasses

It is hoped this response shows a willingness but more importantly a commitment to a sustainable future and we welcome the opportunity to work alongside members and staff to ensure we are able to be the best organisation possible.

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MOTION 18

Recruitment Materials

Conference requests that the CSP looks to make changes to improve recruitment of members into the organisation. With membership being the main income generation for the organisation, it is imperative we are maximising our capacity as an organisation by increasing member numbers.

Current recruitment of members is mainly based on the benefits which can be offered to members once they are signed up. However in a competitive market and with other Unions able to offer freebies if you sign up, we need to consider whether we are missing the opportunity to recruit members especially support workers as we currently don't have recruitment materials available.

We therefore ask for a budget to be made available to improve merchandise to facilitate recruitment of new members within workplaces. It could also be used to increase the visibility of CSP as a brand within a wide range of workplaces as well as encouraging members to attend CSP-run events, improving engagement with CSP.

West Midlands Stewards & Safety Representatives

COUNCIL RESPONSE

Motion lost – no further action required

MOTION 19

Royal College Status

This conference believes that the CSP should seek to become a Royal College in addition to its Chartered status. This would enhance the profile and reputation of physiotherapy and place the CSP on a level playing field with other professional bodies such as the Royal College of Physicians, Royal College of Surgeons and most recently the Royal College of Occupational Therapists.

East of England Regional Network

COUNCIL RESPONSE

Motion lost – no further action required

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MOTION 20

Alternative Roles for Physiotherapists

Conference is concerned with ongoing financial constraints, growing recruitment and retention problems of nursing staff in the NHS, there is evidence to suggest that there is an increasing prevalence of “alternative roles” being advertised across NHS trusts in the UK but we do not know the extent of this concern.

Whilst we fully welcome the opportunity for Physiotherapists to develop and expand their skills in different roles, we are concerned that these posts are ultimately not as advertised and physiotherapists are actually being used to fill the gaps of nursing staff on the ward. We fear these posts are another cost-saving measure which may be putting our members and patients’ safety at risk by therapists working outside their scope of practice, compromising quality of care and there is the risk of losing professional identity and autonomy.

We call on the CSP to:

1. Investigate the scope and prevalence of these posts throughout the UK, highlighting the pros and cons; and
2. Produce a document to inform members about what to consider with these alternative roles, including advice on how to challenge or support the development of these opportunities.

National Group of Regional Stewards

COUNCIL RESPONSE

The CSP is committed to addressing the issues raised and supporting members to be more aware of key considerations. This includes a Frontline article in May 2019 where we raise issues for members to consider in the context of physiotherapists working as part of ward based nursing establishments. In addition we are developing a further article addressing additional areas of concern for members in relation to role development in advanced practice.

We do not consider it necessary to dedicate resources to a large-scale investigation of this issue as we believe significant insight can be gained through asking an additional question of Managers in a planned survey for 2019/2020.

We do see this as a priority piece of on-going cross directorate work in order to develop further guidance for members and include in this a specific resource for stewards to aid management of local issues. We currently do not have the capacity to commit to anything further to support this in 2019, so should council wish us to pursue this prior to 2020 we would need to consider deprioritising other work streams.

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MOTION 21

Health and Social care at end of Life

Currently health and social care is not fit for purpose: differences in local authority funding causes a postcode lottery accessing CCG funding for palliative care patients at end of life, with patients only being offered up to x 2 calls per day for assistance with personal care needs and nursing care additional to this. However patients and their families, often pensioners themselves, feel unable to cope with providing the additional support required and, as patients make the alternative decision to go into 24-hour end-of-life care, this removes choice from the patient.

Conference believes that an increase in social care funding for this patient group would lessen the burden of placement costs for end-of-life care and enable patients to remain at home if they so wished, not relying on family to fill the gap in providing care, often pensioners looking after pensioners.

Conference calls on the CSP to engage with the other healthcarebodies, and other key stakeholders, to lobby the government to provide more equitable funding across palliative care, to ensure patients are cared for holistically, especially as they approach the end of their lives and want to return home.

West Midlands Regional Network

COUNCIL RESPONSE

Council endorses the concerns of the motion about the impact of poor end of life support on members and patients. The CSP will review policy on individualised funding and will contact ACPOPC, Hospice UK and the local government associations in each UK country to indicate our willingness to support any actions they may be taking on this important subject.

MOTION 22

Rehabilitation Prescription

The 2018 UKABIF APPG report Acquired Brain Injury (ABI) - "A Time For Change" - highlighted that, despite investment in acute care leading to increased survivors, there had been no equivalent investment in neurorehabilitation, leaving a shortfall of 10,000 beds. The lack of rehabilitation (proven to be clinically and cost effective) impacts on quality of life and has had wide-reaching societal consequences. This report has been endorsed by Association of Chartered Physiotherapists in Neurology (ACPIN), however the recommendations are not specific to the neurorehabilitation of adults.

This conference asks the CSP to actively endorse the UKABIF report and support the key recommendations. We specifically request a high profile campaign highlighting the importance of physiotherapy throughout the brain injury pathway, whilst emphasising neurorehabilitation, this would also include: those involved with sports-related concussion; first contact practitioners who will be dealing with the ABI as a long-term condition; and those working in education, social services, remand centres and prisons.

This conference calls on the CSP to provide an online training package to ensure physiotherapists in all sectors have the necessary skills to complete the Rehabilitation Prescription and keep physiotherapists as the primary drivers and educators at every stage of rehabilitation for ABI.

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North West Regional Network

COUNCIL RESPONSE

We can confirm that the CSP will retrospectively endorse the “Time to Change Report” by the UKABIF. The CSP is committed to and already engaged in a multi-agency high profile campaign on the #RightToRehab, which includes charities supporting those with Brain Injury. We believe that this campaign will achieve the aim of raising the profile of rehabilitation overall, including for those with Brain Injury and therefore a separate campaign is not necessary at this time. In 2019, the CSP will work to deliver a set of core standards for community rehabilitation, which we anticipate will place a strong emphasis on care planning along the entire rehabilitation pathway. We look forward to collaborating and engaging with Brain Injury specialists, learning from the excellent work that is already happening in regards to Rehabilitation Prescription particularly understanding how and where it is successfully embedded in trauma pathways. However, at this time we cannot commit central resource to a dedicated training package on the Rehabilitation Prescription, opting instead to deliver standards to improve care across the board.

MOTION 23

Clinical Practice Facilitators for AHPs

Conference is aware of the current focus on the drive to raise the profile of Allied Health Professionals within the NHS. As a forward-thinking profession that embraces positive changes, it is time this was reflected in the support we offer our newly qualified staff.

The role of the Clinical Practice Facilitator has been firmly established in Nursing over the last 20 years. Their presence allows better support for junior staff as they start their journey as clinicians, and also reduces the burden on their supervisors by providing support to them as needed.

The presence of Clinical Practice Facilitators for Allied Health Professionals would allow us to transpose these benefits to our professions, also having a positive effect on staff health and wellbeing as well as their confidence levels when treating.

Conference calls on the CSP to:

1. engage with the other healthcare unions, NHS trusts and other key stakeholders to develop the Clinical Practice Facilitator role, with a view to a national roll out across both the acute and community sectors; and
2. to promote the role of Clinical Facilitators for both Registered and non-registered roles.

South West (South) Stewards & Safety Representatives

COUNCIL RESPONSE

The CSP confirms that we are already committed to working with stakeholders and unions to promote roles that facilitate the development of clinical practice in the workplace. The CSP looks to work with every network. While we haven't actively supported clinical education facilitators through a direct network, we have sought to engage them where we know they already exist, through our workshops and accreditation activity, to ensure that their voices are part of the national discussion. We believe that with these existing networks in place it would be possible to achieve this aim without setting

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up such a network. As more of these posts are commonplace, we could offer to set up an iCSP network for the community to network, and share experiences and good practice. We also encourage members to speak to the relevant local lead as we understand that there may be funds available to tap into within the developing local structures, particularly in England.

MOTION 24

Practice-Based Learning

Conference is aware of the challenges faced by higher education providers in accessing wide ranging practice-based learning opportunities. It is also aware of the challenges that clinical educators face in providing these placement opportunities for students in the ever-changing healthcare environment.

Conference applauds Scotland's AHP practice education programme, and their co-ordinated action plan for growing capacity for AHP practice-based learning 2018-2020, and recognises the value in its aims and actions.

Conference is aware that as the demand for practice placements grows, many physiotherapists are being encouraged to use 3:1 or 4:1 models to increase student placement capacity. Although they can be seen to have benefits, they may also have limitations, particularly in remote and rural, or lone working environments. Many staff feel intimidated by these models, and are concerned about the clinical education level they can provide utilising them, especially for poorly performing and/or failing students.

Conference therefore calls on the CSP to work with Physiotherapy education providers, and other interested parties, to develop and publish guidance for practice educators on how to effectively implement 3:1, 4:1, and other innovative models of practice education.

Scottish Stewards & Safety Representatives

COUNCIL RESPONSE

CSP has already committed to continuing to work with Practice educators and higher education institutions (HEIs) to ensure that they are aware of a wide range of student supervision models that can be used to deliver and support practice-based learning. This includes

- Promotion of CSP practice-based learning guidance on the CSP website and resources including webinars on the learning hub. Already included within this web-based resource are case studies, videos and guidance designed to support members implement different models of supervision including many team and long arm supervision within acute, community, private and voluntary sectors. These include real-life examples of how these models work in situ. CSP L&D team will continue to collect more examples and promote them through existing media (iCSP, Website, Frontline).
- Attending meetings and hold events with HEI and practice educators around the country to promote collaboration, practice-based learning models and how future service developments affect practice-based learning. We are also running a session at PT UK this year to promote and discuss

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practice-based learning opportunities. We would be pleased to work jointly with colleagues to deliver a focused webinar/workshop to consider these models implementation within remote and rural settings.

STRATEGIC OBJECTIVE 2:

**Champion the evidence that physiotherapy is both clinically and
cost effective in the planning and delivery of health and social care**

MOTION 25

Health Records

South West members are concerned by the lack of a joined-up approach to health records.

The government pledge is "to create a paperless NHS whereby all NHS staff could access the most up-to-date information" . NHSE Digital Framework for AHPs outlines the aim to achieve digital and interoperable Personalised Health and Care in 2020, "reducing bureaucracy and stimulating research".

This is not the current reality for our members, and plans to achieve this look unlikely. Providers have chosen independent systems with poor interoperability between services and this is adversely impacting the quality and safety of care. Members feel underequipped to enter the procurement and development of electronic systems and are therefore not consulted.

We therefore ask for support:

1. to influence locally the procurement and development of systems with STPs and commissioners; and
2. to promote and provide support to improve digital capabilities of our members.

This will allow our members to work seamlessly across organisations, breaking down barriers, enhance patient care, and maximise the opportunity to transform physiotherapy utilising digital technology.

South West Regional Network

COUNCIL RESPONSE

Procuring a single national system would result in a monopoly with limited system development, innovation and improvement. Instead developing a common information format, using the record standards published by the PRSB, would allow for safe and quick information sharing between multiple systems. A system specification like this should be used for local and regional procurement of systems with physios as CCIOs, or informed advisors, influencing the development and utilisation locally, ensuring that systems are fit for purpose, i.e. that they offer flexible functionality, give users confidence that they produce consistent and timely structured data that is integrated from other parts of the health and care system. This is the

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direction that the newly-formed NHSX in England will support. Their recent publication of a list of supported system suppliers supports this direction of travel and the CSP is and will continue to support it as well. To do this the CSP will continue to prioritise its presence and influence at national forums involving NHSE, NHSI, NHSD, and NHSX and others to ensure physiotherapy content in the development of these datasets and information standards. Data-awareness in terms of service definition, improvement and evaluation should be part of the CSP's ongoing support for local, regional and national services and in supporting our members facing cumbersome EHRs and the other issues limiting efficiency in services.

With a growing resource needed to do this the CSP should explore how member expertise as well as an increased staff awareness and availability can be identified, utilised and valued. The recently formed Digital and Informatics Physiotherapy Group (DIPG) will help with this. It will support CSP influence as well as making the most of existing knowledge and supporting learning for the DIPG members as well as the wider CSP membership. The DIPG will work to create resources for CSP members around various topics and areas under the digital and/or informatics banner. These will signpost members to resources (CSP and other stakeholders) for further learning and form part of a suite of digital learning available to members.

The CSP should also review the current curriculum in terms of digital content. While a radical overhaul is not necessary, the content and delivery of some of the existing modules could be reviewed to embrace the digital world our graduates are increasingly expected to practice in. Educating the workforce of tomorrow will be part of the drive to make physiotherapy and physiotherapists more digitally-enabled and with the work of the DIPG to support our existing workforce the CSP should be in a strong position to promote and provide support to improve the digital capabilities of our members. It should also give them the knowledge, skills, and experience of embracing technology and the innovation and improvement it can bring to our services and our profession. Technology will not replace physiotherapists but physios enabled by technology will absolutely replace those that are not. The CSP remains committed to ensuring that our members are enabled by technology, digital and data.

MOTION 26

Manual Handling Training

This conference believes that there are a lot of unhelpful and often misinterpreted messages delivered through NHS manual handling (MH) training which often aren't evidenced based.

Statements such as: 'Keep your back straight', 'don't twist your back' and ' you need to protect your spine' are commonly reported, but only serve to create fear of normal movement and misconceptions about back pain and injuries.

We call on the CSP, through its links with the professional networks such as the Association of Chartered Physiotherapists in Occupational Health and Ergonomics (ACPOHE), to promote evidence-based moving and handling techniques within the NHS MH training programmes, by advocating the HSE standards and eliminating unhelpful information and resources.

East Midlands Stewards & Safety Reps

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STRATEGIC OBJECTIVE 2:

**Champion the evidence that physiotherapy is both clinically and
cost effective in the planning and delivery of health and social care**

COUNCIL RESPONSE

The CSP acknowledges the importance of accurate, evidence-based manual handling training for staff within the NHS.

The CSP have worked with the Association of Chartered Physiotherapists in Occupational Health and Ergonomics (ACPOHE) professional network to make available their learning modules on Occupational Health via the CSP Learning Hub. This includes an Introduction to Occupational Health Essentials course that includes a module on Risk Assessment and Management. This module signposts to the HSE Manual Handling at Work resources.

The CSP suggests that members use these HSE resources to inform Trusts:

<http://www.hse.gov.uk/msd/manualhandling.htm>

<http://www.hse.gov.uk/pubns/indg143.pdf>

The CSP endorses ACPOHE's suggested resource(s), and will work with them to promote relevant publications via CSP channels.

EMERGENCY MOTION 1

Conference welcomes the WCPT policy statement on Diversity and Inclusion voted on at the General meeting on 9th May 2019. However, conference is disappointed at the subsequent announcement on the same day that the next WCPT congress would be held in Dubai. The United Arab Emirates is a country with well-documented human rights abuses, and intolerance of diversity, inclusion and disability. Both Amnesty International and Human Rights Watch have documented many cases of forced disappearance, incarceration including in camps in Yemen. UAE also outlaws the formation of trade unions.

CSP Council has committed to improving diversity and inclusion within its structures. This move by the WCPT goes against many of the CSP core values that we stand for as both a profession and as a trade union.

Conference demands that the CSP does NOT send a delegation to WCPT congress in Dubai in 2021.

National Group Regional Stewards

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COUNCIL RESPONSE

The response below was updated on 12 November 2019 and replaces the earlier published version.

At its September meeting Council received a detailed paper which outlined the issues raised by the mover of the motion, the restrictions to enter the UAE from the Foreign and Commonwealth Office, feedback from members in support of WCPT conference being in Dubai and those vehemently against, feedback from the professional network ADAPT who work in many countries where restrictions apply, feedback from other member organisations in WCPT, and feedback from the President of WCPT. Council considered a range of options ranging from “taking no action” to a complete boycott. After considerable discussion and debate Council decided not to send a formal delegation of CSP staff or Council members to the Dubai WCPT Congress.

The CSP advises members wishing to attend to check Foreign Office travel advice.

EMERGENCY MOTION 2

Student Mental Health

Following the recent inquest (27th April 2019) into the suicide of a nursing student (Charlotte Hillary) whilst on placement, conference is concerned that appropriate support is not consistently available for all pre-registration healthcare students at HEI's. The inquest details how the stress whilst on placement appears to have been directly attributed to Charlotte's death. Conference therefore calls on the CSP to:

1. Work with HEI's to promote existing support structures to promote pre-registration physiotherapy student's mental health throughout the course;
2. To encourage and promote the benefit of Mental Health first-aid training for all HEI staff with direct student contact and all pre-registration physiotherapy students; and
3. To develop resources collaboratively with HEI's to support clinical educators in supporting and recognising physiotherapy students who are experiencing mental health difficulties whilst on placement.
4. To share examples of good practice by HEI's across the CSP's network

London North Stewards

COUNCIL RESPONSE

We are committed to this activity.

The CSP monitors how teams support their students' wellbeing throughout their programme. All programmes are required to demonstrate that they have supporting structures in place to support students to learn in a safe environment, both while at university and on placement.

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During the 5-yearly accreditation/reaccreditation events the CSP (and HCPC) ask the programmes to provide examples of how they (the team and the wider university) support students, we triangulate this information directly with the student body and with the practice educators. Students and local practice-educators are therefore always involved in determining their effectiveness.

And then annually, via the CSP annual quality review, the CSP expects programmes to drill down in one particular area. This year's focus will be on supporting student wellbeing. It allows us to understand what is being offered and how they are building resilience, wellbeing strategies into their programmes. While student wellbeing has become a national discussion across disciplines, CSP has been actively encouraging and monitoring physiotherapy programmes for over a decade so this is established practice. It should be noted that Physiotherapy programmes generally receive commendations for the level of pastoral support available to students and that physiotherapy students consistently evaluate their supervision on placements extremely highly through the National Student Survey. Based on the examples gathered via the accreditation events, we are expecting to receive a significant number of examples of good practice to be submitted by all programme teams.

The CSP does already make suggestions about how this can be achieved, however we stop short of prescribing to programme teams because we recognise that each HEI organises themselves differently. The HCPC and CSP both therefore operate an outcomes based approach, which means that CSP ensures that the support mechanisms are appropriate to the local context. To do this we use the examples gathered to showcase good practice (through the webinar series and being able to point teams in each other's directions for ideas about implementation etc.)

For this coming year, the annual qualitative data collection (via annual quality review) will be two-fold – explicitly focusing on the teaching of mental health, looking at how programmes teach mental health as well as how the programme teams support students to take care of their own physical and mental wellbeing. A composite report highlighting best practice from this review will be available via CSP website for all members to see [please note that this will be available Oct 2020].

We have also committed to making the expectation around the support for students' wellbeing more explicit within the forthcoming update to its resource CSP Accreditation of Qualifying Programmes in Physiotherapy.

We have already committed to updating 'Into Physiotherapy: welcoming and supporting disabled students' resource in 2020, recognising that not only should programmes be equipping students to understand mental health, but they should also be ensuring that students are supported to attend to their own mental wellbeing. To that end we intend to include more guidance and support for mental health for HEIs, Students, educators and practicing Physiotherapists in supporting each other within this resource. We have already offered to work with the proposer(s) of this motion to be part of the focus group and/or contribute case studies to the resource.

EMERGENCY MOTION 3
Campaign for a Peoples Vote

Conference is aware of the results of the recent European elections. The results have shown a clear shift within the mood of the Public to remain in the EU.

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The prospect of the leaving the EU is likely to have a profound negative impact on the future of our economy and lead to more years of damaging austerity measures. This will have an effect on all of our members, family, friends and colleagues.

The potential of leaving the EU has already had a detrimental effect on staffing within the NHS, which we are aware is supported by a wide and diverse population from across Europe.

The Government has shown through countless votes that they unable and incapable of reaching an agreement on any deal to leave the EU. The only viable option left is to put any proposed deal, no deal, or the option to leave to a people's vote.

Conference calls on the CSP to campaign for a people's vote on a proposed deal, no deal or remain.

National Group Regional Stewards

COUNCIL RESPONSE

Council appreciates that there are potential impacts of Brexit which could be negative. The CSP will continue to highlight these.

Having had a session reviewing the CSP position on referenda and political campaigns, and having discussed the ARC motion, Council decided not to support the People's Vote campaign.

There were concerns about the divisive nature of this issue amongst members and our limited ability to campaign on this issue.

Council appreciates that this will be disappointing for the movers of the motion, but a clear majority believe this was not right at this time.

EMERGENCY MOTION 4

Representation to the Migration

Conference is dismayed at the UK's migration advisory committee's short-sighted decision last week not to recommend for inclusion physiotherapists on the shortage occupation list (SOL).

There is a skills and workforce shortage across the four nations which whilst being addressed in part in England by an increase in the number of students, will not be addressed by current training availability and recruitment practices in Scotland, as we are presently not training enough physiotherapists to meet our domestic needs.

This declaration is further supported by the Scottish Government statement that the demand for physiotherapy is increasing dramatically particularly due to the transformation agenda within primary care and the development of first point of contact practitioners. Add to this the very remote and rural nature of our country and the unique challenges that brings for recruitment, retention and service provision.

Conference therefore calls on the CSP to make representation to the Migration Advisory Committee to promote inclusion of physiotherapists to the SOL.

Scottish Stewards & Safety Representatives.

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COUNCIL RESPONSE

The CSP is aware of the challenges many services, in all UK countries and all sectors, are facing in recruiting staff. Influencing workforce supply has been a priority work areas for the CSP for several years.

In line with the policy adopted by Council, following an ARC motion last year, the CSP does not support the use of the Shortage Occupation List (SOL). Instead, we want to see visas issued on the basis of wider social benefit. This would extend the potential for visas to support workers from overseas and to physios whose salaries do not meet current criteria.

Work to evaluate the state of the workforce in each UK country indicates there is an excess of demand over supply in each country. However, the evidence is limited for some sectors which makes making the case challenging.

The Migration Advisory Committee also prefers domestic labour force remedies to granting SOL status. The success in expanding pre registration training in England and Wales therefore limits the scope to make a case for either physiotherapy in the UK or Scotland to have SOL listing. Scotland and Northern Ireland are yet to address supply adequately but it could be argued that is within the ability of the health departments in both countries to do so.

The Home Office is currently consulting on changes to the visa regime which may well see the abolition of the SOL. We are, through our active membership of the Cavendish Coalition, lobbying for a more sympathetic system in future. Should the Government continue to operate a SOL we will keep the situation under review and could submit evidence for listing if and when there were a realistic chance of securing listing.

TABLED MOTION (SUBMITTED IN TIME BUT OMITTED FROM ARC AGENDA IN ERROR)

On-call and out of hours (OOH) work

This Conference is extremely concerned by the variation of implementation of on-call policies nationally. There is national inequality and broad diversity in local policies and guidelines, this is due to difficulty in interpretation of some National and European publications, as well as Agenda for Change (AfC) Terms and conditions.

Stewards are increasingly being asked about the OOH pay and arrangements and are negotiating with little knowledge of current national procedures, this may also lead to variations. The current guidance is also very confusing and physiotherapists who work on-call are likely to be missing out on entitlements. It is worrying that Physiotherapists may lose out materially with changes; this may have a knock-on effect with less people covering more work.

This conference therefore calls on the CSP to set up a working group to audit current local policies and subsequently issue a guidance document for good practice for on-call working, which could be included in a teaching programme/session for stewards.

This should include clarification of section 13.4 of the AfC Terms and Conditions NHS handbook, as it is anticipated that many staff are not receiving this specified entitlement.

South Central Stewards & London North Stewards

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COUNCIL RESPONSE

In April 2011 the Agenda for Change terms and conditions changed from a national arrangement for on-call and extended services, to local agreements on pay for these services that needed to be developed in partnership locally and be consistent with a set of national principles. At that time the CSP provided guidance to stewards that supported local negotiations around on-call arrangements. More recently it has become clear that over time increasing variations in on-call payments have developed, with some employers having never moved away from the rates in 2011 and some employers introducing very different systems that are now under scrutiny again with a view to reducing costs of services. In addition there is now a range of different types of service within physiotherapy that include unsocial hours as a normal part of the working week and is different again to the payment for on-call and emergency duty.

The CSP recognises this can lead to confusion and make it more difficult to ensure members are being paid correctly for work undertaken.

We will undertake some work with the National Group of Regional Stewards and the stewards' network to gather information on the current situation around pay and policies for on-call work. This could identify rates of pay and look at time off for compensatory rest and for bank holiday work through a sample of stewards. We will review current and previous guidance on this area, drawing together the key elements to provide new guidance for stewards that can be included in a regional training session as appropriate. It will not be possible to prevent all variations due to the local element of the agreements, but it may be possible to share some good practice examples and provide some clarification on entitlements.