

# How to prepare & what to cover in your response

## Preparing your Case - where is your evidence?

- We strongly encourage you to put in a written response as your own clinical knowledge and experience is vitally important to your employer. You are an expert in your field and indeed have a professional responsibility to challenge proposals if you know they could undermine your services. Often managers are deciding on matters they know very little about. Your input is therefore crucial.
- Visit our CSP website [www.csp.org.uk](http://www.csp.org.uk) to review resources such as Physiotherapy Works leaflets, reports, articles that we hope you find helpful. Also check out any relevant iCSP discussion boards etc for information.
- If your post is to change under the proposals, read up on re-evaluation of changed jobs in the NHS Job evaluation handbook to find out what you are entitled to. The hand book is available at [www.nhsemployers.org/](http://www.nhsemployers.org/)
- The CSP encourages you to talk to your colleagues affected by the proposals and possibly with other professionals from your MDT team (if they share your concerns). If you can, submit a team or service response. Managers cannot easily ignore a strong collective submission where there is consensus of staff's concerns. When organised in this way you are more likely to achieve success in either over-turning or significantly improving management proposals.
- To assist your arguments or concerns consider getting statements from MDT colleagues that concur with your views or concerns.
- Gather any thank you letters from patients, particularly if they mention any elements of the service that are under threat by the proposals.
- Liaise with colleagues in other Trusts to see if they have undergone a similar restructuring. Use your iCSP networks' discussion forums. If relevant, refer to their experiences as evidence of the problems that can arise, particularly if it highlights a decline in services to patients.
- Think about those key questions to raise at staff meetings with management. Ensure that either you or other colleagues are present to ask them. Questions that start with 'how' and 'what' are more likely to assist you in getting proper answers, and to expose poor planning and the risks to services.

## How to start...

A good approach to drafting your written response is to set it out under three key headings: Summary (of the issues), Impact (for staff and most importantly on patients), and (your) Concerns.

## What to consider when making your case:

### Review the following questions on the key issues:

- 1 What evidence do you have that the current situation is working well? Are there relevant audits? Patient satisfaction questionnaires? Readmission statistics?
- 2 Do you have access to research or any other evidence that your service is clinically effective?
- 3 Will any of the proposed changes have a positive impact for staff, patients or service delivery? If so, it could be helpful to acknowledge this in your submission to demonstrate you can be balanced and constructive in your feedback. This may encourage your employer to be more responsive to your concerns.
- 4 Consider if there are any better alternatives, particularly if you are aware that the current situation is inefficient. Ensure you have adequate support from colleagues for your ideas. Do you have any local audits to back you up?
- 5 Have quality, safety and efficiency been monitored in your area? If not, why not? Do you think auditing or re-auditing is required before changes are made? Is there a potential risk to quality and safety?
- 6 Do the new proposals meet the CSP's or other relevant sources of clinical standards of practice, national service frameworks, clinical guidelines or do they impede you and others in achieving them?
- 7 If this is about saving money - have managers adequately explored alternative methods of achieving savings? Have management adequately considered other options (such as retiring relevant staff) prior to making these proposals? Are you aware of previous valid ideas that managers may not be aware of or have forgotten?
- 8 Are there elements of your role omitted from a proposed job description that you feel will have the effect of undermining patient services or management efficiencies? Consider the impact on quality, safety, and efficiency of service. Ask your steward to give you our CSP impact form to complete.
- 9 If senior grades are under threat consider the cost and quality arguments of how expertise brings efficiencies through autonomy to triage, referrals, providing more effective treatment, and reducing a patient's length of stay.
- 10 Will the proposals negatively affect other services e.g. social care services, waiting lists?
- 11 Do you have any health, safety and wellbeing concerns? These may include increased workload, stress, deteriorating morale, and staff retention.
- 12 Are there any other areas of risk not identified by management that you consider relevant? For example, the impact on the ability to deliver staff training and supervision if there is fewer senior staff. If helpful, do a calculation of the percentage of senior clinicians' time spent on training, supervision and appraisals against a predicted loss of patient facing time before and after the proposed changes.