

# Reviews and working parties: a guide for NZNO delegates and members

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## What is a review?

A review is a series of meetings organised by the management of a workplace or organisation to recommend changes in the way some part of the organisation runs.

In the health sector, reviews may be small or large, and range from looking at the running of a small unit, to restructuring all nursing services in a large hospital.

## Why is it held?

A review is normally held if management wants to restructure part of a health service – most commonly to improve efficiency and reduce costs. They may also use a review to consult staff about solutions to a problem in the workplace.

## Why should I get involved in a review?

Participation in the review potentially gives you some influence on the outcome. Failure to participate without an alternative plan can reduce your influence. It is best to work with colleagues, members and union representatives to ensure a united, strong and effective approach is adopted. You and your union representatives should find out as much information as possible from management as early as possible. From there you need to consider what all your options are and which will result in the most influence. At workplaces where employees are covered by a collective employment agreement any decisions on levels of participation and alternative approaches/activities need to be made in consultation with union representatives.

## How is NZNO involved?

Many collective agreements have clauses that set out the process for managing change in health sector workplaces. The concept of good faith in the Employment Relations Act 2000 also establishes the requirement for the parties to the employment relationship to behave in a way that supports open communication and consultation around restructuring or changes to the employer's business.

## Who is on it?

The review team will generally include management people, union representatives and possibly other staff from the area under review. The NZNO organiser is available to union representatives on the review for help and advice.

## How are the union representatives chosen?

Management should let the NZNO organiser know about the review before it starts. The organiser then talks to the staff in the affected area and invites them to elect representatives who work in the area, know it well and will represent the staff in the area. It is preferable that at least some of the members on the review team are NZNO delegates, who will have some understanding of how to represent a diverse range of views and who have some understanding of the contract.

## What problems can there be in getting the review going?

There can be disputes with management over interpretation of the management of change clause. There can also be problems getting management to acknowledge they are in fact undertaking a review.

## If I'm on a review what do I need to know beforehand?

You need to know the subject of the review; what help and advice is available to you from NZNO; and what management will supply e.g. equipment, office. You need to be supplied with a copy of the terms of reference and the relevant employment agreements. You need to know which NZNO organiser has been informed, and which delegate or staff representative will be keeping members informed.

## What is the role of the delegate in the review?

The most important thing to remember is that delegates are there to represent the interests of other NZNO members honestly and assertively. Delegates cannot agree to anything in the review without a mandate from members. Delegates need to inform and consult with members at every step.

## How do members get to have a say?

Delegates will need to meet with members before the review starts to gain feedback on issues under review. While the review is in progress, the delegate will feed back information from the review to members and from members back to the review. If there is no delegate involved, check if there is an elected union representative who has been nominated to keep members informed during this process.

## What if I feel intimidated by management on the review?

Make sure you're fully prepared beforehand and clear about the views that you are representing. The amount of trust between staff and management will generally affect the tone of the review.

If you are having trouble, don't struggle on alone - call in help, such as your local delegate, convenor or organiser. If you are unsure who to ask, call NZNO and we will put you in touch with the correct person.

## What if I disagree with the outcome?

The first step is to try to negotiate past the disagreements. However, if the members you represent cannot agree to the review's recommendation, you should have the opportunity to make a separate statement saying so and for this to be included in the review.

The hope is that management will take the dissenting opinion into account when implementing the changes. If they don't, it can lead to deterioration in employer - employee relationships. Members may be more alienated by the way a recommendation is implemented than the recommendation itself. Changes should be made sensitively, and not rushed, so employees have time to adjust.

## What if the review recommends redundancies?

If this happens, your NZNO organiser will be involved. Collective agreements have staff surplus clauses that set out the process that should be followed. Dealing with any staff surplus is not the responsibility of the review team.

## Terms of reference

The purpose of the first meeting with management is to decide whether or not an effective study, a review, an implementation study or some other form of consultation is appropriate and practicable. If the answer is yes, then the meeting needs to go on and establish some terms of reference for the study.

Terms of reference set out:

- > the size and composition of the team to do the study;
- > the date by which the study should start and finish;
- > the resources available to the study team e.g. full-time or part-time hours, offices, phones, photocopying, etc. Resources may also involve the ability to buy professional advice on some things – e.g. questionnaire design;
- > the objectives of the study - a fairly formal statement of the reasons for the study;
- > the 'terms of reference' should be an outline of the expectations of the study team, management and other workers. It can include comment on issues such as confidentiality, how work is to be covered while the study is on, and how the report and recommendations are going to be circulated to the people affected by the review.

## The working party

The size of the working party varies according to the number of people affected by the review. It should be quite small with a minimum of four. More than about eight can be difficult to work with. Sometimes the working party has equal numbers of managers and worker representatives, but often management only has one or two on the team. The idea is to involve a representative range of people from the workplace. However, it is important to remember that the working party members work together co-operatively to endeavour to reach consensus decisions.

The best people to put on working parties are not necessarily the loudest or most 'staunch' people you can find. The person should know the area of work well, and be interested in how the workplace functions. It is best if the person has a good overview

of the area being studied. You need people who are prepared to be open-minded and can work well in a team. They must also know how to keep people informed.

It is a good idea for the group to appoint or elect someone as a chairperson or convenor. It may be helpful to have someone from outside the area being studied to assist as chairperson or convenor. This person will be responsible to see that the work is shared and gets done according to the schedule agreed. This person could facilitate or chair the meetings or the study team might decide to share this role. This person should also ensure that accurate minutes are taken from each meeting.

Time should be made available at the beginning and end of each meeting to allow union representatives to meet separately. This time can be used to discuss issues, tactics and to debrief after each meeting. There should be regular contact with/feedback to the organiser. Methods and time for these meetings should be set up at the beginning of the process.

People will have different skills and be able to contribute in different ways - taking minutes, providing background information and offering suggestions. It is important that everyone participates as fully as possible.

The role of the NZNO organiser is to support the delegates or members while they are on the working party.

## Objectives

The terms of reference for the review should include objectives and will be handed to the working party. They will probably be separated into parts to make them more down-to-earth and practical.

The objective of a review could be "making the outpatients department more efficient". Such a broad objective may require further definition by the working party prior to starting the core work.

For example:

- > the objective of this review is to make the outpatients departments more efficient by considering:
  - patient waiting time and how to reduce it;
  - the internal flow of information between outpatients, x-ray, laboratory, medical records and the typing pool, and whether it can be improved;
  - the quality of information from GPs.
- > the task of making the objectives as concrete as possible should be at the top of the working party's first agenda;
- > the working party will need to keep coming back to the objectives to make sure they are still on target. Other problems or ideas may arise during the review and can be included in discussion and the report but the main task of the team is to work on the objectives originally agreed;
- > well written objectives will be a guide to the issues to be addressed, the questions to be asked, some ideas about where problems might occur, gaps in the service, possibilities of change and the people who should be involved.

## Methodology

Many of the working party's early meetings will be spent working out how to get the information about the area to be studied so the team can meet its objectives. There is no right way or wrong way, but whatever way is chosen, it is called the methodology of the review.

Most reviews have used questionnaires, interviews, group discussion, random sampling, observation and other sources of information - e.g. job descriptions, previous reports, etc.

The review can get information from staff, from others in the hospital who use the service being provided, from patients, GPs, parents, the community and so on.

Confidentiality can be an issue here, and the working party needs to discuss the matter. (This may need to be discussed throughout the review and it may be necessary to keep checking back on what information should and shouldn't be circulated). The idea is not to keep information from people but to ensure that information/comments given in confidence (e.g. personal comments about work colleagues, or personal concerns) are not reported outside the working party.

Working party members can check with the people they represent as to the best way to get information. Some people are not comfortable with written responses e.g. questionnaires. For some people, anonymity will be very important. If patients are being asked for their input, ethical considerations arise and the ethics committee may need to be consulted.

Involving people and keeping them involved is a very important part of the review. It's important that ways of involving people are built into the methodology. Consideration also needs to be given to other workers who may be affected by any changes suggested by the working party.

The working party should include someone who has ideas and experience of good ways to find out the information required. There are many people in the health system and unions who have skills in this area. Union researchers and people involved in quality assurance or quality of service may be able to provide advice on this part of the review.

It is often helpful to begin with a profile of the area that is being looked at - the people involved, where the work comes from, the types of referrals accepted etc.

These help to give everyone involved the same background information as well as some ideas about where problems might occur, gaps in the service and possibilities for change.

Remember to try and make use of information already available, from statistics or other studies and audits that have already been done.

## **Deciding what information to collect**

### **Definitions**

- > Efficiency: how well are the resources used?
- > Effectiveness: how well are the goals achieved?

The information you decide to collect should help you determine how efficient and effective the area is and how it can be improved.

### **Background information**

You will need to identify:

- > what resources are used - staff, materials, buildings and equipment;
- > a clear statement of the service delivery goals - what should be achieved in the work area? What goes on within the area will be assessed against its relevance to this goal. As part of this statement you should include any legal requirements of the service;
- > other useful background information that can be gained from the reports of any previous reviews or studies done in the area.

### **Current situation**

The aim here is to know enough about the area, to understand what is done, describe the area in the report, and be able to identify:

- > inefficient practices;
- > wastage or shortage of materials;

- > obviously under- or over-worked staff or equipment;
- > activities that don't contribute to the goal of the area;
- > over-management or over-supervision.

#### **Topics to ask questions about include:**

- > an overview of the service;
- > staff mix, designation, numbers, and rostering practices;
- > work practices;
- > workflow (e.g. where do the patients/case notes/clean sheets come from and do they arrive in a steady trickle or an occasional 'cloud burst?');
- > what records/statistics are kept within (or about) the area;
- > any problems;
- > ideas for improvements.

#### **User opinion**

Where possible it is a good idea to invite input from users of the service or their relatives. It is important to remember that users can be staff from other areas, or community groups, not only patients.

#### **Statistical information**

You may decide you need to collect some statistical information.

Figures can be useful if you need to:

- > verify that a problem exists;
- > establish the extent of a problem;
- > back up a controversial statement or recommendation;
- > indicate how well or badly an aspect of the current system is performing.

#### **Caution**

When you collect any information, make sure you know what you are getting. The person giving you the information may not be trying to deliberately mislead you, but can still end up giving you information that is not correct. Particularly when dealing with numbers it is a good idea to ask the person providing the data to explain the way the figure was arrived at. The following example demonstrates how many different answers there can be to the same question and all of them are correct in their own way.

What would be the annual cost of providing a board car for a district nurse with an annual mileage of 10,000 km?

The cost might include any or all of the following:

- > petrol (per km averaged over Board fleet);
- > maintenance (annual averaged over Board fleet);
- > depreciation;
- > proportion of transport administration department wages.

Even when we have established which of these factors should be included, we are not sure if our figure is appropriate. If the Board fleet contains heavy trucks and tractors the petrol and maintenance costs may be much higher than that expected for an average car.

So when using data provided by other people don't be afraid to ask questions about how they got their information. If you don't want to listen to a complicated explanation ask them to do a breakdown of the figure in writing - then if you don't understand what they have done you can take it away and get help from one of your back-up people. It is also a good idea to quote the source of your statistical information in your report.

## **Forming recommendations**

The process of formulating the recommendations is a team process. There are many approaches to this, but it is sensible to have a clear idea of what is achievable and what is not. Generally, working parties have only the power to recommend. It is a good idea to ensure that workers do not expect everything that the group recommends to be put into practice. Management has the power to decide. False expectations can hinder the process.

If the working party discovers a particular or popular idea is unworkable then part of their job will be to explain why that has not been put forward as a recommendation.

Sometimes it might be better to present several options rather than recommendations at the end of a report. This might be a more successful way to influence the decision making process than straight recommendations.

In every case the implementation process for recommendations or options should be given attention. It is little use proposing a course of action if there is no consideration as to how that can be achieved. The more important the recommendation, the more necessary it is to have some implementation plan built in to it.

## Report writing

Most studies will be expected to produce a report. While report writing is largely a matter of personal style it can be useful to have some guidelines when you are starting out. The single most important attribute of a good report is readability. The three factors that most influence a report's readability are structure, style and language.

### Structure

The two things to keep in mind when you decide on the structure of the report are:

- > maintaining a logical flow of information for readers who will read the entire report;
- > providing quick and easy access to specific parts of the report for readers who only wish to read sections of interest to them (e.g. recommendations, descriptions).

### Most reports should have six parts:

- > title page;
- > contents page;
- > introduction;
- > summary of the recommendations;
- > main body of the report;
- > appendices.

## Possible problems and solutions

### People feeling threatened or criticised or anxious about their job:

- > the review is of the system not a personal assessment.

### People being overly protective of their work:

- > encourage people to see a big picture of the service.

### People feeling anxious about confidentiality:

- > make clear rules and stick to them;
- > have an outside person available for interviews and receiving and collating questionnaires.

### People feeling anxious about job loss:

- > manager gives clear outline of boundaries to staff and, if possible, commitment to retaining current staff;

- > members having too high expectations of the outcome of the review to reduce job losses. Study group and management need to be honest about limitations and options.  
EAP or other counselling can be requested if people are stressed and/or anxious.

**People feeling negative about the review:**

- > include them in the process so that they own it as well.

**People losing enthusiasm:**

- > plan and organise to get the review done as quickly as possible;
- > be realistic - don't overload people.

**The working party having difficulty working together:**

- > have a chairperson for each meeting;
- > set clear rules;
- > don't allow personal comment to intrude;
- > don't interrupt another speaker;
- > everybody to do some listening and talking. If necessary ask someone from outside to help with meetings.

## Conclusion

Change won't please everybody but it is a fact of life and cannot be ignored. The best approach is to try to involve people in the process - their morale, their productivity and the quality and viability of the whole health system may depend on it.

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**Mission statement**

NZNO is committed to the representation of members and the promotion of nursing and midwifery. NZNO embraces Te Tiriti o Waitangi and works to improve the health status of all peoples of Aotearoa/ New Zealand through participation in health and social policy development.

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