

Occupational Health – Partnership Working

Executive Summary

Partnership working with other Police services in relation to Occupational Health is encouraged, and we currently do seek advice and support from other police services. However a dynamic relationship has been difficult for us to pursue in any practical way because of our relative isolation as a geographical area. There are benefits to sharing knowledge and expertise with other more local organisations who have a positive focus on occupational health and welfare as this validates our internal view.

Several “public sector” agencies have been in discussion with the Chief Constable about our provision of Occupational Health services. It is clear that we offer a gold standard service to the Constabulary, and this is the product of investment of resources and senior managerial commitment to the well being of the workforce. As an outcome of these discussions we have been approached to work in partnership with both the Cumbria Ambulance Trust, and, in the very early stages of negotiation, Cumbria Connexions. We currently have facilities and a professional structure which is seen by the approaching organisations as of a very high standard, but it is not practical for such organisations to develop such a service as the financial implications are disproportionate to their size. Thus they are seeking to buy into a service that can enable them to offer a high quality of service provision, without the high investment costs.

Recommendation

To approve the continued development of partnership working with other selected agencies, where the benefit is mutual, and our own organisational resources and service provision is not compromised

Drivers for Change

The Health unit is in an evolutionary phase, and is continually developing its approach to meet the challenges of the impact of health on organisational capability. The drivers in relation to partnership working are twofold, financial, which will be detailed below, and intellectual. Such working will allow for the cross fertilisation of ideas and innovations in the management of health. In relation to the ambulance service we are dealing with an organisation with similarities to our own in relation to types of sickness, and difficulties in managing these within such a specialism.

Financial Implications

The value of the contract with Cumbria Ambulance Service is £7,500 per annum. The basis of the contract is that the CAS will provide and employ their own Nurse, and that she will be located within our facilities, have access to purchase our external contractors, and FMA. The majority of this cost is for providing expert advice and support to the Nurse to operate her service, and to provide a team environment for a

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specialist who would be otherwise working alone in the CAS. Thus there are no direct costs to the organisation to provide this service, as it is within current assets.

The negotiations with Connexions focus on the direct provision of services by the Unit, but this is very low volume work, and can be absorbed into current service provision with the appropriate charge for cost per contact service. The value of this is approximated at £1,500 per annum.

People Implications

The implications of these contracts and potential contracts will always be assessed in relation to maintaining full service provision as a priority to the Constabulary. Regular review periods are to be set up to assess impact, and although the impact is assessed as low, if this were not the case then action would be taken to terminate any contract detrimental to our service provision.

Outline of Service Provision

The proposal is that the ambulance Trust employ and manage their own nurse, but that she joins the health unit, and is supported and mentored by the expertise that we have. A fee for use of facilities and access to this support has been negotiated. We will also provide them access to the services we have negotiated with external suppliers such as physiotherapists and counsellors.

Negotiations are in the very early stage with Connexions, but their needs are different from the Ambulance Trust. They are a very small organisation of 250 staff, and currently buy their services directly from Capita. However they are finding the service does not meet their needs. Their requirement is for approximately 30 pre employment medicals a year, and 15 Doctor assessments. This could be provided within our current resources with an appropriate recharge. They have expressed much interest in our very focused and specialised management of Stress/mental health related issues, and although they may only have 2/3 cases a year, they can see the potential benefit of tapping into our service provision. All of this service would be offered on a cost per case basis, and costs have yet to be agreed.

Michael Baxter
Chief Constable