

## OUR COVID RESPONSE: CONSULTATION ON POSSIBLE REDUNDANCIES

### STAFF FAQs

#### **Why do we need to make changes?**

As with many charities Covid-19 has brought unprecedented challenges and whilst we have been able to respond with agility and confidence during our initial stage to the pandemic, the long-term impact of the pandemic has far reaching consequences for us.

This year we are facing a minimum £1.5 million shortfall, as well as further shortfalls for the next 4 years, which have been forecasted in the range £2.5m - £10m cumulative.

We need to 'right-size' in our response to Covid-19, enhancing services in some areas whilst changing our approach in others and ensuring we can continue to provide services during a prolonged downturn in income.

#### **What other cost savings have been considered?**

In addition to staff savings, which account for 75% of Trinity's overall expenditure, we have also identified over £200,000 annual non-staff cost savings across the organisation. In addition, the following have already been put in place:

- We assessed support from Hospice UK who lobbied Government to bulk-buy a proportion of our charitable work. This funding ended in the summer. Without it, we would have had an even greater shortfall of over £2.5m this year.
- We have put a hold on all non-essential capital expenditure, with the exception of the replacement of the IPU flooring which is mandated by the CQC under the new hospital inspection regime and the introduction of sound proof 'pods' in the CNS office to support our virtual clinics are exceptions here)
- We are ending all non-essential external service contracts
- We continue to access the Government's part-time and full-time furlough scheme topping up salaries to 100% until the end of October 2020
- Putting a hold on recruitment where possible with all vacancies being considered by the Exec Team before essential roles are advertised
- The core Exec Team of David Houston (CEO), Dr Gill Au (Medical Director); Nicky Parkes (Clinical Director), Helena Lavin (Finance Director) and David Warburton (HR Manager) have waived the pay award for 2020-21 for themselves
- Encouraging everyone to be careful with our resources and get the message out there that the hospice needs support
- Continue to do everything possible to raise funds safely in fundraising and retail

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### **Can we use our financial reserves to avoid the need to offer the opportunity for voluntary redundancies or reduced hours?**

Trinity is fortunate to have pre-Covid reserves, which have helped considerably in recent months with our initial response to the pandemic. However, with expenditure over £9million a year and a deficit budget forecasted for up to the next 4 years, we have an obligation to our donors and our existing and future beneficiaries, to remain agile, responsive and costs effective in the new 'Covid-World'. In this way Trinity can confidently play its full part over the coming years and ensure the continued delivery and sustainability for hospice care across the Fylde Coast.

### **Can we make use of the Government's Job Support Scheme to avoid redundancies?**

The Job Support Scheme has been designed to protect long-term viable jobs in businesses which are facing a temporary decline in demand over the winter months due to Covid-19. The scheme requires employees to work a minimum one-third of their normal hours, which differs from the previous furlough scheme which allowed employers to claim for employees who were fully furloughed or working less than a third of their hours. We will access this scheme where it makes sense to do so. Unfortunately, the scheme does not provide a solution for the long-term challenges we now face.

### **Under the proposals how many roles are at risk of redundancy?**

Proposals are currently in consultation within the following teams with approximately 18 roles at risk of redundancy:

- Housekeeping
- Fundraising & Communications
- Day Therapy Services
- Catering
- Clinical Education
- Brian House

### **How have the proposed changes been developed?**

Proposals have been developed as part of review undertaken by the Exec Team and a number of heads of departments to assess Trinity's response to Covid-19 and our current and future financial challenges. The Board of Trustees have all been consulted with prior to the development of consultation documents, with the HR and Remuneration Committee approving all proposals and documents.

### **How will the hospice minimise the risk of redundancy?**

Trinity has an obligation to mitigate against redundancy where there is a business need. We would therefore explore with affected post-holders any available vacancies across the organisation. Through a 'matching' process an individual's skills and capabilities will be assessed alongside vacant roles within the team and across the organisation. The 'matching' exercise will identify alternative posts which affected individuals could be automatically 'matched' to and they will therefore no longer be at risk. However, if there is no

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suitable role for an affected individual to be 'matched' with, they will be at risk of redundancy should these proposals be confirmed following consultation.

### **What response was received for voluntary redundancies and reductions in hours**

In total 19 enquiries were made regarding voluntary redundancy, 6 of which have resulted in formal requests submitted by staff members that have been accepted. Other enquiries are being discussed individually with staff members. The voluntary redundancies currently accepted provide us with the opportunity to make a financial saving, whilst also looking at how we can adapt and deliver department services in a more efficient and flexible way.

18 members of staff have enquired about a reduction in their hours, which will now be assessed on an individual basis, by department managers, in line with department's needs and workload.

### **Who should I contact if I want to discuss my pay, pension and other benefits with, in regards to redundancy or a reduction in hours?**

All enquiries should be sent to David Warburton at [david.warburton1@nhs.net](mailto:david.warburton1@nhs.net). Please do not contact the finance team directly as there are several aspects to these enquiries other than salary.

### **What alternative roles are available through suitable alternative employment?**

In the event of an employee being identified as at risk of redundancy, they will be met individually by his/her senior manager who will inform the employee of any available vacancies within Trinity, including any opportunities that have arisen following a number of departmental consultations currently taking place.

### **Is my salary protected if my new role has a lower salary?**

Where an employee agrees to accept a lower grade position in lieu of redundancy, their existing FTE salary will be protected for 1 year from the point of taking on the new role. After one year, the salary will move to that of the lower grade position.

### **Is my salary protected if my working hours are reduced?**

Where hours are reduced, your salary will remain for one month at the previous level before transitioning in line with the new hours worked.

### **What if the suitable alternative employment isn't right for me?**

Redundant employees who accept alternative employment with Trinity will be entitled to a trial period of four weeks in the new job (unless a longer period is agreed). Where the new job necessitates retraining, this trial period can be extended by written agreement with both parties to enable the training to take place. During a trial period either the employee or employer can give notice to terminate the contract except where the employer gives notice

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for a reason unrelated to the new job itself – for example misconduct, the employee will be treated as having being dismissed due to redundancy.

### **Will all future vacant roles be put on hold?**

Trinity is committed to continuing and enhancing our core patient services and should a vacancy arise in the future it would not automatically be put on hold. However, in line with Trinity's recruitment policy any future vacant roles will be reviewed to assess suitable alternatives or potential changes since the role was last evaluated. In addition authority to recruit into new or existing vacancies must be granted by the Chief Executive prior to advertising a vacancy

There are a number of current vacancies which have the potential to be redeployment opportunities and are therefore on-hold. A small number of other vacancies are continuing with recruitment due to it being highly unlikely that they would present reasonable redeployment opportunities given their specialist nature.

### **How will Trinity continue to support community patients with the proposed changes to the Day Therapy Unit?**

Our proposed changes are not about reducing services or our support to the community. Rather, they are needed to ensure we remain responsive and flexible. Through a 'Living Well' model Trinity will be able to reach more patients earlier in their palliative diagnosis and give them more choice to attend the areas/clinics that will benefit them.

### **What is a Single Point of Access Model referred to in the consultation documents?**

A Single Point of Access Model (SPA) could see Trinity offering a 24hr centralised hub to patients, carers, the public and healthcare and social care professionals through a telephone based central point of access for hospice care and advice.

Through telephone and 'virtual wards' a SPA service would supports the assessment, signposting, treatment, self-management and planning of patients, to enable:

- Patients with the right care, in the right place, at the right time
- Reduction in unnecessary hospital admission
- Patients accessing the most appropriate care
- Provide a less stressful experience through a lead contact

### **Are there any plans for departments who haven't received consultations documents?**

Proposals are currently in consultation within 7 departments: Day Therapy Unit, Brian House, fundraising & communications, clinical education, catering and housekeeping. However, as part of the hospice wide reviews all departments have been considered.

### **Volunteering & Support Services plus HR**

Lorraine Oxley, Volunteer & Community Engagement Manager has kindly offered to take voluntary redundancy. Consequently, we will now establish an HR and Volunteering Department overseen by David Warburton. We plan to bolster

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volunteering and services support with extra administrative hours whilst introducing new supervisor responsibilities within the existing team to manage administration and reception.

### **Linden Centre**

Earlier this year a review was undertaken with the Linden Centre to assess current ways of working, adapting to meet future demand, improving effectiveness and the overall management of bereavement services. This review resulted in a number of changes which have either already been implemented or are in the processes of being done.

### **In-Patient Unit and Community Services** (including CNS, Hospice at Home and Hospital team)

This year the usual winter pressures are likely to be more challenging than ever for our In-Patient and Community services. We are expecting to see an increase in patients needing palliative and end of life care from late diagnosis or acute presentations.

In order to respond to this unpredictable demand we have recently asked for volunteers amongst clinicians to work alongside other departments to help us respond to the expected and unpredictable demand, whilst enabling them to gain valuable skills and expertise.

### **Retail**

Since re-opening in July our shops are now making a profit and with stock donations and Gift Aid recovering some of the funds lost whilst shops were closed during lockdown. In addition, the team have grown online opportunities through eBay and are carefully monitoring each shop's performance and profit on a monthly basis.

Due to only a limited number of volunteers returning to our shops one of the biggest challenges for the team is to maintain sufficient resources to keep each shop open. All team members are working flexibly to support this, working in different stores where required.

### **What is Trinity's redundancy package and what is it made up of?**

Any staff selected for voluntary redundancy will be paid a statutory redundancy package based on their age and length of service:

- Under 22 years of age: Half a week's pay for each full year worked
- 22-40 years of age: One week's pay for each full year worked
- Over 41 years of age: One and half week's pay for each full year worked

Length of service is capped at 20 years and your weekly pay is the average you earned per week over the 12 weeks before the day you got your redundancy notice and capped at £538.

This will be in addition to employee notice period and any accrued holiday pay and time off in lieu not taken will be paid.

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Trinity will provide all staff who request information about voluntary redundancy with information on what their payment would be and how it has been calculated.

### **What notice period is given for redundancies?**

Notice of termination will be given in accordance with the employee's contractual or legal entitlement, whichever is more favourable to the employee.

The statutory notice period is: -

Service Notice entitlement

- Less than 1 month Nil
- 1 month - 2 years 1 week
- 2 years 2 weeks
- 3 years 3 weeks

Thereafter, 1 week's notice for each complete year of service up to 12 years i.e. a maximum of 12 week's notice. Trinity reserves the right to invoke Pay in Lieu of Notice (PILON).

### **Is my role at risk of being made redundant?**

We still believe that the core elements of our current 5 year strategy remain valid, but the ability to achieve elements is affected to varying degrees. Our revised priorities for 2020-21 understandably focus on our responsiveness to the Covid-emergency and planning for ongoing disruption for up to 2 years. We will need to be extremely flexible, adaptable and responsive should there be a significant second peak/winter pressures crisis. We will be working with colleagues to build our capabilities to flexibly respond to where the pressures are greatest – in the community, hospital or hospice. Accelerating our use of virtual technology, partnerships with Primary Care Networks and exploring the potential of being an integrated Single Point of Access Hub coordinating local palliative care needs, all form part of this flexible response which also takes advantage of productivity improvements.

However, due to the financial impact of the pandemic and uncertainty of the next few years, financing our future is a significant concern, with a deficit budget expected for the next 4 years.

Led by The Executive Team and Heads of Departments, we are now entering a stage of review, looking closely at how we can maintain our core services at this time and which we can safely restore as the country and local community navigates through and ultimately emerges from the Covid-19 crisis. This will include a review of required changes in our working practices to enable us to stay on the front-line for palliative care, supporting colleagues to work flexibly across their roles, departments and different services and identifying any available cost savings we are able to make. Many hospices have sadly had to make redundancies and given the uncertainty of the Covid-19 financial impact, the possibility of redundancies from across the hospice cannot be ruled out. We hope to avoid or reduce the possibility through this initial exploration of voluntary redundancy or reducing hours.

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### **Why are Trinity doing this now at the height of the Covid peak 2? Why can it not wait?**

During the initial months of the pandemic Trinity has been able to adapt to the financial challenges: adopting socially distanced approaches to our income generation activities, a community wide emergency fundraising appeal raising over £147,000, making optimum use of the furlough scheme and benefiting from a share of a £200m government grant secured by Hospice UK. However, this year we are expecting a minimum financial loss of £1.5million and with a significant loss of income expected for the next 4 years, doing nothing or waiting simply isn't an option.

We have obligations to our supporters, and our existing and future beneficiaries to remain agile and responsive in this new 'Covid world' so the hospice can confidently play its full part over the coming months and years.

### **Will there be more redundancies?**

We hope, like all hospices in the UK, that we can avoid further redundancies. However, given the uncertainty around how long this financial impact may last, our predicted losses in those scenarios, and the changing working practices we must introduce to stay on the front-line in the palliative care response to Covid-19, we cannot rule out the possibility.

### **With reduced capacity for children in Brian House how have staff supported families and staffing resources used effectively?**

Brian House have continued to support local children and their families throughout the pandemic, both on site through respite care and in the community. However, due to social distancing and a number of our young patients shielding, capacity for respite care has reduced and therefore the furlough scheme has been used where appropriate. Members of the team have also supported our adult services, working both day and evening shifts on Trinity's IPU.

A recent review has identified new ways of working, a revised approach to staffing for the individual children and opportunities to enhancing services further through a new pilot community service.

### **Are other hospices making redundancies?**

All hospices, as with all charities have been impacted by Covid-19, both in terms of their finances and ability to deliver ongoing and future services. Some have already made redundancies. We are aware of reports that other hospices are predicting redundancies, with some having already started their own review and consultations with staff.

### **What is happening with volunteers?**

Volunteers have always played a key role in our charity and the services we offer the community, with over 800 committed volunteers working across all areas of the hospice.

Unfortunately, Covid-19 has meant a lot volunteering has been put on hold and whilst some areas, assessed as 'Covid secure', have started to see some volunteers return, it is

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expected that we will be unable to bring back volunteers in large numbers within the next 12 months, due to restrictions and required changes in working practices.

We remain committed to supporting our volunteers during this time and will work alongside them to develop alternative ways they support our vital work as a charity and local health care provider.

### **What will Trinity do if the worst OBR scenario modelled becomes a reality?**

Of the three scenarios identified by the Office for Budget Responsibility, the third predicts a longer recovery that won't see a return to pre-virus economy before 2024. Across the country this would result in a more significant loss in business investment, increased number of company closures and unprecedented levels of unemployment.

This scenario would have a detrimental impact for the hospice, our finances and our ability to deliver our vital services and should this scenario happen we cannot rule out further redundancies and changes to services and ways of working.

### **Am I eligible for the job support scheme?**

All employees, who work a minimum one-third of their contracted hours, regardless if they have previously been on furlough or not, are eligible for the new Job Support Scheme.

Through the scheme the government will fund a third of hours not worked, with the employer covering a further third, this ensuring an employee working on reduced hours takes home a minimum 78% of their normal salary. The Board of Trustees has agreed to extend the 100% salary top up until the end of November for anyone who does move to the Job Support Scheme.

### **How can staff support the fundraising and income generation activities?**

As a local charity the care and support we offer our patients and their families goes hand in hand with our fundraising and income generation activities and never before has our 'money and the mission' been so closely linked.

Every member of staff has a role to play in our organisational objective of raising awareness for the charity. By all of us working together to promoting the work of the hospice and ways people can support, working with the fundraising team to help connect patients and families with our charity activities and where desired staff raising funds through their own initiatives, we will be able to grow our income through existing and new opportunities.

### **Who should I contact with any queries?**

Everyone is encouraged to talk to their line manager and, if a member, appropriate union representative. Members of the core Exec Team can also be contacted:

- |                                   |              |                          |
|-----------------------------------|--------------|--------------------------|
| • David Warburton, HR Manager     | 01253 952546 | david.warburton1@nhs.net |
| • David Houston, Chief Executive  | 01253 952545 | david.houston1@nhs.net   |
| • Nicky Parkes, Clinical Director | 01253 952598 | nicola.parkes3@nhs.net   |

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| • Dr Gillian Au, Medical Director             | 01253 952599 | <a href="mailto:g.au@nhs.net">g.au@nhs.net</a>                 |
| • Helena Lavin, Finance & Facilities Director | 01253 952547 | <a href="mailto:helena.lavin@nhs.net">helena.lavin@nhs.net</a> |

In addition, support is available through Trinity's employee counselling and assistance service, NW Therapies which is entirely confidential and can be contact on 01253 280388.

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