

HANDBOOK FOR THE SOCIETY OF RADIOGRAPHERS

**ACCREDITED REPRESENTATIVES** 

**SCOTLAND** 

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### Welcome from the Chief Executive Officer

Welcome to the Society of Radiographers' network of locally elected representatives. Whether you are an Industrial Relations, Health and Safety or Learning Representative you hold a key position within the Society of Radiographers (SoR).

You will play a vital role in developing the SoR's strength by recruiting new members.

You will be your members' first point of contact with the SoR.

Your role is crucial to the ability of the SoR to represent its members effectively both at local and national level.

This handbook will assist you in your role as a SoR representative; however, it is only a basic guide. The SoR structure of officers and elected members exists to provide advice, guidance and support.

The SoR and the TUC provide a range of training courses to help you develop the skills you will need. Details of training courses are circulated regularly.

Remember that you are not expected to be an expert so please don't hesitate to contact those who are available and willing to help.

I hope you find being a rep is fulfilling and enjoyable.

When and if you decide to resign from being a representative please ensure that you arrange for election to the post to take place and that you pass on this handbook and other relevant information to the new representative.

Best wishes

Richard Evans
Chief Executive Officer

### **Statement on Equal Opportunities**

The Society of Radiographers is committed to the fullest possible participation by and representation of its members. None should be put off from participating in meetings because of the actions, attitudes or language of other participants. In particular, women, black, lesbian, gay men and disabled members have the right not to be made to feel ill at ease or distressed, as a result of the behaviour of other SoR members.

The following guidelines have been drawn up to help SoR members ensure that their activities meet the SoR's commitment to the full participation of all its members in a practical and constructive way. It is hoped that the guidelines will be useful in establishing a culture of equality and fairness in the organisation and will ensure that our local democracy benefits from the fullest level of participation by all our members.

### **Arranging Meetings**

- When arranging meetings, think about the accessibility of the venue both in terms of physical accessibility, and geographical accessibility. Do not assume that everybody is full mobile with their own transport
- Think about the timing of meetings most radiographers are women and a high proportion have caring responsibilities
- Give as much notice as possible about the time, date and venue of meeting and events, so that people can ensure that they can make arrangements to attend
- Never use language that is sexist, racist, homophobic or offensive to disabled people in the literature advertising meetings. In particular, think carefully about the titles given to talks on study days
- Consider whether it is practical or possible to provide crèche facilities at events. You may want to survey members to establish whether there is a demand for this.

### **Participation in Meetings**

Meetings are usually about listening to people's views and taking decisions based on those views. It is therefore important that everyone attending SoR meetings feels equal and able to make a contribution if they so wish. So:

- Listen to what others have to say, and avoid being dismissive of their contribution
- Wait until a speaker has finished and do not interrupt their train of thought
- Aim to have reasoned discussion, not arguments
- Any criticism should be constructive and help members develop confidence
- Make your own contribution as clear and concise as possible and do not dominate the discussion
- Ensure that every one who wishes to speak is given encouragement and the opportunity to do so

### Jargon

Jargon is a barrier to good communication, and may discourage people from participating in SoR meetings. The more we become involved in trade union work the more likely we are to use jargon. Take care to explain any jargon or initials you use which other members may not be familiar with so that everyone understands what meetings or discussions are about.

### Harassment

Harassment of any form, including bullying, will not be tolerated.

- Sexual Harassment is defined as unwanted and unwelcome sexual comments, looks, actions, suggestions, or physical contact that is found to be objectionable and results in an unpleasant or intimidating environment being created.
- Racial Harassment is defined as unwanted and unwelcome terms, comments, looks, actions, or behaviour relating to a person's race, ethnic origin, or colour which members of a racial, cultural or religious group find offensive and results in an unpleasant or intimidating environment being created.
- Anti-lesbian/gay harassment is defined as any unwanted and unwelcome terms, comments, actions or behaviour, relating to a person's sexual preference or lifestyle which is found to be objectionable and results in an unpleasant or intimidating environment being created
- Anti- disability harassment is defined as unwanted and unwelcome terms, comments, actions, looks or behaviour relating to a person's condition or speculation about a person's condition

### **SoR Equality Structure**

The Society of Radiographers has an Equality Network: EQUALISE.

The Network is an integral part of the Society of Radiographers; it is open only to members and is fully funded.

The purpose of the Network is to encourage involvement of members and to provide support and a route by which members can contribute to the development of SoR policy in this important area.

The Network is organised at national (UK) level. (The organisation is currently looking at how the networks can interact and work with the Equal Opportunities Officers elected by the Regional Committees.)

The Network co-ordinates SoR representation at TUC conferences and Seminars. Network members are encouraged to participate in these events including writing motions and speaking to them. All such participation is fully funded.

The Network is allowed to submit motions and send six delegates to ADC. Delegates are allowed to speak but not vote.

Network members also nominate members to sit on various SoR committees.

The Regional Officer who has responsibility for Equal Opportunities services the Network.

### Section 1: The Society of Radiographers - Who We Are

The Society of Radiographers (SoR) is the trade union and professional body for radiographers and associated workers in the imaging and treatment fields. The SoR is affiliated to the Trades Union Congress (TUC) and is led by the Chief Executive Officer and the President

The SoR has a charitable subsidiary, the College of Radiographers (CoR). The function of the CoR is to look after the public interest. There are no members of the CoR.

The aim of the SoR is to provide a seamless service to all our members across the whole spectrum of their working lives.

The main departments of the SoR are:

The Department of Education and Professional Development: This department employs specialist staff who have responsibility for developing policy on specific areas of practice, e.g. Therapy, Imaging, CPD, and advising members accordingly. The department is involved in developing education programmes for radiographers and related staff. The Director of Professional Policy leads this department

The Industrial Relations Department: This department is the one that you will have most contact with as an SoR representative. The department employs specialist staff to advise and assist representatives and members with problems in the workplace. This department is involved in developing policy on industrial relations matters such as pay and grading and in providing trade union education for representatives and members. Your first port of call for advice, whatever the problem, should normally be your Regional Officer. The Industrial Relations Department is lead by the Director of Industrial Strategy.

### **Other Departments**

**The Membership Department** maintains a record of all current members. If you need to know whether someone is a member you should contact this department.

**The Finance Department** manages the finances of the organisation and process reps expense claims forms. They also liaise with regional treasurers about regional accounts. These departments are led by the Director of Finance.

**The Conference Department** organises seminars and conferences on behalf of the organisation.

The Conference department is lead by the Director of Professional Policy.

### **SoR Lay Structure**

The infrastructure of the SoR exists to support the lay structure of elected members, including SoR representatives, and the membership as a whole.

The governing body of the SoR is its Council. Council members are elected directly by the regions they represent, one from each English region (8), three from Scotland, two from Wales and one from Northern Ireland. Council members hold office for three years and are eligible to stand for re-election. The President holds office for one year and is a sitting member of Council elected by other Council members.

The organisation's structure is based on Regional Committees in England and National Councils in Scotland, Wales and Northern Ireland. It is designed to devolve control of SoR activity from the centre to the members in the regions. The Regional Committees and National Councils have control over their own budgets which they can use to further the aims and objects of the SoR regionally.

Every year there is an Annual General Meeting (AGM) of each Regional Committee and National Council to which all members in that region are invited. At the AGM Committee Officers are elected to serve on the Regional Committee or National Council

Regional Committees/National Councils meet at least four times each year and are attended by the Regional/National UK Council member and Regional/National Officer. The Scottish Reps Forum meets at least four times per year. These meetings are open to all local reps

Scottish Council and the Scottish Reps Forum have a joint Planning Meeting annually to plan activity for the coming year

Information regarding Scottish Council, Scottish Reps Forum and the Planning Day can be accessed via:

https://www.sor.org/around-uk/scotland/council

https://www.sor.org/around-uk/scotland/reps-forum

### **Annual Delegates Conference**

Annual Delegates Conference (ADC) is a very important event in the SoR year. Delegates, elected by Regional Committees and National Councils, come together to debate and vote on motions, which, if carried by the conference, become policy. Regional Committees, National Councils and the Council of the Society of Radiographers can submit motions

The SoR equality network: Equalise may also submit motions and send delegates who can speak but not vote.

Observers are encouraged to attend ADC. Observers do not have the right to speak or to vote. Regional Committees and National Councils may decide to fund a number of observers to attend ADC.

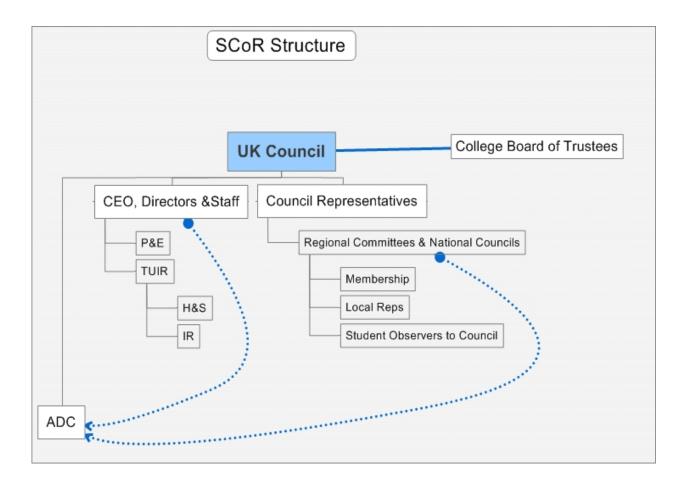
Members of staff, including the Director of Industrial Relations and Regional Officers, attend ADC and are available to provide help and advice to delegates. Conference also invites guest speakers.

As well as being central to policy development, ADC is also a social event that enables delegates to meet each other and the staff, form networks and discuss common problems as well as have a good time.

### **Trade Union Education**

The SoR, both nationally and through Regional Committees and National Councils provides training for its accredited representatives. All SoR representatives are encouraged to attend the SoR Induction Course and TUC Stage I and Stage II ten-day courses. In addition to these the SoR provides short courses on topics which are particularly relevant at any given time.

### **SCoR Structure**



### Section 2: Your Role as a SoR Representative

The role of all SoR representatives can be divided into three main areas of responsibility:

### **Recruitment of New Members and Union Organisation**

An important part of your role is to encourage radiographers and other clinical workers in Imaging and Radiotherapy Departments to become and remain SoR members. It is vital that you know what benefits the SoR can provide to members. Up to date information on benefits to members can be obtained both online and via the membership department.

### **Benefits of SoR Membership**

### The SoR:

- Is the only specialist organisation for radiographers and associated staff working in the fields of imaging and radiotherapy
- Is the professional body for radiographers
- Works with other trade unions with members in the NHS to present a collective view both locally and nationally
- Negotiates members' pay and conditions of service locally and nationally
- Represents members when they have a grievance against their employer
- Represents members who may be facing disciplinary action
- Represents members with regard to their health and safety at work
- Provides legal assistance on employment law
- Takes up legal claims against the employer, including industrial injury claims
- Gives advice on early retirement and pensions
- Represents members who face potential redundancy
- Represents members at disciplinary hearings of the Health Professions Council
- Provides professional indemnity insurance

### **Representing Members**

As an SoR representative your job is to represent the interests of the members, individually and collectively, to your employer. A Trade union's effectiveness is measured by its success in securing improved pay and working conditions.

### **Meeting Skills**

In your role as a representative, there will be many times that your attendance will be required at meetings of varying levels. These may be formal or informal meetings and may involve full committees or just two or three people.

It is important that you conduct yourself in a manner which is appropriate for the meeting you are attending.

You should remain calm and focused in all meeting situations and ensure that you are adequately prepared, having pre-read any documents or papers before- hand.

### **Formal Meetings**

Formal meetings such as JNC, Trust Board, Health and safety committee, partnership, grievance, disciplinary and appeals to name just a few, should always follow the rules of meeting etiquette.

A chairperson will be elected for each meeting and they should ensure that the meeting is conducted properly. A minute taker will keep accurate notes of details from the meeting; this will later be made available to all attendees and a wider audience if appropriate.

When anyone wishes to speak during the meeting, they would normally indicate this by raising their hand and should wait until invited by the chair before they begin to speak. This allows for the chair to ensure that the meeting is kept in order and that all participants are given the opportunity to speak or respond to a speaker. Do not speak over someone or interrupt. Even if the subject matter is contentious, try to keep your voice at a normal level and never shout, no matter how much you may disagree with the speaker.

### **Informal Meetings**

These may be with members, colleagues, managers to name just a few. If you are conducting the meeting you need to ensure that it is controlled and you may want to take your own notes. This is very useful in your role as a representative. Although there is not normally a set agenda for this type of meeting, you will find it useful to have a list of issues or points that you want to address.

When the meeting has ended, check that you have agreed the next steps, whether this is a further informal meeting or a formal meeting or that the matter is resolved.

### Building Relationships within the SoR and the Wider Trade Union Movement.

You and your members work in a constituency that is part of a Regional Committee (RC) or National Council (NC) if you work in Scotland, Wales or Northern Ireland. It is part of your role as a representative to ensure that your constituency is represented on your RC or NC. It is important also that you attend meetings of SoR representatives that may be organised in your region or country. These meetings provide information and allow you to meet with your RO and other SoR representatives.

As well as making contact with other SoR representatives you will need to work with representatives from other unions who have members in your workplace. This contact is vital in order to ensure that SoR members' interests are represented to the employer.

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### Where to Get Help

Inevitably as a newly elected SoR rep you will need support and advice. Your first point of contact is generally your National Officer.

Your National Officer works within their country and staff at head office in London provide administrative support. When officers are in the office, the usual hours are approximately nine to five. It is only possible to return calls outside those office hours in exceptional cases. Inevitably, officers are away from the office several days each week. When the office is not staffed there is an answering service. Calls will be returned as soon as possible. When away for long periods on SoR business, or during annual leave the answer phone message will indicate the date of their return. You have the choice whether to leave a message, call back or seek advice from Head Office.

If you need to leave an urgent message for your officer when they are not in the office then you can do so by contacting SoR Head Office on 020 7740 7234/7218. Your call will be returned as soon as possible.

If you need urgent advice then you should contact HQ and someone will be available to help you. It is always better to wait to speak to the National Officer for your area, if possible, as your case will always be passed back to them.

If you wish to send a document you can either send by post or e-mail (e-mail is better) or in very urgent cases by fax. Please note that fax and e-mail can only be received when the officer is in.

Users of e-mail will wish to note that it receives the same priority as other written communications received in the office.

Finally, it is sometimes a little while before phone calls are returned. This is a product of work pressure and is unavoidable; it does not mean that you are being ignored.

Members should always be encouraged to approach their local SoR rep in the first instance, but if further help is required then phone your National Officer. Details are on the next page.

### **DIRECTOR OF INDUSTRIAL STRATEGY & MEMBER RELATIONS**

Dean Rogers	020 7740 7209   deanr@sor.org
Provides leadership, advice and guidance on all	
matters associated with industrial relations.	

### **NATIONAL OFFICERS**

Responsible for industrial relations issues nationally:

Yvonne Stewart Scotland	020 7740 7256   <u>yvonnes@sor.org</u>
Leandre Archer Northern Ireland	020 7740 7219   <u>leandrea@sor.org</u>
Also responsible for professional issues in Northern	
Ireland	
Kevin Tucker Wales	020 7740 7213   <u>wales@sor.org</u>
Also responsible for professional issues in Wales	
Caroline Hurley Wales	020 7740 7220   <u>wales@sor.org</u>
Also responsible for professional issues in Wales	

### **REGIONAL OFFICERS**

Responsible for industrial relations issues regionally:

Marie Bullough South East region	020 7740 7205   marieb@sor.org
Richard Pembridge Midlands region	020 7740 7215   richardp@sor.org
Helen Wickham Yorkshire & North Trent and	020 7740 7221   helenw@sor.org
Northern regions. Responsible for TUEd	
Jennie Bremner London region	0220 7740 7214  jennieb@sor.org
Marie Lloyd North West region	020 7740 7222   marie.lloyd@sor.org
Peter Higgs South West region	020 7740 7261   peterh@sor.org
Responsible for Equalities issues	
Elaine Brooks Eastern region	020 7740 7223   elaineb@sor.org

### **HEALTH & SAFETY OFFICER**

Rhys Martin	020 7740 7272   rhysm@sor.org
Responsible for Health & Safety matters	

### **STUDENTS & NEW PROFESSIONALS OFFICER**

Nichola Jamison	020 7740 7254   <u>students@sor.org</u>
Responsible for the organization and professional development of student members and new professionals	nicholaj@sor.org

### **DIRECTOR OF PROFESSIONAL POLICY**

Charlotte Beardmore	020 7740 7229   charlotteb@sor.org
Provides leadership, advice and guidance on all	
matters associated with the education and	
professional development of the profession and its	
members	

### PROFESSIONAL AND EDUCATION MANAGER

Rachel Harris	020 7740 7250   rachelh@sor.org
Provides leadership, advice and guidance on all	
matters associated with the education and	
professional development of the profession and its	
members	

### **PROFESSIONAL OFFICERS**

Sue Johnson Responsible for professional support and advice for all radiographers involved in clinical imaging. Lead for Breast Imaging	020 7740 7241   suej@sor.org
<b>Lynda Johnson</b> Responsible for professional support and advice for all radiographers involved in clinical imaging	020 7740 7262   lyndaj@sor.org
Tracy O'Regan Responsible for professional support and advice for all radiographers involved in clinical imaging	020 7740 7263   tracyo@sor.org
Maria Murray Responsible for professional issues in Scotland. Lead Officer for Radiation Protection Matters in the UK. Responsible for NICE Accreditation for the SCoR.	020 7740 7240   mariam@sor.org
Spencer Goodman Professional officer responsible for professional, educational and health policy advice to radiographers and others specialising in radiotherapy, cancer care and workforce planning issues.	020 7740 7257   spencerg@sor.org
Nigel Thomson Specialising in Ultrasound.	020 7740 7242   Nigelt@sor.org
Gill Harrison Responsible for Ultrasound matters.	020 7740 7259   gillh@sor.org
Alexandra Lipton Responsible for MRI and cross-sectional imaging	020 7740 7230   alexl@sor.org
Jacquie Vallis Responsible for education and the accreditation of education institutions and individuals	020 7740 7266   jacquiev@sor.org

Contact details for your Council Member and Region/Country Chair/Secretary can be found on our website using the following links, you will need to be logged in as a member in order to access this information:

SOUTH EAST	https://www.sor.org/about/society-of-radiographers/uk-
	<u>country-and-region-committees/committee-(5)</u>
SOUTH WEST	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/committee-(6)
LONDON	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/committee-(1)
EASTERN	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/committee
NORTHERN	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/committee-(3)
YORKSHIRE & NORTH	https://www.sor.org/about/society-of-radiographers/uk-
TRENT	country-and-region-committees/committee-(7)
NORTH WEST	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/committee-(4)
MIDLANDS	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/committee-(2)
WALES	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/council-(2)
SCOTLAND	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/council-(1)
NORTHERN IRELAND	https://www.sor.org/about/society-of-radiographers/uk-
	country-and-region-committees/council

SOR Staff	https://www.sor.org/about/society-of-radiographers/sor-
	staff

## **Useful Website Addresses:**

https://www.sor.org	www.partnership-at-work.com
http://www.tuc.org.uk	www.theworkfoundation.com
http://www.acas.org.uk/index.aspx?articleid=1461	http://www.unionreps.org.uk/index.cfm
http://www.nhsemployers.org/Pages/home.aspx	http://www.hse.gov.uk
http://www.bis.gov.uk	http://www.hazards.org
http://www.lrd.org.uk	http://www.equalityhumanrights.com
http://marchforthealternative.org.uk	

### Publications available from the SoR website at the following link:

https://www.sor.org/learning-advice/professional-body-guidance-and-publications/documents-and-publications/policy-guidance-document-library

- Around the clock: A negotiators guide to the working time regulations; shift work and flexible working
- Body Mapping: A resource for SoR Health and Safety Representatives
- Bullying and Harassment: Achieving dignity at work for all our members
- The Causes of Musculoskeletal Injury Amongst Sonographers in the UK
- Health & Safety Pregnancy
- Industry Standards for the Prevention of Work Related Musculoskeletal Disorders in Sonography
- Musculoskeletal Disorders in Mammography: A guide to tackling issues in the workplace
- Occupational Asthma & Sensitivity to Chemicals
- Prevention of Musculoskeletal Disorders in Sonography
- Violence and Aggression at Work (including lone working)
- Watch Your Back
- Work Related Stress Guidance for Health & Safety Representatives
- Safety representatives and safety committees: The Regulations, Codes of Practice and guidance relating to the Safety Representatives and Safety Committees Regulations, 1977

### Other Publications:

- Agenda for Change Terms and Conditions Handbook: <u>https://www.msg.scot.nhs.uk/pay/agenda-for-change</u>
- The NHS Knowledge & Skills Framework https://www.sor.org/trade-union-support/agenda-change/knowledge-and-skills-framework
- NHS Job Evaluation Handbook: https://archive.sor.org/trade-union-support/job-evaluation
- ACAS Time Off for Trade Union Duties
   https://archive.acas.org.uk/media/274/Code-of-Practice---Time-off-for-trade-union-duties-and-activities/pdf/11287 CoP3 Time off Union Activities v1 0 Accessible.pdf
- TUC The Union Advantage https://www.tuc.org.uk/research-analysis/reports/union-advantage-how-unions-make-work-better-and-society-fairer

Labour Research Department Publications (including Law at Work) are available via the SoR website at the following link:

http://www.sor.org/members/atwork/LRD pub.htm

### Section 3: The Society of Radiographers in the Workplace

The ability of the SoR to represent its members effectively both at national and local level depends on its strength in the workplace. You should be aiming for 100% membership. Employees who are eligible to be SoR members but who aren't often benefit from the work done by you without making any contribution. This undermines the credibility of the union and the morale of members. The higher percentage membership we can claim, the greater our influence with employers and Government.

Membership of the SoR is open to those working in imaging and therapy in a clinical capacity.

Those groups of staff we are actively seeking to recruit include:

- Radiographers
- Students
- Nurses
- Medical Physics Technicians
- Sonographers (who are not radiographers)
- Physicists
- Mould Room Technicians
- Dark Room Technicians
- Radiography Assistants
- Healthcare Assistants
- Assistant Practitioners

## **Recruiting New Members**

The most effective way of finding out who is a member and who isn't is to ask. Before speaking to people about membership consider when is the best time to approach them, i.e. when they have time and are willing to listen, and what arguments you might use to persuade them. These might need to be tailored to particular cases.

Make sure you have sufficient SoR application forms and recruitment literature.

The best adverts for SoR membership are successes achieved on behalf of the members. Make sure that you can quote some examples of how the SoR has succeeded in improving members' terms and conditions, either locally or nationally. Highlight instances where individuals have been represented successfully either in a grievance or when facing disciplinary action. Remember to respect confidentiality unless you have the member's consent to disclose information.

### **Access to Potential Members**

Many NHS employers have arrangements to give trade union representatives access to new employees through induction programmes. If such an agreement does not exist raise it through the staff side to try to negotiate this facility.

### **Student Radiographers**

Student Radiographers form the bulk of our potential membership for the future so it is vital that they are included in SoR activities from the beginning of their training. Student Radiographers who are members during their training should be invited to members meetings. It is important that Student Radiographers see how the activities of the SoR at local and national level will influence their future working life. We would ask that whilst students are on clinical placements that you take the time to meet with them and explain who you are and what your role in the department is. You can ask are they student members and provide membership information if they are not.

Each Regional Committee or National Council should have a place on the Executive Committee for a Student Officer. SoR reps should encourage Student Radiographers to become involved and to make sure they know who their Student Officer is and to let them know their view on issues under discussion.

When Student Radiographers qualify the SoR offers 6 months free membership if they join immediately upon qualifying. As a rep you need to make sure that Student Radiographers who you have contact with are aware of this and provide them with an application form.

### **Retaining Members**

Having recruited members it is vital the SoR provides a service which members see as worthwhile and pertinent to them.

Providing an effective service includes:

- Making yourself and your role known to members.
- Keeping members informed about what is going on, within their own workplace and at national level, is vital to ensuring that they feel part of the SoR. This can be done through meetings and notice boards.
- Listening to members. Members need to know that there is someone to talk to about work related problems and that their views will be taken into account by management and the SoR.
- Representing members both collectively and individually.

### **Section 4: Getting Yourself Organised**

### **Workplace Organisation**

In addition to recruiting members SoR representatives need to work with other unions and with management to ensure that SoR members' interests are represented at every level within the workplace.

### **Working with Other Unions**

There are many unions that organise in the NHS. It is essential that good working relationships be established at local and national level. See **below** for a list of health service trade unions that are recognised for consultation and negotiation with management.

- •
- Association of Clinical Biochemists (ACB)
- British Dental Association (BDA)
- British Dietetic Association (BDietA)
- British Medical Association (BMA)
- British Orthoptic Society (BOS)
- Chartered Society of Physiotherapy (CSP)
- Community and District Nursing Association (CDNA)
- GMB
- Royal College of Midwives (RCM)
- Royal College of Nursing (RCN)
- Society of Chiropodists and Podiatrists (SOCP)
- Society of Radiographers (SoR)
- UNISON
- Union of Construction, Allied Trades and Technicians (UCATT)
- Unite

Representatives from those trade unions with members in your workplace will meet with the NHS Board management on a regular basis, to discuss issues which affect all employees of the NHS Board.

The trade union representatives are known as the staff side and they usually meet together prior to meeting with management in order to decide what to say at consultative/negotiating committee meetings. The staff side constitution determines the way that these meetings are run. The constitution should be available from the Staff Side Chair or Secretary.

Health and Safety Representatives may belong to the Health and Safety Committee that comprises of trade union representatives and management representatives. Staff side meetings should be held prior to Health and Safety Committee meetings

### The Alliance for Health Professionals

The Society of Radiographers belongs to a smaller group of unions, which work closely together at both national and local level on issues of common interest. This group is called the Alliance for Health Professionals (the Alliance) and consists of several small unions, which are also professional bodies.

Organisations that make up the Alliance for Health Professionals are:

- British Dietetic Association
- British Orthoptic Society
- Chartered Society of Physiotherapy
- Society of Chiropodists and Podiatrists
- Society of Radiographers
- Federation of Clinical Scientists
- Royal College of Speech and Language Therapists

Representatives from these organisations might decide to meet together outside of the full staff side especially if there are issues that affect their members specifically, or if their members' interests on a particular issue are different from the larger unions.

The SoR encourages its reps to make contact with local reps from other Alliance organisations.

### **Time Off and Facilities**

In order to be effective as a trade union representative you and your members will need a certain amount of co-operation from your employer. There is generally a good tradition in the NHS of providing the necessary time off and facilities for trade union representatives to do their job. However this is not the case with all NHS employers and there are often problems in the private sector.

Accredited representatives of recognised trade unions have a right to time off and to certain other facilities by law.

### **Time off for Trade Union Duties**

Union lay officials of recognised trade unions have the right to reasonable paid time off to carry out trade union duties.

Trade union duties are those concerned with negotiations about (or, with the employers agreement, connected to) the following:

## Terms and conditions of employment, or the physical environment in which workers are required to work:

### Should include:

- Pay
- Hours of work
- Holidays and holiday pay
- Sick pay arrangements
- Pensions
- Vocational Training
- Equal Opportunities
- Notice Periods
- The working environment
- Utilisation of machinery and other equipment

Recruitment (Engagement or non engagement, or termination or suspension of employment or the duties of employment, of one or more workers).

### Should include:

- Recruitment and selection policies
- Human resource planning
- Redundancy and dismissal arrangements

### Matters of discipline

### Should include:

- Disciplinary procedures
- Arrangements for representing trade union members at internal hearings
- Arrangements for appearing on behalf of trade union members, or as witnesses, before employment tribunals.

Allocation of work or the duties of employment between workers or groups of workers

### Should include:

- Job grading
- Job evaluation
- Job descriptions
- Flexible working practices

## Trade union membership or non-membership

### Should include:

- Recognition Agreement
- Representational arrangements
- Union involvement in the induction of new workers

### Facilities for officials of trade unions

Should include arrangements for the provision of:

- Accommodation use of office space
- Equipment Such as use of a desk, somewhere lockable to store papers, use
  of telephone, access to typing and photocopying facilities, use of computer,
  web/e-mail access.
- Supply of names of new staff to the union

### **Procedures**

### Should include:

- Disciplinary Procedure
- Grievance and Disputes Procedure
- Redundancy Procedure
- Sickness and Absence Procedure
- Capability Procedure

### **Time off for Trade Union Education**

You are also entitled to reasonable paid time off during working hours for training which will help you to carry out your duties. Any training provided or approved by the SoR or the TUC falls into this category.

The definition of 'reasonable' is vague and is dependent upon the circumstances. Normally the SoR would consider 4-6 weeks to be a reasonable time for management make any necessary arrangements to cover your absence. If you have difficulty getting time off to attend training courses contact your RO as soon as possible.

### **Time off for Trade Union Activities**

All members of trade unions, not just accredited representatives, have the right to reasonable time off without pay to take part in trade union activities. These activities allow the trade union to function effectively and democratically and it is often in the employer's interest to ensure that this happens.

### Such activities include:

- Attending workplace meetings to discuss and vote on outcomes of negotiations with the employer.
- Meeting with your Regional Officer to discuss issues relevant to the workplace or the profession.
- Voting in union elections.

- Attending Regional or National Committee meetings\*.
- Attending national union meetings e.g. the Trade Union Education Committee or Council meetings.
- Attending Annual Delegates Conference (ADC)

Remember: Although there is no legal right to paid time off for these activities the SoR encourages representatives to seek to negotiate pay for some or all of these activities, particularly attendance at ADC.

### **Disclosure of Information**

The employer has an obligation to provide you with information upon request for collective bargaining purposes.

### **Health and Safety Representatives**

The Safety Representatives and Safety Committees Regulations (the 'brown book') gives Health and Safety representatives the following additional rights:

- Safety representatives are entitled to paid time off to carry out workplace inspections.
- For formal inspections employers are required to furnish the 'facilities and
  assistance to safety reps which they may reasonably require'. The TUC
  believes that the facilities recommended in the ACAS code of practice (see
  below) should be made available to safety reps.
- Paid time off to liase with other safety reps, trade union officers and specialist health and safety advisors.

### **Facilities Agreements**

All of the above should be contained in a local 'Facilities' Agreement' which is negotiated between the NHS Board and the trade union Staff Side. A copy of this agreement should be available from the Human Resources Department or the Staff Side Chair or Secretary.

Many facilities agreements are based on the Advisory Conciliation and Arbitration Service (ACAS) Code of Practice 'Time off for Trade Union Duties and Activities' however the SoR regards this as a floor not a ceiling and representatives are encouraged to seek to improve upon the recommendations contained in this code.

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### **Section 5: Industrial Relations Reps**

### **Representing Members**

All SoR representatives are elected by the members and are answerable to them. Your role is to represent your members' interests to the employer. This may be through negotiation with your departmental manager on issues such as on-call payments or grading, at NHS Board level through the joint consultation and negotiating machinery, or individually if members have a grievance or are called to a disciplinary hearing.

As a representative of the SoR you are obliged to abide by the union's rules and its policy as agreed by the Annual Delegate Conference. Your Officer is available to advise you on policy.

### **Handling Members Problems**

One of the main reasons why members join the SoR is so that they will have union support if they have a problem at work. They value SoR representation if they have a grievance or are called to a disciplinary hearing.

Collective bargaining carried out at UK level is conducted via the UK Staff Council.

### The UK Staff Council

The Staff Council is made up of a 'management side' and a 'staff side'. The management side comprises of representatives from the NHS Employers organisation. The staff side is made up of representatives from Trade unions recognised for collective bargaining. Membership of the staff side is proportional to the size of the membership of the organisations.

Those terms and conditions covered by the remit of the UK Staff Council include:

- Maternity Leave and Pay
- Equal Opportunities
- Implementation of the Working Time Regulations
- Arrangements for Redundancy Payments
- Pay and Allowances (See Pay Determination Page 29 for further information)
- Grading
- Hours of Work and Annual Leave
- Sick Leave and Pay

Agenda for Change is underpinned by the concept of partnership working at both national and local level. The Agenda for Change contract is a set of national terms agreed and implemented by mutual agreement at a local level. Guidance on how to implement the terms is jointly agreed in partnership by the NHS UK Staff Council Executive and is intended to help in situations where, locally, the joint partners have not so far been able to agree a suitable way forward.

Agenda for Change is a complex and changing arena. There are many sources of information on various websites and to ensure you have the most up to date information you should refer to the following:

<u>www.sor.org</u> the Society's website from which you can download key documents and gain information on our position and policy on all aspects of AfC, job evaluation and the KSF

Many of the various parts of the agreement and the new handbook are open to variations of interpretation by both employers and unions — often with conflicting views on what the spirit of the documents intend to say. Whatever policy or new employment practise is implemented should only come into being once both parties are agreeable. It is not within the employers remit to force changes through as they see fit. Of course in reality some employers may well attempt to do this. Your role is to act as a gatekeeper and maintain the negotiating line that is in the best interests of your members.

Scotland and Wales are more fortunate in being less subject to local variation of opinion with many issues being agreed on a countrywide basis through national partnership working. In Scotland, terms and conditions of employment which are specific to NHS Scotland are negotiated at the Scottish Terms and Conditions Committee (STAC)

### **Pay Determination**

Pay is determined through the Pay Review Body System. This system also determines pay for nurses and midwives, doctors and dentists and all other associated health service professionals. The PRB has an extended role to monitor equality and diversity.

The Pay Review Body (PRB) is made up of members appointed by the Prime Minister. Members of the PRB are drawn from a variety of backgrounds including the public and private sector.

The remit of the PRB is to make recommendations to the Prime Minister on levels of remuneration for those staff whose pay is determined through this system. The PRB considers evidence submitted by the staff side and the management side.

Topics covered in the evidence include:

- Pay and Affordability
- Recruitment and Retention
- Motivation and Morale
- Economic Evidence
- Comparisons with other groups both within the NHS and in the private sector

In addition to considering the evidence from both sides, members of the PRB visit a number of NHS Boards. They talk to managers and staff side representatives about what is happening locally with regard to such issues as recruitment and retention and staff morale.

The PRB makes recommendations to the Government, usually in the early part of the year, about pay levels. The Government decides whether to implement all or part of the recommendations. The 'offer' is presented to the staff sides who then consult their members on acceptance or rejection. If the offer is accepted the agreement is circulated to all NHS employers for implementation. The contents of the notification become part of the terms and conditions for staff and are applicable from 1<sup>st</sup> April of that year.

### NHS Scotland structure and organisation

Since July 1999 the Scottish Parliament has assumed full responsibility for health. This encompasses structure, organisation and administration of the NHS in Scotland and includes full responsibility for the terms and conditions of employment of NHS Scotland staff.

All decisions, strategic or operational, are reached in NHS Scotland as a result of agreement between the Scottish Health Department and representatives of the Service and Trade Unions. Formal partnership arrangements are enshrined in Scottish legislation and operate at local, area and national levels.

Partnership working in NHS Scotland is unique. It is based on a national consensus between government, employers and staff side organisations over the direction of health service in Scotland which differs from the market-based approach in NHS England and NHS Wales. Partnership working in NHS Scotland goes beyond traditional consultation and negotiation meetings — it involves early stage involvement of staff in developing strategic plans and in decision making. It is essentially based on the philosophy that involving staff at the beginning rather than consulting at the end of the decision-making process is a more effective way of ensuring ownership and delivery of solutions. This has resulted in genuine national level partnership working on coordinated health policies, campaigns and initiatives to improve patient services and the appropriate workforce policies to support these objectives.

### **SCOTTISH PARTNERSHIP FORUM**

Membership comprises representatives from the Scottish Executive Health Dept., Trade Unions and managers from the Service. Regularly attend by the Cabinet Secretary for Health.. SOR is represented by the National Officer

SPF is a strategic body which engages in all major topics affecting the future of NHS Scotland and is involved with the formulation of policy and national service planning as well as driving practical implementation initiatives.

Each of the 14 NHS Boards is visited annually by a Performance Assessment Team, comprising the NHS Scotland Chief Executive and representatives from the SPF. Each Board's performance is assessed against standards laid down by the Performance Framework for NHS Scotland in relation to Corporate, Clinical and Staff Governance.

### SCOTTISH WORKFORCE AND GOVERNANCE COMMITTEE (SWAG)

SWAG is a sub group of SPF and addresses workforce issues that require Scottishwide solutions, working in conjunction with the SPF to ensure that NHS Scotland operates as an exemplary employer.

Membership comprises representatives from the Scottish Executive Health Dept., Trade Unions and managers from the Service. SOR is represented by the National Officer

## **Staff Governance**

The Staff Governance Standard is the overarching key policy for partnership working, employment practice and employee relations and is enshrined in legislation as part of the NHS Reform (Scotland) Act 2004. Staff governance focuses on how NHS Scotland staff are managed. It comprises five standards and makes up the third pillar of the governance framework (alongside clinical and financial governance) within which NHS Boards must operate. Further information can be found via:

http://www.staffgovernance.scot.nhs.uk/

### **PIN Policies**

The Partnership Information Network (PIN) policies, which form part of the terms and conditions of employment of all NHS Scotland employees, are designed to achieve a consistent approach in the way NHS Scotland deals with its employees. The PIN policies are researched and prepared on a partnership basis involving employers, trade unions, professional organisations and the Scottish Government. All employers are required to adopt the values and principles of PIN policies and are expected to meet or exceed the models of best practice contained within them.

The Agenda for Change Terms and Conditions of Service Handbook contains a section (Part1 Para2) which highlights compliance with the Staff Governance Standard including implementation of PIN policies.

A list of PIN policies can be found via:

http://www.staffgovernance.scot.nhs.uk/partnership/partnership-information-network/

### SCOTTISH TERMS AND CONDITIONS COMMITTEE (STAC)

STAC is the forum where term and conditions of employment for NHS Scotland staff are negotiated. Membership comprises representatives from the Scottish Executive Health Dept., Trade Unions and managers from the Service. SOR is represented by the National Officer. Minutes of STAC meetings and copies of agreements reached at STAC can be found via:

http://www.stac.scot.nhs.uk/

### **AREA PARTNERSHIP FORUM**

The Area Partnership Forum comprises Trade Union and management representatives from within the Board area. SOR has the right to one seat on each APF. The APF SOR representative is nominated by all SOR local representatives within the Board area. The function of the APF is to participate in strategic decisions around service provision within the Board and to monitor performance of the board in respect of targets and legal requirements. These include meeting the Staff Governance standards, which in turn means monitoring evidence from local systems to show that PIN guidelines are being implemented.

### **ALLIED HEALTH PROFESSIONS FORUM SCOTLAND**

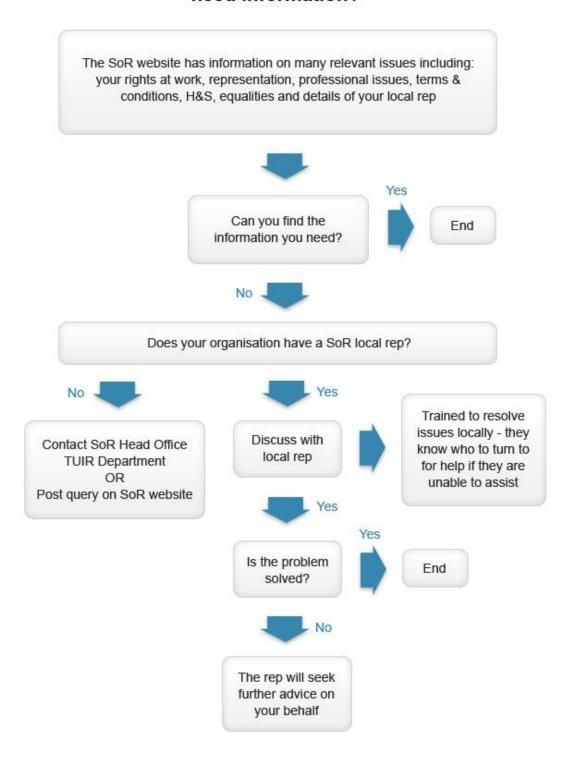
SOR holds two seats on AHPFS. SOR representatives to AHPFS are nominated by Scottish Council

The remit of the group is to foster collaboration between AHPs in Scotland and use the forum as a means of communicating with the Scottish Health Department on behalf of AHPs in Scotland. The AHP officer from Scottish Health Department regularly attends.

### **How Can You Help Your Members?**

If your member/s are experiencing a problem at work or simply need some information, the SoR wants to help them as quickly as effectively possible.

# Do you have a problem at work or do you just need information?



The SoR provides a number of resources to aid Reps in carrying out the role.

### Website

You can consult this website. In the Trade Union Support section, you will find information on issues ranging from Terms and Conditions to employment advice to health and safety and equalities advice. This may answer your query.

### Representation

Sometimes, if your problem is more serious, you may need the SoR to represent you. This may be because you are going through a disciplinary procedure, taking out a grievance against the way you have been treated at work, or been the subject of some bullying or harassment.

Again, your first contact should be with your local rep. They will be aware of the locally agreed procedures which will be followed by both staff and managers and will be able to take you through these. The procedures are intended to ensure that any problems can be dealt with effectively, fairly and as quickly as possible.

The local rep should be able to accompany you to any meetings which you may have in connection with these procedures. Their role will be to listen to what is being said, to take notes and to ensure that the procedure is being followed correctly.

The rep can advise you about any further steps which may be taken and give information about the likely future course of events.

If at any time you would like to get assistance or if the matter is one that involves suspension or gross misconduct you should contact the SoR HQ or your National Officer for further advice.

### **SoR HQ**

Members sometimes contact HQ either by email, telephone or letter. Except in exceptional circumstances they would normally be directed to you as the local rep. You are best placed to be able to help in the first instance. However, if you are unavailable an Officer will be able to give initial 'first aid' advice.

Similarly, enquiries made through the SoR website will be redirected.

Members are asked not to arrive at HQ without an appointment, as officers are not always available.

### **HCPC Referrals**

If a member tells you that they been referred to the HCPC it is imperative that you tell them to contact Vicky Andrews at SoR HQ immediately – <a href="mailto:vickya@sor.org">vickya@sor.org</a> / 020 7740 7234. It is vital that if the member wishes to be represented by the SoR that we are involved from the outset so if the member fails to contact us straightaway it will compromise the member's right to representation. Although preliminary letters from the HCPC will often indicate that no response is required from the member, this does not change the member's responsibility to let SoR HQ know immediately they have been contacted. Immediately means within 24 hours or the next working day.

### **Injuries at Work**

If a member is injured at work then they must contact Vicky Andrews at SoR HQ — vickya@sor.org / 020 7740 7234 as soon as possible. They must also report the accident/injury to the employer using local protocols. This is to safeguard any claim against the employer should it become necessary. Any delay in reporting an accident/injury to us may influence our ability to pursue that claim for compensation.

### **Patient Complaints**

Any patient complaints which might lead to the Trust being involved in litigation must be reported to Liz Robinson at SoR HQ - <a href="lizr@sor.org">lizr@sor.org</a> / 020 7740 7236 <a href="mailto:before">before</a> any written statement is made by the member to the employer. The employer cannot force the member to make any statement until they have had a chance to take advice from SoR HQ and it is a requirement of our Professional Indemnity Policy that our insurers see any statements first. As a rep you should ensure members are aware of this requirement and you should direct any member under pressure to give a statement to Liz Robinson. The SOR web page has advice on the conditions of the professional indemnity policy as well as guidance on making a statement - <a href="https://www.sor.org/sor-access-denied?destination=/being-member/professional-indemnity-insurance/pii-guidance-members">https://www.sor.org/sor-access-denied?destination=/being-member/professional-indemnity-insurance/pii-guidance-members</a>

Members who recognise they are part of a situation that might become a patient complaint in the future should make a private handwritten note of the facts for their own benefit and recall later if interviewed and contact Liz using the above contact details.

### **Court Cases/Coroners Court**

If a member is called as a witness in any patient related court case, they should contact Liz Robinson at SoR HQ - <a href="lizr@sor.org">lizr@sor.org</a> / 020 7740 7236 before making any statement to anyone including their employer. If members are contacted by solicitors by phone they should ask for all contact to be by email or letter.

We fully appreciate the hard work reps undertake to represent SoR members but these are areas we do not expect you to deal with other than to make sure the member is fully aware of the need to contact us as a matter of urgency. If ever in doubt always contact your regional/national officer to discuss. This article reinforces the points made above – please encourage your members to read it regularly <a href="https://www.sor.org/trade-union-support/problem-work/making-claim-what-do-when-things-go-wrong">https://www.sor.org/trade-union-support/problem-work/making-claim-what-do-when-things-go-wrong</a>

### **Using Agreements**

As a SoR representative one of your jobs will be to answer members' queries on their terms and conditions of employment e.g. entitlement to maternity leave, appropriate grading or pay.

If you are a rep in the NHS you will need to familiarise yourself with the national collective agreement, NHS Terms & Conditions of Service and any locally agreed terms and conditions that form part of your members contracts. An up to date copy of the terms and conditions of employment can be found on the NHS Scotland employers website.:

http://www.msg.scot.nhs.uk/publications

If you are a Private Sector Rep then you will most likely not have a national agreement and you will be provided with individual contracts. In order to represent your members issues you will need to ask them for a copy of their contractual terms and conditions.

If you don't know the answer to the query you have been asked there are many ways to obtain further advice.

The following websites will also be able to help you in most cases

www.sor.org
www.tuc.org.uk
www.acas.org.uk
www.unionreps.org.uk
www.nhsemployers.org
www.gov.uk/government/organisations/department-for-business-innovation-skills
www.lrd.org.uk
www.equalityhumanrights.com

### **Contacting your National Officer**

It is better if you do this rather than the member doing it direct because it will increase your standing with the members and improve your knowledge so that next time the issue is raised you will know the answer.

# **Grievance and Disciplinary Procedures**

One of your most important roles as the SoR Industrial Relations representative is to represent individuals.

There are two main areas of individual representation: grievances, when members are unhappy with something that management has done or failed to do; and discipline, when management are unhappy with an employee's behaviour or performance.

Both should be covered by formal written procedures. This is important otherwise management are free to treat individuals in an arbitrary way, which can lead to unfairness and discrimination. It is a fundamental trade union principle that everyone should have the same rights at work and face the same sanctions. It is impossible to have a fair system where the rules are not written down and freely accessible to all staff.

All NHS employers have grievance and disciplinary procedures. These procedures should be the subject of consultation or negotiation with the staff side (trade unions may not want to 'agree' a disciplinary procedure but will certainly want to have an input). It is important that in the grievance procedure for both collective and individual grievances there is a 'status quo clause'. This means that during the time it takes to follow the issue through the procedure the situation remains as it was before the problem arose. This prevents management from making unilateral changes.

### **Using agreements**

In addition to using locally agreed policies and procedures, employment practice should be underpinned by the Staff Governance Standard. Reps should refer to the Standard and appropriate PIN guidelines to deal with specific issues e.g.

Handling members problems – refer to PIN guideline "Dealing with Employee Concerns"

Time Off and Facilities – refer to PIN guideline "Facilities Arrangements"

Health and safety – refer to PIN guideline "Managing health at Work"

Handling Disciplinaries - refer to PIN Guideline "Management of Employee Conduct"

Staff Governance Standard and PIN guidelines can be found on:

http://www.staffgovernance.scot.nhs.uk/

### **Handling Grievances**

### **Dealing With a Grievance**

A member or members with a grievance against their manager will expect your help if they cannot resolve the issue for themselves. Individual matters should always be treated as confidential and should not be discussed with anyone who is not involved. This does not prevent you from seeking advice from your Regional Officer.

When handling either grievance or disciplinary issues, ensure that you begin by establishing the facts. Never meet management when they are better informed than you are. When interviewing the member(s) make sure you have a private place and sufficient time.

#### You will need to find out:

- The exact nature of the problem and any underlying causes.
- The names of those involved.
- Exactly when the problem occurred.
- If the problem has occurred on more than one occasion, exactly how many times.

Having established the facts you will have to exercise your judgement. You are not obliged to represent members in pursuing invalid grievances. It will only undermine your credibility with management if you do.

# Ask yourself:

- Is the grievance valid?
- Are current agreements being followed?
- Are there any wider implications for the rest of the workforce?
- Is the law being broken?
- Are there any health and safety implications?

If you are unsure your National Officer is available to help. They will talk it over with you and you can make a decision together. If you decide that there is not a valid grievance then it may help when you tell the members if you can say that you have consulted your NO.

If you decide that the grievance is valid then you will need to explain the procedure to the member(s) including the consequences of pursuing the grievance, both if the matter is resolved in their favour and if it is not, and any other options open to them. You will need to be familiar with the grievance procedure in order to do this confidently, so study it in advance.

### **Preparing Your Case**

Before meeting with management you will need to prepare thoroughly, this will give you confidence.

Preparation should include:

- Identifying your aims, including the minimum you will settle for as a resolution.
- Identifying events that clearly illustrate the nature of the problem.
- Gathering evidence which backs up your case e.g. Procedures, agreements, letters, pay slips, contract of employment.
- Identifying witnesses and statements.
- Preparing the member(s) and agreeing what, if anything, they will say.
- Preparing questions you may want to put to management.
- Anticipating any questions management may ask you or the member(s).

It is always advisable when meeting with management over any issue to take another SoR representative or member with you as a witness and to take notes. However, in individual cases you will have to be aware of confidentiality and gain the individual's consent.

## **The Grievance Hearing**

The manager to whom you are appealing will hear the grievance. The manager to whom you put the grievance originally will normally present the management case explaining why they could not resolve the grievance. You will be expected to put your member(s) case first, this will include explaining the background to the grievance, raising relevant arguments and laying out what you want as a resolution. You can also call witnesses. The management will then put their case and call any witnesses. Both sides are allowed to question each other and all witnesses. Both sides will then be asked to sum up. The hearing is then adjourned whilst a decision is made. You may be informed of the decision on the day or, in more complex cases, some time later.

As the procedure progresses the hearings become more formal and often written 'Statements of Case' are required from both sides. Generally, unless representatives are experienced and confident, National/Regional Officers will deal with the case from this point.

You should obtain a copy of the Grievance Procedure from Human Resources and familiarise yourself with it.

# At the Hearing

- State your case clearly.
- Listen carefully to management's response and take notes.
- Ask any questions you require to ensure that you understand the management's position.
- Make sure that both sides agree on what action is to be taken.

If the matter is not resolved at this stage then you will need to contact your NO if you haven't already done so. They may need to be involved at a future stage so keep them informed of progress. Keep all documentation safe.

#### **Conflicts Between Members**

Not all grievances raised by members are against their managers, some involve conflict between SoR members. This creates a complex situation because the SoR is obliged to provide representation to both sides. If this situation arises then contact your NO immediately.

Allegations of harassment of one colleague by another (quite possibly both SoR members) are particularly difficult and require very careful handling. Do not attempt to tackle a harassment case until you have spoken to your National Officer.

### **Employment Act 2002 (Dispute Resolution) Regulations 2004**

In order to reduce the number of claims taken to employment tribunals the government has introduced new 'dispute resolution procedures' to encourage employers and employees to resolve disputes internally. The new procedures are contained in the *Employment Act 2002 (Disputes Resolution) Regulations 2004* and came into force on 1<sup>st</sup> October 2004.

### Further details of the Regulations can be found at www.acas.org.uk

From this date all employers must have dismissal, disciplinary and grievance procedures in place that comply with the statutory requirements. Employers and Employees must follow these procedures. Failure to-do so could affect the outcome of any employment tribunal claim.

The procedures set out a *minimum standard*. Most NHS Boards will have agreed much more comprehensive procedures with the recognised trade unions, including the SoR. These procedures can still be used providing they are 'not inconsistent' with the new procedures i.e as long as the basis steps are covered. The new procedures should not be used to undermine the existing procedures or erode pre-existing collective agreements.

You should always contact your National Officer if there is a possible tribunal claim. The SoR cannot undertake to pursue an application if the National Officer was not contacted <u>prior</u> to the application being submitted.

The purpose of the Grievance Procedure is to provide a framework within which legitimate grievances can be brought to the attention of management and, hopefully, resolved.

The procedure consists of a series of steps each taking the problem, if unresolved, to the next level of management. Individual grievances usually finish at the Chief Executive or NHS Board level, collective grievances or disputes may have the option of taking the issue to ACAS for arbitration or conciliation.

Each step of the procedure is taken within a set timetable i.e. meetings/grievance hearings have to be arranged within a set deadline unless both parties agree to extend that deadline. The higher up the management hierarchy you progress, generally the more generous the timetable. The obvious advantage of using the Grievance Procedure is to avoid management using delaying tactics. If the timetable of the procedure is not adhered to, you are within your rights to proceed to the next level.

### **Disciplinaries**

### **Dealing With a Disciplinary**

The SoR representative is the first contact for any member threatened with disciplinary action.

Your will need to follow many of the steps as described in Handling Grievances:

- Make sure of the facts.
- Make sure that you understand the procedure.
- Make sure that management follow their own procedure you should make
  a note of anything that you feel was incorrectly handled in case of the need
  to appeal.
- Talk to independent witnesses gather witness statements.
- Ask to see copies of any witness statements taken by management.
- Do not be rushed into a disciplinary hearing, make sure you have time to prepare.
- Contact your NO for advice.
- Advise the member of the possible consequences if the hearing goes against them. This will depend on the gravity of the alleged offence.

**NB.** Contact your National Officer immediately if the alleged offence is one which could lead to dismissal e.g. harassment, theft, drink/drug abuse, violence.

### The Disciplinary Procedure

The disciplinary procedure lays out the way in which disciplinary matters are to be dealt with. Following the procedure should ensure that management treat individuals in a fair and unbiased way. The aim of the disciplinary procedure should not be to punish but to allow the employee to improve.

The first part of the disciplinary process is often an 'informal' or 'counselling' meeting with the manager. If the manager takes this step they should make it clear to the employee what the problems are, what changes are expected and how the manager is going to help them achieve these changes. This informal stage should also include taking into account personal circumstances that may be affecting behaviour or performance and any training needs. The objective of this stage is to try to prevent the necessity for formal action.

The formal part of the disciplinary process consists of:

- A disciplinary investigation
- A disciplinary hearing
- Outcome which may include disciplinary sanctions

### The Disciplinary Investigation

Before a disciplinary hearing is held an investigation should be carried out to establish whether there is a case to answer. Ideally, the manager who will chair the hearing should not carry out the investigation. During the investigation the investigating manager should seek to establish the facts by interviewing the member and witnesses and looking at available records etc. This person should present the case at the hearing if they find that there is a case to answer. As a result of the investigation they may recommend that there is no case to answer.

During the investigation, if the allegations are serious or it is in the interests of a fair investigation, the member may be suspended on full pay. Suspension is not a disciplinary sanction and should not indicate guilt, however suspension should only happen in the most serious of circumstances. The member should be informed in writing of why they have been suspended and should be given an indication of how long it will last and when it will be reviewed. If a member is suspended, contact your National Officer immediately for advice.

### **Preparing Your Case**

Find out if there have been any similar cases and what the outcome was. This can be used to ensure fair treatment.

If the member is admitting the offence then look at mitigating circumstances which might convince the manager to either not take disciplinary action or to be more lenient. These might include:

- Previous tolerance of the same behaviour
- Previous good record
- Lack of information or training
- Domestic circumstances
- Medical reasons
- Unclear or unwritten rules
- Action taken was necessary to get the job done.

### The Disciplinary Hearing

Members should be informed of their right to be represented at a disciplinary hearing and the date should be agreed to allow adequate representation. Prior to the hearing you should be supplied with the management 'case' i.e. the allegations, the evidence and details of witnesses. If you are planning to call witnesses you need to inform management.

An appropriate manager should hear the case. Often the procedure will list those managers who can dismiss a member of staff. The level of manager hearing the case may indicate the possible outcome if the member is found 'guilty'.

During the hearing, the manager who carried out the investigation should present the case against the member and call their witnesses. You will be given the opportunity to question the management witnesses and also the manager. When the manager has made their case, you will then be asked to present the case on behalf of the member. This might include taking the member through their own version of events and calling your own witnesses. Management can question you, the member and your witnesses. When both sides have presented all the evidence you will be asked to sum up, management should be asked to speak first.

The meeting will then adjourn whilst a decision is made. The decision may be given on the day or in complex cases after a longer period of time.

#### The Outcome

Dependent upon the severity of the allegations and whether the case is 'proved' there are a number of possible outcomes:

- The case is not proved and no action is taken.
- The case is proved but no action is taken.
- The case is proved and a disciplinary sanction is imposed.

Disciplinary procedures outline possible sanctions, usually ranging from verbal warnings that stay on the employee's record for 3-6 months to final written warnings lasting for 12-24 months or even dismissal. The severity of the conduct will determine at what level the sanction is set.

All Disciplinary Procedures have an appeals mechanism.

### **Appeals Against Disciplinary Sanctions**

All disciplinary procedures have an appeals mechanism. Appeals are usually made to the next level of management except in the case of dismissal when appeal will be to the NHS Board Chief Executive or NHS Board.

Before deciding whether to lodge an appeal you may want to discuss the case with your National Officer.

Grounds on which you may wish to appeal include:

- The punishment is unfair you don't believe that management sufficiently proved their case against the member.
- The punishment is too harsh although the case was proven the punishment is out of proportion to the offence. This view may be based on precedents set by other similar cases.
- Management have used the procedure incorrectly leading to unfairness.

# **Disciplining an Accredited Representative**

SoR accredited representatives have the right to be represented by their National Officer. If there is any suggestion that you may be subject to disciplinary action, contact your National Officer immediately. ACAS recommend and most NHS disciplinary procedures agree that the employer should contact the National Officer before taking any action against an accredited representative.

### Guidance for Representatives: Facebook and other Social Networking Websites.

The explosion in popularity of social networking websites such as 'Facebook' and 'Twitter' is nothing short of phenomenal. Members should also be cautious about sending sensitive information via text and social media platforms such as messenger, KIK, Snapchat, Whatsapp and other similar mobile applications.

Many members, including reps will use social networking regularly and there are several good examples of using it as a method to share ideas and keep up to date with friends, share knowledge of industrial relations or discuss professional questions.

However, all members should be aware that there are risks not least the opportunity for fraudsters to use any personal information to steal identities or gain access to confidential information.

One area that has been highlighted recently is the number of cases concerning the publication of libellous material included in individual accounts. Some of these cases have arisen as a result of unscrupulous interrogation of published material by journalists who then put this into print.

In some areas of employment employers are banning the use of social networking sites and bringing disciplinary proceedings against individuals as a result of misuse of employer time at work and any damage to the integrity of employees or the business that may arise from comments made on line.

Reps should advise members of the risks involved in participating in on line social networking and not be openly critical of colleagues, employers, managers and members of other professions. By doing so the writer could be at risk of legal action but may also compromise the integrity of the SoR.

Reps should also take particular care themselves not to (deliberately or inadvertently) bring the SoR into disrepute through confidential details being mentioned on the Internet. Where networks are used to share ideas or ask advice, it is important that personal details of members or third parties are not published.

### **Section 6: Health and Safety Reps**

Health and safety is of great importance to trade union members. The role of a heath and safety rep is to make sure that employers and managers fulfil their responsibility under legislation

### **Health and Safety Legislation**

# **Duties of the Employer**

The Health and Safety at Work Act (HSWA) 1974 is the framework for all health and safety legislation in the UK. The act describes very few specific detailed requirements but describes the general duties of an employer towards their employees. Nevertheless, these are fundamental duties and are often the basis of prosecutions against employers.

Employers must provide machinery, equipment and other plant that is safe and without risk to health, and must maintain it in that condition. Employers must also ensure safe systems of work. This includes workplace layout and the way in which jobs are carried out. (Sections 2(1) and 2(2)(a))

- Employers must ensure that things used at work do not endanger employees'
  health; that information about hazards provided by manufacturers is obeyed
  and products are stored and transported safely. (Section 2(2)(b) and (6))
- All employees must be given suitable health and safety information, instruction, training and supervision. (Section 2(2)(c))
- Employers must ensure that any workplace that is under their control does not pose a hazard to health. This may include walls, flooring, ventilation etc. (Section 2(2)(d))
- Employers are responsible for the workplace environment e.g. heating, lighting, noise levels and welfare provisions such as seating, washing and toilet facilities. (Section 2(2)(e))
- Employers employing more than 5 employees must produce a written safety policy that details the hazards present in the workplace and the procedures and people responsible for dealing with them. (Section 2(3))
- If requested by a recognised trade union, employers must recognise and allow safety reps and safety committees to function. (Section 2(4), 2(6) and 2(7))

The Health and Safety at Work Act provides a framework into which new health and safety legislation, in the form of Regulations can be fitted. Many Regulations derive from European Directives which are enacted under the Health and Safety at Work Act as Regulations. Regulations are legally binding and enforceable under the HSWA.

A particular series of regulations known as the 'Six Pack' are of major importance. They are:

- Management of Health and Safety at Work Regulations 1992: These regulations are important because they clarify how employers must comply with their duties as laid out in the HSWA. They aim to emphasise accident prevention through compulsory risk assessments by employers. Risk assessments are the duty of the employer and should only be signed by a management representative, however safety reps should be involved at the earliest stages of assessments.
- Workplace (Health, Safety and Welfare) Regulations 1992: These regulations
  are especially important for NHS workers as they extend a wide range of
  basic health, safety and welfare issues to schools and hospitals which were
  not previously covered by the Offices, Shops and Railway Premises Act and
  the Factories Act. The regulations are couched in general terms but the
  approved Code of Practice gives more specific guidance on issues such as;
  temperature, workspace, toilet facilities and smoking.
- Manual Handling Operations Regulations 1992: Almost a third of all accidents at work reported to the Health and Safety Executive (HSE) are caused by manual handling i.e. lifting and/or moving loads. The Manual Handling Operations are of great importance to radiographers since many of the tasks associated with the job fall into this category. The regulations place a clear obligation on employers to eliminate hazardous manual handling operations or reduce the risk of injury as much as is reasonably practical for those operations that cannot be avoided.
- Provision and Use of Work Equipment Regulations 1992: These regulations
  cover the selection and operation of any machine, appliance, apparatus used
  at work. The regulations oblige the employer to ensure that all equipment is
  suitable for the task for which it will be used, maintain all equipment in good
  working order and give appropriate information and training to employees in
  use of the equipment.
- Personal Protective Equipment at Work Regulations 1992: These regulations cover all equipment to be worn or held by employees to protect against health and safety hazards. The regulations place responsibility on the employer for providing such equipment free of charge, maintaining it in good working order and training employees in the use of such equipment. NB. Use of personal protective equipment should be a last resort used only when all means of eliminating or reducing the hazard have been explored.
- Health and Safety (Display Screen Equipment) Regulations 1992: This is the
  first legislation in the UK specific to the use of visual display units (VDUs), and
  has introduced legal minimum standards covering the design and use of
  VDUs.

# Other key regulations include:

- Health and Safety (First Aid) Regulations 1981
- Noise at Work Regulations 1989
- Control of Substances Hazardous to Health Regulations 1994
- The Ionising Radiation (Medical Exposure) Regulations 2000
- The Working Time Regulations 1998
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995

### **Approved Codes of Practice (ACOP)**

Many sets of Health and Safety Regulations come with an Approved Code of Practice (ACOP). These give practical advice on how to comply with the law.

If the employer follows the advice, they will be doing enough to comply with the law in respect of those specific matters on which the ACOP gives advice.

The special legal status of an ACOP means that if an employer who is prosecuted for breach of health and safety law cannot show compliance with the ACOP, it would be up to them to prove that the alternative methods used are sufficient, otherwise a court would find them to be at fault.

The Safety Representatives and Safety Committees Regulations (SRSC) 1977 – also known as the 'brown book' and the Management of Health and Safety at Work Regulations 1999 give trade union health and safety representatives certain legal rights provided that the trade union is recognised for collective bargaining.

- Right to Time Off to carry out their functions and for training (See Section 4:
   Time off and Facilities)
- Right to be consulted in good time about issues connected with Health and Safety.
- Right to investigate potential hazards and dangerous occurrences.
- Right to investigate members' complaints
- Right to make representation to the employer.
- Right to carry out workplace inspections at least every quarter.
- Consult with, and receive information from, HSE inspectors on behalf of members.
- Right to attend Safety Committee meetings.

**NB.** Remember, these are *functions* not *duties*. Health and safety representatives cannot be held legally responsible for not fulfilling these functions but the employer can be prosecuted for failing to carry out their duties.

### **Investigating an Accident**

When an accident occurs in the workplace, safety reps have a vital role to play. The SRSC Regulations give you the right to investigate the circumstances of the accident and to gather evidence of the cause. It is extremely important that SoR reps exercise this right since the evidence they produce might be critical if a member needs to make a claim against the NHS Board for compensation. Safety reps also need to use the information gained to ensure that managers fulfil their responsibility to make sure such an accident doesn't happen again.

There should be an agreement with the NHS Board that safety reps are informed immediately an accident occurs. If this is not the case then pursue this through the Health and Safety Committee. Regardless of whether there is such an agreement, make sure that members know to inform you immediately in the event of an accident.

During the investigation you may want to:

- Talk to witnesses, including the victim if possible, and take statements. This is best done immediately before their memory fades.
- Make notes about the scene of the accident ensure that you don't disturb
  anything e.g. position of equipment, position of victim, position of witnesses,
  time, date etc.
- Take photographs of the scene.
- Note the presence of anything unexpected that may have contributed to the accident e.g. fluid on the floor.

You will also want to make sure that the member(s) involved fill in the accident book. All injuries at work, no matter how trivial, should be recorded. If the victim is unable to do this for him or herself then make the entry yourself.

Certain accidents and dangerous occurrences are also reportable to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). Make sure that all reportable accidents are notified to the appropriate authority.

In the case of serious accidents contact your Regional Officer immediately.

### **Health and Safety Inspections**

Health and safety representatives are entitled to carry out workplace inspections:

- At least once every three months or more frequently where there are high risks or rapidly changing circumstances or where there is an agreement with the employer to do so. (SRSC Reg 5(1) and Guidance Note 16)
- Following a change in conditions of work (for example, the installation of new equipment, introduction of new technology or new ways of working).(SRSC Reg 5(2))
- After relevant new information is published by the HSE or other authorities.
   (SRSC Reg 5(2))
- As part of an investigation into potential hazards or dangerous occurrences in the workplace even if the members did not draw it to the health and safety representative's attention and in order to examine the cause of an accident. (SRSC Reg 4(1)(a))
- Following a notifiable accident or dangerous occurrence. (SRSC Reg 6(1) and Guidance notes 23 & 24)
- Following complaints by any member(s) relating to their health, safety or welfare at work. (SRSC Reg 4(1)(b))
- After remedial action has been taken. (SRSC Guidance Note 21)
- Health and safety representatives are also entitled to inspect and take copies
  of documents related to health and safety. (SRSC Reg 7(1) and Code of
  Practice 6)

### **Carrying out an Inspection**

## **Arranging an Inspection**

The timing of inspections must be agreed with the departmental manager. The SRSC Regulations require safety reps to 'give reasonable notice' or 'consult with the employer' before carrying out inspections. It is good practice to agree dates in advance as this gives you the opportunity to make adequate preparations so that your time will be used most effectively.

# **Planning an Inspection**

It is always a good idea to consult members before carrying out an inspection. You can't know about everything that happens in the department, particularly in specialist areas, so talk to members and find out if they have any particular concerns. Safety reps have a legal right to seek the opinions of members. The SRSC Regulations say that nothing should 'prevent safety reps from carrying out independent investigations or private discussion with employees'. Give members plenty of warning of the date of the inspection so that they can arrange to have time to talk with you.

To make the inspection most effective think about an inspection plan. This might include:

Where to inspect: If you are the only safety rep in a large department or group of departments it is probably better to inspect the different areas on rotation rather than trying to get them all done in one day. A rolling programme of inspections will make the task more manageable. Don't forget places such as car parks, film stores, toilets, in fact any area used by members. You don't have to inspect everything – you may decide to concentrate on a particular area or hazard which has been raised as a problem.

**Collating Information:** Use any information you might have about the area(s) you are going to inspect e.g. notes of previous inspections, accident statistics, incident forms. This will give you a better chance of identifying problems.

- Results of any monitoring, tests or measurements: This might apply particularly in processing areas where ventilation monitoring might have been done.
- Technical information about hazards and precautions: This will include manufacturer's information and employer's instructions. e.g. COSH assessments.
- Official documents: For example; fire certificates.
- Reports, Statistics and other information on accidents, dangerous occurrences and industrial diseases: This may include complaints about back pain indicating a manual handling problem or skin complaints indicating latex allergy.

**Risk Assessments:** As well as identifying problems, one of the main objectives of inspections is to make sure that identified risks are being controlled. Make sure you have records of all risk assessments relating to jobs, hazards or processes in the area that you will be inspecting.

Laws and Standards: Find out which laws and/or standards apply.

**Consulting with other safety reps:** If there is more than one SoR health and safety rep in your NHS Board or workplace then make sure you consult each other and coordinate your activity.

### **Drawing up an Inspection Checklist**

When you have identified the potential problem areas and the main questions you want answering then you need to draw up a checklist to help you work through the inspection without missing anything. The checklist will help you carry out an inspection. It is an essential tool to achieving a successful workplace inspection.

You will find an example of a checklist in Section 10 which you can modify to suit your own needs. Your checklist will probably change during your first round of inspections as you identify what you find most useful and get the feel of doing inspections. Remember, the best checklist is one that you are happy with so don't be afraid to use your own ideas.

### **Carrying out an Inspection**

Most reps find it useful to take the manager who is responsible for health and safety in the department with them when they do inspections so that they can point out problems directly. However, you don't have to take a manager with you, the inspection is yours and it is up to you.

- Make sure that you listen to members during the inspection and if you think
  that members are unwilling to talk in front of the manager then come back
  later without the manager present. If is vital members have the opportunity
  to talk to you about their concerns and you have a legal right to talk to
  members in private.
- Do take detailed notes. Don't rely on memory. Use your checklist and if necessary make sketches.
- Try to make sure that you focus on important problems and don't be deflected by members or the manager on to relatively trivial issues.
- Remember that the day of the inspection might not be a typical day so try to take into account possible factors which may affect the situation on another day e.g. staffing levels, workload.

### **Action Following an Inspection**

There is no point in carrying out an inspection if nothing is going to happen to your findings and no action is taken.

Rule number one is *put your findings in writing* to your manager and make sure *you keep a copy!* 

Agree a date with the manager by which they will respond. If this is not possible, in your report request a response by a specified date. If the manager doesn't respond and has no good reason for not doing so then you can use the grievance procedure (See Handling Grievances)

Don't be fobbed off with excuses and don't accept a verbal response to a written report. There are a number of reasons why reports and responses should be in writing:

- It may be used as evidence if a SoR member suffers an accident. If the SoR
  and our solicitors can show that the hazard was reported but no action was
  taken this could be used as evidence of the employer's negligence.
- If a HSE Inspector visits the department you can discuss your reports and responses or not with them. If it is apparent that you are trying to improve health and safety but there is little or no co-operation by the manager then the Inspector can take action.
- You may wish to use the report and response as the basis for a grievance.
- You may wish to raise the matter at the NHS Board health and safety committee.

### **Getting Management to Act**

As soon as you have completed your report, pass it to management. This should be done as soon as possible after the inspection and immediately if a serious hazard that requires immediate attention is found.

If the hazard is not dealt with or there is no response to the report then this can be followed through by one of two approaches, or possibly both:

- (i) Using the grievance procedure: Health and safety matters can be the subject of a formal grievance using the grievance procedure
- (ii) Reporting the problem to the NHS Board Health and Safety Committee: The NHS Board health and safety committee should be able to recommend action. The Health and Safety committee should involve senior managers, including the NHS Board Health and Safety Officer who should be able to get things moving.

Which approach you use is a matter of judgement and you may wish to consult your National Officer.

### **Re-Inspecting**

Safety reps have the right to inspect the workplace once improvements have been completed. This gives you the opportunity to ensure that the situation has been dealt with to your complete satisfaction. Remember to take the notes and report of your original inspection with you and check that members are happy with the improvements.

# **Dealing With Hazards**

A useful hierarchy, which should be followed when a hazard is identified, is:

Elimination – Remove the hazard

**Substitution** – Use a less hazardous substance, process, procedure or equipment.

**Mechanical Engineering Controls** – If the hazard cannot be eliminated or substituted then use mechanical controls such as guards, enclosures, dead man's buttons etc.

**Administrative Controls** – Restrict access to machinery or processes through protocols, limit the numbers of staff exposed, provide training.

**Personal Protective Equipment –** Should be used only as a last resort. Includes gloves, lead aprons and goggles.

### **Organising for Health and Safety**

Regional Committees and National Councils are encouraged to elect at the AGM a Health and Safety Officer to serve on their Executive Committee (See Section 1). The role of the Health and Safety Officer is to keep abreast of developments and be the Regional Representative to the National Health and Safety Forum. They will work with the SoR's National Health and Safety Officer to ensure support for any Health and Safety Campaigns or Surveys.

The SoR supports a national Health and Safety Forum to which Regional Committees/National Councils are entitled to send a delegate. This Forum meets twice per year and is serviced by the SoR Health and Safety Officer. The Health and Safety Officer is available to give advice to health and safety reps and can be contacted through SoR Head Office.

### **Section 7: Union Learning Reps**

The Society of Radiographers recognises that it has an important role to play in supporting the education, lifelong learning and the personal and professional development of our members. The ULR role is an important part of the support we provide

Radiography is continually evolving to meet service demands and to keep pace with technological and medical change. Radiographers must ensure their knowledge and skills are kept up to date in order to demonstrate their fitness to practice, to improve their career prospects and, most importantly, to improve the quality of the care they provide to patients.

Radiographers must be able to evidence their Continuing Professional Development (CPD) to maintain their state registration. The Health and Care Professions Council (HCPC) is the independent regulator set up by the Health and Social Work Professions Order 2001. The HCPC keeps a register for different health and care professions and only registers people who meet the standards it sets for their training, professional skills, behaviour and health. The HCPC will take action against registrants who do not meet their standards. Clearly a ULR would be beneficial in supporting members to meet these standards but the ULR role is more than this.

# The Role of the ULR

SoR ULRs are well trained and well placed to provide support, encouragement and guidance to their members. As a SoR ULR you are an elected trade union representative who will enjoy similar rights to Industrial Relations and Health & Safety union representatives. It is a role which will develop according to your needs and those of the members. The following list is not exhaustive but the role will include:

- Identify the learning needs of members
- Offering advice and supporting members to plan and manage their learning
- Promoting learning opportunities
- Working to improve the access to learning and learning resources
- Promoting members' rights to lifelong learning and professional development
- Influencing the learning and development strategy in the workplace
- Building contacts and information networks
- Developing a culture of learning in the work place
- Supporting members to use CPD Now so they may plan, undertake and record
   CPD in accordance with the College's recommendations

As well as improving members' learning opportunities and educational prospects, you will also develop your own skills and knowledge and be recognised as an asset to the service.

Some employers and / or employees might resent a ULR taking time off for this role. They may question why they should support a ULR within the organisation if it may lead to a loss of productivity. The reality is it has been calculated by government that the loss of productivity is greatly outweighed by employee added value. The role of the ULR helps organisations by:

- Increasing participation in workplace training
- Promoting a positive attitude to learning and skills amongst employees
- Improving productivity, job satisfaction and staff morale
- Improving industrial relations
- Improving staff recruitment and retention

To summarise, it could be argued that the role of the ULR is to facilitate a culture of learning within the workplace which leads to improvements in patient care.

The task may seem daunting and it would be remiss not to acknowledge some of the constraints you may need to deal with. For example:

- Few radiographers have any entitlement to protected study time. In most instances study time is granted on an ad hoc basis and is subject to the vagaries of service demand and staffing levels. Our members' right to study time as a natural component of a professional person's employment is largely unrecognised.
- Funding for post-registration education and training is difficult to identify and in many instances is woefully inadequate.
- Many learning events for radiographers take place during the evening or at weekends and funding is often inadequate.
- The majority of informal in-house CPD learning events take place after work or during lunch breaks.

However, you will not be expected to change things overnight. The role requires patience but it will be rewarding.

#### The ULR and the CPD Facilitator

It is important to bear in mind that the ULR is not a CPD facilitator or co-ordinator. Many departments have introduced this latter role so that a radiographer can organise CPD events for the staff. The SoR welcomes these initiatives but it is important to recognise these are roles for which the post holder is answerable to the employer. The ULR is elected by the local SoR members. The SoR promotes a partnership approach to learning in the work place and would expect the relationship between the ULR and the CPD facilitator to be very close, productive and beneficial to members. However, all union representatives must accept that their remit may on occasion bring them into conflict with the employer's interests. If difficulties of this nature arise, advice and support will be available from other SoR union representatives, your SoR regional officer and the SoR CPD officer.

#### The Induction Course

We aim to give the new Union Learning Representative the confidence, tools and skills to improve the learning culture of their work place. This is much easier to say than do but the feedback we receive from ULRs is very encouraging.

The course will continue to evolve but the core elements of the programme are:

- Your rights as a ULR
- Learning in organisations
- Preparing and conducting a learning needs survey
- An in-depth examination of CPD Now
- Supporting members to prepare a CPD portfolio
- An exploration of CPD resources
- Advanced Practitioner Accreditation
- Practical presentation skills
- An introduction to leadership training
- Preparing an action plan for the work place

#### **Section 8: Data Protection**

When anyone gives and trusts us with their personal information, it is our responsibility to treat this information in a way that lives up to their expectations and complies with all our legal obligations. A serious breach of data protection law could result in criminal prosecution and large fines.

Generally, a useful way of thinking about data protection is to treat people's personal information in the same way that you would expect your own information to be treated.

This data protection guidance is with respect to your work as a rep for SoR. It is related to the SCoR Data Protection Compliance Handbook<sup>1</sup> which you will be asked to sign. The Compliance Handbook forms part of the SCoR data protection policies<sup>2</sup>.

Please also be aware of your employer's policies and procedures.

### Data protection terms and definitions

Data protection regulation applies to how we process someone's personal information. The key terms that we need to understand are:

- Data controller this is an organisation that collects and decides how personal information will be used. SoR is a data controller and has registered with the Information Commissioner's Office (ICO)
- Personal information includes personal data and special category personal data
- Personal data this is information about people and held in computer systems, mobile telephones or in manual records such in paper files and note books. For example, name, address, date of birth, bank account details, interests
- It also includes opinions about a person. For example, notes on how you think someone has behaved, performed or appears
- Special category personal data this is information about a person's health, religion, political opinion, trade union membership, race or ethnic origin, sexuality
- Processing this is what we do with personal information. It includes how we collect, record, store, share and use personal information
- **Principles** these are the rules that we must follow when processing personal information
- A data subject this is the person whose personal information is being processed. For example, a member or student member
- A privacy policy this is how we inform people about how their personal information will be used. Have a look at SoR's privacy policy on our website

<sup>&</sup>lt;sup>1</sup> https://www.sor.org/about-us/data-protection-compliance-handbook

<sup>&</sup>lt;sup>2</sup> https://www.sor.org/about-us/gdpr-policies

- A privacy notice this is a short notice which must be issued when we collect personal information from people to inform them how their personal information will be used and to look at our privacy policy for more detail
- Information Commissioner's Office (ICO) this is the government body responsible for enforcing data protection law in the UK

# The principles of data protection

As a representative you are responsible for ensuring that the personal information you collect, use and hold is:

- collected and processed in a fair, lawful and transparent way
- used only for the reasons it was collected
- relevant and not excessive
- kept accurate and up to date, and corrected or deleted if there are mistakes
- kept for no longer than it is needed
- kept safe to protect it from being lost, stolen or used inappropriately
- processed in accordance with people's rights

### **Practical guidance for compliance**

### Use personal data fairly, lawfully and in a transparent manner

- Explain to people how their personal information will be used. Be clear and open
- Only use personal information in a way that people would reasonably expect
- Obtain the explicit consent of a person if you are collecting their sensitive personal data. For example, health or medical information. Also keep a note of the date and how explicit consent was obtained, for example, 'during a telephone call on 6/05/18'
- Have a look at the SoR privacy policy at www. https://www.sor.org/privacy-statement to see how we used personal information

### Only use personal information for specified, explicit, and legitimate purposes

- Only use personal information for the purpose that was it was provided to you
- Only use personal information as someone would reasonably expect

### Only keep personal information that is relevant and not excessive

- Collect just the right amount of information for the purpose required no more, no less
- If a person gives you more information that you need to know, for example in an email or phone conversation, only record the relevant information
- Data protection law does not allow for personal information to be kept because 'it might become useful'
- Bear in mind that members have the right to see what information you hold on them

### Keep personal information accurate and up to date

- Regularly check that the personal information you hold in computer and paper records is accurate
- Ask members to notify you of any changes in their personal information
- Amend your records as soon as possible if someone informs you of a change in their information
- Do not use personal information if you have doubts about its accuracy
- At least once a year destroy or delete any records that are no longer needed

# Keep personal information for only as long as it is needed

- There must be a valid reason for keeping personal information
- When personal information is no longer required destroy or dispose of it securely, for example shred it or use a confidential waste system

### Keep personal information safe to prevent it from being lost, damaged or stolen

- Use a password to log in to your computer so that others cannot access the personal information you hold
- If you share a computer with other people (even family members), ensure that your folders and documents are password protected to prevent unauthorised access
- Make sure papers or screens containing personal information are not visible to others in meetings, on trains, and even in your own home
- Lock desks and cupboards used to store personal information, and keep the keys secure
- Use Royal Mail registered post to send large volumes of paper containing personal information or sensitive personal data
- If you need to send an email containing personal information, or attach a file
  which includes personal information to an email, password protect the email
  or document, and send the password in a separate email or text message
- Double check that you have attached the correct file before sending an email
- Double check that the email is addressed to the correct recipient
- Always use the bcc field (not the cc field) when sending an email to more than one person so that the recipients' email addresses are not visible to each other - unless consent to share email addresses has previously been obtained
- Take special care when travelling with computers, laptops, tablets, smart phones and paper records containing personal information
- If you use cloud-based platforms such as One Drive and Dropbox to store and share personal information, please ensure that:
  - Your account is password protected
  - Access is restricted and regularly reviewed
  - Sensitive personal information is not stored in the account

### **Sharing personal information**

- A member's personal information must not be shared with another person or organisation without their prior consent unless they would expect their information to be shared. This includes contact details and email addresses
- Only share a member's personal information with their employer when you have permission from the member

### Personal data breaches

Personal data breaches occur when personal information is lost, destroyed or shared without consent, or if someone accesses the personal information or passes it on without consent. This can be deliberate or by accident. It includes sending personal information to the wrong person and electronic devices such as laptops and telephones containing personal information being lost or stolen. We must act quickly if there is an issue.

Data controllers must keep a record of all personal data breaches. Serious breaches must be reported to the ICO within 72 hours of being discovered.

If you think there may have been a data protection breach in relation to your work as a SoR Rep, please let your Regional Officer know immediately.

### How to respond to data subject rights

### The right of access

A member has the right to view the personal information which you hold on them. This includes information recorded electronically in Word and Excel documents, in emails and in photographs. It also includes information recorded in paper files, for example case work documents. Assume that anything you record about a person could be seen by that person. Record facts and opinion that you would be able to defend if challenged.

We have to respond to subject access requests within 30 days of the request being made. You must not include anyone else's personal information unless you have their consent.

SoR has a procedure for responding to access requests<sup>3</sup>. If someone asks to see their personal information, and you are uncertain about how to respond contact your Regional Officer.

### The right to erasure

The right to erasure is also known as 'the right to be forgotten'. People have the right to request the deletion or the removal of their personal information where there is no compelling reason for its continued processing. An example of this includes deleting an individual's email address from your mailing list if they ask you to after they have opted out of receiving updates by email.

If you receive a right to erasure request and you're unsure how to handle it, please get in touch with your Regional Officer.

<sup>&</sup>lt;sup>3</sup> https://www.sor.org/about-us/gdpr-policies

### **Section 9: Equalities**

The Equality Act which came into force on 1 October 2010, harmonises and replaces previous anti-discrimination legislation. Although responsibilities under the Act will stay largely the same.

The Equality Act covers exactly the same groups of individuals that were protected by the previous legislation. However, the headings of age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, and pregnancy and maternity are now to be known as 'protected characteristics'.

Although responsibilities under the Act will stay largely the same, there are some changes that will affect employers and any business that provides goods and services to the public, or a section of the public, and this even includes goods or services that are given away free.

#### **Protected characteristics**

Each characteristic is addressed in the new Act in summary as follows:

### Age

The Act protects employees of all ages but remains the only protected characteristic that allows employers to justify direct discrimination, i.e. if an employer can demonstrate that to apply different treatment because of someone's age constitutes a proportionate means of meeting a legitimate aim, then no discrimination will have taken place.

### Disability

The Act includes protection arising from disability and states that it is unfair to treat a disabled person unfavourably because of something connected with a disability. An example is the tendency to make spelling mistakes arising from dyslexia. Also, indirect discrimination now covers disabled people, which means that a job applicant could claim that a particular rule or requirement disadvantages people with that disability. The Act includes a provision which makes it unlawful, with limited exceptions, for employers to ask about a candidate's health before offering them work.

# **Gender reassignment**

It is discriminatory to treat people who propose to start to or have completed a process to change their gender less favourably, for example, because they are absent from work for this reason.

### Marriage and civil partnership

The Act protects employees who are married or in a civil partnership. Single people are however not protected by the legislation against discrimination.

# **Pregnancy and maternity**

The Act protects women against discrimination because they are pregnant or have given birth.

### Race

The Act protects people against discrimination on the grounds of their race, which includes colour, nationality, ethnic or national origin.

# **Religion or belief**

The Act protects people against discrimination on the grounds of their religion or their belief, including a lack of any belief.

### Sex

The Act protects both men and women against discrimination on the grounds of their sex.

#### **Sexual orientation**

The Act protects bisexual, gay, heterosexual and lesbian people from discrimination on the grounds of their sexual orientation.

### Types of discrimination

The Act extends some of these protections to characteristics that previously were not covered by equality legislation. Employers and business owners now need to be aware of the seven different types of discrimination under the new legislation. These are:

**Direct discrimination** - where someone is treated less favourably than another person because of a protected characteristic.

**Associative discrimination** - this is direct discrimination against someone because they are associated with another person who possesses a protected characteristic.

**Discrimination by perception** - this is direct discrimination against someone because others think that they possess a particular protected characteristic. They do not necessarily have to possess the characteristic, just be perceived to.

**Indirect discrimination** - this can occur when you have a rule or policy that applies to everyone but disadvantages a person with a particular protected characteristic.

**Harassment** - this is behaviour that is deemed offensive by the recipient. Employees can now complain of the behaviour they find offensive even if it is not directed at them.

**Harassment by a third party** - employers are potentially liable for the harassment of their staff or customers by people they don't themselves employ, i.e. a contractor.

**Victimisation** - this occurs when someone is treated badly because they have made or supported a complaint or grievance under this legislation.

### Disability

### What is the definition of disability?

The Act says a disabled person is someone with 'a physical or mental impairment which has a substantial and long-term adverse effect on his ability to carry out normal day-to-day activities'.

Examples include cancer, diabetes, multiple sclerosis and heart conditions; hearing or sight impairments, or a significant mobility difficulty; and mental health conditions or learning difficulties. People in

these circumstances and some others (such as people with a facial disfigurement) are likely to have rights under the Act to protect them from discrimination. However, only the courts can say if a particular individual is defined as disabled under the legislation.

A substantial effect is an effect that is something other than minor or trivial. Indicators of potentially substantial effects include:

- the time taken to carry out tasks
- the way in which tasks are carried out.

Account should be taken of the cumulative effects of impairments that may not in themselves be substantial if taken individually.

The effect of environmental conditions such as temperature, humidity or fatigue are relevant to the issue of whether or not the adverse effect is substantial.

The extent to which an employee can reduce the effects of their condition by modifying their behaviour will be taken into account though treatment will be disregarded. This means that the degree of impairment for someone with a hearing aid would be assessed by the

level of hearing without the aid. This provision also applies to artificial limbs, but not glasses or contact lenses.

Severe disfigurement is a substantial adverse effect unless it is a disfigurement acquired by tattoo or body piercing.

Long term means something that has lasted or will last at least 12 months or the remainder of the person's life. Where a condition is recurrent it is treated as continuing if it is likely to recur. This would apply to conditions such as epilepsy.

Ability to carry out normal day to day activities

A person is likely to be regarded as disabled only if their impairment affects their ability to carry out one or more of the following day to day activities:

- mobility
- manual dexterity
- physical co-ordination
- continence
- ability to lift, carry or otherwise move everyday objects
- speech, hearing, eyesight
- memory or ability to concentrate, learn or understand
- perception of risk of physical danger

### Impairments include:

- physical, eg mobility impairments
- mental, eg learning disabilities and some mental illnesses if severe and long term
- sensory, eg hearing impairments or visual impairments

### The Duty to Make Reasonable Adjustments

Employers are under a duty to make reasonable adjustments where a provision, criterion or practice and/or any physical features of premises occupied by the employer cause a substantial disadvantage for a disabled person in comparison with persons who are not disabled.

The duty to make reasonable adjustments only applies where the employer either knows or reasonably ought to know of the disabled person's disability.

Some examples of what might cause a substantial disadvantage to a disabled person include lighting that is too dim for someone with restricted vision, doors too narrow for wheelchair users or a work start time that causes problems for persons with a mobility restriction.

The Act gives examples of reasonable steps that employers might have to take including:

- (a) altering working hours
- (b) allowing time off for rehabilitation or treatment
- (c) allocating some of the disabled person's duties to someone else
- (d) transferring the disabled person to another vacancy or another place of work
- (e) giving or arranging training to the disabled person or others
- (f) providing a reader or interpreter
- (g) acquiring or modifying equipment or reference manuals
- (h) adjusting the premises
- (i) providing supervision or other support.

If an adjustment is deemed by the Tribunal to be "reasonable", the employer cannot attempt to justify a failure to make such an adjustment in order to avoid falling foul of the Act.

### Section 10: Skills Check for Problem Solving

#### Introduction

The trade union approach to problem solving is known as 'PIP'. This stands for PROBLEM-INFORMATION-PLAN, and takes you through the 3 stages of problem solving. It is a systematic approach that you can apply to a range of situations.

One of your main jobs as a rep will be to deal with members' problems. These could include:

- Complaints about unfair treatment
- □ Changes at work
- Pay and hours
- Working conditions

Members may bring problems to you, or as rep you may see problems arise before they do – for example, changes at work which will affect jobs or health. Members may not raise problems with you if they are unaware of their rights.

Given the range of issue which arise in workplaces, and the range of ways you might deal with them, it is easy for the rep to get bogged down. Having a simple and effective method for tackling problems will be of enormous help.

### **Problem**

The first stage is to identify the nature and causes of the problem. You can do this by asking yourself a number of questions.

- □ What is the nature of the problem?
- What are the facts?
- What could be causes?
- □ Is it a one off or part of a broader problem?
- Who is affected?

### Information

Once you have pinpointed what the problem is, and that the union can help, you will need to find relevant information to help you resolve it. Here are some questions which may help.

- □ Does the union have policy on this?
- □ Have we got any agreements what do they say?
- □ Who may I need to speak to gather evidence?
- □ What does the member want?
- □ What does the law say?
- □ Should I get expert advice e.g. National Officer/TUC etc?
- □ Can I get advice/information/support form anywhere else?
- □ What questions should I be putting to management?

#### Plan

Now that you have all the information you need relating to the problem, you must work out a strategy for overcoming the problem.

- What are my aims?
- ☐ How and when should I take this issue up?
- □ Who with?
- □ In writing?
- A Meeting?
- □ Informally/formally?
- □ What response can I expect?
- □ What pressure or arguments can I use?
- □ What is the strength of membership feeling?
- □ How can I keep my members involved?
- □ What would be my fallback position?

This is an approach which may be applied to a range of situations. The key point is to adopt a questioning attitude. Developing the skills and confidence to do this, and adopting a systematic approach to fully investigating problems or situations will make your job easier.

## **Section 11: Additional Information**

## **Health and Safety Inspection**

<u>INSPECTORS</u>	
Health and Safety Rep	presentative
Competent Person	
<u>DATE</u>	
AREAS INSPECTED	
INACCESSIBLE AREAS	

# **WORKPLACE INSPECTION**

	Hygiene, Cleanliness and Housekeeping	Yes	No	Comments
1	Are all work areas clean and tidy?			
2	Is the floor clean, even and non-slip?			
3	Is there adequate storage?			
4	Are the rooms tidy and uncluttered?			
5	Are corridors uncluttered?			
6	Do sinks work properly?			
7	Is cleaning equipment available?			
8	Is domestic waste safely disposed of?			
9	Is decoration in good repair?			
10	Are shelves stocked sensibly?			
11	Are cables re-routed to prevent hazards?			
12	Are ceilings free from leaks and loose materials?			
13	Are storerooms and plant rooms kept locked?			
14	Are warning labels displayed in areas where			
	the water is very hot?			
15	Is all furniture in good repair and suitable for			
	the purpose it is intended?			

	Ventilation	Yes	No	Comments
1	Is ventilation sufficient?			
2	Is it draughty?			
3	Are fumes, odorous and stale air effectively removed?			
4	Is mechanical/electrical ventilation well maintained?			
5	Are causes of odours/fumes investigated?			

	Heating	Yes	No	Comments
1	Is the temperature reasonable?			
2	Are heating/cooling systems regularly maintained?			
3	Are there effective means of controlling temperature extremes?			

	Welfare	Yes	No	Comments
1	Are the wash areas and toilets clean?			
2	Are there adequate changing facilities and			
	lockers?			
3	Are there adequate drinking water facilities?			
4	Are there adequate restroom facilities?			
5	Is their access to Occupational Health?			
6	Can toilet/cubicle doors be opened from the			
	outside in the event of an emergency?			

	Security	Yes	No	Comments
1	Is there provision for safety of staff working			
	alone?			
2	Are adequate precautions taken against theft?			
3	Are security staffs employed and does staffs			
	know how to contact?			
4	Are there lockable cupboards for:			
	i) drugs?			
	ii) dangerous chemicals?			
5	Are staffs aware of how to access these			
	cupboards?			

	Electrical	Yes	No	Comments
1	Are sockets overlooked?			
2	Is wire management effective?			
3	Is the darkroom isolated inside and outside?			
4	Are plug sockets in tact?			

	Lighting	Yes	No	Comments
1	Is it sufficient?			
2	Is it regularly maintained?			
3	Is there any emergency lighting?			
4	Are their deflectors on strip lights?			
5	Are windows regularly cleaned on both sides?			
6	Are sunblinds available, if applicable?			

	Radiation	Yes	No	Comments
1	Are there sufficient warning lights and hazard			
	signs?			
2	Are all entrances visible from the control			
	panel?			
3	Is protective equipment stored correctly and			
	regularly checked?			
4	Are there local rules and are they displayed?			
5	Are there adequate warning notices to			
	pregnant patients?			

	Mechanical	Yes	No	Comments
1	Are operating instructions available?			
2	Is equipment regularly maintained?			
3	Are staffs trained in the use of equipment?			
4	Are faults reported immediately?			

	Chemicals	Yes	No	Comments
1	Are there hazard warnings			
2	Is their adequate ventilation/extraction?			
3	Is there suitable storage and labelling?			
4	Are staffs trained in the use of chemicals?			
5	Is there suitable P.P.E provided if necessary?			

	Emergency Equipment	Yes	No	Comments
1	Is there a well stocked first aid box?			
2	Are there emergency drugs available?			
3	Are oxygen cylinders and masks available?			
4	Are emergency procedure notices displayed?			

	Clinical Waste/Sharps	Yes	No	Comments
1	Are staffs aware of the procedures for the			
	disposal of clinical waste?			
2	Is clinical waste stored in a safe area whilst			
	awaiting collection?			
3	Are enough sharps bins provided for the safe			
	disposal of sharp instruments?			
4	Are all sharps bins removed to a secure storage			
	area when 2/3 full?			

	Display Screen Equipment	Yes	No	Comments
1	Are staffs aware of the need for regular			
	breaks?			
2	Are staffs able to adjust their workstations to			
	meet their needs?			
3	Are users correctly trained?			
4	Are staffs aware that eyesight testing is			
	available?			
5	Have D.S.E workstations been assessed?			
6	Is the screen free from glare and discomforting			
	reflections?			
7	Do users experience any aches and pains,			
	particularly in hands and arms?			

	Documentation	Yes	No	Comments
1	Do staff know how to report an accident?			
2	Are safety policies and rules displayed for			
	staff?			
3	Are fire notices and policies displayed?			
4	Is the Risk Management Manual accessible to			
	all members of staff?			

LIST OTHER HAZARDS AND RISKS IDENTIFIED ON THE FOLLOWING FORM.

## LIST OTHER RISKS AND HAZARDS IDENTIFIED

<u>ACTION:</u> When risks and hazards are identified as not satisfactory, list action taken

Hazards and Risks Identified	Action Taken	Resolved Y/N	Reported To	Date

### **Glossary**

ACAS Advisory, Conciliation and Arbitration Service

ADC Annual Delegate Conference

AFC - Agenda for New terms and conditions for all NHS

**Change** staff. Introduced in October 2004.

AGM Annual General Meeting

**Allowances** Payment above and beyond basic pay for

performing specific duties e.g. Student Training

Allowance.

**ACOP** Approved Code of Practice

**Advance Letter** Letter to employers instructing them to

implement a collective agreement reached at

national level i.e. GWC or PTA.

**Arbitration** Process by which a dispute is settled by a third

party

**Brown Book** The Safety Representatives and Safety Committee

Regulations 1977

**CEO** Chief Executive Officer

Claim Document laying out the union's (unions')

position to management (e.g. pay).

**Collective Agreements** The results of collective bargaining – become part

of individual contracts of employment.

**Collective Bargaining** Negotiations with the employer on behalf of

groups of members.

**Conciliation** Process by which a third party mediates to resolve

a dispute.

**Constituency** Body of members entitled to elect a delegate to

Regional Committees and National Councils -

based on employers e.g. NHS Boards

**Constitution** Rules and principles on which a committee or

organisation is run.

**CoR** College of Radiographers

**CPD** Continuing Professional Development

**Dispute** Failure to agree through negotiation

**DoH** Department of Health

**Employment** 

**Tribunal** Formally known as Industrial Tribunal – legal

recourse when an employer contravenes

employment law.

**Enabling Agreement** A national level agreement consisting of a

framework to be implemented through

negotiation at local level.

**EQUALISE** SOR Equal Opportunities Network

**European** European Legislation which must be translated

**Directive** into law by member states

**Evidence** Facts or anecdotes used to support a claim

**Functional** 

Whitley Councils Sub-groups of the GWC which negotiate terms

and conditions for specific staff groups e.g. PTA

**Grievance** Legitimate grounds for complaint against the

employer

**GWC** General Whitley Council

**HCPC** Health and Care Professions Council

HR Human Resources

**HSWA** Health and Safety at Work Act 1974

**HSE** Health and Safety Executive

Joint Staff Consultative Committee – forum in

which trade unions meet with management.

NC National Council

**Negotiating** 

**Committee** Forum in which unions negotiate with

management

Offer Statement by management on what they are

willing to give, for acceptance or rejection by

union members.

**OME** Office of Manpower Economics

**Policy** A statement outlining the guiding principles of an

organisation in relation to a specific issue.

PRB Pay Review Body

**Prescriptive** 

**Agreement** Agreement at national level which must be

implemented in full at local level.

**Procedure** Describes the mechanism or series of practical

steps which parties must follow in order to fulfil the organisation's goals and aspirations as stated

in the policy.

PTA Professional and Technical Council 'A'

RC Regional Committee

**Regulation** Domestic Legislation implementing a European

Directive

RO Regional Officer

**SoR** Society of Radiographers

SRSC The Safety Representatives and Safety Committee

Regulations 1977

Staff Side Accredited representatives from recognised trade

unions

Statement of

Case Documentation laying out grounds for grievance

or appeal against disciplinary action.

**Status Quo** Previous state of affairs – used in grievance

procedures to prevent management making

unilateral changes.

**Recognition** Agreement with management that trade union(s)

enter into collective bargaining on behalf of their

members. Recognition confers certain legal

entitlements on trade union reps.

Summary

**Dismissal** Dismissal without notice

**TUC** Trades Union Congress

**TUED** Trade Union Education

