

from your RCN representative

Royal College of Nursing

Response to Public Accounts Committee

Covid 19 Response Review

3<sup>rd</sup> March 2022

Dear Committee Members

Thank you for your letter dated 17<sup>th</sup> February.

Our members were the frontline of the response to Covid 19 and in the beginning, no one really knew the impact or course this pandemic would take.

The island witnessed an inspiring demonstration of the adaptability and skill in all sectors of the public service and the staff delivered, ensuring all islanders were protected against this new entity. Nurses and Midwives stood up to the mark and as a group we are proud of our contribution to the overall response. I however wish to add it is testament to say that without nurses, I don't believe we would have got to where we are today.

I will respond to the questions in order and give an honest appraisal of my reflections on the response.

- 1) Along with other Health Care unions we were first informed of the Covid 19 virus on the 5<sup>th</sup> March by Rob Sainsbury the Hospital Director. This was at a time when we had no active cases on the island but gathering data from other jurisdictions it was clear that this virus could have huge implications on the health and wellbeing of islanders.
  
- A) In the Hospital it was proposed to set up a bronze command group that would keep track of services and demands on the hospital and staff. On the 6<sup>th</sup> March I emailed Mr Sainsbury to ask if we as TU's could be part of this group as I expected many enquiries from our members on the frontline. This was agreed but never happened.

From the first admissions to the Hospital and the first lockdown we were bombarded by contacts from concerned members on issues about working with Covid Patients, PPE and redeployment. We did attempt to engage with the Health Care management but got no responses in the beginning. We did have to keep requesting a meeting with the managers in Health which we eventually got on the 11<sup>th</sup> April. 2020. It was only after this; that the communication improved, and staff were informed about relevant changes.

The PPE concerns were answered in a special meeting set up with Dr Chris Edmunds who led the Department responsible for distribution. There did remain issues with the constant changes to PPE Guidelines and it was unhelpful when the Minister suggested staff were not using PPE properly.

- B) I would not say our relationship has changed
  
- C) From a wider perspective on Employment Relations matters we did from early on have regular meetings using Teams with Employment Relations Team. The Lockdown imposed to manage the Covid Pandemic meant many Government Departments were going to be working differently. From this perspective it meant different challenges for the staff with home working. This was not something that most of our members could do but we did I believe have regular involvement in all related discussions.
  
- 2) With regards to communications with the Government together, with other unions we did have the opportunity to discuss resourcing and staffing issues. These tended to be more general and issues related to Nurses and Midwives were to be addressed with Health and community management.
  
- A) I do not feel we could say we were totally satisfied but we do appreciate this was a situation that had not been faced by anyone before and was also changing quickly both in island and globally and everyone was on a learning pathway.  

From our members perspective they were on the frontline ensuring health care was delivered to all those in need. Closing services and using the staff in other areas did maintain numbers but this did have a price on the wellbeing of staff who were redeployed.
  
- 3) General communications with the Government were clear and once we had established a local communication with management in health, I believe we did have a big improvement in picking up any issues from our members in a timelier manner.
  
- 4) A wellbeing programme was made available quite early in the pandemic. Again, it required constant review to remain fit for purpose. Feedback from our members was mainly good but we did have some who did not feel having someone to talk to helped. On reflection it is difficult to say how it could have been improved. Our members were frontline and that could not be changed. Member's anxieties could have been averted if the communication in the early stages from management had been better. Instead the members only contact was the RCN.

An example of this was staff who were redeployed were constantly moved around and did not feel they had any base, once we did address this, it did improve but it would have been helpful to have had a plan to manage redeployed staff from the beginning.

- 5) I think I have addressed this in previous answers and again would reiterate that once we had a communication pathway to managers in Health, we were able to get our members issues to them in a timely manner.
- 6) From a government wide perspective, I feel we did have adequate opportunity to be part of a "back to normal" situation or close as we can get to that.

Within Health we only achieved involvement following a series of meetings with management. As we remerged from the pandemic and services started to reopen some of these services did not go back to normal practice which caused a lot of distress to our members.

When staff were redeployed, they were reassured that they would be going back to their previous practice and in some cases their normal setting and this did not happen. An example of this was Samares Ward on the Overdale site. Health management decided not to reopen the unit but conduct a review of the rehabilitation service provision.

We had no objection to rehabilitation Services being reviewed but the manner and the time that this was done felt opportunistic leaving staff feeling let down having been assured they would be returning after their redeployment placements ended. Health Management had no communication on this matter with us until we raised the issue. with them.

- 7) Be open and transparent on all matters, not suggesting they didn't do that but by working in Partnership was positive in maintaining services to the island. I do believe a proper debrief with the trade unions and the Government would be helpful to look at this together.
- 8) PPE was a very high profile for us as I have mentioned in response to Question 1a, I should add it was not only high profile for Jersey but they whole world. Once we had the Opportunity to talk to Dr Chris Edmunds who lead the PPE hub, we did get answers to many of our questions.

From early in the pandemic, we had had lots of concerns from members about supply and guidelines on how PPE should be used. The guidelines from infection control were at times ambiguous and changed quite frequently, this maybe was affected by supply and demand but that was not made clear at the time. We also had questions about reusing some single use PPE and how safe that was as areas did not feel they had adequate information on how it should be cleaned. This raised the anxiety of staff but when we did raise the issue communication on the matter improved.

- 9) With many areas being closed the redeployment of staff helped ensure there were adequate staff available to ensure that patient care and safety was maintained.

One issue we did have was redeployed staff were being constantly moved often daily to cover other areas, where I can accept this happens to ensure patient care was maintained it done nothing for the morale of the nursing staff.

Looking Forward, I believe a more coherent plan on redeployment is needed, ensuring there is clear process on how staff will be managed if they are moved from their regular base. Feedback from staff suggested the process they went through was chaotic and ad hoc

This is my account and thoughts reflecting on the pandemic based on the accounts from many members I spoke to.

I am as very proud and humbled by our profession's response.

Should you seek any clarity please contact me and I shall help in any way I can

Kind Regards

A handwritten signature in black ink that reads "Kenny McNeil". The signature is written in a cursive, flowing style.

**Kenny McNeil**  
**RCN Convener (Jersey Branch)**