

Proposal to restructure CHS London Administrative Support Management Phase 1, Roles (B5 – B8b)

1. Introduction

- 1.1. The Trust wishes to enter into formal consultation with staff and their Trade Unions in line with its agreed policy set out in 'Management of Staff Affected by Change Policy and Procedure' (version number 11.1, May 2021). The Trade Unions and affected staff are invited to raise questions and comments which can be taken into account before the proposals are finalised.
- 1.2. The purpose of this consultation document is to outline the proposal to restructure the administration support functions of CHS London (Newham and Tower Hamlets). The paper is intended for the administrative functions and will outline the operational and business case for proposing the change including all contractual and service changes affecting staff.
- 1.3. The restructure of the administrative team will take place in 2 parts. Phase one will focus on the management levels, AfC Bands 5, 6, 7, 8a and 8b. Phase two will focus on staff that carry out operational support tasks at AfC Band 4, 3 and apprenticeship posts. The reason for this phased approach is due to the number of staff involved and wishing to ensure that each individual employee's case can be responded to appropriately and sympathetically, in accordance with the policy.
- 1.4. The process of consultation is to ensure all staff are informed of the proposal and is also intended to allow the affected employees the opportunity to respond and take an active role in this process.

2. Background

- 2.1. The administrative support function across CHS London, largely sits as 2 separate place-based teams, each supporting their own area. The structures differ across CHS London directorate and are also managed in various forms, either via an admin manager, or within a clinical service.
- 2.2. Following the CHS Leadership Team (Phase 2) restructure, which was implemented in May 2025, the 2 place-based teams have been realigned with overarching professional roles and service 'stacks', of which one stack straddles both Places, containing services with the potential to harmonise service provision. There is an opportunity to strengthen the administrative support function across CHS London by aligning administrative support functions to this structure.
- 2.3. The administrative support management teams in Newham and Tower Hamlets currently comprises the following staff:

2.3.1. Table 1: Administrative Staff banding 5 to 8b

Banding	Job Title	WTE
B8b	Head of Admin Adult Community Services (Newham)	0.90
B8a	Business Manager – (Tower Hamlets)	1.00
B7	Support Services and Building Manager (Newham)	0.90
B7	Deputy Head of Admin (Newham)	1.00
B6	Community Administration Manager (Newham)	2.00
B6	Senior Executive Assistant (CHS London)	1.00
B5	Lead Administrator (2 in both locality)	4.00
B5	Site Admin Manager (Newham)	3.00
B5	Executive Assistant (1.84 Newham, 2 Tower Hamlets)	3.84
B5	Ward Admin/Executive Assistant (Newham)	0.60
B5	Bank Administrator (in post since 2019 - Newham)	1.00
TOTAL		19.24

2.4 The following staff have been excluded from this consultation for reasons stated below:

- 2.4.1 Fothergill staff – The administrative staff aligned to the Fothergill Ward budget E72806, will proceed under a separate review and future consultation
- 2.4.2 Integrated Discharge Hub (Newham) is a separately funded service, and funding should be ring fenced. These admin roles directly manage patient pathways as part of the integrated team working with the acute Trust. A review and reduction of admin was completed last year which resulted in the removal of a post when vacant.
- 2.4.3 Transfer of Care Hub (Tower Hamlets) is also separately funded and therefore ring fenced. As above, this administrative function sits as part of the Transfer of Care Hub managing patient pathways from acute to community services.
- 2.4.4 Continuing Healthcare Service Coordinators – These posts are a coordinator function which interfaces with the clinical team and therefore sits outside of this administrative review.

2.5 Note that there is one bank member who has been working in a non-funded post. They have been included in this proposal as they have been in post since 2019 and should therefore be included in this change management process.

2.6 The current structure charts are noted on **Appendix 1 and 2**.

3 Proposal

3.1 It is considered necessary to restructure the administrative function across CHS for the following reasons:

- 3.1.1 To ensure our critical administrative staff and function supports the needs of all our clinical services to optimise patient care for service users.
- 3.1.2 To aligning the administrative function to reflect the new CHS leadership structure and optimising opportunities to standardise roles and responsibilities.
- 3.1.3 The current administrative teams are led by the Head of Admin Services (AfC8b) in Newham and a Business Manager (AfC 8a) in Tower Hamlets. Historically, the

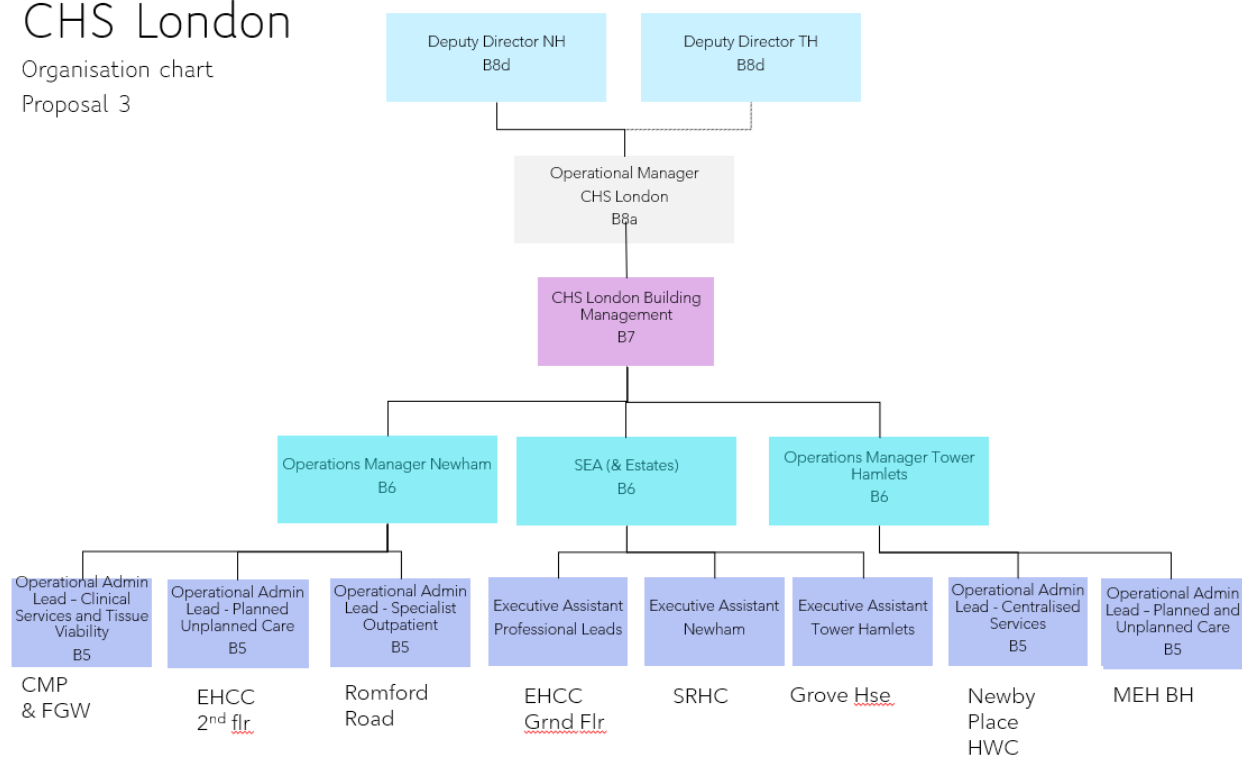
- Head of Administration (situated in Newham) worked across both place-based teams. However, they have more recently only had a small amount of involvement in Tower Hamlets teams, largely only involving joint corporate communication, cascading new training available or providing advice to the 8a Business Manager.
- 3.1.4 The proposal is to have one overarchingly led function to provide consistency across the 2 Place based Admin Support teams.
 - 3.1.5 In large, Newham administrative staff sit within the administrative function and are managed in this way. In Tower Hamlets, the EPCT admin are overseen by the Business Manager, while other services have their own admin support which the Clinical Team Leads oversee directly. Our proposal is to move all line management into an administrative support team, which would offer the opportunity to ensure consistent working, job plans, training and development and provide more resilience. This will also support Clinical Team Leads to focus on their clinical service, releasing time savings related to people management processes such as sickness or employee relation cases.
 - 3.1.6 There is also a need to review the level of admin support in place across the different clinical services. Some clinical teams do not have administrative support (or currently fulfilled by temporary interim support awaiting consultation). In Newham especially, as services have been commissioned/decommissioned, there have been changes in administrative functions and so there is a need to review and ensure that the administrative function is fit for purpose and is effective and supportive to our clinical teams and service users.
 - 3.1.7 Clinical Team leads have been involved in the discussions to shape the new structure.
 - 3.1.8 The national drivers including digital innovation which are and will continue to shape the way we plan care, requires our administrative teams to be adapting to new ways of working in order to support clinical services.
 - 3.1.9 Lastly, the restructure will allow there to be implementation of best practise across the two boroughs and reduce variation and provide an opportunity for alignment with other administrative functions in the Trust.
- 3.2 The proposal is to create a joined up Administrative Support Team, with one overarching Operational Manager who will not only head up the administrative function but also be instrumental in operational tasks such as data and digital. The Head of Administration role will also sit across CHS London, with 2 Administration Managers reporting to them: one of each Newham and Tower Hamlets. The proposed structure will support the clinical services as well as the professional development and standardise job roles for administrative staff across the Directorate.
- 3.3 As part of this review, the activity into the service stacks has been reviewed to understand workload. This is a mix of activity (referrals/appointments) and the number of services/staff being supported. This will be used to determine the demands of the services to ensure equity in administrative provision what support staff (apprentices, B3, B4) are needed to adequately support the team which will be addressed in Phase 2 of this project.
- 3.4 To support the aim of the proposal, generic job descriptions JD's will be implemented across the teams at all levels. A review of what is needed to support clinical and service transformation, to include new ways of working and use of technology have been included in these considerations. For example, digital solutions such as Teams Premium and EPR E-Rosting are actively being explored currently and are noted in the new, draft job descriptions.

- 3.5 Following the implementation of the proposal, work will commence to ensure that all staff are trained to the same level, for example the use of excel to support data for operational planning purposes and HR policies and procedures. Work Life Balance requests will also be revisited, with staff advised to formally request any previous applications for discussion with their new line manager. These actions will create equity across the team.
- 3.6 As part of the Trust's Going Further Together Programme there has been a need to review all service structures. To ensure best value for money and effectiveness, any savings generated from the role and skill mix review in this proposal will contribute to the Directorates financial viability target. While in Phase 1 the review focused on 'management' roles, a Phase 2 review is planned to take place later in 2025. It is recognised that it is of upmost importance to ensure that there are sufficient staff to support service delivery and therefore it is expected that the Phase 2 review will focus on the realignment of staff to the structure and implementation of generic job descriptions.
- 3.7 It is proposed that each Band 5 role takes on responsibility for the day-to-day management aspects relating to an allocated building. With co-ordination of estate and building issues on a strategic basis sitting with the Band 6 Senior Executive Assistant and Buildings.
- 3.8 Draft Job descriptions have been developed and may change subject to the consultation feedback.

3.9 Proposed Structure Chart: CHS London (including responsible area)

CHS London

Organisation chart
 Proposal 3



3.10 Establishment Figures and Current Vacancies

The tables below show the current and proposed staffing establishment for the change management along with the current vacancy position and number of staff at risk. All job roles have been reviewed and newly created positions are within the proposed structure.

Role	Band	WTE	Post deleted	Vacant	Staff affected
Head of Administration	8b	0.9	0.9	0	1
Business Manager	8a	1	1	0	1
Deputy Head of Admin	7	1	1	0	1
Buildings and Reception Services	7	0.9	0.9	0	1
Community Administration Manager	6	2	2	0	2
Senior Executive Assistant	6	1	1	0	1
Lead Administrator	5	4	4	1	3
Executive Assistant	5	3.84	0.84	0	4
Bank Administrator (not funded)	5	1	1	0	1
EA/Ward Admin	5	0.6	0.6	0	1
Site Manager	5	3	3	0	3
Totals		19.24	16.24	0	19

3.11 Job roles available in the new structure:

	Job Title	Band	WTE
1.	Operations Manager CHS London	8A	1.00
2.	Head of Administration CHS London	7	1.00
3.	Administration Manager Newham	6	1.00
4.	Senior Executive Assistant and Buildings	6	1.00
5.	Administration Manager Tower Hamlets	6	1.00
6.	Operations Admin Lead	5	5.00
7.	Executive Assistant	5	3.00
	Total WTE Available in new structure:		13.00

4. Impact on Staff

- 4.1 All staff affected by proposed changes will have an opportunity to attend 1:1 individual consultation meeting with management to discuss the proposal in detail and for management to understand how the proposed changes affect them directly. Staff will have opportunity to provide feedback and comments during these meetings and in writing up until the end of consultation period for management consideration
- 4.2 Some staff within the current structure will be at risk of redundancy, there will be opportunities for staff to apply for roles in the community health services which support the new structure, aligned to service stacks.
- 4.3 Staff will be entered onto the Trust re-deployment list and will have access to redeployment support via Trust's Redeployment careers advisor, as well as opportunities to explore suitable alternative employment.
- 4.4 All Staff will have the opportunity to apply for the available posts within in the new structure at their current grade. A competitive selection process will follow.
- 4.5 In the event that individual members of staff are unsuccessful in the competitive interview for their preferred role, they will be slotted into their next preferred post/available post where possible to avoid a redundancy situation.
- 4.6 All staff impacted will be offered an individual consultation meeting to discuss how the proposal impacts them personally and invited to provide any feedback in relation to this proposal.
- 4.7 All new job descriptions will be made available to all staff during the course of consultation

5 Financial, staffing and workload implications

- 5.1 This consultation has been managed as part of identifying best value and will contribute to the Trusts Finance Viability target. Expected savings based upon this proposal are £316,742 full year effect.
- 5.2 There is a total reduction of 7.24 WTE funded establishment as part of this consultation.
- 5.3 A detailed breakdown of the cost savings expected are below:

CHS London Admin Re Structure (13-06-25)

				ILW	OLW	Total
Post		banding	wte	£	£	£
Operational Manager CHS London	Tower Hamlets	8a	1.00	86,774		86,774
Head of Admin	Tower Hamlets	7	1.00	76,910		76,910
Operations Manager Newham	Newham	6	1.00		63,728	63,728
SEA (& Estates)	Tower Hamlets	6	1.00	66,852		66,852
Operations Manager Tower Hamlets	Tower Hamlets	6	1.00	66,852		66,852
Operational Admin Lead - TV & Clinical Services	Newham	5	1.00		52,523	52,523
Operational Admin Lead - Planned/Unplanned Care	Newham	5	1.00		52,523	52,523
Operational Admin Lead - Specialist Outpatient	Newham	5	1.00		52,523	52,523
EA Professional Leads	Newham	5	1.00		52,523	52,523
EA Newham	Newham	5	1.00		52,523	52,523
EA Tower Hamlets	Tower Hamlets	5	1.00	54,861		54,861
Operational Admin Lead Centralised Services	Tower Hamlets	5	1.00	54,861		54,861
Operational Admin Lead Planned/Unplanned Care	Tower Hamlets	5	1.00	54,861		54,861
Costing for New structure			13.00	461,972	326,344	788,316
Funding Available			20.15			1,105,058
Available for FV - Full year Effect			7.15			316,742

6 Service User Impact Assessment

6.1 The aim of the proposed structure is to create sufficient, streamlined capacity to support service delivery and therefore should impact positively on service user experience.

7 Timetable & Proposed Implementation

7.1 The Proposals for organisational change to (Service) will be managed in line with the Trusts "Management of Staff Affected by Change Policy and Procedure".

7.2 There will be a formal consultation period of 30 calendar days commencing on 3rd July 2025.

7.3 The Trust is committed to achieving meaningful consultation and therefore welcomes feedback and comments on the proposed organisation change proposals. Any comments should be made in writing either via e mail or by letter and directed to the relevant Deputy Director sarah.skeels@nhs.net and/or petra.nittel@nhs.net.

7.4 On completion of the 30-day consultation timeframe all comments received will be considered and a final decision will be made and communicated to affected staff.

7.5 Phase 2 will commence in November and will involve apprentices, Band 3 and Band 4 administrative staff.

7.6 The timetable summarises the full implementation plan and is attached as **Appendix 3**.

8 Equality Analysis

8.1 Under equality legislation, public authorities have legal duties to pay 'due regard' to the need to eliminate discrimination and promote equality with regard to race, disability and gender, including gender reassignment, religion age as well as to promote good race relations.

8.2 The law requires that this duty to pay 'due regard' be demonstrated in the decision-making process. Assessing the potential equality impact of proposed changes to policies, procedures and practices is one of the keyways in which public authorities can show 'due regard'.

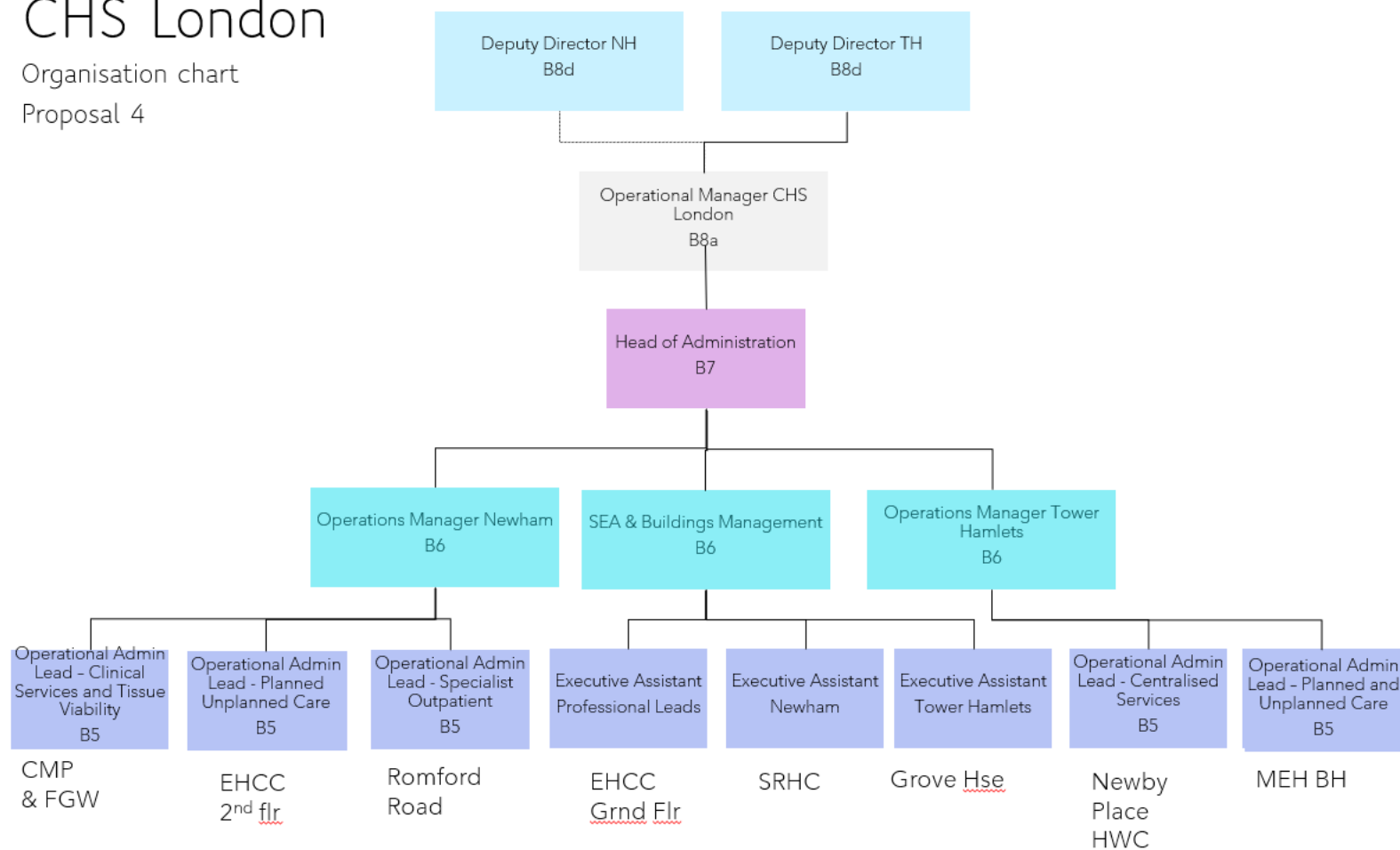
8.3 Equality Analysis template can be found at **Appendix 4**.

Appendix 1 - Current Structure Chart: Newham

CHS London

Organisation chart

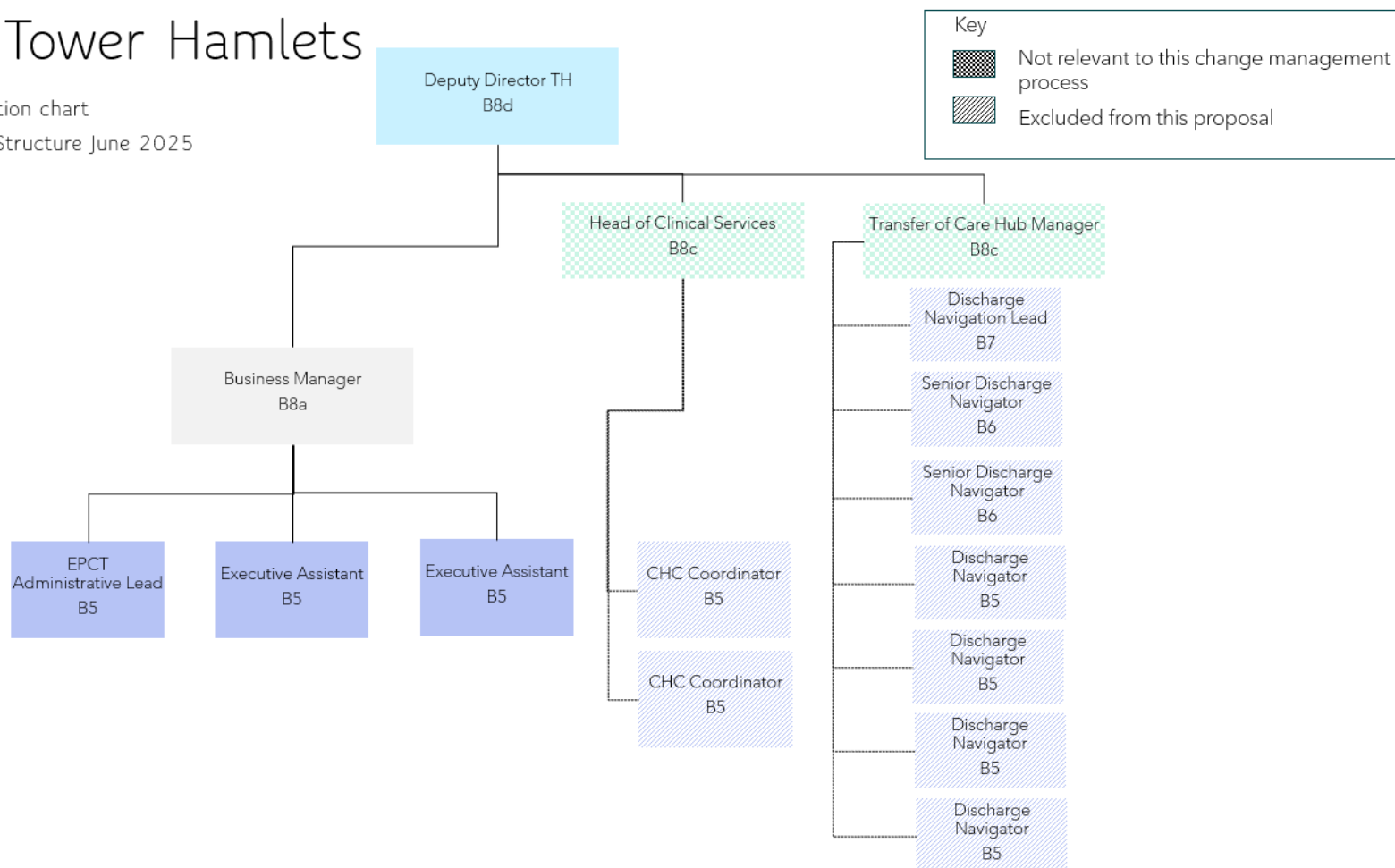
Proposal 4



Appendix 2 - Current Structure Chart: Tower Hamlets

CHS Tower Hamlets

Organisation chart
Current Structure June 2025



Appendix 3 - Implementation Timetable

Date	Action
2 nd July 2025	Consultation document shared with Staff Side and TU reps
3 rd July 2025	Start of consultation. Consultation document given to affected staff
w/c 7 th July 2025	Group meeting to discuss proposals.
w/c 7 th July 2025	Consultation meetings with individuals, as required
w/c 28 th July 2025	Responses to consultation from Staffside, individual TUs or staff submitted to management (it is a matter for those responding to decide who should be copied into their response)
1 st August 2025	End of consultation period
w/c 4 th August 2025	Management consider all responses and discuss their response with Staffside and try to reach agreement when views are conflicting. At this stage any need for further consultation or an extension can be considered
w/c 11 th August 2025	Written notification of decision following consultation, including timetable for implementation of changes
w/c 18 th August 2025	Selection activities – e.g. interviews
1 st September 2025	Implementation of change and posts commence
1 st March 2026	Impact assessment of major change to be undertaken 6 months after implementation

Appendix 4 – Equality Analysis

Provided as a separate document