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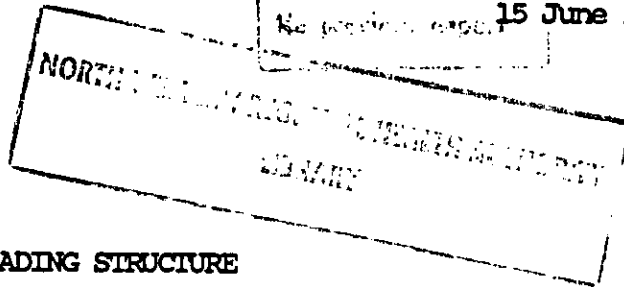
Your reference:

Our reference: EL(88)P87

Regional General Managers
General Managers of the Special Health
Authorities for the London Postgraduate
Teaching Hospitals

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File No. 8/16/18/2
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File already issued to
No previous copies 15 June 1988

Dear General Manager,



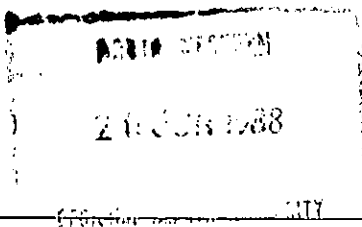
IMPLEMENTATION OF NEW NURSE GRADING STRUCTURE

1. As you will see from the enclosed copy of a letter which Mr Newton has written to Regional Chairmen, Ministers are taking a close personal interest in the regrading exercise. The Department has been instructed to keep closely in touch with progress, and I am writing now to ask for your help in doing this.

2. As you know (see paragraph 1.12 of the implementation guidance attached to EL(88) P67) the Department has set up a small team to give help and advice on the implementation process, and to report back on any emerging problems. They will increasingly be taking a proactive role in arranging visits in the Regions, and I hope you will ensure they are given full co-operation in doing so.

3. I would also be grateful if you could let me have a report within the next three weeks about how the implementation process is being handled in your Region. It would be helpful if you would include the following areas:

- Who is responsible for managing the operation at Regional level? How are nursing, personnel and finance inputs to the operation being provided at Regional level?
- What specific instructions or guidance have you issued or do you intend to issue to Districts on the management of the implementation process?
- Is the success of the exercise registered as a key IPR/PRP objective for all DGMs?
- Is the additional financial allocation being held at Region, or allocated to Districts, or a mixture of both?
- Has everyone involved in the regrading process now received appropriate training?



- How is the Region discharging its monitoring function? When do you expect provisional returns from Districts, in what form and how will they be handled?
- At what level are the trade unions being consulted? Are they being consulted just on the regrading process or on the outcome as well?
- Are any special arrangements being made for appeals (see paragraph 1.13 of the implementation guidance)?
- Apart from the scale and timetable of the exercise, have serious difficulties in implementing the new structure yet emerged? If any sort of 'dummy run' was done, what was the outcome?

4. The Department may need to see the provisional returns referred to in the sixth indent of paragraph 3 above, and discuss them with you. Inter alia, this will enable us to assess the degree of consistency across the country.


5. In any case, please let me know immediately, if problems arise which may jeopardise successful implementation.

6. Finally, it would be helpful if you could nominate one of your Senior Managers with whom we could liaise as necessary on any detailed issues arising from the implementation process.

7. I am sorry to have to impose these additional burdens upon you, but I am sure you will appreciate the need for the Department closely to monitor this exercise. I am sorry too if this letter seems excessively inquisitorial. The Department is anxious to help authorities in any way it can within the resources which it has available. Please let me know if you see ways in which our contribution can be extended or improved.

Copies of this letter are enclosed for Treasurers and Personnel Officers

Yours sincerely,



R M MORTON

Expiry Date: This letter will be cancelled and deleted from the current Communications Index on 15 June 1989.



DEPARTMENT OF HEALTH AND SOCIAL SECURITY

Richmond House, 79 Whitehall, London SW1A 2NS

Telephone 01-210 3000

From the Minister for Health

Sir Donald Wilson
Chairman
Mersey Regional Health Authority
Hamilton House
24 Pall Mall
Liverpool L3 6AL

F10 JUN 1988

IMPLEMENTATION OF NEW NURSE GRADING STRUCTURE

I am writing to you about the implementation of the new clinical grading structure, to emphasise the importance which John Moore and I attach to its successful completion and to ask you to take a personal interest in progress in your own Region. Regrading nearly half a million nursing posts between now and the end of October is one of the largest and most sensitive operational tasks which the NHS is faced with this year. It is vital that we get it right.

The Department has now issued detailed guidance on the regrading process and has made the necessary financial allocations. Officials will be asking RGMs to keep the Department closely in touch with progress and to ensure that we have early warning of any emerging problems. If problems do emerge we will take them up with your General Manager and his officers.

I know I can count on your co-operation in ensuring that the Service rises successfully to this challenge.

TONY NEWTON