Role profile

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| **Role title** | **Industrial Relations Officer** |
| **Department and directorate** | **Member Relations Directorate** |
| **Grade** |  |
| **Reports to (job title)** | **Industrial Relations Manager** |
| **Direct reports (job titles)** | **None** |

| **Summary – purpose of the role** |
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| Describe as concisely as possible the overall purpose of the job and including the core duties/responsibilities required to be performed in the role (eg, to provide a full range of administrative support services to the department including x,y,z) |
| The BMA local negotiating committee is the recognised trade union body that negotiates all local terms and conditions of service or working arrangements that apply to all employed hospital doctors and dentists in the NHS.The IRO is a member of the LNC representing the Association and the senior lead person responsible for supporting, negotiating, and representing all employed members with their employers. They will:* Negotiate high level collective and individual terms and conditions and other employment related matters at local level.
* Establish, develop and lead the work of Local Negotiating Committees and increase local member engagement, maintain/improving nationally and locally agreed terms and conditions of service.
* Ensure representatives are appropriately supported and deliver negotiating skills training.
* Undertake recruitment and retention activities by leading on behalf of the Association, facilitating and deliver seminars/training events and other core programme/recruitment activities. Target specific trusts to increase membership levels.
* In response to requests from members, provide expert advice on collective issues, such as employment, contract and local/national agreements across all grades of doctors.
* Prepare and present cases representing members to employers at hearings on all collective matters, eg. internal appeal panels, etc.
* Establish effective working relationships with senior managers, Directors, Chief Executives and health professionals in Trusts, CCG’s, LETBE’s, SPF’s etc.
* Develop effective working relationships with LMCs in area and look to promote EAS when attending meetings.

Develop effective communication/engagement with members locally.The LNC and the IRO are also responsible for translating nationally agreed terms and conditions of service to the local environment.The IRO will also be expected to participate in other local and national negotiations.The IRO will be the responsible officer for local Branch of Practice Committees, providing advice and support.The IRO will also support Divisions as appropriate, this may include assisting in the reinvigoration or potential mergers with neighboring Divisions.Develop areas of specialist interest and work within the team to develop and update guidance for members as necessary.Become the Member Relations expert at various external (NHS trust management), and internal liaison groups, working parties and other groups as deemed necessaryTo keep local representative structures under review; raise the BMA profile and improve member engagement at local levelDevelop effective relationships with external health and medical organisations at a senior level (including NHS, independent, primary and secondary and social enterprises) that have an impact on BMA membership and attend and represent the Association at all relevant meetings.Maintain effective links with colleagues at BMA House and in the regions and nations and develop a mechanism to ensure a structured two-way flow of intelligence on medico-political developments.To facilitate and lead on national campaigns at local level and initiate and run local campaigns that impact members. |
| **Skill (level and breadth of application)** |
| What relevant experience is necessary to undertake this role? What specialist, technical or professional qualifications are required to be able to perform the job?How far does the role extend out across the organisation, eg confined to own team, involves co-ordination with another department or requires regular negotiation with many other parts of the organisation. Why is this necessary? Describe the range of issues that are involved in this, eg resolving people’s IT problems, collecting information on key research items or advising members on a particular issue. |
| * Graduate or equivalent with extensive experience of advising/representing employees and/or employers (may hold a Law or CIPD qualification)
* Up to date and in-depth expert knowledge of employment law, industrial relations and human resource policies, procedures, good practice, and terms and conditions under which NHS doctors work
* Proven experience of collective bargaining and negotiating terms and conditions of employment
* Highly developed negotiator with ability to gather, assimilate and analyse information and develop a strategy for handling very complex negotiating forums and collective/individual member cases.
* Excellent interpersonal skills, facilitating the development of effective relationships at a very senior level
* Excellent oral and written communication skills including presentation and expert advocacy
* Proven leadership skills
* Excellent planning and organisation skills required to deal with issues raised by members and their cases. More complex cases will typically extend over several months
* Ability to prioritise and manage own caseload and work effectively with minimum supervision delivering results on time and within budgets
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| **Intellectual demands (complexity and challenge)** |
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| What sorts of problems, situations or issues are typically dealt with? Give any illustrative examples. How are the problems, situations or issues dealt with (eg undertaking original research and analysis or seeking specialist advice)?To what extent are standard procedures and processes followed when undertaking typical tasks, and how is personal initiative used when solving problems? To what extent is creativity used in solving the problems (eg adopting different approaches, trying things that have not been done before within the organisation or improving/changing previous approaches). |
| * Acts largely autonomously, organises and prioritises own workload, balancing competing priorities and managing peaks and troughs in demand. Often works on personal initiative to resolve issues, negotiate changes to doctors’ terms and conditions locally. Using highly specialised skills and expertise to advantage members and promote collective bargaining at local level.
* There is a requirement to balance these decisions with maintaining long- term relationships with employers and other health professionals.
* Required to recognise and adhere to specific critical timescales as part of the representational/case handling process arising from Employment law requirements/ET timelines/local employer procedures.
* Required to identify solutions using sound judgement and level that against the impact on our members, and the Association more generally
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| **Judgement (independence and level and impact limitations)** |
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| What are the typical decisions that are made in the job without reference to any higher authority? What informs/constrains the decisions (eg expenditure limits, have to follow clearly laid down procedures or working within broad objectives). What influence upon policy, procedures or resources is there (eg giving advice to others)? Who (or what) is next to be affected by the decisions that are made – for example, supervisor sees them before they leave the team or the whole department sees and has to respond to the change that is made. Give typical example(s) of the consequences of the decisions (eg what impact does the decision-making have on the performance of the team/section/department/organisation)? |
| * Has freedom to act with significant individual responsibility and independence in providing expert advice and negotiation.
* Performance, final outcomes and the extent to which objectives are achieved determines the degree of member satisfaction and the way in which the Association is perceived by members and external organisations.
* Will seek guidance from IRM or Head of Local Member Engagement Relations on very major decisions that will affect other key territories.
* Decisions taken and advice given have a high impact on members and credibility of the Association and therefore must be correct
* Post holder will act in partnership with Regional Charis of Committees and has to demonstrate tact, diplomacy and persuasion by encouraging those Chairs to pursue their regional political agendas and ensuring that activities do not conflict/contravene nationally agreed policies.
* The post holder may be required to consider change management and leadership approaches and models for improving or changing approaches
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| **Use of resources (supervision of resources and influence)** |
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| What responsibility is there for managing people, equipment, budgets, resources, customer’s welfare or confidential information? If this is a staff management role describe what is involved, eg staff reporting, staff development, appraisal, leading a department or the allocation of work.How does the role fit within the organisation, eg support role, team member, team leader, specialist policy adviser, or leading major areas of core business? |
| * Budget set by Head of Department and devolved to the role holder who retains responsibility for expenditure against budget. Responsible for dealing with members’ expenses.
* Works within a team and advises and guides other staff.
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| **Communication (level, internal and external demands and significance)** |
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| What people are typically contacted (regardless of the medium) **inside** the Association, eg immediate colleagues, senior managers or administrators? Committee members are the only members classed as internal communication. Normal non-committee membership and doctors are external (see below)Who is in regularly contact with the role holder **outside** of the Association, eg members who are not committee members, suppliers, members of the public? Approximately what percentage of the time is spent on external communications?What is the purpose of these contacts, eg conveying information, gathering data? |
| * Extensive contact with colleagues at all levels of the association – eg, chief officers (who lead this work for the BMA), chairs of devolved nations’ councils, committees and committee chairs, executive team, leadership team, devolved nations, policy, communications and engagement and human resources.
* Required to develop excellent contacts with members, and at a high level with senior managers, Directors and Chief Executives of NHS organisations and their legal representatives.
* Must develop good relationships with Branch of Practice secretariats and other expert departments within the Association including membership of craft specific liaison groups.
* Requires highly developed interpersonal skills and must to be able to obtain case history from members then manage expectations which can be unrealistic, in order to reach agreement on objectives.
* Collective bargaining requires a high level of developed influencing and negotiating skills. In many cases, these have to be displayed in a formal setting when experienced advocacy and persuasive skills are necessary.
* In the short term, these skills are deployed to the immediate advantage of the member and to promote them. There is a requirement to balance this with maintaining long- term relationships with employers/organisations and other health professionals.
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| **Physical demands & coordination (physical effort and mental strain)**  |
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| Are there any unusual physical or mental demands of the role; for example, lifting heavy objects, standing for long periods, using VDUs extensively or high levels of concentration? |
| * Required to develop excellent contacts with members, senior managers, Directors and Chief Executive of NHS organisations and their legal representatives.
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| **Working conditions and emotional demands)** |
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| What are the environmental conditions in which the work is conducted, the social and emotional demands faced by the role and the pressures resulting from these? |
| * The job is conducted in a home office environment with a high degree of external location as required to carry out the role. Some out of office hours work in necessary (evenings). The role is not considered to be exposed to hazardous conditions or extreme anti-social behaviour (which should be reported through the appropriate internal channels). However, there may be times where the role holder is involved with members that involves an emotionally charged situation. Support is given to the role holder as required.
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| **Values and behaviours** |
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| The post-holder is expected to execute their role in line with our five organisational values. The following examples illustrate how we are using our values to inform how we act: We are **leaders** because: – We strive to always improve – We take responsibility for our actions – We collaborate with each other and work as one BMA for the good of our members – We are proactive and prepared to guide our members and each other We are **experts** because: – We understand our members – We draw on our collective experience and knowledge to solve problems – We use our insights and research to make decisions – We provide accurate, credible, relevant and engaging information – We recognise our strengths and act upon them We are **committed** because: – We listen to our members and put them at the heart of everything we do – We are respectful, inclusive, open and honest with our members and each other – We approach everything we do with confidence and sensitivity We are **reliable** because: – We deliver on what we say we will do – We are accessible and approachable – We build trust by being consistent and supportive – We are positive and decisive whatever the situation We are **challenging** because: – We fight, ethically and fearlessly, for the interests of all our members – We work as a brave, assertive and effective champion for high quality health services and the advancement of the profession  |
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