



# Canberra Health Services Consultation Paper

## Medical Services Group Realignment

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## Introduction

The Executive Director Medical Services (EDMS) is a composite position accountable for professional leadership of all medical staff employed by Canberra Health Service, and for leadership and direct management of a group of service entities.

In early 2022, a decision was made to create an Executive Branch Manager (EBM) position within the Medical Services Group with the intent that accountability for designated service groups would be transferred to the EBM for direct management, strengthening the support for these areas and allowing the EDMS to focus to a greater extent on professional leadership of the medical profession.

The first of these areas transferred to the EBM was Medical Imaging under a consultation to implement an interim management structure for Medical Imaging. The interim arrangements under that proposal are now being consulted upon as permanent changes.

This consultation proposes the transition of further service orientated areas of the Medical Services Group to the direct line management of the Executive Branch Manager. By its very nature such a consultation raises questions about the rationale for grouping services in a particular way under the direction of a professional lead executive, in this case the lead professional for medical staff. It is expected that feedback to this proposal might extend to include such commentary.

## Purpose

The purpose of this paper is to consult with stakeholders, internal and external to the Medical Services Group, on the intention to transfer the reporting line of a number of service departments from the EDMS to the EBM of the Medical Services Group.

## Current model

The EDMS is the single point of accountability for the following service groups, management functions, and clinical governance activities:

- Service Groups
  - ACT Pathology
  - Medical Imaging
  - Pharmacy Services
  - Health Technology Management
  - Blood Counts
  - The GP liaison Unit
  - Library and Multimedia
  - Medical Officer Support, Credentialling, Employment and Training Unit
- Clinical Governance Activities, including but not limited to
  - Credentialling and matters of clinical competence
  - Speaking up for Safety and Promoting Professional Accountability
  - Medical Engagement

- Medical Industrial Matters

The organisational chart depicting these arrangements is provided in attachment 1.

The EDMS is supported by an Executive Branch Manager, a Business Manager, an Executive Officer and an Executive Assistant, collectively as the “Office of the EDMS”.

## Rationale for change

### Medical Management, Clinical Engagement and Governance

Medical staff constitute a very important and valuable staffing group with particular attributes when it comes to how they engage with health service organisations.

Canberra Health Service (CHS) is required to invest in a number of medical management, engagement and governance matters, including but not limited to:

- Wellbeing and pastoral care
- Engagement frameworks
- Transactional matters (including enterprise rostering and scheduling etc).
- Planning frameworks (including clinical and medical unit planning activities, short run and long run)
- Medical industrial matters (contract constructs, job sizing etc)
- Training and Development
- Research
- Quality and Safety

Most of these would be considered standard areas of capability in a health service of the size and type that CHS represents. For a number of reasons, mostly related to a rapid turnover of accountable executives and a lack of the requisite training (Fellowship of the College of Medical Administrators or similar) these considerations have not been progressed as far as might have been expected and now require significant improvement.

As of today, the Executive Director Medical Services role, in addition to the medical management accountabilities described above, retains significant operational responsibility for a number of service delivery areas, some of which are of a significant size (ACT Pathology, Pharmacy Services, Medical Officer Support, Credentialing, Employment and Training Unit), complexity (Medical Imaging, Health Technology Management), and importance (GP Liaison Unit, Blood Counts and Library and Multimedia).

In return, a number of health service functions that sometimes are associated with an EDMS type role are assigned to other executives in CHS, this includes Research and Training, and Quality and Safety. This consultation does not include these as they fall outside of the EDMS portfolio in 2023.

## Management as a Professional Pursuit

Without questioning the number and type of operational service delivery units assigned to the EDMS, it is clear that most of these would benefit from the attention of an experienced and capable manager in a focussed way, over a period of time.

In some instances, an EDMS type appointee may have the experience to manage large, or complex, operational services, but this is unlikely to be the case, at least more often than not. EDMS roles are filled, by definition, by medical doctors as the primary qualification.

In the long run, and for as long as the Medical Services Group exists as currently constituted, there would appear to be some benefit in the operational areas being run by an experienced manager, albeit the EDMS remains accountable for the whole Medical Services Group.

## Benefit of Change

The case to supplement the EDMS role with an executive level management appointment was made in mid-2022. The basis for this was to enable the EDMS to increase their focus on developing medical management, engagement, and clinical governance, while augmenting the support for service delivery areas reporting to the EDMS.

The rationale is, on the face of it, a reasonable response to the accountabilities of the EDMS in managing the Medical Services Group.

In recognition of the management load on what is, by rule, a medical appointee (the EDMS), the position of Executive Branch Manager was established, funded, and recruited to in late 2022.

At the time the associated change process, whereby the reporting line of the appropriate service areas were transferred to the Executive Branch Manager from the EDMS, was not undertaken.

This consultation now aims to address that issue.

## Proposed Future model

### Changes

It is proposed to change the reporting line of the following areas within the Medical Services Group to the Executive Branch Manager, Medical Services Group.

- Director- Healthcare Technology Management
- Director Library and Multimedia
- Director Pharmacy

It is further proposed to change the reporting line of the Medical Imaging Service to the Executive Branch Manager. There has been a separate change process describing this arrangement as it also involves some realignment of the leadership roles within Medical Imaging, and this is currently being consulted upon in parallel.

In addition, in recognition of the reallocation of managerial burden, it is considered appropriate to reallocate members of the Office of the EDMS according to workload. For this reason the existing Business Manager position for the Medical Services Group is proposed to report to the Executive Branch Manager (EBM). The Business Manager will retain professional accountability and leadership for the office of the EDMS, rebranded as the Office of the Medical Services Group.

No other changes are included in this consultation.

This change is depicted in attachment 2.

### Affected Positions

Title	Nature of proposed change
Executive Branch Manager, Medical Services	Assumes line management responsibility for named operational service lines within the Medical Services Group.
Director Health Technology Management	Change in reporting line.
Director Library and Multimedia	Change in reporting line
Director Pharmacy	Change in reporting line
Business Manager, Medical Services Group	Change in reporting line
Executive Officer, Medical Services Group	Change in reporting line

### Physical design/structure

- No material changes to physical design or office space layout is being considered as part of this proposal. Occupants of the Office of the EDMS may be offered alternate seating arrangements of a similar or same nature.

## Implementation

The implementation timeline is provided in the table below.

Under the Union Encouragement Policy, employees will be given full access to union officials / delegates and facilities during working hours to discuss the restructure on the provision that work requirements are not unreasonably affected.

It is envisaged the reporting realignment will be implemented as soon as possible after the consultation period is closed.

*Table 1: Proposed Structure implementation timeline*

Steps	Action	Anticipated Completion Date
1	Executive Branch Manager advised of intention to consult	22 December 2022
2	Meet with affected Directors, and Divisional Business Manager.	Week of 30 January 2023
3	Consultation period begins with all affected staff and unions	6 February 2023
4	Consultation period ends	20 February 2023
5	Decision and communication of decision	Week commencing 20 February 2023
6	Implement change	To be advised

## Consultation

During consultation, we are seeking responses to the following questions:

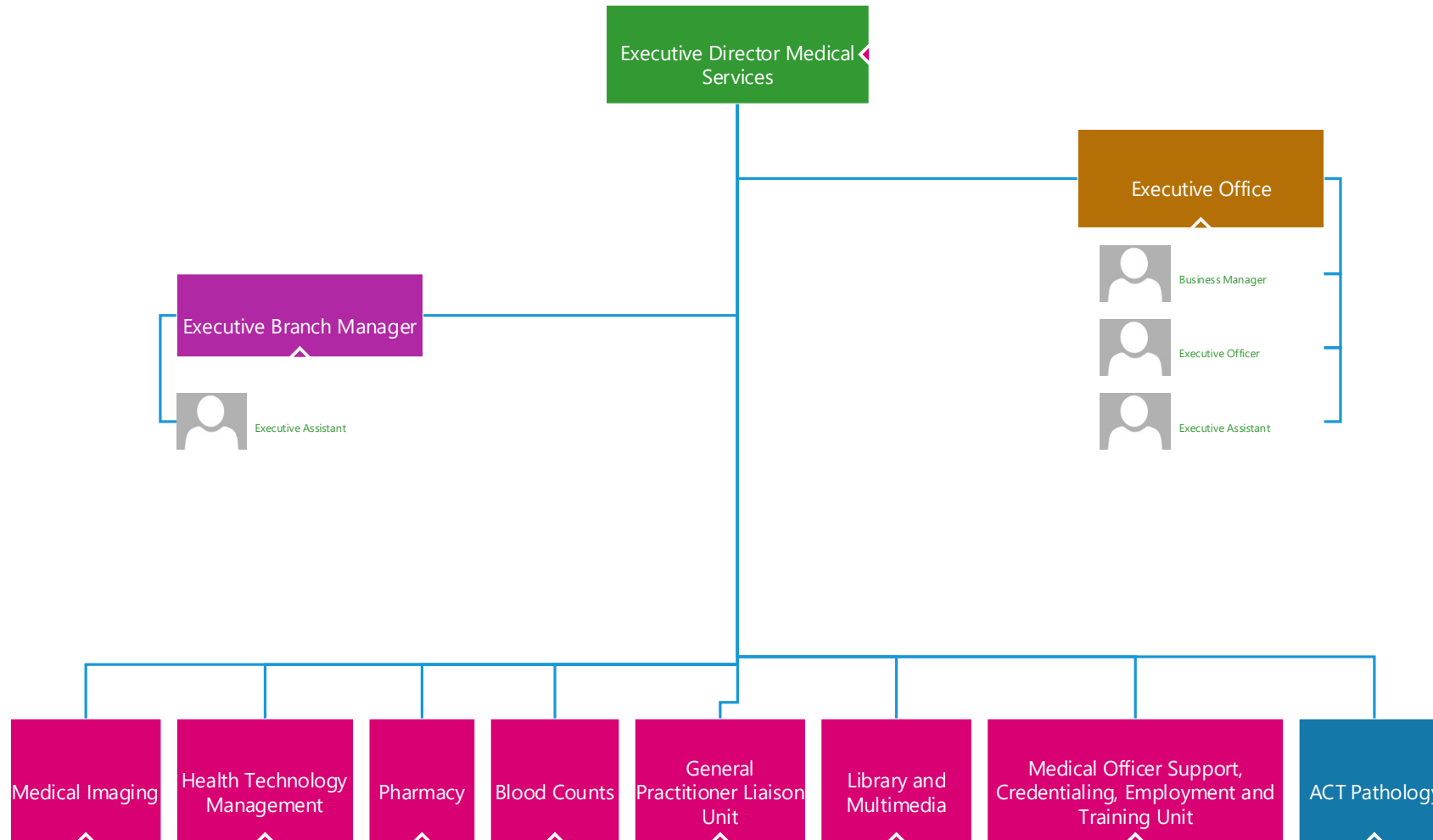
- Do you have any concerns about the proposal? If so, what are they?
- Do you have any other feedback you would like to be considered in relation to the interim changes?

Feedback on this paper should be provided via email to [edms@act.gov.au](mailto:edms@act.gov.au) by **COB Monday 20 February 2023**.

For any further information relating to the change and subsequent consultation process, please contact [edms@act.gov.au](mailto:edms@act.gov.au)



# Attachment 1: Current Structure



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## Attachment 2: Proposed Structure

