



Introduction of Health and Security Assistants (HASA) in Bankstown-Lidcombe Hospital

HASA Change Management Plan Bankstown-Lidcombe Hospital

Purpose

The purpose of this Change Plan is to describe the proposed changes being made to the Security services function and structure within Bankstown-Lidcombe Hospital (BLH), and to establish the role and classification of Health and Security Assistants (HASA). The plan describes the likely impact that these changes may have on service delivery, existing positions and team members.

- This plan also describes the process that will be followed in order to implement changes and provide information to team members about support that is available while the change process being undertaken. Importantly, this document provides key information to team members to facilitate their contribution and input into the proposed changes.

Context and Background

- Where security issues arise, or where security functions are required to be performed, Security Officers or contract Guards are deployed. These officers and guards monitor risk of violence, aggression and prevent patients absconding. Essentially, their role is to ensure the safety of patients, visitors and staff within BLH, and to protect property.

The Security Bank aims to eliminate reliance on external security contractors at BLH by replacing them with HASA employees. With the Security Bank program, resources can be optimised and financial value can be improved as HASA employees provide clinical support services to assist in the provision of consumer care when security support is not needed.

The Security Bank HASA model is recommended in the Peter Anderson recommendations no. 22, 43, 60, 82, and 106* (replacement of contract security).

- The HASA position is a multi-skilled role that combines both security and health assistance related duties. Employees in this role must have a security licence and perform traditional security duties (such as patrol and patient restraint when appropriate) as well as health assistant duties such as assistance with patient care activities.

The introduction of an internal HASA who is appropriately trained will improve the quality of care provided to patients and improve the management of violence and aggression.

*Reference – Peter Anderson Recommendations

22 – Security Officers and HASAs should be part of a state-wide hospital security function enabling mobility through transfers and ongoing professional development.

43 – Districts/Networks should establish a pool of casual security staff, similar to that for teachers, to enable suitable staff to be identified at short notice.

60 – Consideration should be given to embedding Health and Security Assistants (HASAs) in appropriate emergency departments and mental health facilities/units.

82 – The use of security specials by each LHD be urgently reviewed to ensure the most cost effective provision of same.

106 – In establishing casual pools, Local Health Districts/Specialty Networks must have processes in place to identify those individuals in the casual pool who are available to escort patients on intra-hospital transports or to undertake security observations (security specials)



Expected Benefits

The recruitment of internal HASA to provide security services and establishment of a unified team structure will have a number of benefits, including:

- Improved communication and integration into the multidisciplinary team as the HASA workforce will be stable and consistent compared to contractors. This will allow the establishment of professional relationships with clinicians and other support workers.
- Improved education and training. As internal staff, the HASA positions will be required to undertake the identified online and face to face training to develop skills to manage and de-escalate patients with behavioural presentations. Completion of mandatory and delegated training will be monitored as part of the yearly performance development review.
- Optimisation of resources and flexibility in services provided.

Restructure Requirements

In order to sufficiently support the increase in FTE and support the change the following actions are proposed.

1. **Regrade of Security Manager** to a Health Manager Level 2 (HM2). This will align BLH with the Campbelltown & Camden Hospitals Manager Security, Switchboard and Patients Services position description.
2. **Re-structure of the Security Services and General Services at BLH.** It is proposed to change the reporting lines of 28 FTE Patient Support Services and 1 FTE Patient Support Services Supervisor from General Services Coordinator to the Security Manager. This is proposed for the following reasons:
 - To streamline the overlap between the security officers, Wardsperson and HASA positions.
 - Better align with the Campbelltown & Camden Hospital model for provision of all security and patient services functions under the same manager.
 - Provide appropriate support and supervision to HASAs.
 - Give Wardspersons the opportunity and support to attain their security licence and progress their career as a HASA.

Proposed Implementation

- Under the supervision of the Security and Patient Services Supervisor, it is proposed to trial a bank of 10 FTE permanent HASA employees and a casual pool of 20 positions. Implementation will include:
 - Regrade of the Security Manager position
 - Recruit up to 10 FTE HASA positions and a casual pool of 20 HASA positions
 - Implement suitable after-hours supervision arrangements for the HASAs
 - Confirm changes to and grading of positions associated with the change in Wardsperson reporting lines

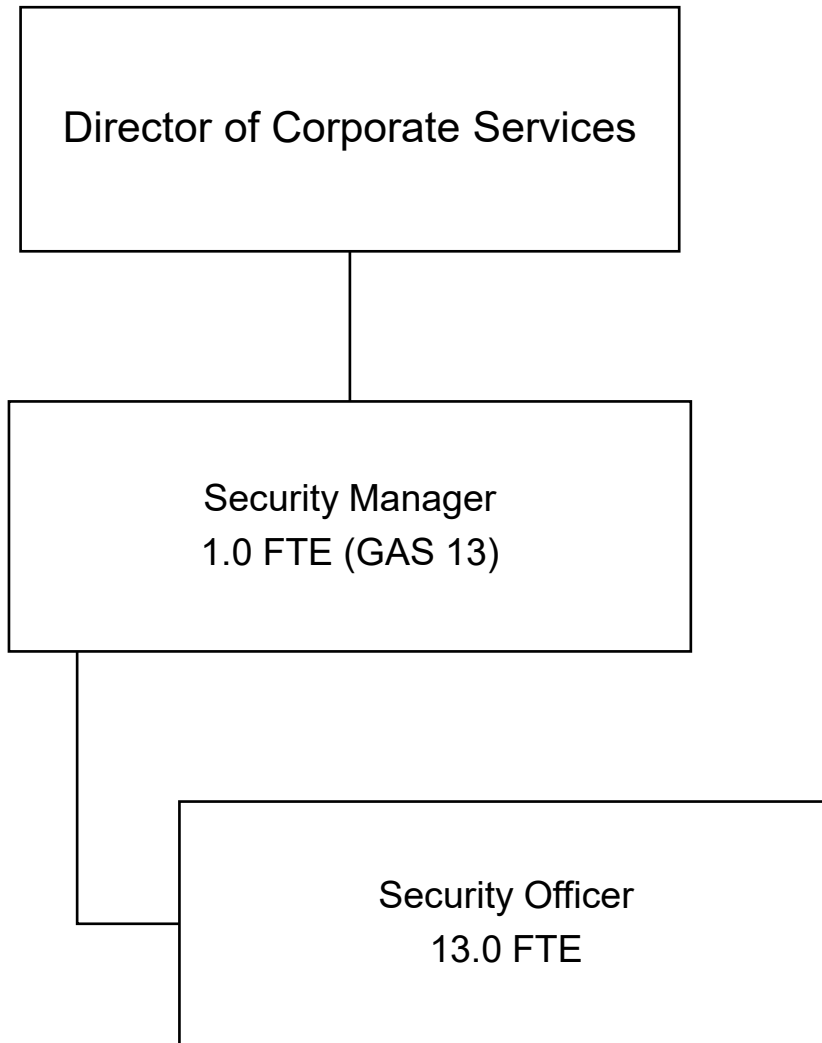


- Complete changes to Security Services and General Services including supporting staff through the change management process as it pertains to their role.
- Security Services to become Security and Patient Services
- 12 and 24 month reviews are planned to be completed of the HASA model in BLH.

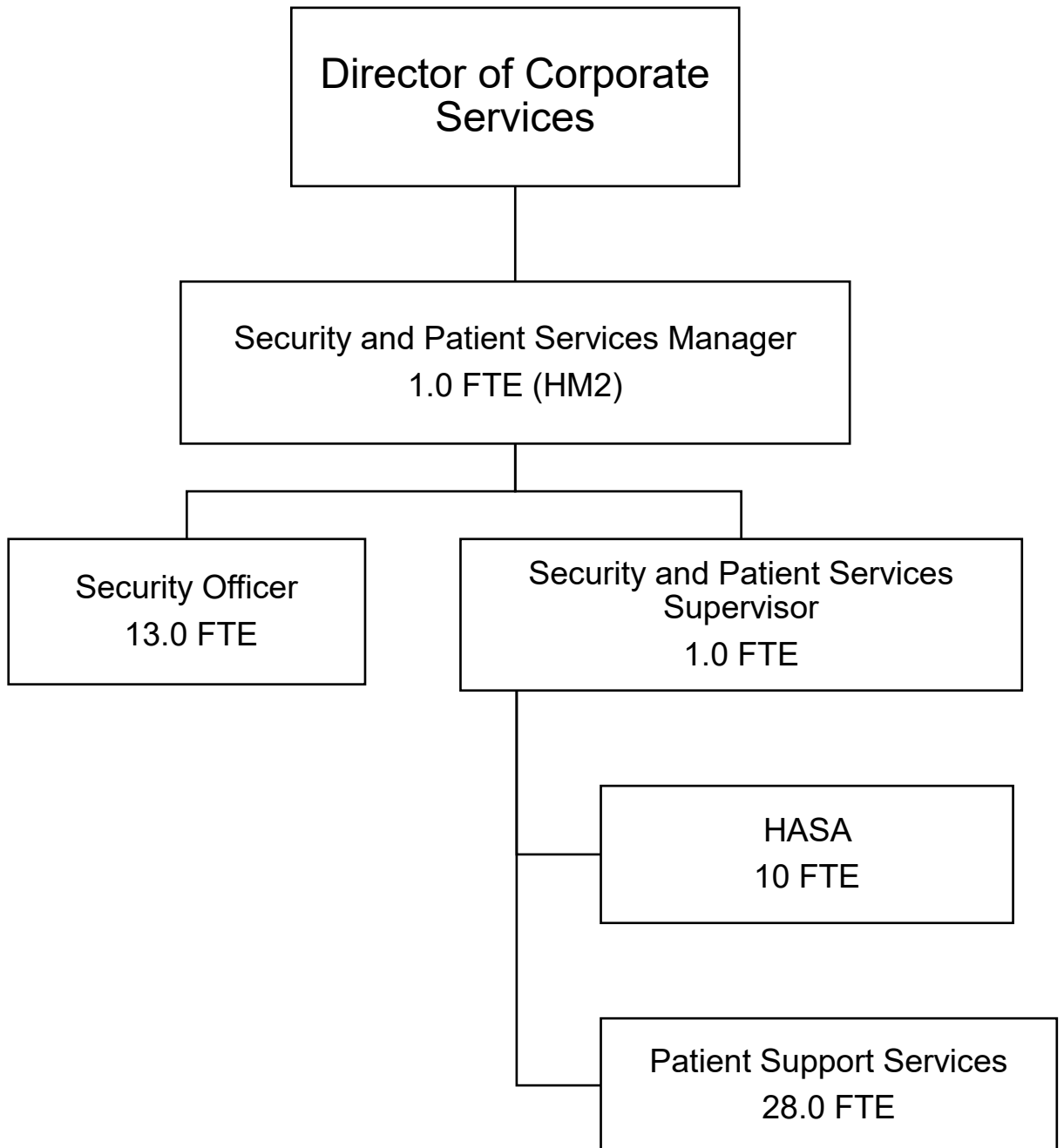


Service Structure

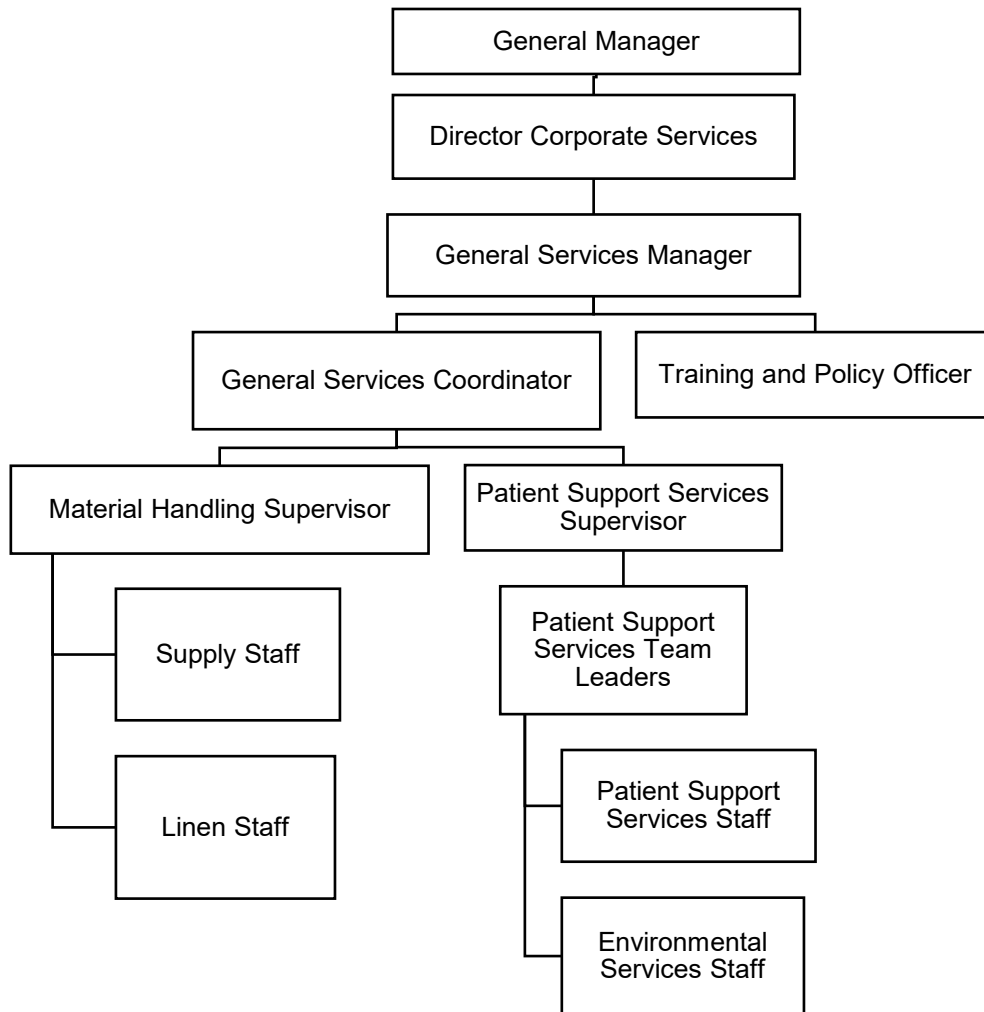
Current Structure Security Services, BLH



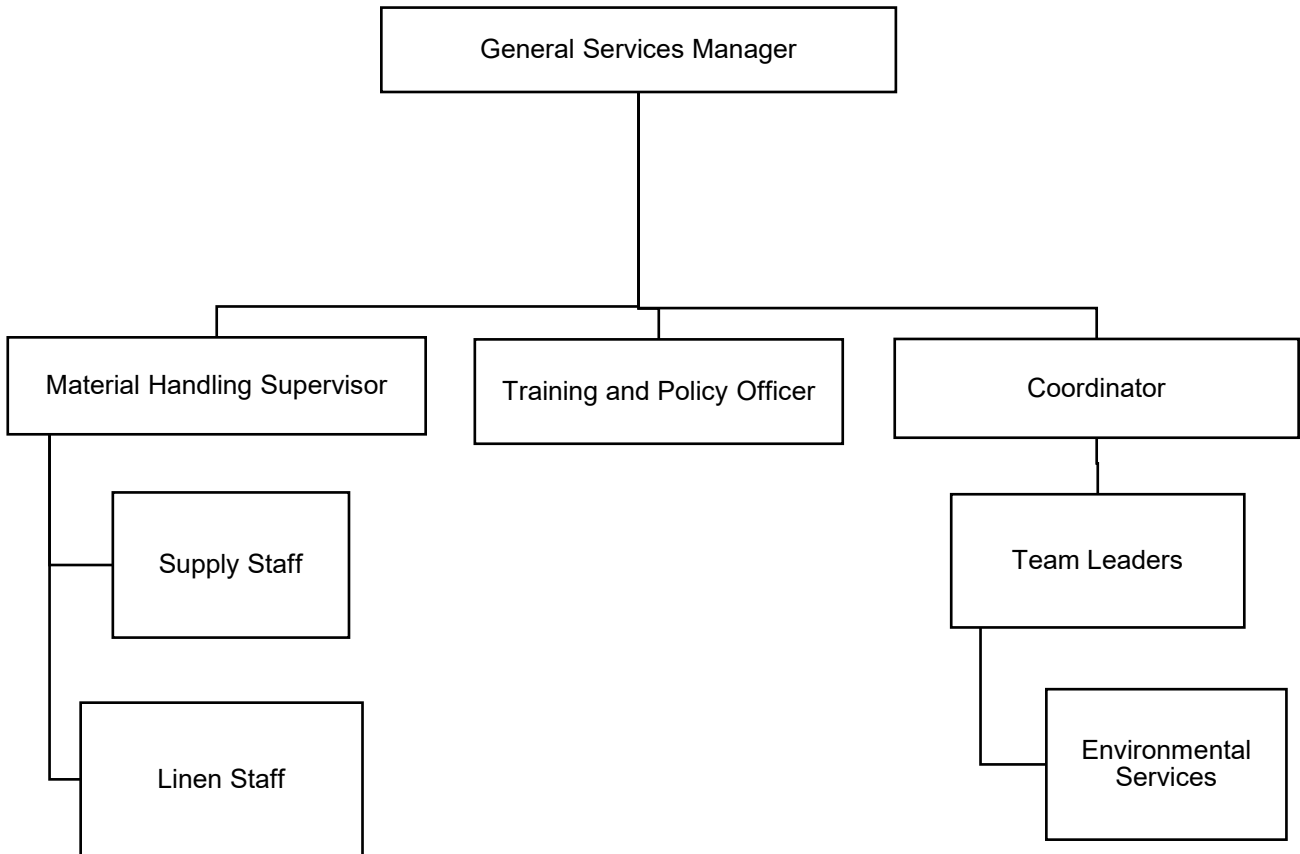
Proposed Structure: Security Services, BLH



- **Current Structure General Services**



- **Proposed Structure General Services**



Education & Training

- Each HASA employed will be provided with education and training opportunities to safely and effectively perform a range of functions in their role. People recruited into HASA positions will be required to complete a structured program of education and training including;
 - Security in the Health Environment - 3 Day TAFE Program
 - Feeling Safe in the Emergency Department (FSIED) CSK12436
 - Violence Prevention & Management Personal Safety Workshop 45793317
 - Violence Prevention & Management Team Restraint Techniques 45792110
 - Mental Health De-Escalation MEN1275
 - Understanding Mental Illness MEN1205
 - A Better Way to care for the Confused Person CSK12360
 - Conflict Resolution 39964199 (Online)
 - Security Awareness - Security Staff 197081007 (Online)
 - Introduction to Aggressive Behaviours 144148304 (Online)
 - De-escalate Aggressive Behaviours 144147947 (Online)
 - Introduction to Work, Health and Safety 40022948 (Online)
- There will also be opportunities for on the job training through local supervision and induction into the ward based teams.

Monitoring & Evaluation

- Monitoring and evaluation of the proposed model and the implementation will be reviewed at 12 months and 24 months.

In addition there will be regular review and feedback from staff, relevant unions, leading hands and management.



Position Impact

Position	Proposed Changes
<ul style="list-style-type: none"> Security Manager 	<ul style="list-style-type: none"> Grade of role changes to an HM2 and the title becomes the Security and Patient Services Manager.
Security Officers (Year 1, Year 2)	<ul style="list-style-type: none"> Change of department from Security to Security and Patient Services. Security Officers will be required to work along-side HASA positions.
Health and Security Assistants (HASA)	<ul style="list-style-type: none"> Introduction of the HASA positions at the facility.
<ul style="list-style-type: none"> Patient Support Services Supervisor 	<ul style="list-style-type: none"> Change of department from General Services to Security and Patient Services. Change of reporting line from the General Services Coordinator to the Security and Patient Services Manager. Grade to be determine with consultation and in compliance with the SWSLHD Policy Directive SWSLHD_PD2019_007 Grading and Regrading Policy. Change of position title. Removal of reporting lines of Cleaning Team Leaders. Additional supervision requirements for HASAs Requirement to hold a security licence
<ul style="list-style-type: none"> Wardspersons & Courier 	<ul style="list-style-type: none"> Change of department from General Services to Security and Patient Services. Current Wardspersons will be required to work along-side HASA positions. Increased career progression options. Removal of direct report - courier
<ul style="list-style-type: none"> General Services Coordinator 	<ul style="list-style-type: none"> Removal of direct report - Patient Support Services Supervisor. Addition of direct reporting lines of Team Leaders. Removal of responsibility for Patient Support Services. Removal of direct report – Material Handling Supervisor Grade to be determine with consultation and in compliance with the SWSLHD Policy Directive SWSLHD_PD2019_007 Grading and Regrading Policy.
<ul style="list-style-type: none"> Material Handling Supervisor 	<ul style="list-style-type: none"> Change of reporting line from General Services Coordinator to the General Services Manager Addition of direct report - courier
<ul style="list-style-type: none"> General Services Manager 	<ul style="list-style-type: none"> Removal of patient support service staff from the General Services portfolio Additional direct report - Material Handling Supervisor Removal of responsibility for Patient Support Services.
Contract Security Officers (Wilson)	<ul style="list-style-type: none"> Eliminate need for contract security services.



Consultation and Communication

The BLH Corporate Services leadership team is committed to:

- Defining the reason for change through ongoing and timely communication with key stakeholders.
- Defining the reason for change through ongoing and timely communication with team members both directly and indirectly affected, ensuring they understand the reasons for the changes being made
- Delivering formal top-down communication, including regular team briefings to discuss issues and answer questions relating to the proposed changes
- Clearly communicating the impact of the change and ensuring that the transition arrangements are regularly communicated to every team member affected by the change
- Ensuring all team members, including those on secondment or on leave remain informed throughout the process
- Ensuring all team members have the opportunity to raise questions or queries relating to the proposed changes
- Timely engagement with any relevant Union.

Consultation will include

- this change plan
- presentation to workers
- provision of new Position Description/s
- provision of relevant policies noted in this change plan
- Correspondence to people in positions impacted by the proposed changes.

Further communication with team members and unions will occur once feedback from the consultation period is considered, and final approval for change is given by the Chief Executive.

Communication Timetable

Activity	Indicative Timeframe
Employee Briefing	One week following approval
Meeting and letters to impacted workers	Day of briefing
Worker feedback	2 weeks from briefing. Town Hall meetings to be considered if staff would rather provide feedback in person.
Union Specific Consultative Committees	Two meetings held over 4 weeks.
Chief Executive approval sought for final model.	After feedback received and considered.



Impact on Rural Communities

- The positions captured under this plan are based in the Sydney metropolitan area; therefore there will be no direct impact on positions located in rural areas.

Impact on EEO Groups

- There will be no impact on positions to Equal Employment Opportunity groups.

Impact of the restructure on Employee with special needs

- There are no known employees with special needs affected or impacted by the proposed restructure.

