



Canberra Health Services Consultation Paper

7-day Allied Health Staffing
Acute Allied Health Services,
Division of Allied Health

Remember - Seek advice about consultation requirements with staff and unions from the **People & Culture Branch** prior to commencing your consultation process.

512 49610 - Employee Relations Hotline, People & Culture Branch

HealthEmployeeRelations@act.gov.au

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1. Introduction

Canberra Health Services (CHS) is focussed on the delivery of high quality, effective, person centred care. It provides acute, sub-acute, primary and community-based health services to the Australian Capital Territory (ACT)—a catchment of approximately 400, 000 people. It also services the surrounding Southern New South Wales region which includes the Bega Valley, Bombala, Cooma-Monaro, Eurobodalla, Goulburn, Mulwaree, Palerang, Queanbeyan, Snowy River, Upper Lachlan Shire and the Yass Valley.

CHS administers a range of publicly funded health facilities, programs and services including but not limited to:

- **The Canberra Hospital:** a modern 600-bed tertiary hospital providing trauma services and most major medical and surgical sub-specialty services.
- **University of Canberra Hospital Specialist Centre for Rehabilitation, Recovery and Research:** a dedicated and purpose-built rehabilitation facility, with 140 inpatient beds, 75-day places and additional outpatient services.
- **Mental Health, Justice Health, Alcohol and Drug Services:** provide a range of health services from prevention and treatment through to recovery and maintenance at a number of locations and in varied environments for people suffering from mental health issues.
- **Dhulwa Secure Mental Health Unit:** a purpose designed and built facility providing clinical programs and treatment options for people suffering from acute mental health issues.
- **Six community health centres:** providing a range of general and specialist health services to people of all ages.
- **Three Walk-in Centres:** which provide free treatment for minor illness and injury.
- A range of **community-based** health services including early childhood services, youth and women's health, dental health, mental health and alcohol and drug services.

CHS is a partner in teaching with the Australian National University, the University of Canberra and the Australian Catholic University.

On 1 October 2018 ACT Health transitioned into two separate organisations being the ACT Health Directorate (ACTHD) and Canberra Health Services (CHS).

To enable CHS to have a strong focus on operational effectiveness, efficiency and accountability in the health services we provide, CHS is proposing a realignment of functions.

The [current organisational chart](#) and the recent [Annual Report](#) and the ACT Government [Budget Papers](#) provide more detail about CHS.

2. Purpose

The purpose of this paper is to describe a proposed Acute Allied Health Service 7-day staffing model for implementation from March/April 2023 and the associated implications for the Acute Allied Health Services (AAHS), Division of Allied Health and the clinical units in the Canberra Hospital.

AAHS provides allied health services across the Canberra Hospital campus in the disciplines of Aboriginal Liaison Officers, Audiology, Nutrition and Dietetics, Exercise Physiology, Occupational Therapy, Physiotherapy, Psychology, Social Work, Speech Pathology and their associated Allied Health Assistants. Despite increasing demand at Canberra Hospital, there has been minimal growth in allied health staffing.

The health consequences of low allied health support for patients are substantial. Canberra Hospital has stubbornly high rates of hospital acquired complications with pressure injuries, falls resulting in harm and malnutrition complications, where timely evidence-based allied health intervention could reduce the acquisition and severity of complications.

An analysis of Canberra Hospital's allied health staffing levels showed they are lower than high performing peers. Canberra Health Services (CHS) has used Victorian Allied Health Staffing Levels 2015 and published Health Round Table (HRT) reporting to compare the safety, quality and efficiency of our healthcare performance and allied health staffing levels and therapy times with peer hospitals and health services.

The AAHS team has been funded over three years to deliver an increase in Allied Health staffing of 41.9FTE which will see the staffing level increase to levels similar to those of high performing peers.

Included in phase one is allocated FTE to enable access for patients to 7-day allied health services.

This change will increase staffing rostered to work across the weekend in Canberra Hospital where there was a shortfall in staffing which will enable improved access to Allied Health services seven days per week.

In accordance with Section G1.2 page 98 of the *ACT Public Sector Health Professional Enterprise Agreement 2018-2021*, where there are proposals to introduce change, the head of service will consult with the effected employees and relevant unions.

AAHS staff were presented with the proposal through a staff in-service sessions in late 2022. Further in-services about the proposal will be conducted in regular team meetings throughout the consultation period.

Consultation with relevant unions and AAHS staff is sought to provide a genuine opportunity to contribute to and influence the decision-making process.

3. Current model

Currently services in AAHS are provided in a range of models. AAHS Physiotherapy provides staffing to the Intensive Care Unit, Emergency Department and evenings using 7-day rostering patterns. Additional on-site weekend service provision is provided to inpatient wards using weekend criteria, seven days per week. AAHS Social work provides limited after-hours and weekend services. AAHS

Nutrition provides a limited onsite service on Saturday and a Sunday on call service. Other AAHS services provide a 5 day per week service.

There are several work patterns including flexible work arrangements, set rosters, overtime, on call duty and part time working arrangements in place for these teams.

4. Rationale for change

Acute care patients require safe high quality, evidence-based care seven days per week which is evidenced to improve outcome and reduce length of stay. The proposed staffing model aligns with CHS' strategic priorities of personal health ensuring there are systems, processes and standards in place to enable consistent, high-quality care.

A 7-day allied health service in an acute hospital setting can provide several benefits for patients, including:

Improved patient outcomes: Having allied health professionals available 7 days a week can help ensure that patients receive timely and appropriate care, which can lead to better health outcomes.

Reduced length of hospital stay: By providing regular and consistent care, patients may be able to be discharged from the hospital sooner, reducing the overall length of their hospital stay.

Better continuity of care: With 7-day services, patients have access to allied health professionals throughout their stay, which can help to improve continuity of care and reduce treatment delays.

Improved patient satisfaction: Patients and their families may appreciate the convenience and continuity of 7-day services and this can lead to improved satisfaction with their hospital experience.

Reduced pressure on emergency departments: By providing regular allied health services, patients may be able to receive the care they need in a less acute setting, which can help to reduce pressure on emergency departments and free up resources for more critically ill patients.

Cost-effective: A 7-day service can be cost-effective by reducing the length of hospital stay and improving patient outcomes.

Improving and optimising the use of resources: Allied Health Services are crucial for delivering care that is efficient, effective and safe. A 7-day service optimizes use of resources in the hospital and allows the healthcare team to deliver the best care possible.

5. Future model

5.1. Scope of the future model

Weekend allied health staffing would increase for Physiotherapy, Nutrition and Social Work and commence for Occupational Therapy and Speech Pathology to enable the multi-disciplinary team to provide care over the weekend.

Weekend shifts will attract penalties for Saturdays and Sundays work and public holiday loadings where applicable.

It is expected that the need to use overtime will reduce with staff rostered in advance to undertake weekend shifts.

Each team will establish in collaboration with staff roster patterns and work towards implementation of these patterns over 6-12 months as additional weekday staffing is recruited to through the allied health growth funding.

5.2. Physical design/structure

There are no requirements for physical design change of workspaces. Existing workspaces which are underutilised on the weekend in Building 15 will be used on the weekend. The Building 15 doors will remain proximity card access only on weekends and the ground floor reception area will be unattended as no patients access this area on weekends.

5.3. Benefits of the future model

The proposed 7-day model has numerous benefits for patients and staff. These include:

- Increased allied health staff per bed
- Increased weekend service provision for patients including assessments and interventions
- Improved skill mix of staff across 7-days
- Increased education and teaching time across 7-days
- Improved staff and job satisfaction
- Development opportunity for HPO1 and HPO2 staff in different settings to gain experience and career advancement.
- Reduction of hospital bed pressure on Monday and Friday
- Growth of workforce at various HPO classification levels.
- Potential to improve workplace culture

5.4. Implementation of the future model

Following the consultation, subject to the support of the proposed changes, the recruitment of additional positions required will commence. It is anticipated the weekend rosters would be finalised in consultation with staff during March/April and then commencing from each departments next roster period. Managers will work with teams to provide advanced notice of roster changes or work patterns in accordance with the relevant sections of the EBAs.

The escalation pathway for weekend support (professional and WHS) will include access to onsite senior allied health professionals and escalation to the After-Hours Hospital Coordinator.

The weekend staffing model will be evaluated through:

- Weekday and weekend service activity data

- Patient access to Allied Health services including response to referral time
- Staff and stakeholder satisfaction

5.5. Related change processes

The implementation of the 7-day staffing model is dependent on successful recruitment to permanent positions in the Acute Allied Health Service Teams.

The proposed change will be closely monitored by the AAHS leadership team. Measures will include patient outcomes, patient satisfaction and staff satisfaction. We will be specifically monitoring the demand for allied referrals and the timing of the allied health response to referrals over the 7-day week and the impact this has on the service.

As the 7-day model is implemented staffing ratios will be reviewed to determine if any changes are needed to the model to ensure the best outcomes are achieved.

5.6. Implications for not undertaking the change

The implications of no change include continued low allied health intervention/therapy time over the weekend and continued pressure on the service Monday and Friday. These pressures have the potential to adversely affect workplace culture.

6. Consultation methodology

This proposal provides detail in relation to the Acute Allied Health 7-day Staffing Model.

Feedback can be provided via Consultation Form attached or via email to:

Ora-anong.Wattanatassi@act.gov.au

Feedback is due by 5.00pm 28th February 2023

In particular we are seeking responses to the following questions:

1. Do you have any concerns about the proposal so far, if so, what are they?
2. Do you have any other feedback you would like to be considered in relation to this proposal?

For any further information relating to the Acute Allied Health 7-Day Staffing Proposal and the consultation process, please contact Andrew Slattery, Director of Allied Health on 5124 5135 or via email andrew.slattery@act.gov.au

7. References

Document	Author
Canberra Health Services Strategic Plan	CEO, Canberra Health Services
What makes weekend allied health services effective and cost-effective (or not) in acute medical and surgical wards? Perceptions of medical, nursing, and allied health workers	Lisa O'Brien, Deb Mitchell, Elizabeth H. Skinner, Romi Haas, Marcelle Ghaly, Fiona McDermott, Kerry May & Terry Haines
Challenges, uncertainties and perceived benefits of providing weekend allied health services—a managers' perspective	Deb Mitchell, Lisa O'Brien, Anne Bardoel & Terry Haines
Hospital care for patients experiencing weekend vs weekday stroke: a comparison of quality and aggressiveness of care.	Kazley AS, Hillman DG, Johnston KC, Simpson KN.
Weekends: a dangerous time for having a stroke? Stroke.	Saposnik G, Baibergenova A, Bayer N, Hachinski V.
NHS Improving Quality. NHS services—open seven days a week: every day counts.	London: NHS Improvement Quality
Mortality among patients admitted to hospitals on weekends as compared with weekdays.	Bell CM, Redelmeier DA.