



Canberra Health Services Consultation Paper

Establishing Independent Duty
Statements for Two Existing Sterilising
Services Assistant Manager (ASO 5)
Positions.

Work Area	Author(s)	Contact Details
Sterilising Services	Sandra Wheeler	Sandra.wheeler@act.gov.au

Contents

1.	Introduction	3
2.	Purpose	3
3.	Current model.....	4
4.	Rationale for change	4
5.	Future model.....	5
5.1.	Scope of the future model	Error! Bookmark not defined.
5.2.	Physical design/structure.....	Error! Bookmark not defined.
5.3.	Benefits of the future model.....	Error! Bookmark not defined.
5.4.	Implementation of the future model.....	Error! Bookmark not defined.
5.5.	Related change processes.....	6
5.6.	Implications for not undertaking the change	7
6.	Consultation methodology	Error! Bookmark not defined.
7.	References	Error! Bookmark not defined.

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 several 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.

Sterilising Services is a part of CHS and is responsible for providing specialist sterilising services to Canberra Hospital (CH) theatres, wards, and outpatient services, including the Gastroenterology and Hepatology Unit.

Sterilising services are also provided to Calvary Public Hospital Bruce (CPHB), and some private clinics within the ACT and surrounding areas of NSW.

Sterilising Services provides reprocessing (cleaning, disinfecting, and sterilising), and purchasing, repair, and maintenance of RMD, and is organised into the following functional areas:

- Sterilising Services Unit at Mitchell, including management and administration
- Sterilising Services Unit at CH
- Sterilising Unit at CPHB
- Central Reprocessing Unit (CRU) at the Gastroenterology and Hepatology Unit at CH

Sterilising Services has two Assistant Managers, Administrative Service Officer Level 5 positions (position numbers P29392 and P29388). One duty statement covers both positions. The Assistant Managers are primarily responsible for human resource management across all four Sterilising Services sites, and instrument management for the Perioperative Unit at both Canberra Hospital and Calvary Public Hospital, ensuring compliance with National Standards, AS/NZS4187, Infection Control guidelines and CHS policy and procedures.

One of these positions manages instrument repairs and purchases while the other is responsible for human resource management, including rosters and all facets of staff management. Both positions have active involvement in quality improvements, audits and other projects related to Sterilising Services.

Although there are two independent positions that each perform tasks separately and independently of the other, historically, the owners of these positions have rotated roles every two weeks.

2. Purpose

The purpose of this paper is to describe the proposed changes to the current duty statement and position occupancy rotation.

The proposed revision of the duty statement and rotation through positions is designed to ensure Sterilising Services can provide timely and efficient human resource support for staff, reduce task duplication and improve operational efficiencies within Sterilising Services.

3. Current model

Two Assistant Manager, Administrative Service Officer Level 5 positions share one duty statement; however, this is not a job-sharing arrangement, as both positions are fulltime and performed independently of each other. Each position has its own position number.

One of the positions works primarily with surgical instruments, organising repairs of damaged instruments and ordering new/replacement instruments for both the Perioperative Unit at Canberra Hospital and Calvary Public Hospital. This position requires the position holder to have a technical background and comprehensive knowledge of surgical instruments.

The second Assistant Manager position is responsible for managing human resources, including drafting rosters and approving timesheets, approving leave requests, and all aspects of staff management, including performance management, staff development and workforce planning.

Each of the Assistant Managers performs one of the roles for two weeks then rotates to the other position for the following two weeks. Rotation through both positions is ongoing.

4. Rationale for change

Work practices for the Assistant Manager positions are fractured and often results in operational deficiencies, such as task duplication, increased opportunities for errors, confusion for staff,

customers and company representatives, and lack of accountability, as neither employee can take ownership of either position.

To ensure both Assistant Managers have all the information required to perform their duties effectively, emails that relate to either position, including instrument quotes and correspondence, applications for leave, performance plans, training requests, roster requests, payroll, recruitment and other documentation are sent to both Assistant Managers. This results in additional workload for occupants of both positions, as they are required to keep abreast of tasks and communications for the other position in addition to managing their own workload. At times, emails have been missed which has resulted in one manager not having the relevant information to order or repair critical instruments.

There is a lack of consistency in dealing with human resources and staff performance matters. Staff find it confusing knowing which manager to nominate as their manager when applying for leave or requesting changes to their roster. When discussing roster changes, banking of Accrued Days Off (ADO), or proposed leave applications, staff are required to relay the information to both Assistant Managers which can be confusing and frustrating for staff.

Rotation through positions is not operationally efficient, contributes to errors, creates confusion for staff, customers and company representatives, and unnecessarily increases workload for the Assistant Managers through task duplication and repetition.

Expressions of Interest (EOI) have been sought numerous times to cover backfill for these positions; however, interest from Sterilising Services staff is lacking. Feedback from staff is that they would be more likely to apply for one position, or the other, as that is where their interest lies, but are not interested in learning both roles. Ceasing rotation of the Assistant Manager positions will increase learning, development and higher duties opportunities, as staff could apply to positions that reflect their interests.

5. Future model

Sterilising Services is proposing that rotation through the two positions ceases and that each manager is allocated permanently to either instrument management, or human resources which would result in more consistent and streamlined communication, no task duplication, and less errors and confusion.

A position description for each role has been drafted for staff consultation and feedback.

Sterilising Services are proposing a change of classification from Administrative Service Officer Level 5 to Technical Officer Level 3 for the instrument management position. The rationale behind the proposed classification change is that the occupant needs to understand and be able to manage all aspects of surgical instrument management, including instrument repair, purchase, replacement, and maintenance to comply with National Safety and Quality in Health Service (NSQHS) Standards, AS/NZS4187, Infection Prevention in Endoscopy Guidelines (GESA), and Infection Control guidelines. This position requires a comprehensive instrument knowledge to input instrument data into the electronic instrument tracking system, T-Doc, and extract and

interpret data from the same system. This position requires instrument process knowledge and will be responsible for providing T-DOC user training and education to CHS personnel. Active involvement in quality improvement initiatives, audits, and projects is an expectation of this role. The occupant of this position will be required to respond to customer enquiries efficiently and effectively, ensuring a patient focused quality product and service are delivered to each customer. Completion of a Certificate III Sterilising Services will be a mandatory requirement for the occupant of this position. As the duties of this position are primarily technical, re-classification to a technical position is required.

The Assistant Manager, Human Resources position will remain as an Administrative Service Officer Level 5 classification and is responsible for providing leadership to effectively manage human resources, including rostering staff across a multifaceted health service, and coordinating the day-to-day management of operational areas within assigned budgets. This position is responsible for managing all aspects of staff management, including performance feedback, management, and team culture. The Human Resource Manager is actively involved in quality improvement initiatives, audits, and managing projects, as required, and is responsible for providing timely, efficient, and effective responses to customer enquiries and requests, while ensuring a patient focused quality product and service are delivered to each customer.

5.1. Benefits of the future model

Implementing the proposed structure will provide:

- One point of contact for instrument management
- One point of contact for human resource management
- No duplication of duties
- Reduced opportunity for errors
- Consistency with human resource matters
- Ownership and accountability
- Consistency with instrument management issues
- Clear point of contact for both positions
- Increased opportunity to share knowledge and experience, creating opportunity to backfill for planned and unplanned leave
- Increased opportunity for career development and progression
- Improved workplace culture

5.2 Affected Positions

Positions affected by this change are:

Assistant Manager, Administrative Service Officer Level 5 – position number P29388	Position permanently filled.
--	------------------------------

Assistant Manager, Administrative Service Officer Level 5 – position number P29392	This position is currently vacant and backfilled via a temporary contract. Pending the outcome of this consultation process the owner of position number P29388 will be provided the opportunity to choose either the instrument management, or human resources position they wish to occupy permanently. The remaining vacant position will then be permanently recruited to.
Sterilising Services Health Service Officer 3/4/5 (several positions), Technical Officer Level 2 (several positions), Technical Officer Level 1 (several positions)	Change in reporting line.

5.2. Implementation of the future model

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

It is envisaged that the proposed structure will be implemented proceeding the consultation period has closed as per the following timeline:

	Action	Dates
1	Letter and consultation document provided to all affected staff and Unions; HSU & CPSU	02/03/2023
2	Director & Assistant Director, Operations to meet with affected staff to discuss the proposed changes and answer any questions	19/12/2022
3	Feedback from consultation reviewed and any changes incorporated	21/03/2023
4	Impacted staff to receive formal notice	24/03/2023
5	Recruitment of vacant Assistant Manager Position	30/04/2023

6. CONSULTATION METHODOLOGY

The purpose of this paper is to provide information to SS staff of the proposed changes to the duties of two ASO 5 positions within Sterilising Services and the associated reporting line changes and implications for the Sterilising team members. This document outlines and seeks approval to commence the next part of the consultation process for the changes to the duties of the two ASO 5, Assistant Manager Roles.

The SS Manager, Human Resources will assist with providing leadership to effectively manage human resources, including rostering staff across a multifaceted health service, and coordinating the day-to-day management of operational areas within assigned budgets. This position is responsible for managing all aspects of staff management, including performance feedback, management, and team culture.

The SS Instrument Management will be responsible for all aspects of surgical instrument management, including instrument repair, purchase, replacement, and maintenance to comply with the National Safety and Quality in Health Service (NSQHS) Standards, AS/NZS4187, Infection Prevention in Endoscopy Guidelines (GESA), and Infection Control guidelines. This position requires a comprehensive instrument knowledge to input instrument data into the electronic instrument tracking system, T-Doc, and extract and interpret data from the same system.

This proposal provides more detail regarding the proposed changes to the Assistant Manager roles within Sterilising Services, including reporting line changes for the sterilising services team, as staff will report directly to the SS Manager, Human Resources rather than both Assistant Managers. There are still details that need to be determined and your feedback, suggestions and questions will assist in further refining the proposal.

Feedback is due close of business, 21 March 2023.

We are seeking responses to the following questions:

1. Do you support the proposal to change of the duties to two ASO 5 positions?
2. Do you have any concerns about the proposal? If so, what are they?
3. Do you have any concerns with the change in reporting lines?
4. Do you have any other feedback you would like to be considered in relation to the proposed change?

For any further information relating to the proposed changes to the duties for the two Assistant Manager, ASO 5 positions within Sterilising Services and the associated reporting line changes and implications for all HSO3/4/5, TO1 and TO2 positions please contact:

- Natalie Ogilvie – Natalie.ogilvie@act.gov.au, or Sandra Wheeler - sandra.wheeler@act.gov.au.

Attachments

Attachment A: Current Assistant Manager (ASO 5) Duty Statement

Attachment B: Draft Assistant Manager Instrument Management (TO3) Duty Statement

Attachment C: Draft Assistant Manager Human Resources (ASO5) Duty Statement

Attachment D: Sterilising Services Organisational Chart