



The Canberra Hospital

Consultation Paper

Transfer of Sterilising Services into the
Critical Services Building, Building 5
Canberra Hospital.

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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.
- **Northside Canberra Hospital:** The North Canberra Hospital (formerly Calvary Public Hospital Bruce) is a modern hospital with approximately 250 available beds. It provides a comprehensive range of medical and surgical services as well as a busy Emergency Department and seven operating theatres.
- **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.

The Sterilising Services Unit (SSU) is part of the Infrastructure and Health Support Services (IHSS) Division within the Canberra Hospital and is currently located in Mitchell ACT, Building 12 (Canberra Hospital), Building 1 (Canberra Hospital) and North Canberra Hospital. This unit is responsible for providing specialist sterilising services to:

- the theatres, wards and outpatient services within the Canberra Hospital,
- the Central Reprocessing Unit (CRU) located within the Gastroenterology and Hepatology Unit at Canberra Hospital,
- the North Canberra Hospital (NCH); and
- some private clinics within the ACT and surrounding areas of NSW.

2. Purpose

The purpose of this consultation paper is to describe the transfer of sterilising services from Mitchell ACT, Canberra Hospital Building 12, and North Canberra Hospital (NCH) into the new Critical Services Building (also known as Building 5) located on the Canberra Hospital Campus.

Included in this consultation paper are the proposed rostering updates to support working in Building 5. The roster reform is designed to:

- ensure sterilising services adequately meet and sustain the reprocessing requirements with the relocation of services into Building 5,
- better align shifts with theatre activity and reprocessing requirements,
- realise the proposed efficiencies; and
- achieve a productive team environment.

3. Current model

The SSU provides reprocessing (cleaning, disinfecting, and sterilising), purchasing, repair, and maintenance of Reusable Medical Devices (RMD). This service is currently organised into the following functional areas:

- SSU Mitchell ACT (includes management and administration teams),
- SSU at Canberra Hospital, Building 12,
- the CRU at Canberra Hospital; Building 1; and
- SSU at NCH.

The Mitchell ACT site is currently the reprocessing area for RMDs which cannot be reprocessed onsite at Canberra Hospital and NCH. This is due to equipment capacity and footprint limitations:

- NCH:
 - All RMD reprocessing is conducted onsite - except for orthopaedic loan sets which are reprocessed at Mitchell.
 - Once orthopedic loan sets have been used at NCH and returned to Mitchell, they are cleaned, checked, and returned to the loan set company via courier.
- Canberra Hospital:
 - For used RMDs, 60 per cent are reprocessed onsite with the remaining 40 percent are sent to Mitchell for reprocessing. Once this step is completed, Canberra Hospital RMDs are stored at Mitchell.
 - The Canberra Hospital Perioperative Unit place a daily order for the RMDs that are required for the following day's surgeries. Sterilising Services staff pack the order and deliver to Canberra Hospital.
- Private clinics:
 - RMDs reprocessed for private clinics are collected by a courier.
- For Canberra Hospital and NCH collections and deliveries are rostered for up to three runs/trips per day/5-days a week.

The current Sterilising Services frontline workforce comprises of:

- Health Service Officers 3/4/5 (HSO),
- Technical Officers Level 1 (TO1); and
- Technical Officers Level 2 (TO2).

These staff can be rostered at any one of the four sterilising services sites at Mitchell, Canberra Hospital, NCH, or CRU.

All four sites operate independently of each other, and have varying shift patterns in managing the workflow:

Table 1: Shift Patterns:

Mitchell ACT	Canberra Hospital	NCH	CRU Canberra Hospital
Monday to Friday	Monday to Sunday (including all public holidays)	Monday to Friday	Monday to Friday
7:00am – 3:30pm 12:30pm – 9:00pm	7:00am – 3:30pm 12:30pm – 9:00pm 8:00pm – 07:30am 2:30pm – 11:00pm	7:00am – 3:30pm 12:30pm – 9:00pm 2:30pm – 11:00pm Saturday: 8:30am – 5:00pm	7:00am – 3:30pm 11:00am – 7:30pm

Sterilising Services has historically rostered for weekend, night shifts, public holidays, and ‘on-call’ through seeking volunteers. However, current duty statements for frontline positions specify the requirement to work across all shifts and all days (see [Attachments A, B and C](#)).

Employees that work night shift are rostered on for 76 hours over 7-days, followed by 7-days rostered off.

4. Rationale for change

4.1 Relocation

A new SSU is included in Building 5, with the service due to become operational in mid-2024. This new facility will have the opportunity for significantly enhanced theatre capacity and co-located sterilising services that will streamline support for theatres along with improved efficiencies and workflows across a 24/7 service.

In addition, the existing SSU at Mitchell does not meet the requirements of the relevant standard – AS4187. The new SSU will ensure compliance and will support the provision of safe, high-quality services to patients across all sites mentioned.

4.2 Rostering

The current rostering for Sterilising Services does not provide for sufficient utilisation of staff resources across 24 hours, 7 days per week. Shifts are not adequately aligned with required workflows, causing additional burden to staff during peak times, and surplus resources during quieter intervals.

Team Leaders do not work night shift under the current arrangements.

The current practise for Sterilising Services staff is to receive three paid tea breaks per shift (1 x 10-minute break and 2 x 15-minute breaks) totalling 40 minutes of paid breaks for each employee per shift.

The additional break/s impact significantly on staffing resources and productivity. The relevant Enterprise Agreements currently provide for paid breaks.

Weekends have become difficult to roster and is completed through staff volunteering - including Health Services Officers (HSO) and Team Leaders. Some weekends are staffed only with new and/or inexperienced staff. This poses a safety risk to both staff and patients.

5. Proposed model

5.1 Revised arrangements

The SSU will continue to provide the above-mentioned services of reprocessing (cleaning, disinfecting, and sterilising), purchasing, repair, and maintenance of RMDs. However, in a much improved and efficient manner.

The overall organisational structure of the Sterilising Services unit will continue. ([Attachment D](#)).

The change in location will see a centralised Sterilising Services hub created through:

- Functions currently completed at Mitchell moving into Building 5 (including management and administration teams).
- SSU operating at Canberra Hospital (Building 12) moving into Building 5.
- Sterilising Services at NCH moving into Building 5. However, pre-wash and packaging for transport activities will continue on-site to have the re-processing workflow undertaken.

The CRU will remain in its current location in Building 2, Canberra Hospital for the present.

With these location changes and centralisation, RMDs will only be transported to the NCH.

The frontline staffing composition will continue to comprise of:

- Health Service Officers 3/4/5 (HSO),
- Technical Officers Level 1 (TO1); and
- Technical Officers Level 2 (TO2).

Table 2 provides the proposed updated rostered shift times. These amendments include:

- Employees who do not accrue an Accrued Day Off (ADO), will work 38-hours per week - rostered either 7.5 or 8-hour shifts (excluding an unpaid 30-minute meal break). Staff without an ADO are usually rostered 7.5 hours over four days and 8 hours for the fifth day to bring staff to 38 hours per week. In 2020, SSU ceased offering an ADO to staff due the impact rostering 53 staff off a day each month was having on the business operations of the unit. Existing staff retained their ADO – however as natural attrition occurs positions are recruited to without the offer of an ADO.
- For those staff who are still working with an ADO, all shifts will be eight hours in duration - totalling 40 hours per week.
- Team Leaders will be rostered across 24 hours/7 days. With the move to Building 5, the closure of the Mitchell site and reprocessing for the NCH being provided from Building 5, there will be six Team Leaders rostered within the SSU at Canberra Hospital. This will ensure Team Leaders remain competent in tasks that are performed and can provide knowledge, leadership, direction, and support to staff across all shifts.
- Rotation of all permanent staff to work allocated weekend shifts, in accordance with the relevant duty statements.
- Rotation of all permanent staff to work allocated 8-hour night shifts (11:59pm – 8:30am). Night shifts will be rostered in accordance with the requirement of the Technical and Other Professional Enterprise Agreement (TOPEA) and may include a weekend.
- Rotation of all permanent staff to be rostered as 'on call' at any sterilising site (Canberra Hospital, NCH or CRU).
- Change of operating hours at the CRU to meet the operational demand at this site.

- Consolidation of current tea break arrangements. Amending these arrangements will include the provision of 2 x 10-minute breaks throughout shifts - in updating from the current 2 x 15-minute breaks and 1 x 10-minute break. This will align to saving approximately 43 hours of lost productivity per week.

Table 2: Rostered Shift Times:

Site	Current Shift	Proposed Shift	Comment
Canberra Hospital	5:00am – 1:30pm		The main task associated with this shift is driving the truck to and from the Mitchell site to pickup/deliver RMDs. With the closure of Mitchell, this shift will no longer be required.
	7:00am – 3:30pm	8:00am – 4:30pm	Proposed start and finish times are 1 hour later.
		10:00am – 6:30pm	Additional shift
	12:30pm – 9:00pm	12:00pm – 8:30pm	Proposed start and finish times are 1 hour later.
		2:00pm – 10:30pm	Additional Shift.
		4:00pm – 12:30am	Additional shift.
	8:00pm – 7:30am	11:59pm – 8:30am	Proposed shift length is reduced from 11 hours to 8 hours and from 7 -nights on/ 7-nights off, to 5 or 7-nights on/2-nights off.
CRU	7:00am – 3:30pm	8:00am – 4:30pm	Start and finish times are 1 hour later.
		10:00am – 6:30pm	Additional shift.
	11:00am – 7:30pm	12:00pm – 8:30pm	Proposed start and finish times are 1 hour later.
NCH	7:00am – 3:30pm 12:30pm – 9:00pm 2:30pm – 11:00pm 9:00am – 5:00pm	7.5 or 8-hour shifts rostered between 7:00am – 11:59pm.	Shifts will be rostered in accordance with the requirements of the business unit and will depend on theatre throughput. Weekend work will likely be required.
Team Leader Shifts	7:00am – 3:30pm 12:30pm – 9:00pm	8:00am – 4:30pm 12:00pm – 8.30pm 4:00pm – 12:30am 12:00am – 8:30am	Ensuring Team Leader coverage across all shifts, and any available time can be utilised better.

5.2 Benefits

Implementation of this proposed model will provide:

- A centralised processing hub within Building 5
- An impressive new work environment in Building 5
- Improved workflows and efficiencies
- Better servicing of operational needs
- Improved contingencies in the event of equipment failures or service disruptions.
- No expected job losses
- Revised work rosters will provide:

- Reduced WHS risks for Sterilising Services employees,
- Assistance in ensuring a fair work/life balance for all staff,
- Improved access to opportunities for training and development,
- Increased opportunities to share team leading knowledge and experiences,
- Improved opportunities to backfill for planned and unplanned leave; and
- Increased opportunities for career development and progression.

5.3 Implementation

The relocation of sterilising services from Mitchell into Building 5 is scheduled to occur mid-2024, following the handover of the new building to Canberra Hospital. This service will be one of the first to be established in Building 5.

The Model of Service for the SSU in Building 5 was finalised in February 2023, following the completion of consultation and consideration of the feedback received.

A detailed transfer schedule for the move from Mitchell into Building 5 will be developed and co-ordinated with SSU staff, through SSU management, the Transition Manager (Campus Modernisation) and the engagement of a Relocation Consultancy by the Campus Modernisation team.

The forecasted implementation of the revised rostering (Table 1) will be from the commencement of the sterilising services in Building 5.

5.4 Implications for not implementing the changes.

Not implementing these proposed changes will provide the following issues:

- Not transferring services from Mitchell into Building 5:
 - National Safety and Quality in Health Services (NSQHS) Standard 3.17 will not be met.
 - Will put business continuity as a concern.
- If the SSU currently at Canberra Hospital and the SSU at NCH are not included, the opportunity will be missed of having a centralised sterilising hub, and the efficiencies and benefits that this will provide.
- Not updating the current roster process will see:
 - An impact on the standard and delivery of sterilising services to CHS and external clients.
 - An impact on the level of patient care.
 - An impact on staff welfare, safety, and individual development opportunities.
 - Put business continuity at risk.

6 Consultation methodology

Under the Union Encouragement Policy, employees will be given full access to union officials and delegates during working hours to discuss the proposed model of working, whilst current work requirements are not unreasonably affected.

Consultation will be undertaken with SSU staff and relevant unions (CPSU and HSU) for a period of approximately 3-weeks. As part of the release, initial meetings will be held with Sterilising Services

staff to advise that the consultation process and period is commencing. Meetings will also be offered to unions.

During the consultation period, team meetings will be facilitated with staff at Mitchell, Canberra Hospital and NCH in supporting the distribution of information and in responding to any queries.

During the consultation period, feedback on this proposal can be provided to:

CHS.CHEunionforums@act.gov.au

7. References

Document	Author
Consultation Guidelines for Managers	People & Culture, Canberra Health Services
Recruitment policy	People & Culture, Canberra Health Services
ACTPS Union Engagement Policy	ACT Public Service
ACTPS Technical and Other Professional Enterprise Agreement 2018-2021(TOPEA)	ACT Public Service

8. Attachments

Attachment A: HSO Duty Statement



P29358_several -
HSO 3-4-5 Sterilising

Attachment B: TO1 Duty Statement



P29370 - SSTO1 -
Sterilising Loans Off

Attachment C: TO2 Duty Statement



P29349 - SSTO2 -
Sterilising Services T

Attachment D: Sterilising Services Organisational Chart



Organisational
Chart - Sterilising Se