

Timing: Commissioned 29 November 2021

Overview of Department

The redevelopment of the Emergency Department (ED) will see the refurbishment of the current ED HOPE Building Level 1 and an extension to the north of the existing building towards Burdett Street. This expansion of the ED aligns to the Hornsby Ku-ring-gai catchment area population profile and anticipated increases in older patient presentations in line with population projections. Presentations in 2019 exceeded 43,000 and prior to COVID-19 in early 2021 were expected to exceed 45,000. HKH ED Is classified as a Level 4 ED and a B1 peer hospital. The hospital is accredited with the Australasian College of Emergency Medicine (ACEM) for training and is due for re-accreditation in early 2022.

A review of clinical goals and services of the ED identified the need for better access to medical imaging, fast track, acute and sub-acute zones for adult and paediatric, and an expanded co-located ED Short Stay Unit (EDSSU). In addition, areas identified for further refinement and improvement included expansion of resuscitation capacity and a dedicated paediatric pod. Previously paediatric patients were seen in a location attached to the adult area which was deemed inappropriate and a clinical risk.

The new design will deliver key clinical adjacencies between the ED, EDSSU, Medical Assessment Unit, Medical Imaging and the Transit Unit (facilitates discharge and patient flow from the inpatient areas and emergency department of non-emergency patient transfers and discharges for patients in a stable condition). However, each new section of the ED is now physically closed off from each other in 'pods'.

Old Emergency Department

The old ED covered approximately 900m² with open plan layout using curtains to delineate the 4 distinct zones. This configuration made it possible to observe patients, other staff and respond quickly with resources based on patient need. The old ED composed of:

- Acute (adults and paediatrics)
 - o 10 adult single bays
 - 2 adult single isolation (ISO) rooms
 - o 4 paediatric beds (connected by an open entry to the adult area)
 - Nursing staffing:
 - Adult 4 RNs plus 1 Team Leader per am and pm shift, 4 RN's for night shift
 - Paediatric 1 RN per shift 1:4.
- Resus 2 beds, currently staffed with 1 RN. The Team Leader provides care when a second patient
 is admitted.
- EDSSU 8 beds with 2 nurses rostered per shift
- Fast track the new model of care is in operation with redevelopment staffing of a newly recruited Primary Contact Physiotherapist (PCP) to complement the existing staffing of 2 Nurse Practitioners (NP) working 10 hr shifts (am 0800:1830 and afternoon 1130:2200) and 1 RN/EN working a 10 hr shift (1130:21:30).
- **Triage** front of house Triage 1 RN 24/7 (0700:1530, 1330:2200, 2130:0730) currently operating bedside ambulance triage where patients go straight to a bed. There are on average 25 ambulance presentations per day.

The New Emergency Department

The new ED covers approximately 2,504m² (excluding non clinical spaces), which is more than doubling the department's footprint. The configuration of the unit will have 5 distinct pods, co-located together.

Day 1 opening will be:

- Acute Adult 12 beds (curtained areas). Nursing staffing for 12 beds will be 3 RNs/1 EN am, pm shift and night shifts. Equivalent to 1:3 ratio (ACN requirement). This pod is a locked down unit.
 - The new build acute adult capacity is 18 beds and as presentations increase and they consistently meet ED thresholds further beds will be opened in a staged manner with appropriate staffing.
- New Paediatric ED –5 beds and 3 chairs (excluding the treatment room) operating 24/7 with staffing of 2 RNs per shift, equivalent to 1:4 ratio when fully occupied. This pod is a locked down unit.



- Resus 2 beds requiring 2 RNs per shift (working 8,8,10 hr shifts) equating to 1:1 ratio. Plus a COVID resus bay with 1 RN.
- EDSSU 8 beds with current staffing of 2 Nurses per shift (RN/EN) (1:4 ratio). The unit is co-located with ED resulting in improved patient flow. This pod is a locked down unit.

The new build EDSSU capacity is 12 beds and as presentations increase and consistently meet ED thresholds further beds will be opened in a staged manner with appropriate staffing.

- Fast track 4 beds, a procedure and plaster room and 6 consult rooms. Staffing unchanged.
- Triage 2 consultation rooms. Also located within the triage area are 2 rooms, one for high-risk families and one for Aboriginal & Torres Strait Islander assessment. 1 RN am, 2 RN pm and 1 RN night.

Although floor pace is increased, the staffing resources are allocated based on pods and beds opening from Day 1. In the redeveloped ED there are three locked down units – Acute Adult, Paediatric and EDSSU and staffing therefore reflects FTE to ensure patient safety and to meet Award and safety standards.

The overall bed increase for Day 1 is 1 Paediatric bed and 3 chairs.

Nursing

As part of the redevelopment and a review of the ED model of care additional NUM1 roles, 24/7 (working 8,8,10 hr shifts) are being introduced to replace the Team Leaders. NUM1's have responsibility for ensuring patient flow, continuity of care and patient safety, which is a broader scope of practice than Team Leader responsibilities. This will result in improved off stretcher time, greater consistency in performance, reduced clinical risks, Cat 2&3 patients seen within timeframes and meeting admitted ETP. This structure is comparable to similar sized ED's.

The proposed staffing profiles ensure compliance with the New South Wales Nurses' & Midwives' Association State Award 2021 and reflects Work, Health & Safety legislation.

This results in requiring the following additional Day 1 nursing staffing:

- 1 x NUM1 (26/7) = 5.51 FTE (excludes current 2.34 FTE existing). The NUM positions are replacing the team leader RN 8 with in charge allowance.
- 1 x Triage RN (8 hr pm shift 7 days) = 1.69 FTE
- 1 x Paeds RN (24/7) = 5.51 FTE
- 1 x Resus RN (24/7) = 5.51 FTE
- 1 x RN/EN Acute Beds 1:3 ratio for 12 beds (26/7) = 5.51 FTE

Medical

In the old ED there was a model of 4 zones with senior medical decision makers able to have direct line of sight over the acute adult and paediatric models of care. The new floorplan will mean senior medical decision makers will be spread between separate pods separated by walls and closed doors. This requires an SRMO or Registrar level doctor to always be present in the acute adult and paediatric pods to maintain patient safety.

Day 1 medical staffing will see the allocation of 1 SRMO level staff per 24 hrs to ED, equating to 2.1 FTE. Existing medical resources will be reallocated to cover the acute pods. A 1.5 FTE increase occurred in July 2021 as part of stage 2 early budget allocation.

Allied Health Stage 2 staffing has already been recruited to support non-admitted Emergency Treatment Performance (ETP). The resources are:

- 1.8 Physiotherapist Level 4
- 1.0 Social Worker Level 3

Social Work provide an on call service from Friday evening - Monday morning (and Public Holidays) to the entire hospital, however primarily provide support to ED. An additional 0.42 FTE Speech Therapy resource as part of Stage 2 Allied Health enhancement for the entire hospital is available to support ED patients as needed.

Clerical there is no requirement for additional clerical staffing related to the ED redevelopment or the future growth in bed base. Budget for existing EDSSU staff have been allocated.

Wardspersons there is no additional wardspersons staffing required for Day 1.



Corporate Services staffing of 0.42 FTE additional ED Cleaning staff has been included in the 29.53 FTE approved for Stage 2 redevelopment and is currently being recruited to.

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dvanced Trainee	1.0	Advanced Trainee	1.0	
	4.0		4.0	
	52.37		54.47	2.1*
UM 3	1.12	NUM 3	1.12	
UM 1	2.78	For 24/7 cover	5.51	2.73
IP	4.00	NP	4.00	
NE	2.00	CNE	2.25	0.25
N,CNS,EN	53.56	RN,CNS,EN	66.13	12.57
	59.46		75.01	15.55
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O3	1.0	AO3	1.0	S. I. S. A.
O3	10.65	AO3	13.03	2.38
O4	0.22	AO4	0.22	
O5	1,11	AO5	1,11	
	12.98		15.36	2.38
	2.0		2.0	
	2.0		2.42	0.42
	4.0	Mary Harris	4.42	0.42
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^{*} Additional medical resource being sourced from within existing Medical staffing, no additional recruitment for Day 1. # Nurse Practitioners budget and management is with Nursing Administration – not included in FTE totals.

Prepared by Peter Tattersall & Pauline Luttrell, HR Business Partners, Hornsby Ku-ring-gai Health Services, with input from Ros Ferguson, NUM3 ED, Jenny Neilsen DON&M, Justine McMahon Clerical Supervisor and Andy Brown, ED Clinical Director.

⁺ Special Funding FY22 and 23 - not included in FTE totals



Consulted	Position	Date
Drew Hilditch-Roberts	Director of Nursing & Midwifery Services, HKHS	22 Now 21
Sam Ah Kit	Director of Medical Services, HKHS	,
Aidan Murphy	Manager Finance and Performance, HKHS	20 Dec 21
Approved	Position	Signed ,
Simon Hill	General Manager Hornsby Ku ring gai Hospital	Silm