

Meeting of the Western Sydney Local Health District
Joint Consultative Committee















No. 2021/4

Date: 2 December 2021

Time: 10.00am

Venue: WSLHD Executive Office meeting room Level 1, Westmead Hospital
Microsoft Teams (External)

Minutes

 (Via Microsoft Teams)	
PRESENT	
Western Sydney LHD Committee members	Union Committee members
Luci Caswell (LC) Director People and Culture WSLHD	Mark Murphy (MM)  Organiser, NSWNMA
Emma McCahon  Director Medical Services WSLHD	Frances Cavallaro (FC)  NSWNMA Staff Delegate, Cumberland
Jacqueline Dominish (JD)  Director Allied Health WSLHD	Alice Eggleston (AE)  Organiser NSWNMA
Julie Welch (JW)  Deputy Director, People and Culture WSLHD	Omila Bir (OB)  HSU Delegate
Dominika Nambiar (DN)  Director Industrial and Employee Relations WSLHD	Hannah Schultz (HS)  Organiser, ASMOF
Alison Derrett (AD)  Executive Director Operations	Liwayway Besilos (LB)  Staff delegate
Carol Farmer (CF) Director Nursing and Midwifery	
Steven Nguyen (SN)  Secretariat	
APOLOGIES	
Graeme Loy (GL) Chief Executive WSLHD	Elishka Skelding (ES) Organiser, ASMOF
	Tom Stevanja (TS) Industrial Officer HSU NSW
	Randall Millington (RM) Organiser HSU NSW
	Alayne Dwyer (AD) Organiser NSWNMA
	Deborah Owen (DO) Staff delegate, NSWNMA
	Audrey Figures (AF) Staff delegate NSWNMA
	Xanthe Thomson (XT) Organiser, ASMOF
	Ian Sherwood (IS)  Organiser HSU NSW

Item 1 Welcome and Acknowledgement of Country

The meeting was chaired by Director People and Culture, Luci Caswell. Apologies were noted.

Item 2 Minutes of Previous Meeting

Minutes from 2 September 2021 were confirmed as a true and correct record with an exception raised by MM at 6.4.3, the word “rations” to be corrected to “ratios”.

Item 3 Actions from the Previous Meeting

3.1 Staffing Red Areas

- LC confirmed the matter has been resolved.

3.2 Interpretation of Clause 13 of the Health Employees’ Condition of Employment State Award

- DM advised information was provided to RM.

3.3 Grading for Oral Health Staff

- LC advised progress has been interrupted due to the COVID-19 outbreak

Item 4 Presentations

Nil

Item 5 Matters Escalated from facility SCCs

5.1 Mental Health Service – Staffing profile and vacancies for HSU Classification

- OB advised it was best to move to next JCC meeting and wait for HSU/RM. There was another issue to be discussed, “model of care”.
- AD asked whether the issue was regarding current vacancies or profile as well.
- FC commented on the need to look at model of care in the new build as well as staff profiles.
- OB advised the need to know the baseline figures, consistent with model of care. Without the figures it would be difficult to understand what the proposed model of care is going to be.
- LC agreed to hold it over to next JCC meeting.
- LC advised HSU Delegates to speak with HSU organisers regarding clarity around their issues so WSLHD can address them.
- MM advised NSWNMA did not receive any correspondence regarding consultation and requested if WSLHD can forward information to NSWNMA.
- LC advised she will speak with Bill Brakoulis.

Item 6 Items Raised by Industrial Organisations

6.1 Health Services Union (HSU)

Nil

6.2 NSW Nurses and Midwives Association

6.2.1 Return to face-to-face orientation

- MM questioned when WSLHD will recommence face to face (F2F) orientation which is the preference for NSWNMA
- LC advised that orientation is happening regularly but the District do not intend to return to F2F. However, there are special orientations that have F2F components

which will go ahead. Where there is not a requirement to have F2F orientation, WSLHD have included Union information and videos into the online orientation.

- CF advised the LHD responded to Brett Holmes on 24 November 2021 regarding how many new graduates are commencing employment.
- It was noted by CF they would get F2F orientation like the JMOs.
- MM asked whether corporate orientation will be F2F? LC advised orientation will be online with links to Union websites, videos and union information and that the Union material is part of the units that staff are required to do during orientation.
- MM asked whether it is just an online module or with an actual presenter?
- LC advised it's mandatory training, so online. Mandatory training is all online unless there are practical components that need to be done F2F.
- MM asked whether there is capacity for Unions to be involved in F2F sessions?
- LC advised it is mandatory training not orientation. Unions are involved in orientation in accordance with the Awards. When new JMOs commence, there is a F2F component of their orientation. As such, Unions are invited to present at these orientations in accordance with the Award.

6.2.2 Annual mask fit testing

- MM asked that with WHS concerns with increasing Covid numbers, what is the intention of the LHD regarding fit testing P2 and N95 masks.
- AD advised fit testing will occur when there is a change in facial characteristics. Fit testing is still done at regular intervals. Awaiting advice from CEC regarding length of interval.
- LC advised if staff perceive masks don't fit, LHD will re-test/refit them. If the original mask is not available LHD will attempt to fit them to more than one mask where possible.
- It was noted that there is adequate supply of masks.
- MM asked what is the LHD's position on Union organisers being on site?
- LC advised that if the organiser is vaccinated and willing to comply with entry requirements and notices then it should not be a problem.
- MM asked whether the LHD is okay with the NSWNMA organisers engaging nurses and midwives in tea rooms when they are on their breaks?
- LC advised to take caution around tea rooms. Prefer for meetings to happen outside, especially with a larger group. This is to protect everybody from transmission. As long as everybody is safe, Unions can come on site and conduct their business.
- It was clarified for FC that fit testing will be afforded to new staff.
- MM stated that GL recently advised there were a couple of hundred nursing vacancies across the LHD and asked to have numbers for each facility and the current status of the LHD with regards to workforce and capacity.
- LC advised that the LHD does not provide vacancy information as it changes day by day. Vacancies are causing workload issues and the LHD will monitor more closely and intervene. CF, GL and LC working on nursing recruitment more generally for next year (2022) with the aim to remove delays to ensure good recruitment systems and minimise vacancies.
- MM asked whether it is the same with casuals, overtime, and sick leave and whether the information can be reviewed
- LC advised that the information sought comes from the Reasonable Workloads Committee and the local Director of Nursing and Midwifery. The information is used to assess workload and staffing issues.

6.3 Australian Salaried Medical Officers Federation of NSW (ASMOF)

Nil

6.4 Other Matters

Nil

Item 7 Items Raised by Local Health District

7.1 Covid Update

- LC reported that NSW Health moved from red to amber Rules have also moved from red to amber. Masks are still to be worn in hospital in all areas except back of office. All red wards closed and red beds available if needed. LHD have ICU capacity if needed. Existing red patients are in the community. Practices and processes are available if there is another COVID wave which requires the LHD to respond.
- The LHD is back to business as usual. Surgery and dental have resumed. Unvaccinated people don't have freedom of movement until 15 December 2021. District executive will be on site to deal with any spike in COVID cases.
- The LHD intends on giving the majority of staff leave during the Christmas period as they are exhausted. Staff have worked hard over the last 3 years.
- FC asked whether the LHD will restrict visitation for unvaccinated people?
- LC reported that MoH advised on visiting requirements and will provide advice closer to 15 December.
- EMc advised that if they are required to visit due to extenuating circumstances, risk assessment will take place and managed where appropriate.

7.2 Next year plans

- LC advised that next year the LHD will focus on WHS, staff wellbeing and staff safety. All facilities have things they will need to focus on.
- PMES results people plan, and facility plans, looking at manager capabilities, skills and leadership.
- LC advised there may be audits, improve consultation practices, general improvement to safety. LHD would like staff and Unions to participate in improvement processes. Also improve facility SCC attendance.
- OB commented that sentiment is great involving union safety consultation but every time in MHS, when issues are raised, need to consult with Union so information goes out to members. What strategies do you have to consult with a majority of members and not a few?
- LC advised SCC mechanism in place. For example, MHS SCC for redevelopment. This SCC is very well attended. Better place to consult would be at SCC or USCC. PUG process run by development team is a user group. User groups not a proper group for consultation.
- OB disagreed and advised PUG information is not being escalated to SCC.
- LC advised OB to raise this at SCC.
- MM commented that consultation has been poor with regards to Union involvement in significant changes. HSRs have not been consulted. MHS patient allocation list, request it to be standardised across the service and request was denied. Involvement of Unions is not happening at the local level.
- LC acknowledges there are some issues. WHS to draft up consultation process. Give staff direction and instructions.
- MM advised consultation is not taking place. Issue raised at redevelopment SCC by HSU, ASMOF and NSWNMA.
- LC acknowledges MM comments. We need a process on how we consult with our staff and provide guidance.
- MM raised a concern that managers don't know how to consult. Basic management. It is a requirement under the WHS act involving safety of employees.
- LC advised steps and process are going to be put in place to ensure managers know what to do and what staff is to expect.
- AE commented requirement to understand the correct way to report WHS concerns. Raised ED issues. Understaffing causing patient safety concerns. Issues have been raised by nursing and medical staff.

- AE advised that at a meeting GL attended, he advised that he did not want Union representation. However, members do want Union representation. If concerns are not heard, issues will be escalated.
- EMc advised that was not what GL had said. GL proposed that we put a small working group together regarding clinical models of care, staff expertise and will involve ASMOF and small group of clinicians; not that ASMOF can't attend.
- AE advised combined working group meeting with Union reps. That is what the NSWNMA are requesting.
- LC advised issue cannot be dealt with at JCC but will have the comments minuted.
- AE raised that no correspondence was provided when an IMS is logged. No follow up from managers, no streamlined delegation on how they report WHS issues.
- AE advised no. AE to send LC IMS/WHS concerns and examples.

Item 8 Facility Staff Consultative Committee (SCC) minutes

MHS SCC minutes available for information.

Item 9 Next Meeting

The next meeting will be held on Thursday, 3 March 2022 in the WSLHD Executive Office meeting room, Level 1, Westmead Hospital.

Signed: _____ (Chair)

WSLHD Joint Consultative Committee Action Log

Meeting No: 2021/4

Meeting Date: 2 December 2021

DATE RAISED	ITEM NO	ITEM	ACTION	COMMENT	RESPONSIBLE	STATUS
02.12.21	5.1	MHS – Staffing profiles and vacancies for HSU classifications (Escalated from MHS SCC by RM)	Speak with Bill Brakoulias and provide an update at next meeting		Luci Caswell	Open
02.12.21	7.2	Reporting WHS issues	Provide LC with concerns and examples		Alice Eggleston	Open
03.12.20	6.1.2	Grading for Oral Health staff	Provide update at next meeting if available.		Dominika Nambiar	Open
2.9.2021	6.4.3	Staffing Red Areas	LC to investigate delays in recruitment process for nurses	Matter resolved	Luci Caswell	Closed Dec 2021
04.03.21	6.2.1	Interpretation of Clause 13 of the Health Employees' Condition of Employment State Award - BMDH	Confirm in writing to HSU that BMDH is 1 hospital, 2 campuses.	Information provided to RM	Dominika Nambiar	Closed Dec 2021
03.06.21	6.2.2	PINs and HSR's	LC to provide Unions with updated HSR information.	HSR information provided on 1/9/2021.	Luci Caswell	Closed Sept 2021
04.03.21	6.1.2	Implementation of recommendations from the Anderson Report	LC will provide an update, if available, at the next JCC meeting.	Recommendations from Anderson Report allocated to facility GMs. Facility based forum to be established. Can be raised at SCCs	Luci Caswell	Closed Sept 2021
03.06.21	6.1	Online Performance Management System	TS to contact LC to discuss.	Taken off line to discuss.	Tom Stevanja	Closed Sept 2021

DATE RAISED	ITEM NO	ITEM	ACTION	COMMENT	RESPONSIBLE	STATUS
04.03.21	6.2.2	Exclusion Order	RM to send email to LC with particulars of incident.	LC confirmed the matter has been resolved.	Organiser	Closed Sept 2021
04.3.21	6.4.1	Seclusion Concerns – MHS	FC to email Wade Norrie regarding issue.		HSU	Closed
04.03.21	6.2.3	Vacancies in WSLHD	HSU to send list of vacant roles to LC they claim are not being filled.	List received from HSU and response provided by LC on 21/4/21	HSU	Closed
04.03.21	6.1.1	Facilitation of COVID vaccination of Nurses and Midwives outside of Westmead Hospital	Follow up regarding transport of staff to COVID Clinic. Update to next Committee	LC emailed Mark Murphy on 11/3/21	Luci Caswell	Closed
3.12.20	7.1	NSWNMA considers restructure occurring in MHS without consultation.	GL confirmed no restructure is taking place.	NSWNMA to contact MHS for organisational structure.	NSWNMA	Closed