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TRIM Ref: NSHD/23/51803

Mr Gerard Hayes
Secretary
Health Services Union (HSU) NSW
Level 2, 109 Pitt Street
Sydney NSW 2000

*Attention: Mr Josh Dodsworth / Mr Blake Adair-Roberts
Via email: info@hsu.asn.au*

Dear Mr Hayes,

Re: Evaluation of the restructured Rehabilitation Program, Macquarie Hospital - Occupational Therapy Rotation

I am writing with regards to the outcomes of an evaluation following implementation of the Macquarie Hospital Rehabilitation program restructure. Following a lengthy and productive period of consultation the restructure of the Rehabilitation Program team in Macquarie hospital occurred in January 2023. The intent of this restructure was to promote a program that is recovery orientated and holistic, consistent with contemporary evidence based mental health rehabilitation practices

The restructure involved the creation of 1.0 FTE Rehabilitation Program Manager position as well as FTE drawn from existing current Day Program and Recreational Centre FTE as well as Occupational Therapy (OT) team, inclusive of the Rehabilitation Coordinator role. Part of the workforce restructure included a three month rotation for 3.0 FTE Occupational Therapists within the OT department. This was initiated as a result of the members input during the consultation period to further compliment strong leadership and vision, improve communication and collaboration, community integration and evidence based programs to support a holistic program of care.

Evaluation process

Since the implementation of the restructure informal feedback has been gathered from staff and consumers. Staff have provided feedback through weekly rehabilitation team meetings or individual feedback to management. Consumers have been provided opportunities for feedback during programs.

Additionally, an anonymous survey was conducted within the Rehabilitation Program team, OT Department and Consumer Peer Workforce at the end of March 2023. This feedback collection coincided with the end of first OT rotation. The survey was sent to 20 staff members of which 10 surveys were completed. The following is a summary of feedback collected since the restructure has occurred and the second three month rotation has commenced.

Benefits achieved from the restructure:

- Greater engagement and involvement of consumers in the program
- Creation of a collaborative team environment which has been achieved through:
 - Locating all team members in one office area;
 - Establishing regular formal and informal support, individual and team clinical supervision;
 - Rehabilitation Program Manager and Rehabilitation Coordinator working cohesively together;

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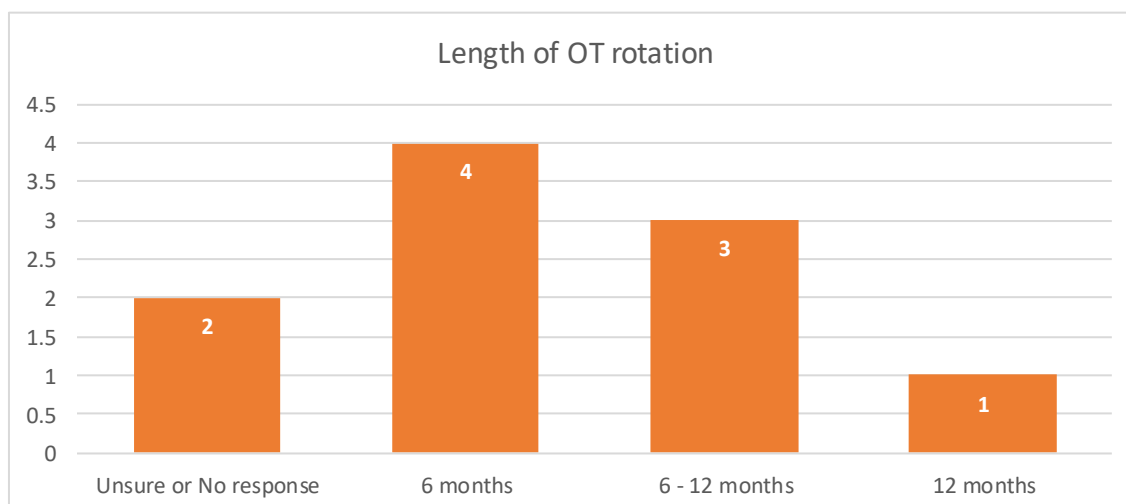
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- The Rehabilitation Program team is more focused on group program delivery and development;
- Changes and plans have been developed in regard to the further implementation of recovery orientated groups as well as evidence based activities to assist with community integration and capacity building; and
- Workforce benefits include designated multidisciplinary staff available to facilitate groups and a focus on recruitment to staff vacancies to build a team.

Challenges following the restructure:

- Staff involved in transitioning within the Rehabilitation Program acknowledged the restructure created a sense of uncertainty due to service delivery changes.
- Staff within the Rehabilitation Program and OT Staff completing their rotations have identified that the three month OT rotation is too short a period for them to adjust to their new clinical settings, service delivery and the teams they are working in.

The table below shows the responses provided from staff when asked what they recommended as a suitable length of the OT rotation within the Rehabilitation Program. Overall, the Rehabilitation Program team and OT department recommended the increase of the OT rotation to a 6 months rotation with further evaluation at the end of the 6 month period.



Next steps

It is well established that change requires time to be implemented. The restructure has been a significant change for culture, roles and responsibilities, management, and service delivery for staff within the Rehabilitation Program team, Macquarie Hospital, and consumers. To implement effective change, it is highly beneficial to provide a consistent and stable workplace environment. The following are outcomes which are hoped to be achieved by extending the OT rotation to 6 months.

1. Define clinical activities and priorities

It is important for management and staff to clearly articulate the 1:1 and group clinical interventions required across the hospital and within the Rehabilitation Program. Further consultation and collaboration is required with different multi-disciplinary team

members at each unit and across the site in order to be able to embed the changes in service provision the process would benefit from extending the period of rotation to 6 months to reduce disruption to clinical engagement.

2. Manage OT workload distribution within Rehabilitation Program and OT department

Consumers need for ongoing group and individual OT interventions has been recognised within the restructure. Continuing to define the clinical activities of an Occupational Therapist will assist with equitably managing workload demands. During the next six month rotation period, service contact forms (SCF) data will be used to analyse the OT demand and capacity. This will provide quantitative data on OT activities across the hospital and be used to create systems and process to integrate OT services across the different settings to provide seamless and integrated assessment an intervention pathways. Along with data collection Occupational Therapists within the Rehabilitation Program and on the unit will work collaboratively with one another to continue to ensure equitable workload allocation.

3. Establishment of Rehabilitation Program team

The Rehabilitation Program is a new team which is in the early stages of team formation. Extending the rotation length to 6 months will assist with improving team member relationships, team values and goal setting and service delivery through consumer rapport development and review.

These recommendations have been developed through feedback and consultation with the local members and staff engaged in the local teams and the changes will be commencing from 3 July 2023.

If you have any questions, or require further clarification, please don't hesitate to contact myself on (02) 8877 4420, or via email at Elisabeth.Manning@health.nsw.gov.au or Ms Sarah Eldridge-Smith, People and Culture Manager, MHDA and PaCH on 0407 768 740 or via email at Sarah.EldridgeSmith@health.nsw.gov.au.

Yours sincerely,



Elisabeth Manning
Service Director / Site Manager – Macquarie Hospital

Date: 13.6.23

Cc:

Anne Bajuk, Operations Manager, Macquarie Hospital
Sarah Eldridge-Smith, People and Culture Manager, Mental Health Drug and Alcohol