

8 February 2024

Mr Gerard Hayes
Secretary, Health Services Union
Level 2 109 Pitt Street
SYDNEY NSW 2000
E: info@hsu.asn.au

Attention: Mr Matthew Ramsay and Ms Tracey Gaddelin
matthew.ramsay@hsu.asn.au and tracey.gaddelin@hsu.asn.au

Dear Mr Hayes

Reference: Proposed changes to the Aboriginal Health Unit at Hunter New England Local Health District

I write to you about the proposed structural changes to the Aboriginal Health Unit at Hunter New England Local Health District (HNELHD).

While our unit has performed well to date, our fragmented approach and singular focus on health prevention strategies means that we're missing an opportunity to support Aboriginal and Torres Strait Islander people at every stage of their health journey.

Having taken on the role of Executive Director, Aboriginal Health at HNELHD in August 2023, it was immediately clear to me that our unit needed to bring together clinical and non-clinical service providers, to ensure our patients' needs are carefully considered and communicated with the right people at the right time.

To achieve this care coordination model, we must redesign how our Aboriginal Health Unit is designed and governed and what services are delivered, with a shared purpose to close the gap in health services for our Aboriginal and Torres Strait Islander communities.

Our vision is to transition current efforts under three streams of work:

- Cultural governance for clinical and community-based care,
- Coordinated care with oversight of our Aboriginal Health Workers and Practitioners; and
- Integrated Chronic care program.

In doing so there will be changes to some roles and reporting lines. It is expected there will be district-wide manager positions created to lead each of the cultural governance and integrated care streams of work, to compliment the already existing position that's responsible for chronic care programs. We anticipate a small number of roles will be directly impacted because of this change and will work with those staff affected.

These proposed changes are not a reflection of the unit's performance, rather, they have been designed so that we have an operating model that's purpose-led and reduces fragmentation for Aboriginal patients engaging with our health services.

We have commenced a consultation process with staff on these proposed changes, and we wish to work closely with the Health Services Union and consult. Further information will be provided to you once our team has worked through the details of and feedback about the proposed changes.

Initially I provide the current and proposed organisational charts for your information. The District Manager is proposed to be a Health Manager Level 3, noting there are currently two (2) Health Manager Level 3's in the existing structure. Following consultation, and recruitment, it is envisaged further consultation would occur with respect to the next tier of positions.

Should you wish to discuss this matter further, please contact me directly on 0408-472797 or via email: raylene.gordon@health.nsw.gov.au or alternatively Mr Nathan White, HR Manager on (02) 498 53291 or via email nathan.white@health.nsw.gov.au

Sincerely,



Raylene Gordon
Executive Director, Aboriginal Health
Hunter New England Local Health District

cc: Nathan White, HR Manager
Tracey McCosker PSM, Chief Executive

Attachment – current and proposed Aboriginal Health organisational charts