

The Staff Consultative Committee – Minutes

T23/73183

Date: 18 October 2023 Time: 2pm

Location: TSH Executive Meeting Room

TEM	DESCR	IPTION	NSQH					
	Welco	me & Acknowledgement to Country						
	"I would like to acknowledge the Traditional Custodians on whose land we stand today; the lands of the Dharawal people. I would also like to pay my respects to the Elders past, present and those of the future."							
L.	Meetir	ng Opening						
1.1	Attend	lance and apologies (attached)	<u>1.01</u>					
2	Declar	ation of conflict of interest – Nil declared	1.01					
3	Minute	es of the previous meeting						
	The m	inutes of the meeting held on 16 August 2023 were approved.	1.01					
. N	latters <i>i</i>	Arising						
2.1	Action	Table (attached)	<u>1.01</u>					
	2.1.1	Recruitment of vacant maintenance positions						
		As agreed with Sharon Carey, SESLHD General Manager, Corporate Services, this matter has been referred to the Corporate Services Staff Consultative Committee.						
		R Millington queried if anything had progressed since the previous meeting. R Melan advised that the gardeners position has been readvertised several times without success. Stephen Lambert has been appointed to the role of Deputy Maintenance Manager.						
	2.1.2	Number of domestic services staff for the operating theatre redevelopment						
		This matter will be referred to the Corporate Services Staff Consultative Committee. VW advised we are awaiting confirmation of our redevelopment budget. Domestic Services staffing (2 FTE) has been included in the budget buildup. Our priority is for the hybrid theatre to commence operating. R Millington advised that he has received complaints from the linen staff regarding having to work extra hours due to lack of staff. Additional staff are essential to avoid workplace injuries. VW confirmed that, with the exception of winter activity and the winter enhancement, there has been no increase to the bed base.						
	2.1.3	Vote on pay increase vote (HSU)						
		R Millington referred to the previous meeting and stated that this issue should not have been discussed at this meeting. The query should have been referred directly to the HSU. He advised that the majority of the Allied Health staff are pleased with the pay increase. The award reform is moving forward and Allied Health staff will benefit from this.						
	2.1.4	Recruitment and rosters for Operations Assistants						

	2.1.5	R Millington advised that one of his delegates requested a meeting which was subsequently changed to a staff meeting and R Millington was excluded. R Millington believes there has been no progress on this issue and reiterated there will be no 24/7 rostering until staffing is fully recruited. He stated that the self-rostering system had been working well and as a result of the process change, staff have left the organization. VW advised that work is progressing on the roster and recruitment is underway. Terms of Reference The Terms of Reference was approved, however further changes will be required to				
	O: !!	remove references to Corporate Services contained within the document.				
		ng Items				
3.1	Genera	l Manager's Update (Vicki Weeden)	<u>1.01</u>			
	 high Integrated from the control of the control	are currently preparing for the seasonal transition following winter. Activity is still . Review of the bed base, staffing profiles and activity is ongoing. grated system testing ("Blackstart") was carried out this morning to ensure the sition to the new building is successful. dover of the new Operating Theatre complex will occur in December 2023. Additional len space will be available for staff to use. R Millington requested a WH&S inspection he new building prior to it opening, as per HSU policy and requested he be provided a some dates. He stated that he had previously requested a USCC (usual practice at commencement of a redevelopment) and did not receive a response. VW stated that ughout the building project, WH&S compliance has been a priority. GA requested a atthrough be arranged for the NSWNMA to view the new building prior to opening. high level PMES results have been received. VW is awaiting to local results and will k with the Executive Team to form an action plan. hospital will celebrate its 65th birthday on Friday 27 October 2023. Members of the munity and political leaders have been invited to attend. The "Donor				
	Appreciation/Friends of Sutherland" wall will be unveiled.					
		fare being encouraged to take leave over the Christmas/New Year period.				
3.2	Corpora	te Services Update	<u>1.01</u>			
	• Secu oppo A re the s	nding item will be removed for future meetings as it has been referred to the te Services Staff Consultative Committee. Irity Services: SH advised that recruitment is continuing and he is looking into ortunities for further training for the officers to ensure restraint training is up to date. View of the training courses is underway - some staff at Garrawarra have completed Safety Intervention Course, however will need to re-do the training as it is different to course undertaken by the Killara staff.				
3.3	Nursing	& Midwifery Update (Joanne Newbury)	<u>1.01</u>			
	The recr willET a	bsence, VW advised: Clinical Workforce Team are working through the MidStart and GradStart uitment. There will be 102 graduates commencing next year. Education and support be provided to the graduates as they transition to their new career. pplauded the commitment to recruitment at TSH. She stated that whilst supporting new graduates, it is also important to support our existing staff as well.				

3.4	People & Culture Update (Aleksandra Milenkovski)	<u>1.01</u>
	 The People & Culture team are focusing on the PMES results and will be supporting and working with the sites to formulate actions plans. The Christmas/New Year shutdown period is Monday 25 December 2023 – Friday 12 January 2024 (including an extra week approved by the CE). There will be a focus on reducing excessive ADOs and annual leave. The Recruitment & Selection Policy has been updated by the MoH and as a result, our local policies will require updating. They will be circulated for comment once updated. 	
3.5	Allied Health Update (Brielle Gosch)	<u>1.01</u>
	 In BG's absence, VW advised: Allied Health Day will be celebrated today with activities for allied health staff in the Wellbeing Garden. At the recent SESLHD Allied Health Awards, two staff from TSH received awards. Caroline Zeitoun, Director of Pharmacy, was awarded Leader of the Year and Christie Longinidis was awarded Aboriginal Leader of the Year. 	
3.6	Director of Operations Update (Renata Melan)	<u>1.01</u>
	 Bronwyn Clarke has been appointed to the Acting Administration & Outpatient Services Manager position (whilst April Gosses is on secondment). Recruitment is underway to replenish the AO2 Casual Pool. A review of rosters is underway to ensure as much leave as possible can be supported during the shutdown period. Wellbeing highlights: The following events received positive feedback from staff: RUOK BBQ, Steptember and Staff Health & Wellbeing Day with free health checks for staff. 	
4. N	ew Business	
4.1	Sonographer On-call Roster/Rostering of Radiographers	
	Sonographer on-call roster:	
	R Millington advised that sonographers are unhappy with the frequency of being on-call, following the resignation of two sonographers earlier this year. Since then, one of the positions has been replaced with a trainee, due to the amount of time it takes to train sonographers.	
	Karen Fisher, Medical Imaging Manager, agreed that it is a concern for staff and advised that she is currently investigating why there have been so many callbacks. The number of call backs, although slightly lower this month, has been approximately the same for the last three months. This concern has been raised and discussed at the department's Patient Safety & Quality Meeting. The guideline for ultrasound call backs was redistributed to staff via the DMS office. It has also been raised at Clinical Council.	
	KF advised there are four ultrasound rooms, however they are currently staffed to run three rooms and the fourth is an overflow room. A trainee left after he completed his training (2 years) and following consultation with a Senior Sonographer, the position was replaced by another trainee. Subsequent to this, a qualified sonographer also resigned. Sufficient staff are required to provide a 24/7 service. It is motiving for staff to see staff being trained in this field.	

R Millington raised concern that the on-call roster was down 2 staff at present. KF stated that there is one staff member who, for medical reasons, has requested not to be on the roster. Keely Barakat, Sonographer, confirmed that last year, there were 8 sonographers on the on-call roster and this has reduced to 5 staff. KF disagreed, stating there were only 6 plus the trainee for a couple of months after he was qualified and prior to his resignation. K Barakat stated that she used to be on-call for 6 weeks per year and has currently worked 11 weeks on-call this year.

KF advised that she has requested that the sonographers respond to her by 20/10/23 advising their preference for the 7-day roster i.e. 7 days, 5 days + 2 days, 3 days + 2 days + 2 days. Once everyone has voted, the change will be implemented.

Rostering of Radiographers:

R Millington stated that an alternative roster was submitted to management that would reduce overtime, call backs and allow for radiographers to work less days (same hours), however it was rejected.

KF confirmed the radiographers requested to work a 4-day week by working 10 hours days. KF expressed concern as some areas of the department would be staffed for longer than funded for. In addition, shift penalty costs would increase and there would be issues with sick leave. The option of a 9-day fortnight was discussed and a roster was presented to KF. This option is currently being discussed and will require union agreement prior to implementation.

KF advised that all discussions have been minuted in the department meetings.

R Millington stated that feedback from his members is not consistent with the advice provided by KF and requested an urgent USCC be scheduled to discuss these issues.

VW stated that this issue needs to be discussed at a local departmental level and is happy for it to be discussed again at the TSH SCC if required.

4.2 Venue for Meal Breaks for Wardspersons

R Millington advised that the wardspersons are still not happy about losing their original space and being asked to vacate a tea room by nursing staff.

VW confirmed that the meal break rooms are available for all staff on all wards. There is also the atrium, a wellness garden and seating areas at the front of the hospital for staff to use. An additional undercroft space will open following handover of the new building. There is no dedicated cafeteria or break room other than those on the wards/units.

As discussed at the last meeting, wardspersons were clustering in the Yarrabee/CCU tea room for long periods of time during non-break periods and on occasions were asked to separate. The wardspersons roster allows for varying break times, however clustering in one space is unacceptable, particularly when the hospital is busy. There will be no dedicated tea room for Wardspersons as space is provided for all staff to use. AM confirmed that the award states that morning tea is 20 minutes (or 2 x 10 minutes) and lunch is 30 minutes. R Millington reiterated that the wardpersons were being victimized by not being able to take a break in the Yarrabee/CCU tea room, while other staff do the same but disguise it as a "meeting". ET advised that she has worked in CCU and confirmed that the tea room space is used as a meeting room and for clinical in-services. This matter is to be referred to the WH for further discussion and resolution. **CSSD Staffing Levels to Cover Annual & Other Leave** 4.3 R Millington advised that the CSSD staff are dissatisfied with current staffling levels. He stated there is inadequate staffing to cover leave and requested a review be undertaken. Staff have been refused leave, however are forced to take leave when it becomes excessive. VW stated that recruitment is an ongoing challenge. Despite budgetary constraints, all positions have been approved for recruitment. VW has not heard about the CSSD leave issue and will follow-up and report back at the next meeting. 5. Documents for Noting The minutes of the SESLHD Joint Consultative Committee on 1 June 2023 were noted. 5.1 1.01 5.2 The minutes of the TSH Work & Safety Committee on 4 August 2023 were noted. <u>1.01</u> 6. Business without notice Nil

7. Next meeting

20 December 2023 at 11am in the Executive Meeting Room.

ACTIONS – OUTSTANDING

Mtg Date	Action	Responsible	Status
16/8/23	Approval of minutes dated 22 February 2023	All	Pending
	One committee member is to review the minutes and email VW with		
	their endorsement.		
16/8/23	Recruitment and rosters for Operations Assistants	Surgical	Pending
	R Millington advised that a 24-hour roster will not be accepted until	Stream	
	the roster is fully staffed. VW advised that work is progressing on	Rep	
	the roster and recruitment is underway.		
18/10/23	Term of Reference	IJ	Pending
	The document is to be updated to remove references to Corporate		
	Services contained within the document.		
18/10/23	Inspection of New Operating Theatre Complex	VW	Pending
	HSU - R Millington requested an inspection of the new facility prior		
	to it opening. VW to refer this request to the WH&S team.		
	NSWNMA – GA requested a walkthrough be arranged prior to		
	opening. Both walkthroughs to be arranged within the next month.		
18/10/23	Sonographer On-Call Roster/Rostering of Radiographers	AM	Pending
	R Millington has requested an urgent USCC be scheduled to discuss		
	these issues. AM to facilitate the meeting.		
18/10/23	Venue for Meal Breaks for Wardspersons	WH	Pending
	This issue is to be referred back to Wendy Howard for further		
	discussion and resolution.		
18/10/23	CSSD Staffing Levels to Cover Annual & Other Leave	VW	Pending
	VW will follow-up why leave is being refused and will report back at		
	the next meeting.		

ACTIONS - CLOSED

Mtg Date	Action	Responsible	Status
22/2/23	Recruitment of vacant maintenance positions and time taken to	CS SCC	Closed
	action requests		
	This matter has been referred to the Corporate Services Staff		
	Consultative Committee.		
16/8/23	Number of Domestic Services staff for the Operating Theatre	CS SCC	Closed
	redevelopment		
	This matter has been referred to the Corporate Services Staff		
	Consultative Committee.		
16/8/23	Vote on pay increase vote (HSU)	R	Closed
	It was agreed that this issue should not have been discussed at this	Millington	
	committee. Action closed.		

National Standard 1	<u>Clinical Governance</u>
National Standard 2	Partnering with Consumers
National Standard 3	Preventing and Controlling Infections
National Standard 4	Medication Safety
National Standard 5	Comprehensive Care
National Standard 6	Communicating for Safety
National Standard 7	Blood Management
National Standard 8	Recognising and Responding to Acute Deterioration

Attendance 2023

Key: **P** Present **O/L** Present Online **A** Apologies **N** Non attendance

TITLE	ATTENDEE	22 February	19 April (No quorum)	21 June (No quorum)	16 August	18 October	20 December
General Manager TSH / Garrawarra (Chair)	Vicki Weeden	Р	A (Renata Melan)	A (Renata Melan)	Р	Р	
Director of Nursing & Midwifery	Joanne Newbury	Р	А	Р	A (Nicole Wedell)	А	
Director of Operations	Renata Melan	Р	A (Greg Cramery)	A (Greg Cramery)	А	Р	
Director of Shared Clinical Services	Brielle Gosch	-	-	-	Р	А	
Nurse Manager, Clinical Workforce Services	Wendy Howard	Р	А	А	Р	А	
Lead HR Business Partner	Aleksandra Milenkovski	P (Deb Shea)	A (Tanja Andric)	A (Tanja Andric)	P + Tanja Andric	Р	
Allied Health Representative	Mickson Yam	А	Р	Р	Р	A (Christina Ibrahim)	
Security Manager	Scott Howard	Р	Р	Р	Р	Р	
NSWNMA TSH Branch Representative	Elizabeth Turner	Р	А	Р	Р	Р	
NSWNMA Representative	Georgia Armstrong	Р	А	А	Α	Р	
HSU Representative	Randall Millington	Р	Р	А	Р	Р	
Secretariat	Jennifer Joyce	Р	Р	Р	Р	Р	

Rotational Basis:								
Head, Facilities Management, SESLHD	Clayton Tubbs	А	Р	А	Р	No longer attending.		
Head, Security Services, SESLHD	Diane O'Donaghoe Adrianna Scotti-Roberts	A P	A A	P P	P A	Refer to Corporate Services SCC		
Head, Corporate Support Services, SESLHD								
Co-opted attendee:								
SESLHD General Manager, Corporate Services	Sharon Carey	-	-	-	Р			
Medical Imaging Manager	Karen Fisher	-	-	-	-	Р		
Keely Barakat	Sonographer	-	-	-	-	Р		

CERTIFIED A CORRECT RECORD

Minutes confirmed by Committee resolution at meeting held on xx/xx/xxxx