

**PRIVATE & CONFIDENTIAL**

Mr Gerard Haynes  
Secretary Health Services Union  
Level 2, 109 Pitt Street  
SYDNEY NSW 2000

Attention: Ms Denise O'Shaughnessy

Email: Denise.OShaughnessy@hsu.asn.au

Dear Denise

**RE: Orthotics Service, Royal North Shore Hospital**

I write with reference to a recent trial in the Royal North Shore Hospital, Northern Sydney Local Health District (The District), Orthotics Service. The trial looked at the implementation of a 7 day clinical service which focused on facilitating patient discharge via improved patient flow in ICU, ED and acute wards. Orthotics is a service which has direct impact on the onward medicals team ability to perform ongoing tasks. The trial was over a 4 week period for the entirety of March. During the trial staff worked either a Saturday or a Sunday shift from 8.00am until 4.30pm, using a workforce substitution model to ensure the service still operated within allocated FTE.

During the 4 month lead in prior to implementation trial I consulted and worked closely with staff with the department who are members of HSU and other team members in the Orthotics Department; and provided updates to the RNSH NUMs, Divisional Heads and key stakeholders. The service was heavily promoted via various notification channels pre implementation. Following the completion of the trial additional feedback was sought with staff who worked shifts during the trial period and on ground level with nurses, allied health and medical staff. The project aims were analysed and evaluated.

I am pleased to advise that the trial has now been completed and to provide you with a summary of feedback:

- Staff involved within the trial noted they enjoyed working weekend shifts and would be willing to volunteer their services to be a part of an ongoing rotation roster if the service received support for continuation post trial. This was then tabled at the North Shore Ryde Health Service Orthotics meeting and at the Clinical Services Meeting at Executive level. All Orthotics staff were involved and participated in the trial.
- Feedback attained from staff and patients external to the department was positive
- Patients who were referred after hours on Friday or over the weekend could be seen by staff working the weekend service. Patients were either discharged after consult or referred on to (after consult) the onward medical team to help facilitate an earlier discharge date
- Patients on the wards noted it was wonderful to be seen on a Saturday as carers and support networks were more readily available to attend education sessions to better care for their loved ones once discharged from the hospital environment
- KPIs improved for the service. The department improved its ability to enact a referral within 48 hours by approximately 5%, an increased number of occasions of service, improved staff productivity, better response time to patients in emergency (ETP Performance) and better ability to discharge patients outside of ICU after a consult was performed. Please refer to the Patient Flow Charts (attached)
- From the feedback attained more work had to be thought about how the staff substitution model impacts patient flow for regular Mon-Fri services

*Northern Sydney Local Health District is located on the traditional lands of the Eora Nation*

All correspondence to be emailed or sent to:

[NSLHD-Mail@health.nsw.gov.au](mailto:NSLHD-Mail@health.nsw.gov.au)

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Based on the feedback attained an additional staffing model was supported to operate a 7 day service model in June 2021. Staff again relayed the benefits of implementing such a model. The key learnings:

- Preference to operating an enhanced workforce model if supported to less impact Mon-Fri workflow
- Processes improved regarding the timeliness of the referrers referring pattern. This may be because they were aware of the earlier trial phase
- Again, KPIs improved for the service. The department improved its ability to enact a referral within 48 hours by approximately 5%, an increased number of occasions of service, improved staff productivity, better response time to patients in emergency (ETP Performance) and better ability to discharge patients outside of ICU after a consult was performed

The District is now seeking to implement a 6 day service model on a temporary on-going basis during the COVID-19 pandemic response for a period of 12 months.

This is of particular importance right now during the Covid 19 pandemic as the government is supporting and requiring managers to adopt safe Covid19 Work Practices. To adopt this our team have operationalized into 2 separate teams to minimize operational impact in case a staffer became a confirmed or a suspected case of Covid-19. A 6 day service model would better separate our team. The team have unanimously supported a 6 day model when the subject was broached at the North Shore Ryde Orthotics Departmental monthly meetings from Nov-March 2021.

Staff have been advised of the district's intent to continue on-going and I am pleased to advise that there is genuine support from staff. I personally thank the staff for their support of the trial which has already led to significant improvement to the functionality and effective of the service.

Staff have also broached they would ideally like to work a 9 day/ fortnight shift model. This would support the team for having increased hours of service provision by half an hour each day. This will continue to better meet the needs of patients in ICU and ED to help patient flow and prevent bed block in case of a referral received just out of operational hours Mon-Fri. Additionally a 9 day/ fortnight shift model will also support better socially distancing of our team.

In summary, the temporary change will require staff to work a 1:6 rotating weekend shift. Please find attached a sample roster which has also been provided to staff as part of the consultation process.

I wish to reiterate that there is no impact on staff (eg no loss or reduction to FTE) and no change to the duties in the prescribed position description (attached).

If the Association does not provide feedback or request a Union Specific Consultation Committee (USCC) after today's meeting it will be deemed that the Association has no concerns with the temporary proposal and will progress to implementation accordingly.

Yours sincerely,

Thomas Paine  
**Head of Department, Orthotics**  
**Royal North Shore and Ryde Hospitals**

Date: Wednesday 15<sup>th</sup> September 2021

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