

# Proposed Restructure of ED/Admissions Administration Teams

## Consultation Feedback Update

Patient Services (Gosford & Woy Woy Hospitals)

11 January 2023



Health  
Central Coast  
Local Health District

workflow  
human element  
work life balance

patient experience

accountability

experienced staff

fairer roster

overnight shift

learning new skills

workload equity



Health  
Central Coast  
Local Health District

# Central Feedback 'Themes' To Date

- Concerns around proposed ED Administration roster specifically weekend shift allocation.
- Feedback regarding the timing of the proposed restructure communication.
- Questions regarding the training package & concerns about learning new tasks.
- Questions around the proposed workflow & ensuring a shared workload/accountability across team members.
- Concerns about the combining of admissions & comms clerk tasks for the overnight shift.
- Clarity around employment terminology of 'shift', 'non-shift' & 'day' worker.
- Feedback about the human element or "consider individual team members' circumstances, skill sets and preferences".

# Proposed Roster

- Is designed to allocate a roster line to a staff member/s and is repeated monthly. It is not proposed to rotate through the lines.
- Initially, lines could be shared across more than 1 staff member. For example: a staff member who works 3 days/wk could be 'buddied' with a staff member who works 2 days/week to fill a full time line in the roster.
- Staff who are 'buddied' have the opportunity to suggest how they work the roster line between them to help accommodate individual staff preferences for days of the week or shift times.
- Shift swaps, in line with Rostering Best Practice Guidelines, would remain available in both proposed rosters.
- Feedback suggests that the opportunity to have 2 consecutive days off on a weekend is important for work life balance. A roster option to meet this request is being developed.



# Timing of Proposed Change

- We would like to acknowledge feedback that some staff have found the timing of the change proposal challenging with non-work related pressures felt across the Christmas/New Year period.
- As very few team members have been on leave, with support from line managers and our HR Business Partners also available, the decision to proceed with consultation was made.
- Feedback has also been received from some team members acknowledging that “there’s never a good time for a restructure” and waiting until January may have found team members thinking that it “ruined the start to a new year”.



# Proposed Training Package

**A draft 8 week training package** has been developed that identifies the use of experienced staff who are subject matter experts (super-users) to lead sections of the training. An EOI would identify interested super-users from teams & broader Patient Services teams.

- **Phase 1** Group Training sessions, with super-users released from assigned shifts to provide follow up 1:1 buddy training across AM, PM and O/N shifts.
- **Phase 2** Group Training sessions with a focus on in-service training from diversity & inclusion, mental health, carers support, Aboriginal liaison, palliative care services, & a consumer representative session.
- **Weeks 9 – 12** available for ongoing buddy training or refreshers where identified.

Assistance from line managers floating across shifts to provide additional support.

Check in and feedback from team on progress and identify adjustments to package.



# Proposed Workflow

- With the exception of merging the overnight Admissions & Comms Clerk shift there is no reduction in the number of shifts or staff rostered across the day/afternoon.
- There is no increase in the overall number of tasks or workload across AM/PM shifts, but a change in the *type & distribution of tasks* performed by each staff member.
- The proposed roster will provide increased number of staff in the afternoons to share the work across a greater number of staff.
- Introducing a patient/admin workflow concept will increase accountability and equitable workload for all team members including taking and actioning requests for direct admits or NAPs from IPU.
- We will work with the team to develop protocols on workflow processes on patients arriving by ambulance, what happens at change of shift, or situations in which multiple patients need to be registered/admitted within MoH timeframe, and seek advice from other LHDs.

# Merging of Comms Clerk/Admissions Overnight Shift Tasks

- Options to have Comms Clerk (with admissions tasks) remaining at Staff Station will be explored; along with use of technology to help with communications between 2 overnight staff members that may negate the need to be located at Staff Station.
- Feedback from team members indicate there is capacity to merge the two roles with peaks/troughs in tasks coming at different times for 2 overnight staff members.
- Benchmarking of peer Hospitals indicates other LHDs commonly have 2 staff members rostered overnight to complete registration, admissions and comms clerk tasks.



# Employment Classifications

Health Employees' Conditions of Employment (State) Award 2022

## Clause 2. Definitions

- "Day Worker" (non-shift) means a worker who works their ordinary hours from Monday to Friday inclusive and who commences work on such days at or after 6.00 a.m. and before 10.00 a.m. otherwise than as part of a shift system.
- "Shift Worker" means a worker who is not a day worker as defined.

## Clause 4. Roster of Hours

- (iii) Rosters providing for shift work shall not be introduced into any hospital or health institution or section thereof until such time as the proposals are discussed with the Union by the employer.



# The Human Element of Change

- A key objective of the proposed change is to retain all current ED & Admissions team members; there are no plans to terminate employment or make staff redundant.
- Short-term flexible workplace options would be considered to help team members manage the transition to the proposed roster.
- The consultation phase is the 'listening to team feedback' phase which in turn may guide the process to a change in outcome which considers staff, resources and the overarching goal, which is to improve service to patients.
- The proposed roster allows team members to be 'buddied' with others to provide a phased approach towards the identified workforce demand profile while considering the skills and experience of individual team members.
- All team members are encouraged to engage with EAP for extra support if needed.



# Consultation Plan Timeframe Update

Consultation Step	Communication Tool	Responsible	Proposed dates
3. Staff consultation document – copy of presentation	Email - staff consultation document, copy of presentation to all involved, following the completion of the pre-arranged teams' meetings.	PSM, HRBP	14 December 2022 <b>Action complete</b>
4. Key stakeholder consultation	Email – relevant information to key stakeholders with a follow up meeting to discuss feedback	PSM	14 December 2022 <b>Action complete</b>
5. Union consultation letter	Email - letter to be sent to the Health Services Union (HSU) to introduce the identified opportunity of the proposed change.	PSM, HRBP	14 December 2022 <b>Action complete</b>
6. USCC	Meeting - Union Specific Consultation Committee (USCC) - Opportunity to meet with the association and their members to discuss proposed changes and receive feedback.	PSM, HRBP, HSU and members	19 January 2022
7. Response to feedback including FAQs	Email – information considered and response to feedback sent to all staff including the HSU, as necessary.	PSM	Due week beginning 30 January 2023

