

T21/3111

Restructure Consultation Paper

Drug & Alcohol Service
Population and Community Health
South Eastern Sydney Local Health District

Comments or feedback on this proposal can be submitted in writing to
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By 27 October 2021

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1. Overview of SESLHD Drug & Alcohol Services Structure

1.1 Responsibilities of SESLHD Drug & Alcohol Services

South Eastern Sydney Local Health District (SESLHD) Drug & Alcohol (D&A) Service is responsible for providing clinical services across community and hospital settings, collaboration and support for other service providers in addressing substance use in their client populations, and research, evaluation and workforce development to continue to improve services. Services include:

- Centralised Intake
- Comprehensive Assessment
- Counselling
- Case management and support
- Withdrawal management
- Opioid treatment programs
- Medication assisted treatment
- Cannabis clinics
- Psychiatric co-morbidity clinics
- D&A hospital admissions at Sydney/Sydney Eye and St George Hospitals
- Hospital D&A consultation and liaison services to SESLHD acute facilities
- 24/7 medical on-call service
- Forensic Services incl. Downing Centre Adult Drug Court and Magistrates Early Referral Into Treatment (MERIT) Program through the Sutherland Court & Downing Centre Courts
- Assertive Community Drug & Alcohol Service
- GP Consultation Liaison and Shared Care services
- Substance Use In Parenting & Pregnancy Services
- In reach services for young people provided at Headspace at Hurstville, Miranda and Bondi Junction
- In reach services at La Perouse Aboriginal Community Health Centre
- Addiction Medicine outpatient clinics at Prince of Wales, St. George and Sutherland Hospitals
- Co-located services with Prince of Wales Pain Clinic Services

Community based services are delivered from: Sutherland D&A Service (located at Caringbah); St George D&A Service (located at Kogarah) and Langton Centre D&A Service (located at Surry Hills).

In addition, SESLHD D&A Service:

- Hosts the Alcohol & Other Drug Harm Minimisation and Prevention Unit (AODHMPU) a devolved entity of the Ministry of Health Drug (MoH) & Alcohol Office. AODHMPU is responsible for the development of state-wide D&A related health promotion, educational resources and the NSW D&A Clinical Research & Improvement Network (DACRIN);

- oversees 13 SESLHD based D&A Non-Government Organisations (NGOs) contracted by the MoH to deliver specific drug and alcohol programs to people across NSW and SESLHD;
- is commissioned by MoH to develop the NSW Clinical Outcome and Quality Indicators Framework;
- is commissioned by CESPHE to lead the GP Liaison Alcohol and Drugs (GLAD) project across SESLHD.

SESLHD D&A Services are situated within the Population and Community Health Directorate and report to the Chief Executive via the Director of Population and Community Health and Executive Director, Operations.

The Director D&A Services reports to the Director, Population and Community Health through to the Executive Director, Operations and Chief Executive, SESLHD.

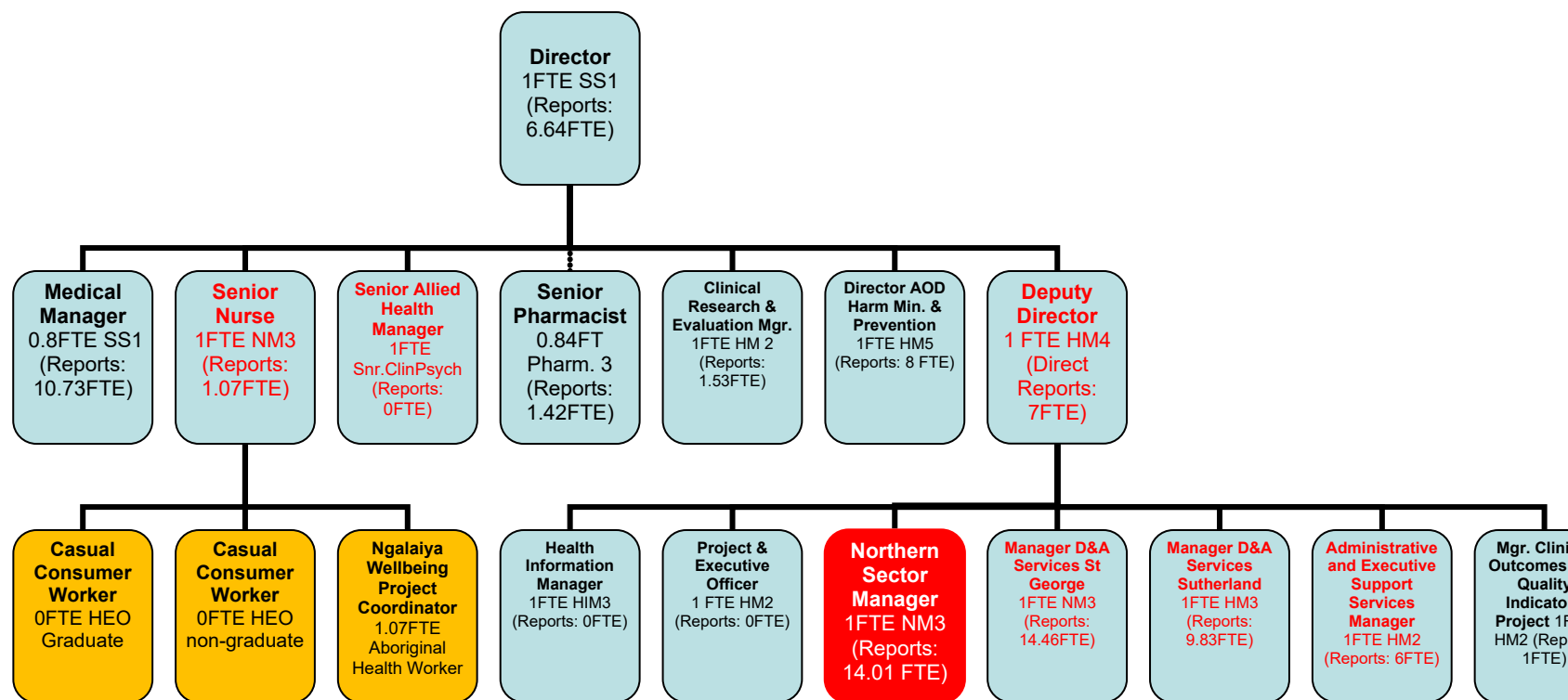
SESLHD D&A Service has a number of internal governance structures, working groups and committees, the peak of which is the Drug & Alcohol Governance Group.

The Alcohol & Other Drug Harm Minimisation and Prevention Unit, also reports through the Executive Director, Centre for Alcohol and other Drugs, Ministry of Health for its annual work plan and activities.

1.2 Current Organisational Structure

The current organisation structure is illustrated on the following page at 1.2.1 Position detail for the 116 FTE is provided in Attachment 1.

1.2.1 Current Organisation Chart: Overview



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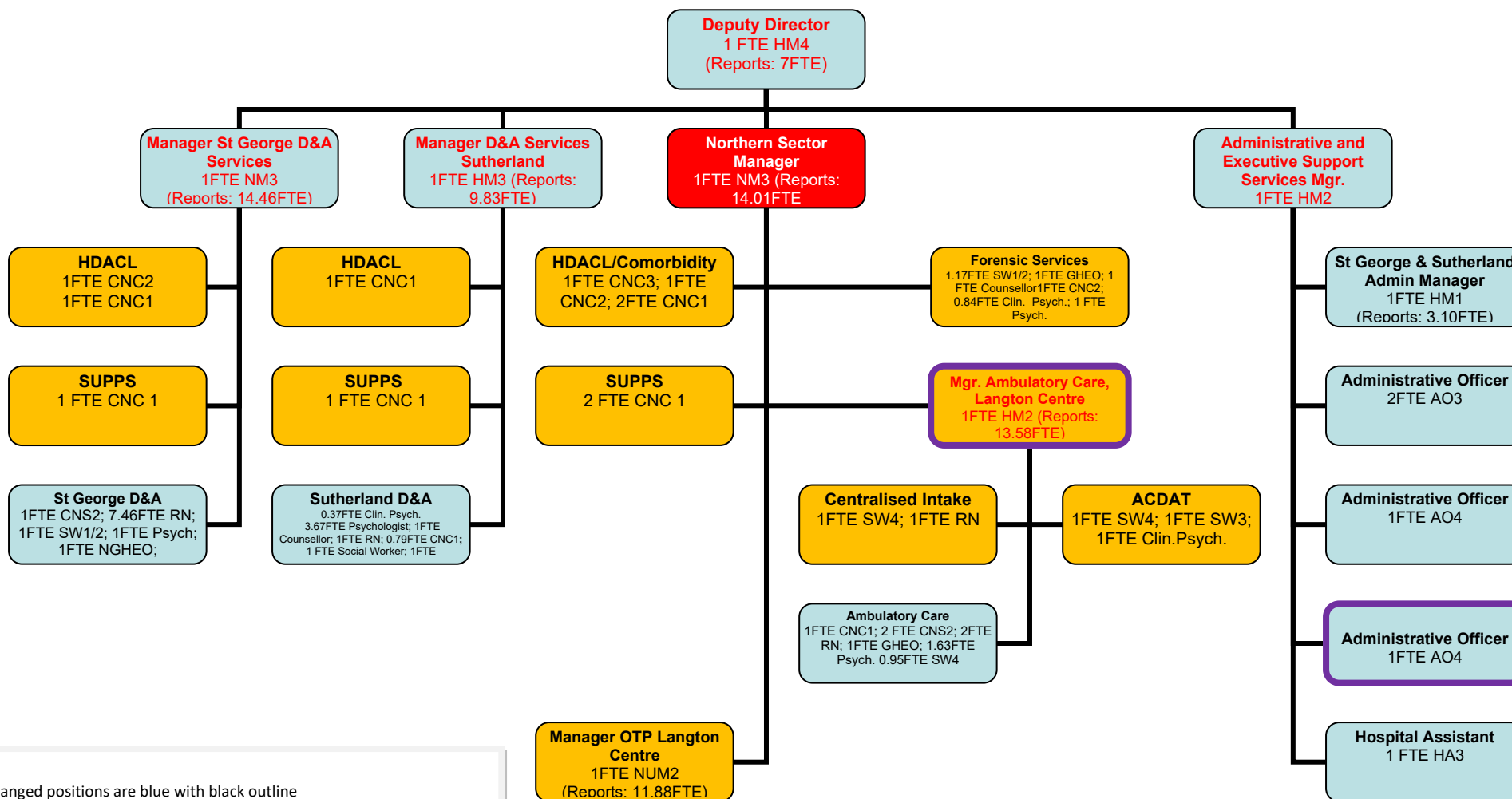
Unchanged positions are blue with black outline

Positions for deletion are coloured red

Positions with changes to their direct reports are in red font

Positions with changes in operational reporting lines are coloured orange

1.2.1 Current Organisation Chart: Deputy Director's Direct Reports (Affected staff only)



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 Unchanged positions are blue with black outline
 Positions with changes to their direct reports are in red font
 Positions with changes in operational reporting lines are coloured orange
 Positions for regrading are outlined in purple

1.3 Case for Change

In 2017, SESLHD undertook a management restructure to achieve better alignment with the overall SESLHD management structure and better support the implementation of the current Drug & Alcohol Clinical Services Plan. The 2017 restructure achieved a flatter, less hierarchical organisational structure whereby management is organised into two clusters: professional managers reporting directly to the Director, and services/operations reporting through the Deputy Director - albeit recognising that clinical leads also manage some clinical services and staff, and have “dotted line” reporting to the Deputy Director regarding operational issues (eg. budgets). A restructure of the management of D&A services in the Northern Sector of the LHD was deferred due to uncertainties regarding redevelopments of the Randwick Health campus and Maroubra Mental Health site, each with the potential for major impacts upon how D&A Services are delivered in that sector.

The current restructure proposal is driven by:

- D&A Clinical Services Plan
- Alignment with recent developments in District organisation structures and processes, including the recent SESLHD Pharmacy Restructure
- Changing and evolving models of care within Drug & Alcohol Services
- Collaborative, partnership and co-design approaches required of contemporary integrated health care systems

The D&A Clinical Services Plan outlines the strategic directions and priorities for Drug and Alcohol services within the next 5-10 years. It provides an overview of current service delivery and presents the case for change required to ensure an appropriate range of services are provided to serve the needs of the SESLHD population. A key aim of the plan is to ensure the sustainability and continued development of D&A Services through strengthening the foundations and infrastructure required to support SESLHD D&A Services over the life of the plan. A key enabler of delivery of Drug & Alcohol Services across SESLHD is optimal D&A governance and management structures for the safe, effective and efficient delivery of services across the District.

Central to the proposed restructure is to improve operational efficiency by implementing a flatter hierarchical structure for D&A Services in the Northern Sector. The restructure also aims to better align staff and services with a District wide scope with managers with District wide responsibilities; and adapt to changed models of care and increasing demands of contemporary integrated approaches to care that require enhanced collaboration and co-ordination with key partners.

Changes to management of the Northern Sector. In order to enhance operational efficiency, a revised ‘flatter’ and less hierarchical structure is proposed for the Northern Sector Drug and Alcohol Services. This would see the Langton Centre’s community based clinical services report through the existing Manager Opioid Treatment Program, Langton Centre and the Manager Ambulatory Care, Langton Centre directly to the Deputy Director, rather than through the Northern Sector D&A Manager to the Deputy Director. In 2017, SESLHD D&A undertook a management restructure to better align with the overall SESLHD management structure which had

dispensed with the idea of Northern and Southern Sectors. The 2017 restructure was predicated on the notion of a District-wide D&A service delivered from 3 sites across the District that was outlined in the 2017 Drug & Alcohol Clinical Services Plan. The 2017 restructure proposed the deletion of the Southern Sector D&A Manager position and the Northern Sector management position, creation of the St George D&A Services Manager position and the Manager D&A Services, Sutherland position, while retaining the Manager OTP, Langton Centre and Manager Ambulatory Care, Langton Centre.

The changes to the Southern Sector management structure were endorsed and have since been implemented however, the proposed changes to the Northern Sector did not proceed. This was largely due to uncertainty about the redevelopments of the Randwick Health campus and Maroubra Mental Health site, and the potential impacts of these developments upon where/how D&A Services might be delivered and the management resources that might be required. Three years on there is a clearer picture of the implications.

Changes in co-ordination and reporting of senior nursing staff working in hospital based consultation and liaison roles. It is proposed to reorganise the reporting of all D&A senior nursing staff working in hospital-based Consultation Liaison roles to report directly to the D&A Senior Nurse Manager position. This will include D&A Hospital Consultation and Liaison Services, Substance Use in Parenting and Pregnancy Services and Co-morbidity services. Currently, these positions report operationally through each of the local site managers at Sutherland, St George and Langton Centre, fragmenting co-ordination of staff and services across hospital campuses. The proposed centralisation of reporting to the D&A Senior Nurse Manager should enable better co-ordination of resources and services delivered within acute facilities across the District.

Administrative support for Director and Deputy Director. A further driver of change is the recent developments in District organisation structures and processes requiring a higher degree of administrative support for the Director and Deputy Director, including diary management and executive correspondence, than was previously required. It is proposed to address this by reclassifying the vacant Admin Officer Level 4 position to an Admin Officer Level 6 Admin to provide administrative support to the Director and Deputy Director in addition to the existing administrative duties of the position.

2. Proposed SESLHD Drug & Alcohol Services Structure

2.1 Proposed Organisation Structure

The proposed organisation structure is illustrated on the following page at 2.2.1. Position detail for the 116 FTE is provided in Attachment 2.

In the proposed structure the current Northern Sector Manager position is deleted and the Manager Opioid Treatment Program, Langton Centre and Manager Ambulatory Care, Langton Centre report directly to the Deputy Director.

It is proposed that the Forensic Services staff currently reporting to the Northern Sector Manager will report directly to the Manager Ambulatory Care, Langton Centre position and that the substantively vacant Manager Ambulatory Care, Langton Centre position is regraded (currently HM-2) to a Nurse Unit Manager 2 to optimise flexibility of the unit staffing profile and capacity to deal with variety of clinical presentations.

Under the proposed structure, the Consultation Liaison, Comorbidity & Chemical Use in Pregnancy staff currently reporting to the Northern Sector Manager report directly to the Senior Nurse Manager position. In addition, the reporting lines for the Consultation Liaison and Substance Use in Pregnancy & parenting (SUPPS) services and staff that currently report to the Manager D&A Service, Sutherland and Manager St George D&A Services are also proposed to change, reporting instead directly to the Senior Nurse Manager.

The D&A consumer workforce reporting lines are currently to the Senior Nurse Manager, and this restructure provides an opportunity to formally redirect these positions to report to the recently appointed Senior Allied Health Manager.

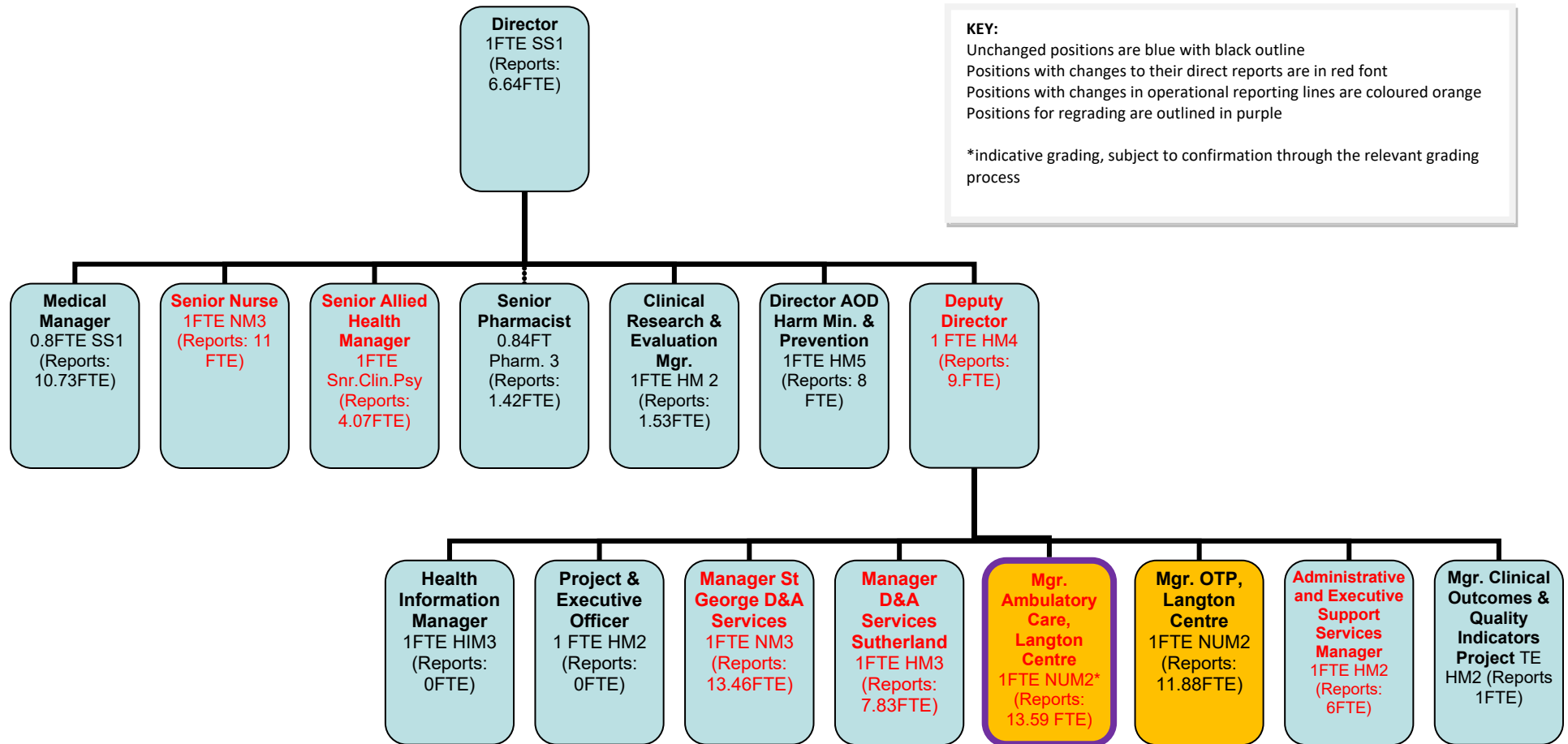
Similarly, the District facing Assertive Community D&A Team (ACDAT) currently report to the Manager Ambulatory Care, Langton Centre and the restructure provides an opportunity to formally redirect the reporting of these District facing Allied Health positions to the Senior Allied Health Manager.

It is proposed that the savings from the deletion of the Manager D&A Services Northern Sector position will go to wards addressing the shortfall in funds for the current D&A staffing establishment.

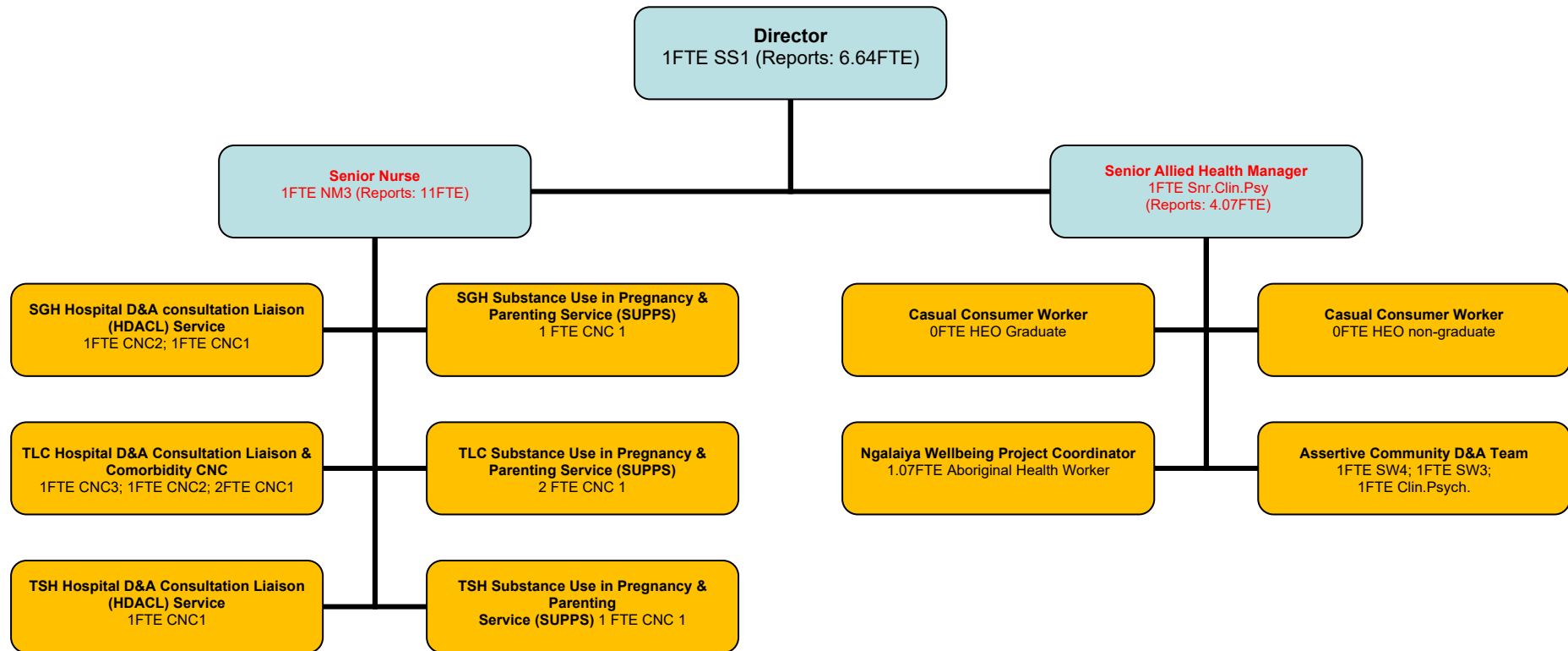
It is proposed that the D&A Centralised Intake Service and staff which currently reports to the Manager Ambulatory Care, Langton Centre will report directly to the Manager St George Drug & Alcohol Service.

A further proposal is to reclassify the substantively vacant Administrative Officer Level 4 position located at the Langton Centre to Administrative Officer Level 6 to provide administrative support to the Director in addition to the existing administrative duties of the position

2.1.1 Proposed Organisational Chart: Overview

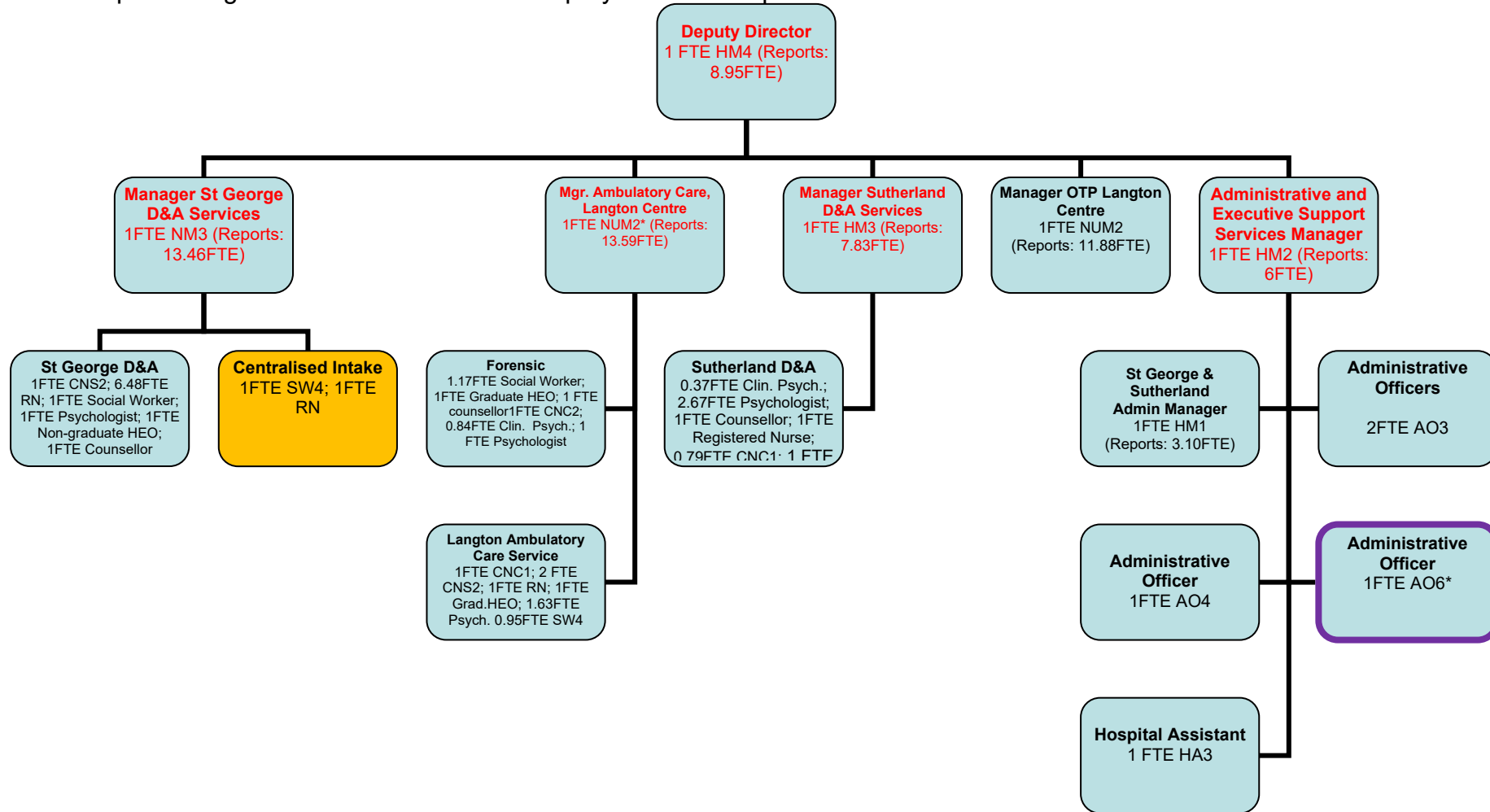


2.1.2 Proposed Organisational Chart: detail Director's reports



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 Unchanged positions are blue with black outline
 Positions with changes to their direct reports are in red font
 Positions with changes in operational reporting lines are coloured orange
 process

2.1.3 Proposed Organisational Chart – detail Deputy Director’s reports



KEY:
 Unchanged positions are blue with black outline
 Positions with changes to their direct reports are in red font
 Positions with changes in operational reporting lines are coloured orange
 Positions for regrading are outlined in blue

*indicative grading, subject to confirmation through the relevant grading process

3. Proposed changes to Position Descriptions

3.1 Summary of Proposed changes

Changes	Number of positions affected	Comments
Positions for deletion	1	Net decrease of 1FTE – Nurse Manager 3
Positions with changes to direct report lines	35	N/A

3.2 Positions of Deletion or Reduction

No.	Position Title and Grade	Summary of Proposed Change	Filled or Vacant	Incumbent affected
1	Manager D&A Services, Northern Sector <i>Nurse Manager Grade 3</i>	<p>Deletion of position.</p> <p>Transfer of line management responsibilities for Hospital Consultation Liaison CNC, SUPPS CNC and Comorbidity CNC to District D&A Senior Nurse position.</p> <p>Transfer of line management responsibilities for Forensic Services to Manager Ambulatory Care, Langton Centre.</p> <p>Transfer of line management responsibilities for Manager OTP, Langton Centre & Manager Ambulatory Care, Langton Centre, to Deputy Director.</p>	Filled	Yes

3.3 Positions with changes to Reporting Lines

No.	Position Title and Grade	Summary of Proposed Change	Filled or Vacant	Incumbent affected
1	Consumer Worker <i>Health Education Officer Graduate</i>	Change in direct reporting line to Senior Allied Health Manager	Filled	No
2	Consumer Worker <i>Health Education Officer Non-Graduate</i>	Change in direct reporting line to Senior Allied Health Manager	Filled	No
3	Ngaliya Project Coordinator <i>Senior Aboriginal Health Worker</i>	Change in direct reporting line to Senior Allied Health Manager	Filled	No
4	Consumer Worker <i>Aboriginal Health Worker</i>	Change in direct reporting line to Senior Allied Health Manager	Vacant	No
5	Social Worker, Assertive Community Drug & Alcohol Team <i>Social Worker Level 4</i>	Change in direct reporting line to Senior Allied Health Manager	Vacant	No
6	Social Worker, Assertive Community Drug & Alcohol Team <i>Social Worker Level 3</i>	Change in direct reporting line to Senior Allied Health Manager	Filled	No
7	Neuropsychologist, Assertive Community Drug & Alcohol Team <i>Clinical Psychologist</i>	Change in direct reporting line to Senior Allied Health Manager	Filled	No
8	Hospital Consultation & Liaison CNC, St George D&A <i>Clinical Nurse Consultant Grade 2</i>	Change in direct reporting line to Senior Nurse	Filled	No
9	Hospital Consultation & Liaison CNC, St George D&A <i>Clinical Nurse Consultant Grade 2</i>	Change in direct reporting line to Senior Nurse	Filled	No
10	SUPPS CNC, St George <i>Clinical Nurse</i>	Change in direct reporting line to Senior	Filled	No

No.	Position Title and Grade	Summary of Proposed Change	Filled or Vacant	Incumbent affected
	<i>Consultant Grade 1</i>	Nurse		
11	Hospital Consultation & Liaison CNC, Sutherland D&A <i>Clinical Nurse Consultant Grade 1</i>	Change in direct reporting line to Senior Nurse	Filled	No
12	SUPPS CNC, Sutherland D&A <i>Clinical Nurse Consultant Grade 1</i>	Change in direct reporting line to Senior Nurse	Filled	No
13	Hospital Consultation & Liaison CNC, Northern Sector D&A <i>Clinical Nurse Consultant Grade 3</i>	Change in direct reporting line to Senior Nurse	Filled	No
14	Hospital Consultation & Liaison CNC, Northern Sector D&A <i>Clinical Nurse Consultant Grade 2</i>	Change in direct reporting line to Senior Nurse	Filled	No
15	Hospital Consultation & Liaison CNC, Northern Sector D&A <i>Clinical Nurse Consultant Grade 1</i>	Change in direct reporting line to Senior Nurse	Filled	No
16	SUPPS CNC, Northern Sector D&A <i>Clinical Nurse Consultant Grade 1</i>	Change in direct reporting line to Senior Nurse	Filled	No
17	SUPPS CNC, Northern Sector D&A <i>Clinical Nurse Consultant Grade 1</i>	Change in direct reporting line to Senior Nurse	Filled	No
18	Comorbidity CNC, Northern Sector D&A <i>Clinical Nurse Consultant Grade 1</i>	Change in direct reporting line to Senior Nurse	Filled	No
19	Manager OTP, Langton Centre	Change in direct reporting line to Deputy	Filled	No

No.	Position Title and Grade	Summary of Proposed Change	Filled or Vacant	Incumbent affected
	<i>Nurse Unit Manager 2</i>	Director		
20	Manager Ambulatory Care, Langton Centre <i>Nurse Unit Manager 2</i>	Change in direct reporting line to Deputy Director Change in classification to include NUM2	Filled	No
21	MERIT Worker, Forensic Services Langton Centre <i>Social Worker Level 1/2</i>	Change in direct reporting line to Manager Ambulatory Care, Langton Centre	Filled	No
22	MERIT Worker, Forensic Services Langton Centre <i>Social Worker Level 1</i>	Change in direct reporting line to Manager Ambulatory Care, Langton Centre	Filled	No
23	MERIT Worker, Forensic Service Centre/Langton Centre <i>Graduate Health Education Officer</i>	Change in direct reporting line to Manager Ambulatory Care, Langton Centre	Filled	No
24	MERIT Worker, Forensic Service Langton Centre <i>Counsellor Level 1</i>	Change in direct reporting line to Manager Ambulatory Care, Langton Centre	Filled	No
25	Clinical Nurse Consultant, Forensic Service Langton Centre <i>Court Clinical Nurse Consultant Grade 2</i>	Change in direct reporting line to Manager Ambulatory Care, Langton Centre	Filled	No
26	Clinical Psychologist, Forensic Service Langton Centre <i>Clinical Psychologist</i>	Change in direct reporting line to Manager Ambulatory Care, Langton Centre	Filled	No
27	Psychologist, Forensic Services Langton Centre <i>Psychologist</i>	Change in direct reporting line to Manager Ambulatory Care, Langton Centre	Vacant	No
28	Social Worker/Intake Officer <i>Social Worker Level 4</i>	Change in direct reporting line to Manager St George D&A	Filled	No
29	D&A Clinician/Intake Officer	Change in direct reporting line to	Filled	No

No.	Position Title and Grade	Summary of Proposed Change	Filled or Vacant	Incumbent affected
	<i>Registered Nurse</i>	Manager St George D&A		
30	Manager D&A Services, St George <i>Nurse Manager 3</i>	Change in direct reports	Filled	No
31	Manager D&A Service, Sutherland <i>Health Services Manager 3</i>	Change in direct reports	Filled	No
32	Senior Allied Health Manager <i>Senior Clinical Psychologist</i>	Change in direct reports	Filled	No
33	Corporate Service Manager, D&A Services <i>Health Services Manager 2</i>	Change in direct report grading	Filled	No
34	Deputy Director, D&A Services <i>Health Services Manager 4</i>	Change in direct reports	Filled	No
35	Senior Nurse, D&A Services <i>Nurse Manager 3</i>	Change in direct reports	Filled	No

3.4 New positions

No.	Position Title	Summary of Change
1	Manager Ambulatory Care, Langton Centre (vacant) <i>Nurse Unit Manager 2</i>	Regrading of an existing Health Manager Level 2 position, which is substantively vacant and temporarily filled up to Feb 2021. Position will take on Forensic Service, Langton Centre from the Manager DA& Services, Northern Sector position.
2	Administrative Officer (vacant) <i>Administrative Officer Level 6</i>	Regrading of an existing vacant Administrative Officer 4 position. Position will take on administrative duties of the existing position with additional diary management functions to support the executive staff and Director.

4. The recruitment and matching process

There is no matching process as the position of Manager D&A Services, Northern Sector is deleted and the new positions are proposed at a lower classification and grade.

No.	Position Title	Matching expected	Position matched to
1.	Manager D&A Services, Northern Sector Manager <i>Nurse Manager Grade 3</i>	No	N/A

New Positions

The following new positions will be filled through a merit-based recruitment and selection process, open internally and externally.

No.	Position Title
1	Manager Ambulatory Care, Langton Centre (vacant) <i>Proposed as Nurse Unit Manager Level 2</i>
2	Administration Officer (vacant) <i>Proposed as Administrative Officer Level 6</i>

Staff members will be able to apply for advertised positions. NSW Health PD2012_021 Managing Excess Staff of the NSW Health Service will be followed as required for any staff members who do not obtain positions within the new structure.

5. Consultation

This Restructure Consultation Paper and the draft position descriptions will be released for consultation for three weeks.

The Director Drug & Alcohol (D&A) Services will have discussions with all members of the D&A Services team who are directly impacted by the proposal during the consultation period.










The Director, D&A Services will consider feedback from all staff members and the District Director Pharmacy Services (for pharmacist positions). Written feedback should be provided to Michelle Schulz, Project Officer via email Michelle.Schulz@health.nsw.gov.au



The Health Services Union (HSU) and the New South Wales Nurses and Midwives' Association (NSWNMA) will be notified of the proposal and provided with the Restructure Consultation Paper, as well as an opportunity to comment on the proposal.

6. Restructure Timeframe

Task	Documentation/Task	Timeframes (indicative) Week Commencing
Consultation period with staff and unions commences	Restructure Consultation Paper and draft position descriptions sent to all staff and unions	6 October 2021
Consultation period closes		27 October 2021
Feedback reviewed and considered	Restructure Consultation Paper Feedback from consultation	3 November 2021
Final consultation document incorporating any changes identified during consultation circulated	Restructure Consultation Paper (Final)	12 November 2021
Written advice issued to affected staff	Letter to advise of 'affected status'	12 November 2021
Process of direct matching of affected staff to positions in the new structure	Letter to advise of matching to position	19 November 2021
Vacant positions advertised	Through merit selection recruitment process	19 November 2021
Selection process for positions commences	Assessment of applications and interviews	19 November 2021
Written advice issued to staff appointed to positions	Letter to advise of appointments	17 December 2021
Staff not matched or appointed to positions are declared excess	Letter to advise of "excess status" and the option to choose a voluntary redundancy or seek redeployment	17 December 2021
Voluntary redundancies (VRs) accepted/declined	Acceptance/declination forms submitted to Workforce Services	2 weeks from date of excess
Staff who accept VRs to exit SESLHD	Separation and VR processed	2 weeks from date of acceptance
Staff who decline VRs to be provided with case management and career assistance	Letter to advise of allocation of People and Culture Business Partner for case management	Date of declination
Written advice to staff unable to be placed in positions after three months of case management to receive involuntary redundancy. *Currently paused in relation to any action of involuntary redundancy	Letter to advise of involuntary redundancy	3 months from date of declination

7. Attachments

No.	Document Description	Internal Reference
1.	Current Organisation Structure - Stafflink position detail hierarchy	T21/3744  Attachment 1 current structure Position det:
2.	Proposed Organisation Structure – Stafflink position detail hierarchy	T21/3746  Attachment 2 proposed structure pc
3.	Current Position Description Manager D&A Services, Northern Sector (NM 3)	T21/3750  PN693824 Manager Drug & Alcohol Servc
4.	Current Position Description for Manager Ambulatory Care, Langton Centre (HM2)	T21/3754  PN693794 Manager Ambulatory Care .pdf
5.	Proposed Position Description for Manager Ambulatory Care, Langton Centre (NUM 2)	T21/3756  DRAFT NUM2 Amb Care Langton Centre I
6.	Current Position Description for Administrative Officer Level 4	T21/3762  Administration Officer, Level 4 Positic
7.	Proposed Position Description for Administration Officer (Admin Officer Level 6)	T21/3766  Administration and Executive Assistant_AI
8.	Current Position Description for Senior Allied Health Manager	-T21/3769  PN706131 Senior Allied Health Manager
9.	Current Position Description for Senior Nurse Manager, (NM 3)	T21/3771  PN104095 Senior Nurse Manager, Drug
10.	Current Position Description for Manager D&A Services Sutherland (HM 3)	T21/3773

No.	Document Description	Internal Reference
		 PN693833 Manager Sutherland Drug & Al
11.	Current Position Description for St George D&A Manager (NM 3)	T21/3797  PN683930 Manager Drug & Alcohol Servic

8. Endorsement

Executive Sponsor

Name	Tony Jackson
Position Title	Acting Director, Population & Community Health SESLHD
Signature	
Date	

Chief Executive

Name	Tobi Wilson
Position Title	Chief Executive, SESLHD
Signature	As per approved business case
Date	