

Consultation document to restructure and roster change for Emergency Department Administration and Admissions Officers at Gosford Hospital

1. PURPOSE

This document outlines the concept to undertake workforce consultation and seek feedback from staff of the Central Coast Local Health District (the District) Emergency Department (ED) and Admissions administration support staff and the NSW Health Services Union (HSU) in relation to an identified opportunity to improve non-clinical support for the ED and Admissions functions at Gosford Hospital.

The proposed changes to ED and Admissions administration support will be approached in accordance with the Districts' commitment to staff welfare, union consultation obligation and relevant industrial instruments.

2. BACKGROUND

The Emergency Department relocated in a larger space in May 2018 without an FTE enhancement for the administrative support team. Over the past three years minor modifications have been made to the ED administration roster to support the changed needs of the new location, increased activity levels and more recently the introduction of the Patient Experience Officers to manage the ED waiting room.

Both the Admissions and ED administrative teams have 24/7 rostering requirements to meet service delivery needs. However as there is a variance in the Award levels for the two teams – ED Administration Officers are AO2 and Admissions Officers are AO3 – this grade variance has highlighted inefficiencies in the way the teams complete the essential patient registration and admissions process with tasks split according Award level.

3. BUSINESS CASE/RESTRUCTURE SCOPE

The scope of the restructure is limited to Gosford ED Administration and Admissions Officers at Gosford Hospital.

After careful review and benchmarking, the ED Administration Supervisor, Admissions & Revenue Manager and Patient Services Manager wishes to propose:

- Disestablishing current ED Administration AO2 positions and create AO3 positions within the ED Administration team.
- AO2 staff will be affected, and a closed merit recruitment process will be followed; seeking to redeploy AO2 staff who are not appoint to an AO3 position within the ED Administration team.
- Separating the functions of Surgical Admissions (Monday – Friday rostering) and ED Admissions (Monday – Sunday rostering) to create a 0.5FTE saving.
- Merging the ED Admissions roster with the ED Administration roster, combining the tasks of the overnight Admissions Officer and ED Comms Clerk to create a further 1.39FTE saving.
- Utilising the FTE savings to fund the re-grade of the ED Administration Officers from an AO2 to an AO3.

- Transitioning all staff on the new ED administration support roster to a 24/7 roster pattern to provide equity in penalty shift opportunities, training and in-service opportunities and a consistent level of support and skill competency across all shifts recognising peak activity periods of the ED.
- Transition all staff on the new Surgical Admissions roster to a Monday – Sunday roster pattern
- Appoint permanent contracts to fill vacancies in line with identified workforce demand profile providing opportunity for increased contracted hours.

Further information will be provided to the whole of District should we progress with the proposed change. However, there is no significant impact by this structural change for the wider stakeholders.

4. PROPOSED CHANGE TO ORGANISATIONAL STRUCTURE

- There will be a potential change in position classification.
- There will be a potential change in reporting line.

With this proposed change, there will be:

- 21 x AO2 staff will be affected, closed merit recruitment process for AO3 role, redeploy if necessary.
- Disestablishment of 1.39 x FTE (AO2) from ED by combining the overnight shift tasks of the Admissions Officer and Comms Clerk.
- Disestablishment of 0.5 x FTE (AO3) from the Admissions team through improved roster efficiencies.
- Five (5) employees currently contracted as ‘non-shift workers’ will be affected by the implementation of a rotating 24/7 roster pattern. The District will work with these employees to find alternate working locations within the Patient Services team (if required).
- 13 x AO3 employees currently employed as ‘shift’ workers within the Admissions area will be afforded the opportunity to provide their preference to work in either the Surgical Admissions area or ED Administration area, for consideration.
- Seeking to include casual employees who are currently providing support to the Service for consideration of permanent contracts.
- Seeking to provide the opportunity for staff to increase hours if interested.

5. INFRASTRUCTURE/SPACE IMPACT

N/A

6. RISK ASSESSMENT

Description	Risk Rating
Disruption of service delivery during implementation	Low
Staff, patient and visitor safety	Low
Staff unrest and industrial action	Medium
Benefits are delayed or reduced	Low
Timeframes are extended	Medium
Outlays are advanced or increased	Low
Output quality (fitness for purpose) is reduced	Low
Media interest	Low

7. BENEFITS

The key benefits of the proposal include:

- Consolidated administrative support for the service across all shifts with no separation of tasks based on Award levels.
- Provides ED Administration staff the opportunity to increase their knowledge, capacity, and learnings, with an increase in hourly pay rates.
- Provides the opportunity to consolidate the rosters, reducing reliance on casual staff by increasing the number of full time and part-time hours.
- Provides an equitable shift rotation for all staff to obtain penalty rate shifts and improve their knowledge of the service by working across the full span of operational hours.
- Improved roster transparency.
- Meets the CE’s objectives to seek operational improvements that better service patients with our community and are cost effective.
- Most importantly, it provides a patient-centric approach to our workflows, which in turn improves the experience for our patients and their loved ones with our community – a key pillar of our Caring for the Coast Strategies.

8. CONSULTATION PLAN – ENGAGING AND SUPPORTING STAFF

The consultation process will be undertaken in accordance with Table 1: Consultation Plan (below). This process will entail consultation with relevant union representatives and staff and key stakeholders on the concept of service improvement and rostering changes.

Support available for staff will include:

- Individual/Group discussion with the affected/impacted employees, providing clarity about the impact of the changes as soon as is possible during the process;
- Consultation will be conducted with staff and relevant unions on ways to minimise the effects of the change;
- Support and assistance through the process from the relevant directorate line management with human resource services support to line managers if required.
- Employee Assistance Program including free and confidential, face-to-face counselling is available to all staff through AccessEAP via self-referral by calling 1800 818 728.
- All staff will be given an opportunity to participate in the consultation. As part of the consultation process, staff forums/workshops will take place as required with impacted staff. These staff will be encouraged and supported by their managers, and will be allowed sufficient time and resources to actively participate in the consultation process.
- Engagement with participating unions will be encouraged throughout the consultation process.

Table 1: Anticipated consultation plan

Consultation Step	Communication Tool	Responsible	Proposed dates
1. Initial meeting request email	<ul style="list-style-type: none"> • Email – notification to all staff of Microsoft teams meeting • HSU phone call – courtesy notification 	Patient Services Management (PSM) Human Resources Business Partner (HRBP) Team	6 December 2022 Action complete

Consultation Step	Communication Tool	Responsible	Proposed dates
2. Face to Face & Microsoft teams meeting to be held with impacted staff (Initial discussion and presentation)	Initial discussion with affected staff members, that being 'non-shift workers'. Meeting – Face to face Microsoft teams information session with staff impacted by the proposed change to introduce identified opportunity, discuss proposal to regrade role and explain process. Tuesday, 13 December 2022 2:00pm to 3:00pm 6:00pm to 7:00pm Wednesday, 14 December 2022 8:30am to 9:30am	ALL	13 – 14 December 2022 Action complete
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
4. Key stakeholder consultation	Email – relevant information to key stakeholders with a follow up meeting to discuss feedback	PSM	14 December 2022
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
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	January 2022 (Request for USCC expected within 2 weeks of the consultation letter)
7. Response to feedback	Email – information considered and response to feedback sent to all staff including the HSU, as necessary.	PSM	January – February 2023 (Within a week or two of final feedback date)
8. Consultation completion	Email - to all staff and unions concluding consultation process.	PSM, HRBP	February 2023

Consultation Step	Communication Tool	Responsible	Proposed dates
9. Closed merit selection process	Email - informing staff within the service there is an opportunity to apply for the proposed role based on a closed merit bases selection process.	PSM	February 2023
10. Matching process	Meeting - dates for review of applications and ongoing process. DATE: TBA Identify skills match process (adequate onboarding and training if required), redeployment options, re-allocation of staff etc.	PSM	February / March 2023
11. Outcome	Letter – distribution of relevant letter of offers etc.	PSM, HRBP	TBA 2023
12. Commencement of Roster	Appropriate notice will be provided in relation to roster change in accordance with Award.	PSM	TBA 2023
13. Evaluation of change	Conduct a review of change	PSM	6/12 months from implementation date

9. BUSINESS RULES TO FILL POSITIONS

Current staff within the ED Administration and Admissions Department will be invited to apply for the proposed position.

Important to note: There is endorsement to progress down a closed merit-based selection process for this change. Therefore, internal recruitment to CCLHD within the ED Administration team will occur in the first instance, seek to redeploy AO2 staff who are not appointed. If the positions are not filled, external recruitment will occur.

10. PROVIDING FEEDBACK

Stakeholders are invited to provide feedback by 3 weeks from the date of this correspondence regarding the change process. Feedback may be provided to Ms Cindy Hoad, Patient Services Manager via email Cindy.Hoad@health.nsw.gov.au and/or Ms Katrina Haines, Human Resource Business Partner, Workforce and Culture, via email Katrina.haines@health.nsw.gov.au

11. ATTACHMENTS

- Attachment 1 – Current Roster and Organisational Structure
- Attachment 2 – Proposed Roster and Organisational Structure
- Attachment 3 – Position Description – Administration Officer Level 3

Document Details

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