

**Community and Allied Health, Restructure**

**Themes from Comments from Consultation in January 2022**

**February 2022**

Staff who gave feedback were provided with an individual response specifically addressing their concerns. Feedback collected during the consultation was then themed and 8 key themes emerged from the analysis. These themes were:

1. Clarification on the role of a Clinical Stream/Program Manager;
2. Clarification on what is meant by professional support;
3. Number of nursing management positions within the structure;
4. Capacity of a district wide manager to cover a large geographic area;
5. Responsibilities for site/facility management;
6. Clarification on the role of the Allied Health Education Coordinator;
7. Allied health heads of department and
8. Evaluation of the new structure.

Theme	Response from the Northern NSW Local Health District
Clarification on the role and function of a Clinical Stream/Program Manager	<p>The local health district has recently streamed palliative care and is in the process of streaming services sitting within the Integrated Prevention and Response to Violence Abuse and Neglect Program. As part of this process these two services have and continue to develop robust and effective processes for the implementation and ongoing support of staff and services.</p> <p>The role of a clinical stream/program manager is to take a district wide approach to the strategic and operational management of the service. A district wide clinical stream/program manager can effectively oversee services across the local health district via the following strategies.</p> <ul style="list-style-type: none"> <li>- Operating with a district wide service description and model of care;</li> </ul>



	<ul style="list-style-type: none"> <li>- Operating with a district wide process for CHOC locations, data and service activity;</li> <li>- Operating with consistent workforce processes such as recruitment, orientation and ongoing management of staff (including recruitment, orientation, performance appraisals, management of leave and health roster;</li> <li>- Having a physical presence in each of the sites on a regular basis;</li> <li>- Having a clear and agreed processes for contact when not physically on site;</li> <li>- Having arrangements between the delegated site/facility manager and the clinical stream/program manager regarding site issues and</li> <li>- Operating with processes for the support of staff including regular team and case review meetings</li> </ul> <p>With the implementation of the clinical stream/program model, an important advantage of this model is that managers will have the ability to focus on a single service or program such as child and family or aged care. This will allow the managers to develop expertise in service processes and operational issues, MOH, ACI and other relevant policies and guidelines as well as evidence-based practice for their relevant clinical stream/program.</p>
<p>Clarification on what is meant by professional support.</p>	<p>Professional support refers to:</p> <ul style="list-style-type: none"> <li>- Support for clinical supervision that is appropriate to the staff members area of work. For example, a child and family speech pathologist or a palliative care nurse will receive their clinical supervision by a relevant clinician who works in their particular field. This can be implemented via peer supervision, group supervision and individual supervision sourced either internally or externally;</li> <li>- Support for professional development and</li> <li>- Support for career advancement;</li> </ul> <p>With the delegated responsibility of managers to address professional support as well as allied health and nursing education staff, this structure presents an opportunity to provide</p>

	<p>a consistent, targeted and planned approach to the professional support and ongoing education opportunities for health staff.</p>
<p>The number of nursing management positions within the structure</p>	<p>The community and allied health structure has four Nursing Unit Managers. In addition to these positions there is also the Nurse Manager, Palliative Care and the Nurse Manager who will oversee the community nursing and HITH service and the Director of Nursing who will provide senior leadership for nursing in community health. In addition to these positions there are the Clinical Stream/Program Managers who will oversee both nursing and allied health staff in the individual clinical streams/programs. With the implementation of the clinical stream/program model, an important advantage of this model is that managers will have the ability to focus on a single service or program such as child and family or aged care. This will allow the managers to develop expertise in service processes and operational issues, MOH, ACI and other relevant policies and guidelines as well as evidence-based practice for their relevant clinical stream/program building and strengthening service capacity.</p> <p>The inclusion of Nursing Unit Managers, Nurse Managers and a Director of Nursing provides a clear career pathway for nursing staff. Nursing staff are able to apply for any of the clinical stream/program manager positions in the structure.</p>
<p>Capacity of a district wide manager to cover a large geographic area.</p>	<p>The local health district has recently streamed palliative care. This role covers the geography of the local health district. As part of this process, palliative care have and continue to develop robust and effective processes for the implementation and ongoing support of services and staff.</p> <p>The role of a clinical stream/program/nursing manager is to take a district wide approach to the strategic and operational management of the service. A district wide clinical stream/program/nursing manager can effectively oversee services across the local health district via the following strategies.</p> <ul style="list-style-type: none"> <li>- Operating with a district wide service description and model of care;</li> </ul>

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<p>Responsibilities for site/facility management.</p>	<p>With the exception of the Allied Health Heads of Department all positions in the community and allied health structure are LHD wide. Given this, positions will be advertised without a specific location attached to the role. All Tier 4 and 5 positions in the structure will be responsible for site management of a particular facility/sites. At the sites where there are no Tier 4 or Tier 5 managers, managers in close proximity to these sites will be allocated to manage the facility/site. The clinical stream/program manager will have clear and agreed processes for contact when not physically on site and there will be arrangements between the delegated site/facility manager and the clinical stream/program manager regarding site issues such as safety and security.</p>
<p>Clarification on the role of the Allied Health Education Coordinator.</p>	<p>This is a new role for the local health district. The Allied Health Education Coordinator will work in collaboration with the Allied Health Manager, Clinical Stream/Program Managers, the Director of Integrated Care and Allied Health and the Department Heads to build capacity in education and training for allied health. This role will take a leadership role in the coordination of allied health education across the local health district to ensure that the educational needs of allied health are met. This role will also</p>

	<p>work in collaboration with the Clinical Nurse Educators/Nurse Educators to ensure opportunities for education are maximised.</p> <p>This role will be a starting point for the development of allied health education and will take responsibility for coordinating HETI applications, coordinating education and training and work with allied health managers to ensure that staff have access to education and training opportunities.</p>
<p>Allied Health Heads of Department.</p> <p>Issues noted include:</p> <p>Process /algorithm used to determine the split between management and clinical.</p>	<p>The implementation of the role of the Allied Health Manager supports the development of all allied health services across the local health district. In collaboration with the General Manager, this position will be responsible for the strategic and operational planning for allied health services. A key priority for this position will be the alignment of inpatient and community based allied health services who do not sit in a program. This work needs to be done in a timely manner and is a priority issue moving forward.</p> <p>In relation to what algorithm that will be used to determine the breakdown of clinical and management tasks for affected heads of department, to date, there is no pre-determined algorithm that will be used. It will be the role of the Allied Health Manager to work with each of the heads of department to determine the % breakdown. In Richmond specifically, part of this work will be to review each of the discipline services that will come into the service and assess each of the positions - both management and clinical.</p>
<p>Defined measurement of the clinical load of a department head.</p>	<p>The absence of consistently defined objective measure of clinical load in heads of department job descriptions, it is the intention that once the Allied Health Manager commences that clearly defined Performance Agreements will be put in place for all managers. It is also the intention that these agreements will include clinical/management breakdown of activities</p>

<p>Grading of positions that may experience a decrease or increase in FTE</p>	<p>All processes including the review of current management roles and function will be done in line with workforce policy and processes. Each of the positions will be reviewed and managed individually in relation to the issues relevant to that role.</p>
<p>Evaluation of the new structure</p>	<p>There is an evidence base for managing staff in both clinical streams/programs and professionally based departments. Research in both of these areas clearly articulates both the strengths and weaknesses of these two models for both clinicians and patients. It is the intention of the organisation that once the clinical stream/program managers are in place that an evaluation framework be developed that will sit alongside the changes in the structure. It is intended that this evaluation framework will be both patient-centred as well as capturing the needs of the clinicians.</p>