Health
South Eastern Sydney
Local Health District

T21/89711

The Sutherland Hospital

Clinical Program 1 - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services

Restructure Consultation Paper

May 2022

Comments or feedback on this proposal can be submitted in writing via email to:

SESLHD-TSH-ProgramsCorrespondence@health.nsw.gov.au

By 5pm, 20th June 2022

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1. Overview of TSH Program 1- Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services

1.1 Responsibilities of the Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Program

Program 1 was formed in November 2020 as a result of The Sutherland Hospital (TSH) Executive and Senior Management restructure. The formation of Program 1 brought together Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services. The alignment of these departments into this program was intended to correlate with the LHD streams as well as reflect synergy within the clinical services and to ensure appropriate financial, administrative support and the delivery of high quality safe patient care.

In partnership, the Medical Co-Director (MCD) and Co-Director Nursing and Operations (CDNO) Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services develop and deliver the Program's strategic plans, develop models of care, set objectives and targets, monitor financial and operational activity, proactively manage performance, implement organisation-wide initiatives and deliver local improvements and projects that improve performance, the patient journey, workplace culture and organisational reputation.

The MCD is responsible and accountable for providing strategic leadership and effecting high levels of clinical expertise. The MCD provides professional leadership of the Programs Medical Heads of Department and in conjunction with the Director of Medical Services (DMS), will develop medical workforce planning strategies to ensure that appropriate staffing and skill mix levels are sustainably maintained.

The CDNO is responsible and accountable for the delivery of high quality clinical services, education and research, and the day-to-day management of the Program within allocated resources. The CDNO provides professional leadership and management accountability for delivering high quality patient centred care according to nursing clinical standards and practice, and quality and safety outcomes through appropriate nurse staffing levels and skill mix. The CDNO also supports the Nurse Managers and Nurse Unit Managers in talent and performance development and enhancement of their staff and building leadership capabilities across the Program.

The Program is made up of the following departments/services and they are responsible for:

Critical Care Medicine – The Department of Critical Care Medicine provide care for patients who have suffered a serious illness or have undergone major surgery. These patients frequently require machines to support their lungs, heart and kidneys, as well as specific medications and very close monitoring. Being a highly specialised environment, a number of health care professionals work together in a team to address every aspect of the patient's needs. The team is led by a group of specialist doctors, known as intensivists, who are highly trained in this area.
CCM is made up of Intensive Care Beds (ICU) and high dependency (HDU) beds with the patient to nurse ratio is 1:1 and 1:2 respectively.

Emergency Department - The Emergency Department provides high level acute care for paediatric and adult patients in need of immediate medical attention. The team treat a range of emergency conditions including the critically ill, cardiac arrest, minor trauma, heart attacks, stroke and abdominal pain as well as mental health, aged and socially disadvantaged patients, in a multidisciplinary setting. The team consist of doctors, nurses, social workers, mental health specialist, physiotherapist and administrative staff.

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ED is made up of Triage / CIN / Ambulance bays, Resus, Fast Track, Acute, Paediatrics, Consult, Procedures and EDSSU

Gastroenterology - The Department of Gastroenterology provides inpatient services and outpatient clinics that specialise in the assessment and care for patients with gastrointestinal conditions. They works closely with the operating theatre endoscopy suite to perform procedures including gastroscopy, colonoscopy, ERCP, enteroscopy and endoscopic ultrasound.

Surgery - TSH provides emergency surgery, elective surgery and short stay surgical procedures, inpatient and outpatient care across a myriad of subspecialties, these include: Colorectal, General, ENT, Orthopaedics, Ophthalmology, Urology and Vascular. The inpatient wards are Cooinda (*meaning happy place*) containing 28 beds specialising in colorectal, general surgery, vascular, ENT and urology and Jara (*meaning bones*) containing 28 beds specialising in orthopaedic and gastroenterology.

Anaesthetics – The Department of Anaesthetics is dedicated to patient care before, during and after surgery or other invasive procedures. The team supervises post-operative pain management as well as anaesthesia and sedation for interventional procedures.

Perioperative Services – Perioperative Services consists of a large team of medical, nursing, technical and support services with specialised knowledge and skillset, who together, provide end to end safe and high quality care to surgical patients from surgical bookings, pre-admission support, day surgery, operating suite to post-operative recovery and care.

1.2 Current Organisational Structure

The current organisational structure for TSH Program 1 - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services is shown on the following page as 1.2.1.

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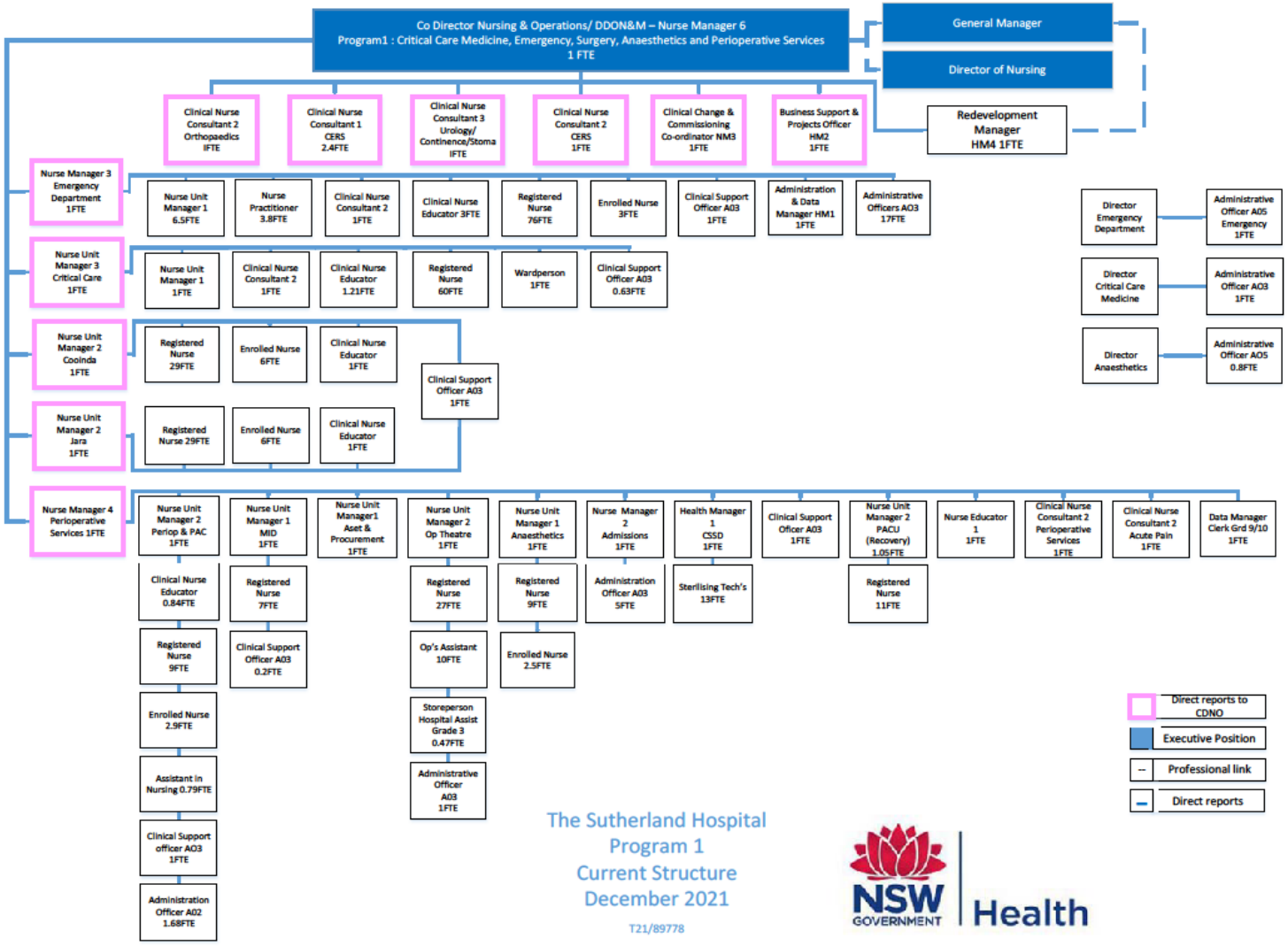
1.2.1 Current Program 1 Structure Organisational Chart



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1.3 Case for Change

1.3.1 Executive Summary

In November 2020, The Sutherland Hospital implemented the revised Executive and Senior Management structure which focused on the establishment of directorates and the alignment of departments, units and wards into Programs. The formation of Program 1 brought together Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services. The alignment of these departments, units and wards into this program was intended to correlate with the LHD streams as well as reflect synergy within the clinical services.

While the services brought together with the formation of Program 1 provide a natural synergy of clinical services, the structure of the program required a review to be undertaken, to ensure that the structure is efficient, effective, and that the clinical service leadership and management team can provide appropriate financial, administrative, operational support and drive improvements in the delivery of high quality, safe and compassionate patient care.

The overview of the program identified that the services (and resources) are not all streamed in the most appropriate clinical line within the program, examples include:

- the span of control of some positions are either too wide or too narrow
- differing levels of management, education, data and administrative support
- difficulties in mobilising resources effectively
- a reduced opportunity for career progression in nursing and administration
- enhanced leadership visibility and engagement is required for frontline teams within the program

Transforming and embedding the vision of the program model requires a realignment of the services into clinical lines and changes to positions and operational reporting lines within the Program. The proposed realignment will address the abovementioned issues and provide clinicians with:

- greater autonomy and accountability
- the ability to make their own decisions on how to improve their departments, units and wards in each clinical service line
- The ability to implement changes that will best serve themselves, their patients, staff and the organisation

1.3.2 Rationale

The purpose of the program realignment is to ensure that The Sutherland Hospital has a capable and high performing workforce that delivers required critical care, emergency surgical, anaesthetics and perioperative services to the community by linking its workforce and structure to its business objectives and strategic plan. The realignment will also ensure that structure is in place to support the Operating Theatre Redevelopment, the changing landscape of the local community and that the program has the right people, with the right skills, in the right place at the right time.

The key objectives of the realignment are to:

- Provide a strengthened structure; ensuring that the configuration of services is robust and can effectively implement all necessary changes to ensure activity and quality key performance indicators (KPI's) are met
- To implement an efficient and effective management structure

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- To improve the operational capability and efficiency of the program whilst providing improved governance
- To direct maximum resources into clinical services, to ensure a sustainable business and resource management model
- Devolution of accountability and an increased focus on quality

The ultimate objective of the restructure is to ensure a sustainable, skilled, flexible and adaptable workforce – through attracting, developing and retaining the best talent to deliver the best patient and employee experience.

Building a positive workplace culture is key to the long term viability and success of the new Program. A positive workplace culture will be built, maintained and developed through:

- Demonstrating strong, adaptive leadership and setting good examples
- Consistent and regular two-way communication with employees
- Understanding the views, values and motivations of individual employees
- Offering opportunities for professional development and growth
- Recognising and rewarding effort
- Establishing and building strong teams
- Caring about our employees
- Challenging the status quo by driving accountability across all levels
- Support frameworks for the building of an engaged and positive workplace culture are regular and constructive performance development conversations as well as the right training and development in new methodologies, systems and equipment.

The Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Program is responsible for leading, managing and directing clinical initiatives, high priority strategies and enabling innovation and improvement throughout the clinical specialties. This will enable us to build broad capability for change and models of care to achieve high performing and innovative speciality services.

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2 Proposed TSH Program 1 - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Structure

2.1 Proposed Organisational Structure

The proposed structure is necessary to support existing staff and positions which have reached capacity and to ensure that the services are able to continue to develop. It has been informed by thorough analysis of the resources required that support evidence based decision making, planning and performance, and to deliver on The Sutherland Hospital's (TSH) Business Plan while maintaining exceptional quality patient care and delivery of high quality services within the clinical specialty areas.

The strength of the proposed structure:

- Identifies clinical and operational lines of the Program and establishes functional areas within these lines
- Facilitates efficiencies in the management structure and promotes a more collaborative management approach by strengthening the responsibilities of management team meetings to support key business areas of the Service
- Improves clarity of accountability and decision making within the key positions.
- Is cost effective, ensuring the service can continue to increase clinical services while maintaining quality service delivery, supporting increasing participation
- Creates an environment that encourages internal promotion and cross skilling to support staff satisfaction.
- Promotes effective utilisation of staff and offers opportunities for succession planning.
- Additional resources are invested to deliver on the commitment to build internal capability.
- Recognises that the clinicians are best placed to identify the opportunities in their areas to improve services, will promote and enable innovation and disruption to the status quo where needed
- Enhances the ability to drive quality improvement throughout the clinical specialties, building broad capability for change and a culture that supports agility in thinking

Central to the proposed Program 1 structure is the creation of two clinical and operational lines within the Program:

- Critical Care and Emergency
- Surgery Anaesthetics and Peri Operative Services

This establishment of the two clinical and operational lines within the Program is centred around the patient while balancing the size and scale of the line for strategy development and implementation. It also maintains clear line of sight and connection to frontline service delivery and clinical flows. This structure and connection will foster integration of clinical, operational, data and financial performance across the Program.

The senior nursing and medical leadership teams will lead the clinical services within each clinical line. There will be the creation of two new positions which will assist with the operational challenges in the current Program structure and improves clarity of accountability and decision making within these key positions.

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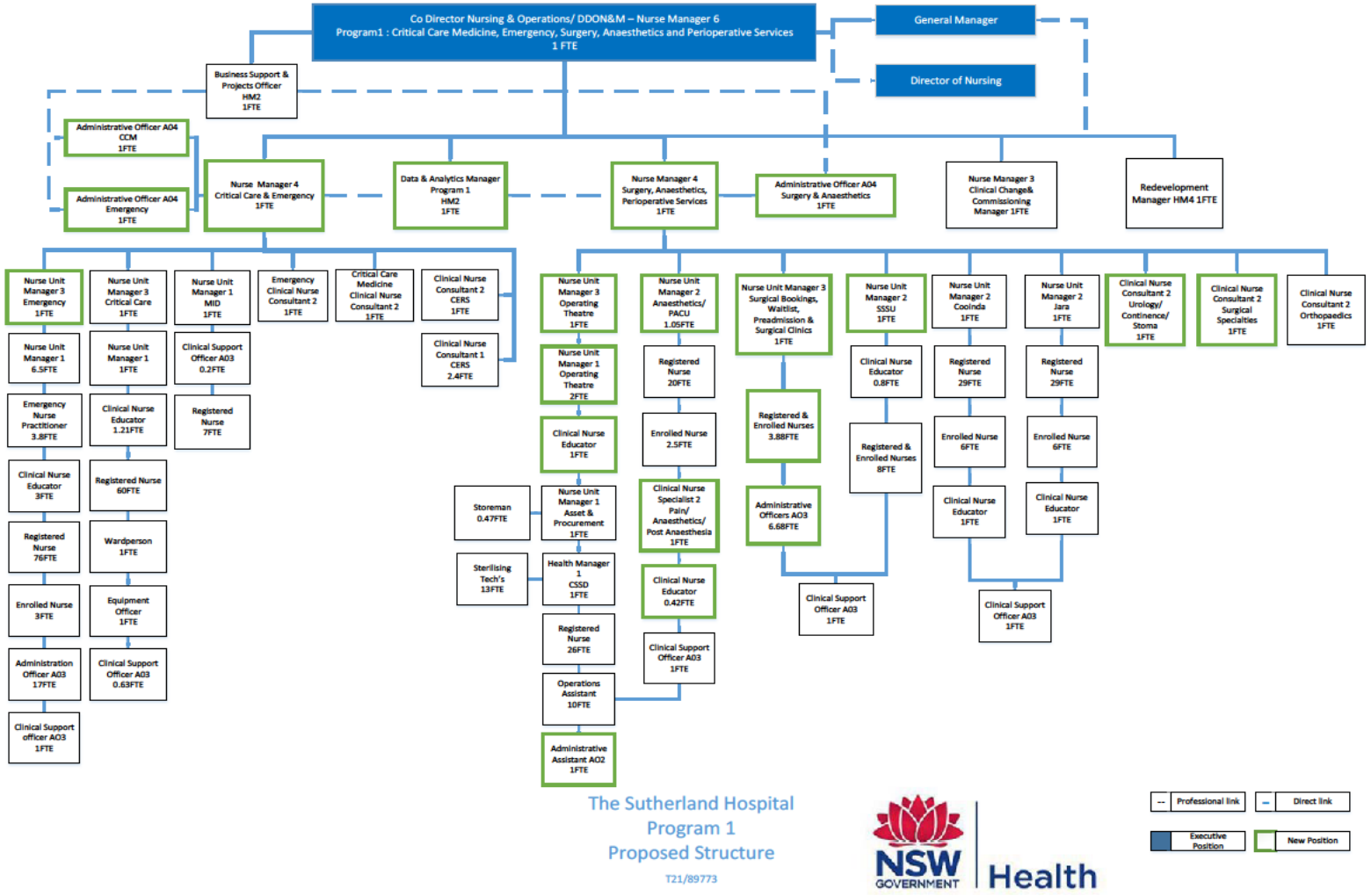
2.1.1 Proposed Organisational Structure Chart



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2.2 Proposed Changes to Position Descriptions

The two points of contact for the lines will be a Nurse Manager Grade 4. These positions have been graded in recognition of the responsibilities and reporting lines of these positions. The Nurse Manager roles will provide leadership as well as operational performance and governance, financial and human resource management, implement quality initiatives and local improvements, safety and risk management, planning, redesign and change management and contributing to the Programs strategic and operational plans.

Critical Care & Emergency

The Critical Care and Emergency clinical line will consist of:

- Critical Care Medicine
- Emergency Department
- Medical Imaging Nursing (professional reporting line)
- Data & Analytics Manager (working across the Program)

It is proposed that medical imaging nursing previously professionally reporting into Surgery, Anaesthetics and Peri Operative Services will now report into Critical Care and Emergency. This offers opportunity for close alignment with emergency department (operationally and geographically) and replicates similar structures across LHD.

It is proposed that the following positions are created:

Nursing and Operational Support Structure

Nurse Manager Grade 4 Critical Care and Emergency - is responsible for the operational, clinical and resource management ensuring the delivery of optimal and safe patient care within Critical Care Medicine (CCM) and the Emergency Department (ED). This position is pivotal to providing leadership, support and mentorship to the senior nursing leadership team to ensuring that they have the skills to lead the services. Primary responsibilities include appropriate management and co-ordination of staff which includes nurses, administrative and support staff, coordination of patient care and management of departmental processes and practice. New position created, taking on position responsibilities to support the Nursing & Administrative Operations of Critical Care and Emergency clinical line.

Nurse Unit Manager Level 3 Emergency Department - is responsible for working in collaboration and in consultation with the Nurse Manager Critical Care and Emergency to ensure the delivery of optimal and safe patient care within the Emergency Department through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM3 works closely and collaboratively with the Nurse Manager Critical Care and Emergency, clinical NUMs and CNC in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department. New position created, taking on position responsibilities to support the Nursing and Administrative Management of the Emergency Department.

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Administrative Support Structure

Data & Analytics Manager Program 1(HSM2) - Critical Care & Emergency, Surgery, Anaesthetics & Peri Operative Services. The primary purpose of this role is ensure optimal data integrity/quality, data analysis, data support and reports for the Critical Care, Emergency, Surgery, Anaesthetics and Peri Operative Services to meet the clinical, research, business intelligence and mandatory reporting requirements. This role also provides data leadership to the administrative officers within the clinical program.

There will be two administration officers aligned to Critical Care and Emergency line, reporting to the Nurse Manager Grade 4 to ensure prioritisation of administrative functions as necessary to support the departments within the clinical line. These new positions will be created from the FTE of existing administration officer positions. Consultation with the respective department heads has been undertaken. These positions will be graded consistently across the departments within the clinical lines and across the Program.

Administration Officer Level 4 Emergency Department – the administration officers will provide high level administrative support to the Emergency Department, in particular the Director and Nurse Manager - Critical Care & Emergency and key clinicians ensuring all departmental needs are met.

Administration Officer Level 4 Critical Care Medicine & Gastroenterology – the administration officer will provide high level administrative support to Critical Care Medicine & Gastroenterology, in particular the CCM Director, HoD Gastroenterology, Nurse Manager Critical Care & Emergency and key clinicians within critical care medicine and gastroenterology ensuring all departmental needs are met.

Surgery, Anaesthetics and Peri Operative Services

The Surgery, Anaesthetics and Peri Operative Services clinical line will consist of:

- Surgery
    - Cooinda Ward (General Surgery, ENT, Urology, Vascular)
    - Jara Ward (Orthopaedics, Gastroenterology)
- Anaesthetics and Perioperative Services
    - Anaesthetics, Pain and Post Anaesthesia Care Unit
    - Surgical Bookings, Waitlist, Pre Admission and Surgical Clinics
    - Operating Theatres
    - Short Stay Surgical Unit
    - CSSD

It is proposed that inpatient surgical wards previously reporting to Co-Director Nursing & Operations – Program 1 will now report into Surgery, Anaesthetics and Peri Operative Services. This offers opportunity for close alignment (operationally and geographically) and replicates similar structures across LHD. It creates the opportunity to streamline the surgical patient journey from admission right through to discharge.

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It is proposed that the following positions are created:

Nursing and Operational Support Structure

Nurse Manager Grade 4 Surgery, Anaesthetics and Peri Operative Services - is responsible for the operational, clinical and resource management ensuring the delivery of optimal and safe patient care within Surgery, Anaesthetics and Perioperative Services. This position is pivotal to providing leadership, support and mentorship to the senior nursing leadership team to ensuring that they have the skills to lead the services. Primary responsibilities include appropriate management and co-ordination of staff which includes nurses, administrative and support staff, coordination of patient care and management of departmental processes and practice. New position created, taking on position responsibilities to support the Nursing & Administrative Operations of Surgery, Anaesthetics and Peri Operative Services using existing FTE.

Nurse Unit Manager Level 3 Operating Theatre - is responsible for working in collaboration and in consultation with the Nurse Manager Surgery, Anaesthetics and Peri Operative Services to ensure the delivery of optimal and safe patient care within the Operating Theatre through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM3 works closely and collaboratively with the Nurse Manager Surgery, Anaesthetics and Peri Operative Services, Clinical NUM's and Data & Analytics Manager, in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department. New position created, taking on position responsibilities from the Nurse Unit Manager Level 2 Operating Theatres and the Nursing and Administrative management of the Operating Theatres.

Nurse Unit Manager Level 1 Operating Theatre - The Nursing Unit Manager Level 1 (NUM1) is the registered nurse in charge of the clinical operations of the Operating Theatres, reporting to the Nurse Unit Manager Level 3, Operating Theatres. New position created, taking on the clinical responsibilities from the Nurse Unit Manager Level 2 Operating Theatres and Nurse Unit Manager Level 1 Anaesthetics. This clinical NUM position will be 2.0 FTE able to cover AM and PM shift – Monday to Friday.

Clinical Nurse Educator Operating Theatre (Circulating/Instrument) - The Clinical Nurse Educator (CNE) will work in collaboration with the Nurse Unit Managers to lead, develop, co-ordinate and implement all structured learning for nurses within The Sutherland Hospital Operating Theatres. The CNE will provide clinical teaching, orientation, skill accreditation and professional development support for all nursing and support staff. New position created to provide coordination, delivery and evaluation of clinical nurse education within operating theatres.

Nurse Unit Manager Level 2 Anaesthetics and Post Anaesthesia Care Unit - The Nursing Unit Manager Level 2 (NUM2) is the registered nurse in charge of the Anaesthetics & Post Anaesthetic Care Unit (PACU). New position created, taking on position responsibilities from the Nurse Unit Manager Lvl 1 Anaesthetics and the Nurse Unit Manager Lvl 2 Recovery.

Clinical Nurse Specialist Grade 2 Pain/Anaesthetics/Post Anaesthesia Care - The CNS2 Pain, Anaesthetics and Post Anaesthesia Care is responsible for the co-ordination of activities related to pain providing consultative and education support to patients, their families and carers and health care professionals. This position involves working collaboratively with the multidisciplinary pain team, acting as a clinical expert, professional role model and change agent to promote practice development, education and quality

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initiatives that promote the delivery of safe, efficient and high quality acute pain management. New position created, responsible to the Nurse Unit Manager Anaesthetics and Post Anaesthesia Care Unit.

Clinical Nurse Educator Anaesthetics/Post Anaesthesia Care - The Clinical Nurse Educator (CNE) will work collaboratively with the Nurse Unit Manager and Clinical Nurse Specialist to lead, develop, co-ordinate and implement all structured learning for nurses and support staff within The Sutherland Hospital Anaesthetics and Post Anaesthetics Care Unit (PACU). The CNE will provide clinical teaching, orientation, skill accreditation and professional development support for all nursing staff and support staff. New position created to provide coordination, delivery and evaluation of clinical nurse education within anaesthetics and post anaesthetic care unit.

Nurse Unit Manager Level 3 Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics - is responsible for working in collaboration and in consultation with the Nurse Manager Surgery, Anaesthetics and Peri Operative Services to ensure the delivery of optimal and safe patient care within the Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM3 works closely and collaboratively with the Nurse Manager Surgery, Anaesthetics and Peri Operative Services in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department. New position created taking on position responsibilities from the Nurse Manager Gd 2 and the Pre Admission and Surgical Clinic responsibilities from the Nurse Unit Manager Level 2 Peri Operative Unit.

Registered Nurse Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics – New position created for ensuring pre procedural preparation for ensuring a successful elective surgical or procedural patient journey. This new positions will be created from the FTE of existing Registered Nurse position in Peri Operative Unit.

Enrolled Nurse Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics - New position created for ensuring pre procedural preparation for ensuring a successful elective surgical or procedural patient journey. This new positions will be created from the FTE of existing Enrolled Nurse position in Peri Operative Unit.

Registered Nurse – Surgical Bookings, Pre Admission and Direct Access Screening - New position created to provide timely assessment and care co-ordination of patients requiring elective surgical and endoscopic procedures including early referral to treatment and development and implementation of management plans for patients on the elective surgery and endoscopy waiting list in consultation with the multidisciplinary team and other stakeholders. This new position will be created from the FTE of existing Registered Nurse position in Peri Operative Unit.

Nurse Unit Manager Level 2 Surgical Short Stay Unit - The Nursing Unit Manager Level 2 (NUM2) is the registered nurse in charge of the Surgical Short Stay Unit. New position created utilising existing FTE and taking on some of the responsibilities from NUM Peri Operative Unit position.

Clinical Nurse Consultant Grade 2 Urology/Continence/Stomal Therapy - The Clinical Nurse Consultant – Urology/Continence/Stomal Therapy provides leadership and expertise in the

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care, management, education and support of patients within the Sutherland Hospital. The CNC works autonomously as well as being part of the multidisciplinary team. The CNC is responsible for the coordination of care for inpatients and outpatient related to urological, continence and stomal therapy. The CNC is an expert nurse who provides leadership, advice, recommendations on all aspects of nursing and consults on matters relating to safe and appropriate use of urological, continence and stoma related nursing practices. This is a proposed regraded position using existing FTE and graded consistently with other CNC positions within the Program. It is also proposed that previously reporting to Co-Director Nursing & Operations – Program 1 will now report into Surgery, Anaesthetics and Peri Operative Services.

Clinical Nurse Consultant Grade 2 Surgical Specialties - The Clinical Nurse Consultant – Surgical Specialties (General Surgery, ENT and Vascular) provides leadership and expertise in the care, management, education and support of patients within the Sutherland Hospital. The CNC works autonomously as well as being part of the multidisciplinary team. The CNC is responsible for the coordination of care for inpatients and outpatient related to general surgery, ENT and vascular. The CNC is an expert nurse who provides leadership, advice, recommendations on all aspects of nursing and consults on matters relating to safe and appropriate use of general surgical, ENT and vascular related nursing practices. This is a new position using existing FTE.

Administrative Support Structure

Data & Analystics Manager Program 1(HSM2) - Critical Care & Emergency, Surgery, Anaesthetics & Peri Operative Services. The primary purpose of this role is ensure optimal data integrity/quality, data analysis, data support and reports for the Critical Care, Emergency, Surgery, Anaesthetics and Peri Operative Services to meet the clinical, research, business intelligence and mandatory reporting requirements. This role also provides data leadership to the administrative officers within the clinical program. New position created, taking on position responsibilities from Data Manager Operating Theatres, ED Data Manager with the additional data requirements of Critical Care.

There will be an administration officer aligned to Surgery and Anaesthetics reporting to the Nurse Manager Grade 4 to ensure prioritisation of administrative functions as necessary to support the departments within the clinical line. This new position will be created with an enhancement and from existing FTE of an administration officer position. Consultation with the respective department head has been undertaken.

Administration Officer Level 4 Surgery & Anaesthetics – the administration officers will provide high level administrative support to Surgery & Anaesthetics, in particular, the Anaesthetics Director, HoD Surgery, Nurse Manager Surgery, Anaesthetics and Peri Operative Services and key clinicians within these departments ensuring all departmental needs are met.

Administration Officer Level 3 – Surgical Bookings, Waitlist and Pre Admissions & Surgical Clinics - This position provides administrative support to the Surgical Bookings office, Pre Admissions and Surgical Clinics and clinical staff. The position is responsible for ensuring the Surgical Bookings Office operates efficiently whilst maintaining an accurate waiting list for patients requiring a surgical procedure. The position is also responsible for providing frontline reception to patients and administrative activities for the Pre Admission and Surgical Clinics.

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Clinical Support Officer Short Stay Surgical Unit (SSSU) / Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics - New position created utilising existing FTE, taking on position responsibilities from CSO Peri Operative Unit.

Clinical Support Officer – Operating Theatres / Anaesthetics & PACU - New position created utilising existing FTE, taking on responsibilities from CSO Peri Operative Services

Administration Officer Level 2 – Operating Suite Reception - This position is responsible for providing a combination of exceptional frontline reception service to customers as well as undertaking a variety of administrative responsibilities as directed by the Operating Theatre Nurse Unit Manager and the clinical team.

The restructure plan commits to:

- ensure the new management model is efficient and effective
- establish a transition period to ensure appropriate appointments to newly defined roles
- that all necessary support and mentoring is provided in a timely manner
- ensure that all efficiencies gains are directed into clinical services to meet increased activity

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3.Proposed Summary of Position Changes

3.1 Positions for deletion

3.1 Positions for deletion - Nursing						
No	**Location**	**Position Title / Classification**	**FTE**	**Summary of Proposed Change**	**Filled or Vacant**	**Incumbent affected**
1	Emergency Department	Nurse Manager Emergency Department Gd 3	1.0	Deletion of position, Transfer of responsibilities to new roles, NM Critical Care & Emergency Gd 4 and Nurse Unit Manager Lvl 3	Filled	Yes
2	PeriOperative Services	Nurse Manager PeriOperative Services Gd 4	1.0	Deletion of position, Transfer of responsibilities to new roles, NM Gd 4 Surgery, Anaesthetics and PeriOperative Services role	Filled	Yes
3	PeriOperative Services	Nurse Unit Manager – Operating Theatre Lvl 2	1.0	Deletion of position, Transfer of responsibilities to new Nurse Unit Manager Lvl 3 Operating Theatres	Filled	Yes
4	PeriOperative Services	Nurse Unit Manager – Anaesthetics Lvl 1	1.0	Deletion of position, Transfer of responsibilities to new Nurse Unit Manager Lvl 2 Anaesthetics and Post Anaesthesia Care Unit (PACU)	Filled	Yes
5	PeriOperative Services	Nurse Unit Manager – Recovery Lvl 2	1.05	Deletion of position, Transfer of responsibilities to new Nurse Unit Manager Lvl 2 Anaesthetics and Post Anaesthesia Care Unit (PACU)	Filled	Yes
6	PeriOperative Services	Nurse Educator Gd 1 Yr 2	1.0	Deletion of position. Transfer of responsibilities relevant to scope in the new Clinical Nurse Educator Operating Theatre and new Clinical Nurse Educator Anaesthetics and Post Anaesthetics Care Unit roles	Filled	Yes
7	PeriOperative Services	Clinical Nurse Consultant Acute Pain Gd 2	1.0	Deletion of position. Transfer of responsibilities relevant to scope in the new role Clinical Nurse Specialist Gd 2 Pain, Anaesthetics and Post Anaesthetics Care	Vacant	Yes
8	PeriOperative Services	Clinical Nurse Consultant Peri Operative Services Gd 2	1.0	Deletion of position, Transfer of responsibilities to new roles Nurse Unit Manager Lvl 3 Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics and new CNC Surgical Services Gd 2	Filled	Yes
9	PeriOperative Services	Nurse Manager Admissions and Waitlist Gd 2	1.0	Deletion of position, Transfer of responsibilities to new role Nurse Unit Manager Lvl 3 Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Vacant	No
10	PeriOperative Services	Nurse Unit Manager – Peri Operative Unit Lvl 2	1.0	Deletion of position, transfer of responsibilities to new Nurse Unit Manager Lvl 2 Surgical Short Stay Unit and Nurse Unit Manager Lvl 3 Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Filled	Yes
11	PeriOperative Services	Assistant in Nursing	0.79	Deletion of position, change of model of care	Filled	Yes
12	Operating Theatres	Registered Nurse	1.0	Deletion of position, conversion of FTE towards the creation of new 2 x Nurse Unit Manager Level 1 Operating Theatres	Vacant	No

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13	Critical Care, Surgery, Anaesthetics & Perioperative Services	Clinical Nurse Consultant Urology/ Continence/Stoma Gd 3	1.0	Deletion of position. Transfer of responsibilities relevant to scope in the new role Clinical Nurse Consultant Gd 2 Urology/ Continence/Stomal Therapy.	Filled	Yes
Positions for deletion - Administration						
14	Emergency Department	Administrative Officer AO5	1.0	Deletion of position, Transfer of responsibilities to new Administrative Officer role	Filled	Yes
15	Emergency Department	Emergency Administrative & Data Manager HM Lvl 1	1.0	Deletion of position, Transfer of responsibilities to new Program 1 Data Manager, new Nurse Unit Manager Lvl 3 and new Administrative Officer role	Vacant	No
16	Critical Care Medicine	Administrative Officer AO3	1.0	Deletion of position, Transfer of responsibilities to new Administrative Officer role	Filled	Yes
17	Operating Theatres	Administrative Officer A03 Operating Theatre Reception	1.0	Deletion of position, conversion of FTE to create new Administrative Officer AO2 role	Filled	Yes
18	PeriOperative Services	Administrative Officer AO5	0.80	Deletion of position, Transfer of responsibilities to new Administrative Officer role	Vacant	No
19	PeriOperative Services	Administrative Officer – Pre Admission Clinic AO2	1.68	Deletion of position, transfer of responsibilities to changed Administrative Officer AO3 role Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	Vacant	No
20	PeriOperative Services	Data Manager Operating Theatres Transport Department Health Clerk Gd 9/10	1.0	Deletion of position, Transfer of responsibilities to new role Program 1 Data & Analytics Manager	Filled	Yes

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3.2 Positions with changed responsibilities and/or changed title

3.2 Positions with changed responsibilities or title - Nursing					
Location	**Position Title / Classification**	**FTE**	**Summary of Proposed Change**	**Filled or Vacant**	**Incumbent affected**
PeriOperative Services	Nurse Unit Manager – Peri Operative Unit Lvl 2	1.0	Change of position title to: Nurse Unit Manager - Surgical Short Stay Unit. Change in responsibilities – no longer oversee Pre Admission Clinic this responsibility has transferred to newly created Nurse Unit Manager Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Filled	Yes
PeriOperative Services	Registered and Enrolled Nurse – PeriOperative Unit	7.98	Change of position title to Registered or Enrolled Nurse Surgical Short Stay Unit (SSSU) and change of reporting to Nurse Unit Manager Level 2 Surgical Short Stay Unit (SSSU)	Filled	Yes
PeriOperative Services	Registered and Enrolled Nurse –Peri Operative Unit	3.88	Registered or Enrolled Nurse Surgical Bookings, Pre Admission & Surgical Clinics	Filled	Yes
PeriOperative Services	Clinical Nurse Educator – Peri Operative Unit	0.84	Change of position title to Clinical Nurse Educator Surgical Short Stay Unit	Filled	Yes
Positions with changed responsibilities or title - Administration					
PeriOperative Services	Administrative Officer – Lvl 3 - Admissions	5.0	Change of position title to Administrative Officer Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics and transfer of reporting to new Nurse Unit Manager Lvl 3 Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Filled	Yes
PeriOperative Services	Clinical Support Officer – Peri Operative Services AO3	1.0	Change of position title to: Clinical Support Officer – Operating Theatres / Anaesthetics & PACU. Change of CSO responsibilities: from Perioperative Services to specifically Operating Theatres / Anaesthetics & PACU	Filled	Yes
PeriOperative Services	Clinical Support Officer – Peri Operative Unit AO3	1.0	Change of position title to: Clinical Support Officer – Short Stay Surgical Unit (SSSU) / Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics. Change of CSO responsibilities: specifically from Perioperative Unit to Short Stay Surgical Unit (SSSU) / Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Filled	Yes

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3.3 Positions with changes to reporting lines

3.4 Positions with change to reporting lines - Nursing						
No	**Location**	**Position Title / Classification**	**FTE**	**Summary of Proposed Change**	**Filled or Vacant**	**Incumbent affected**
1	Program 1 Critical Care, Emergency, Surgery, Anaesthetics & PeriOperative Services	Nurse Unit Manager Lvl 2 – Cooinda Ward	1.0	Transfer of reporting line to new role, Nurse Manager Surgery, Anaesthetics and PeriOperative Services	Filled	Yes
2	Program 1 Critical Care, Emergency, Surgery, Anaesthetics & PeriOperative Services	Nurse Unit Manager Lvl 2 – Jara Ward	1.0	Transfer of reporting line to new role, Nurse Manager Surgery, Anaesthetics and PeriOperative Services	Filled	Yes
3	Program 1 Critical Care, Emergency, Surgery, Anaesthetics & PeriOperative Services	Clinical Nurse Consultant Gd 2 - CERS	1.0	Transfer of reporting line to new role, Nurse Manager Critical Care and Emergency	Filled	Yes
4	Program 1 Critical Care, Emergency, Surgery, Anaesthetics & PeriOperative Services	Clinical Nurse Consultant Gd 1 - CERS	2.42	Transfer of reporting line to new role, Nurse Manager Critical Care and Emergency	Filled	Yes
5	Program 1 Critical Care, Emergency, Surgery, Anaesthetics & PeriOperative Services	Clinical Nurse Consultant Gd 2 - Orthopaedics	1.0	Transfer of reporting line to new role, Nurse Manager Surgery, Anaesthetics and PeriOperative Services	Vacant	No
6	Emergency Department	Clinical Nurse Consultant Gd 2 – Emergency Department	1.0	Transfer of reporting line to new role, Nurse Manager Critical Care and Emergency	Filled	Yes
7	Emergency Department	Nurse Practitioners – Emergency Department	3.8	Transfer of reporting line to new role, Nurse Unit Manager Level 3 Emergency Department	Filled	Yes
8	Emergency Department	Clinical Nurse Educator – Emergency Department Nurse Unit Manager – Lvl 1 – Emergency Department Registered and Enrolled Nurse – Emergency Department	3.0 6.5 79.0	Transfer of reporting to new role, Nurse Unit Manager Level 3 Emergency Department	Filled	Yes
9	Critical Care Medicine	Nurse Unit Manager Lvl 3 – Critical Care Medicine	1.0	Transfer of reporting line to new role, Nurse Manager Critical Care and Emergency	Filled	Yes
10	Critical Care Medicine	Clinical Nurse Consultant Gd 2 – Critical Care Medicine	1.0	Transfer of reporting line to new role, Nurse Manager Critical Care and Emergency	Filled	Yes

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11	PeriOperative Services	Nurse Unit Manager Lvl 1 – Medical Imaging	1.0	Transfer of professional reporting line to new role, Nurse Manager Critical Care and Emergency	Filled	Yes
12	PeriOperative Services	Nurse Unit Manager Lvl 1 – Asset & Procurement	1.0	Transfer of reporting to new role, Nurse Unit Manager Level 3 Operating Theatres	Filled	Yes
13	PeriOperative Services	Registered Nurses – Operating Theatre	27.0	Transfer of reporting to new role, Nurse Unit Manager Level 3 Operating Theatres	Filled	Yes
14	PeriOperative Services	Registered and Enrolled Nurses - Anaesthetics	11.5	Transfer of reporting to new role, Nurse Unit Manager Lvl 2 Anaesthetics and Post Anaesthetics Care Unit (PACU)	Filled	Yes
Positions with a change to reporting lines – Administration						
15	Emergency Department	Administrative Officers AO3	17.0	Transfer of reporting to new role, Nurse Unit Manager Level 3 Emergency department	Filled	Yes
16	Emergency Department	Administrative Officer CSO AO3	1.0	Transfer of reporting to new role, Nurse Unit Manager Level 3 Emergency department	Filled	Yes
17	PeriOperative Services	Health Manager Lvl 1 - CSSD	1.0	Transfer of reporting to new role, Nurse Unit Manager Level 3 Operating Theatres	Filled	Yes
18	PeriOperative Services	Administrative Officer – Lvl 3 – Surgical Bookings, Waitlist, Pre Admission & Surgical Clinic	5.0	Transfer of reporting line to new role, Nurse Unit Manager Lvl 3 Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Filled	Yes
19	PeriOperative Services	Operating Theatre Storeman – Hospital Assistant Gd 3	0.47	Transfer of reporting line to Nurse Unit Manager Lvl 1 Asset & Procurement	Filled	Yes
20	PeriOperative Assistant	Operating Assistant	10	Transfer of reporting line to the Nurse Unit manager Lvl 3 Operating Theatres	Filled	Yes

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3.5 New positions

3.4 New positions - Nursing					
No.	**Location**	**Position Title**	**Classification / Grade**	**FTE**	**Summary of Proposed Change**
1	Program 1 Critical Care, Emergency, Surgery, Anaesthetics and PeriOperative Services – Critical Care and Emergency	Nurse Manager Critical Care and Emergency	Nurse Manager Gd 4	1.0	New position created, taking on position responsibilities to support the Nursing & Administrative Operations of Critical Care and Emergency
2	Program 1 Critical Care, Emergency, Surgery, Anaesthetics and PeriOperative Services - Surgery, Anaesthetics and PeriOperative Services	Nurse Manager Surgery, Anaesthetics and PeriOperative Services	Nurse Manager Gd 4	1.0	New position created, taking on position responsibilities to support the Nursing & Administrative Operations of Surgery, Anaesthetics and PeriOperative Services
3	Emergency and Critical Care - Emergency Department	Nurse Unit Manager – Emergency Department	Nurse Unit Manager Lvl 3	1.0	New position created, taking of position responsibilities of the Nursing and Administrative Management of the Emergency Department
4	Surgery, Anaesthetics and PeriOperative Services – Operating Theatres	Nurse Unit Manager – Operating Theatre	Nurse Unit Manager Lvl 3	1.0	New position created, taking on position responsibilities from the Nurse Unit Manager Level 2 Operating Theatres and the Nursing and Administrative Management of the Operating Theatres
5	Surgery, Anaesthetics and PeriOperative Services – Operating Theatres	Nurse Unit Manager – Operating Theatre	Nurse Unit Manager Lvl 1	2.0	New position created, taking on the clinical responsibilities from the Nurse Unit Manager Level 2 Operating Theatres and Nurse Unit Manager Level 1 Anaesthetics. Clinical NUM covering AM and PM Monday – Friday
6	Surgery, Anaesthetics and PeriOperative Services – Anaesthetics and Post Anaesthesia Care Unit	Nurse Unit Manager – Anaesthetics and Post Anaesthesia Care Unit (PACU)	Nurse Unit Manager Lvl 2	1.05	New position created, taking on position responsibilities from the Nurse Unit Manager Lvl 1 Anaesthetics and the Nurse Unit Manager Lvl 2 Recovery
7	Surgery, Anaesthetics and PeriOperative Services – Surgical Short Stay Unit	Nurse Unit Manager – Surgical Short Stay Unit	Nurse Unit Manager Lvl 2	1.0	New position created, taking on position responsibilities from the Nurse Unit Manager Lvl 2 Peri Operative Unit
8	Surgery, Anaesthetics and PeriOperative Services	Clinical Nurse Consultant Surgical Specialties	Clinical Nurse Consultant Gd 2	1.0	New position created – to support the Surgical Specialties in expert clinical consultancy
9	Surgery, Anaesthetics and PeriOperative Services – Operating Theatres	Clinical Nurse Educator – Operating Theatres (Circulating / Instrument)	Clinical Nurse Educator	1.0	New position created to provide coordination, delivery and evaluation of clinical nurse education within operating theatres.

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10	Surgery, Anaesthetics and PeriOperative Services - Anaesthetics and Post Anaesthesia Care Unit	Clinical Nurse Educator – Anaesthetics and Post Anaesthesia Care Unit	Clinical Nurse Educator	0.42	New position created to provide coordination, delivery and evaluation of clinical nurse education within anaesthetics and post anaesthetic care unit.
11	Surgery, Anaesthetics and PeriOperative Services - Anaesthetics and Post Anaesthesia Care Unit	Clinical Nurse Specialist – Pain, Anaesthetics and Post Anaesthesia Care	Gd 2	1.0	New position created, responsible for the co-ordination of activities within the acute pain service providing a consultative and education pain management support to patients, their families and carers and health care professionals.
12	Surgery, Anaesthetics and PeriOperative Services – Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Nurse Unit Manager - Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Nurse Unit Manager Lvl 3	1.0	New position created taking on position responsibilities from the Nurse Manager Gd 2 and the Pre Admission and Surgical Clinic responsibilities from the Nurse Unit Manager Level 2 PeriOperative Unit.
13	Surgery, Anaesthetics and PeriOperative Services – Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Registered Nurse – Surgical Bookings, Pre Admission and Direct Access Screening	RN	0.21	New position created to provide timely assessment and care co-ordination of patients requiring elective surgical and endoscopic procedures including early referral to treatment and development and implementation of management plans for patients on the elective surgery and endoscopy waiting list in consultation with the multidisciplinary team and other stakeholders
14	Surgery, Anaesthetics and PeriOperative Services – Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	Registered and Enrolled Nurse – Pre Admission & Surgical Clinics	RN / EN	3.67	New position created for ensuring pre procedural preparation for ensuring a successful elective surgical or procedural patient journey
15	Surgery, Anaesthetics and PeriOperative Services	Clinical Nurse Consultant Urology, Continence and Stomal Therapy	Clinical Nurse Consultant Gd 2	1.0	New position created – to support the Urology, Continence and Stomal Therapy in expert clinical consultancy
New positions – Administration					
16	Emergency and Critical Care - Emergency Department	Department of Emergency Medicine Administrative Officer	Administrative Officer level 4 AO4	**1.0**	New position created-to support the Head of Department and Medical clinicians with all the medical administrative functions required in the ED as well as support administratively the Nurse Manager Critical Care and Emergency
17	Emergency and Critical care - Critical Care Medicine	Department of Critical Care Medicine/ Gastroenterology Administrative Officer	Administrative Officer Level 4 AO4	1.0	New position created – to support the Head of Department and medical clinicians with all Medical administrative functions required in CCM as well as administratively support the NUM Critical Care Medicine and Nurse Manager Critical Care and Emergency. Reporting line to new role, Nurse Manager Critical Care and Emergency

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18	Program 1 Critical Care, Emergency, Surgery, Anaesthetics and PeriOperative Services	Critical Care, Emergency, Surgery, Anaesthetics and PeriOperative Services Data & Analytic Manager – Program 1	Health Manager Lvl 2	1.0	New position created, taking on position responsibilities from Data Manager Operating Theatres, ED Data Manager with the additional data requirements for Critical Care
19	Surgery, Anaesthetics and PeriOperative Services	Department of Anaesthetics & Surgery Administrative Officer	Administrative Officer Level 4 AO4	1.0	New position created – to support the Head of Department Anaesthetics and medical clinicians with all Medical administrative functions required, as well as support administratively Medical Co Director and the NM Surgery, Anaesthetics and PeriOperative Services. Reporting line to new role NM Surgery, Anaesthetics and PeriOperative Services.
20	Surgery, Anaesthetics and PeriOperative Services - Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	Administration Officer - Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	AO3	1.68	New position created – this position will primarily support the functions of the Pre Admission and Surgical
21	Surgery, Anaesthetics and PeriOperative Services - Operating Theatre	Administration Officer -Operating Theatre Reception	AO2	1.0	New position created –this position will provide frontline reception service to OT customers and other administrative tasks.

4. Consultation

This restructure consultation paper and the draft position descriptions will be released for consultation. The Co-Director Nursing & Operations - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services will have discussions with all members of the program who are directly impacted by the proposal during the consultation period.

The Co-Director Nursing & Operations - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services will consider feedback from all staff members. Written feedback should be provided via email to:

SESLHD-TSH-ProgramsCorrespondence@health.nsw.gov.au.

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

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5. The recruitment and Matching Process

5.1 Proposed Realignments and Matching

No.	Current Position Title	Current grade	Matching expected	Position matched to	Position grade
1	Nurse Manager Emergency Department	Nurse Manager Grade 3	No		
2	Executive Assistant Emergency Department	Administrative Officer Level 5	No		
3	Emergency Administrative & Data Manager	Health Manager Level 1	No – position vacant		
4	ICU Secretary Department Critical Care Medicine	Administrative Officer Level 3	No		
5	Nurse Manager PeriOperative Services	Nurse Manager Gd 4	Yes	Nurse Manager Surgery, Anaesthetics and PeriOperative Services	Nurse Manager Grade 4
6	Nurse Unit Manager – Operating Theatre	Nurse Unit Manager Level 2	No		
7	Nurse Unit Manager – Anaesthetics	Nurse Unit Manager Level 1	Yes	Nurse Unit Manager – Operating Theatres	Nurse Unit Manager Level 1
8	Nurse Unit Manager – Recovery	Nurse Unit Manager Level 2	Yes	Nurse Unit Manager – Anaesthetics and Post Anaesthesia Care Unit (PACU)	Nurse Unit Manager Level 2
9	Nurse Educator PeriOperative Services	Nurse Educator Grade 2	No		
10	Clinical Nurse Consultant Acute Pain	Clinical Nurse Consultant Grade 2	No- Position vacant		
11	Clinical Nurse Consultant Peri Operative Services	Clinical Nurse Consultant Grade 2	Yes	Clinical Nurse Consultant Surgical Specialties	Clinical Nurse Consultant Grade 2
12	Data Manager Operating Theatres	Transport Department Health Clerk Gd 9/10	No		
13	Nurse Manager Admissions and Waitlist	Nurse Manager Grade 2	No - position vacant		
14	Nurse Unit Manager – Peri Operative Unit	Nurse Unit Manager Level 2	Yes	Nurse Unit Manager – Surgical Short Stay Unit	Nurse Unit Manager Level 2
15	Executive Assistant Anaesthetics Department	Administrative Officer Level 5	No - position vacant		
16	Assistant in Nursing – Peri Operative Unit	Assistant in Nursing	No		
17	Registered Nurse – Peri Operative Unit	Registered Nurse	Yes	Registered Nurse – Surgical Short Stay Unit	Registered Nurse

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18	Enrolled Nurse – Peri Operative Unit	Enrolled Nurse	Yes	Enrolled Nurse – Surgical Short Stay Unit	Enrolled Nurse
19	Registered Nurse – Peri Operative Unit	Registered Nurse	Yes	Registered Nurse – Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	Registered Nurse
20	Enrolled Nurse – Peri Operative Unit	Enrolled Nurse	Yes	Enrolled Nurse – Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	Enrolled Nurse
21	Administrative Officer – Operating Theatre Reception	Administrative Officer Level 3	Yes	Administrative Officer Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	Administrative Officer Level 3

All changes will be managed as per NSW Health PD2012_021 Managing Excess Staff of the NSW Health Service and SESLHD PD/180 Management of Organisational Restructures and Other Reforms in SESLHD.

Upon conclusion of the consultation period and provision of a response to feedback including any changes as a result, all staff who will be affected by deletions, realignments or change of reporting lines will be informed in writing that they are affected.

Directly matched affected staff will be advised in writing of their new position. Where matching cannot occur, positions will be advertised and a merit selection recruitment process will be undertaken. Where staff are not matched or appointed to a position, they will be declared excess.

Excess staff will have 14 days to accept or decline an offer of voluntary redundancy. Staff who accept an offer of voluntary redundancy will leave SESLHD within 4 weeks. Staff who decline the offer of voluntary redundancy will receive case management and career assistance.

6. Employee Assistance Program

Staff are reminded of the availability of the Employee Assistance Program through Converge on 1300 687 327. This number is answered 24 hours per day, seven days per week, to facilitate enquiries, booking requests and to provide assistance.

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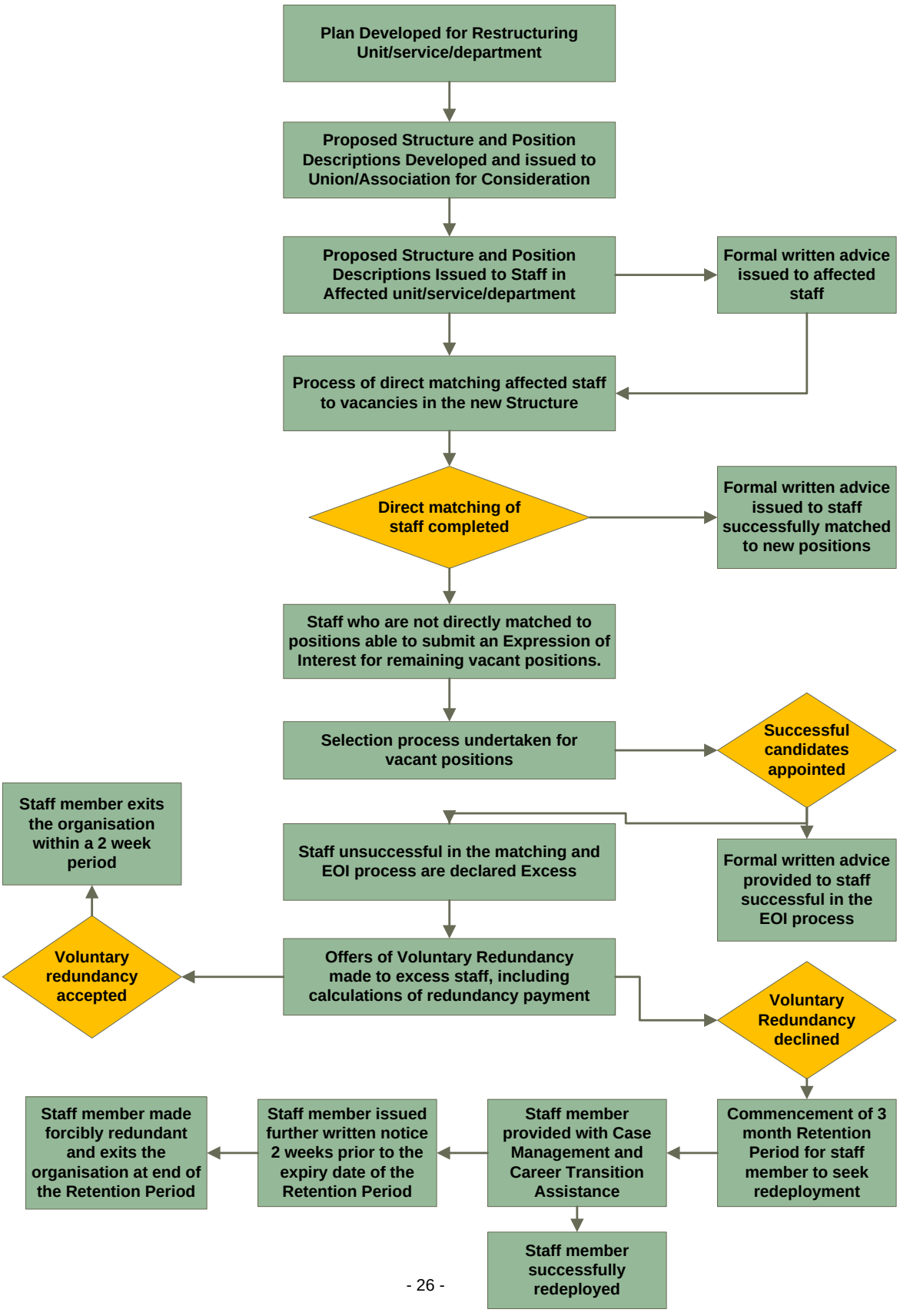
PROCESS MAP FOR ORGANISATIONAL RESTRUCTURES



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7. Restructure Timeframe

Action	Detail	Timeframes (indicative) Week Commencing
Consultation period with staff and unions commences	Release Restructure Consultation Paper and draft position descriptions	23rd May
Consultation sessions	Staff consultation sessions conducted	26th & 27th May
Consultation period closes		20th June
Feedback reviewed and considered	Restructure Consultation paper feedback from consultation	4th July
Approval by CE to implement structure	Submit brief to CE for final approval of structure	25 July
Written advice issued to affected staff	Letter to advise of 'affected status'	1 Aug
Process of direct matching of affected staff to positions in the new structure	Letter to advise of matching to position	1 Aug
Vacant positions advertised	Through merit selection recruitment process	1 Aug
Selection process for positions commences	Assessment of applications and interviews	22 Aug
Written advice issued to staff appointed to positions	Letter to advise appointments	5th September
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	5th September
Staff who are declared excess will be provided with case management and career assistance	Letter to advise of allocation of HR Business Partner for case management	9th September
Voluntary Redundancies reviewed for staff declared in excess and who have not secured a position as per the case management process.		19th September
Staff who accepted VR's to exit SESLHD		TBA
Written advice to staff unable to be placed in positions after three months of case management to receive forced involuntary redundancy	Letter to advise of forced involuntary redundancy	TBA

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8. Version Control

Version	Date	Notes	Author (Name and Position Title)
1.0	22/02/2022	First approved draft version of document	Joanne Newbury, CDNO Program 1
2	18/05/2022	Original version release for consultation	Joanne Newbury, Director of Nursing & Midwifery Services

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9. Attachments

No.	Document Description	Internal Ref.
1	Position Description: Nurse Manager Gd 4 Critical Care and Emergency	T21/53186
2	Position Description: Nurse Unit Manager Lvl 3 Emergency Department	T21/53187
3	Position Description: Nurse Manager Gd 4 Surgery, Anaesthetics and PeriOperative Services	T21/53193
4	Position Description: Nurse Unit Manager Lvl 3 – Operating Theatre	T21/53194
5	Position Description: Nurse Unit Manager Lvl 1 – Operating Theatre	T21/53195
6	Position Description: Nurse Unit Manager Lvl 2 – Anaesthetics and Post Anaesthetics Care Unit (PACU)	T21/53196
7	Position Description: Clinical Nurse Consultant Gd 2 Surgical Specialties	T21/53198
8	Position Description: Clinical Nurse Educator – Operating Theatres (Circulating/Instrument)	T21/53206
9	Position Description: Clinical Nurse Educator – Anaesthetics and Post Anaesthetic Care Unit	T21/53207
10	Position Description: Clinical Nurse Specialist Gd 2 – Pain, Anaesthetics and Post Anaesthetic Care	T21/53210
11	Position Description: Nurse Unit Manager Lvl 3 - Surgical Bookings, Waitlist and Pre Admission & Surgical Clinics	T21/53212
12	Position Description: Nurse Unit Manager Lvl 2 – Surgical Short Stay Unit	T21/53222
13	Position Description Clinical Nurse Consultant Gd 2-Continence, Urology, Stomal Therapy	T21/53233
14	Position Description: Administrative Assistant Lvl 4 Department of Emergency Medicine	T21/53189
15	Position Description: Administrative Assistant Lvl 4 Department of Critical Care & Gastroenterology	T21/53191
16	Position Description: Critical Care, Emergency, Surgery, Anaesthetics and PeriOperative Services Data & Analytics Manager – Program 1 – Health Manager Lvl 2	T21/53202
17	Position Description: Administrative Assistant Lvl 4 Department of Anaesthetics & Surgery Administrative Officer	T21/53205
18	Position Description: Administration Officer Lvl 3 - Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	T21/53223
19	Position Description Administration Officer Lvl 2-Operating Theatre Reception	T21/53228

*Position descriptions are subject to grading approval

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Position Description

Facility/Service	The Sutherland Hospital, SESLHD
Department	Program 1 -Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Critical Care, Emergency, Surgery
Manager	Co-Director Nursing and Operations (CDNO) - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services
Position Number	New PN
Cost Centre	163101

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		**Nurse Manager - Critical Care and Emergency**	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	*If Yes, Please list each Classification and grade below*
Award*		Public Health System Nurses' & Midwives' (State) Award	
Position Classification*		Nurse Manager Grade 4	
Job Category Coding (ROB)*		ANZSCO Code: 254415 Nurse Manager	
Job Classification Coding (ROB)*		Nurse Manager	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Nurse Manager Critical Care and Emergency is responsible for the operational, clinical and resource management ensuring the delivery of optimal and safe patient care within Critical Care Medicine (CCM) and the Emergency Department (ED). This position is pivotal to providing leadership, support and mentorship to the senior nursing leadership team to ensuring that they have the skills to lead the services. Primary responsibilities include appropriate management and co-ordination of staff	

		which includes nurses, administrative and support staff, coordination of patient care and management of departmental processes and practice. The Nurse Manager Critical Care and Emergency works closely and collaboratively with the CCM Medical Director and ED Medical Director in order to ensure appropriate leadership in clinical, financial and human resource management and to support the daily operational activities of the departments. This position ensures that overall functioning of CCM and ED is in accordance with the department's strategic plan and also ensures the maintenance of quality standards of care. The Nurse Manager promotes excellence in patient care and clinical service delivery and is a senior role in the organisation that participates as part of the senior leadership and executive team for the Program. The position acts as a leader in professional nursing practice, supporting, developing and promoting high standards of clinical care and continuously improving and developing services in response to changing consumer needs. The position will guide the development and implementation of contemporary models of practice and development and monitoring of staff review within the framework of the Workforce Strategic Plan.

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*		**1. Operational Performance and Governance** • To provide operational, clinical leadership and resource management to Critical Care and Emergency services in collaboration with the hospital executive and Clinical Programs. • To be responsible for monitoring of specific Critical Care and ED performance indicators i.e. triage times, ambulance release times, Emergency Treatment Performance (ETP), length of stay, access and exit block. • Identify actual and potential operational problems and coordinate the development of strategies and action plans to increase the effectiveness and efficiency of nursing services. • The position acts as a leader in professional nursing practice, supporting, developing and promoting high standards of quality clinical care and continuously improving and developing services in response to changing consumer needs. • The position will guide the development and implementation of contemporary models of practice and developing services in response to changing consumer needs. • Contribute to the clinical governance system and support strategies to ensure best practice in clinical care, and continuous improvement in quality and safety throughout all services. • Ensure clinical supervision at the point of care occurs, in line with the Australian Nursing and Midwifery Council Decision Making Frameworks for Nurses and Midwives.

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		• Participate in the establishment, promotion and maintenance of evidence based practice in the delivery of nursing care. • Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures. • Maintains a professional standard of conduct which reflect the values of the Ministry of Health and the SESLHD. **2. Leadership and Management** • Provides leadership, advice and issues management as a key member of the Critical Care and Emergency leadership team. • Supports and mentors the Nurse Unit Managers in their roles through establishing and maintain relationships of trust in the workplace and inspire others to achieve their potential. • Promotes a culture of learning ensuring performance management and skill development activities are met. • Develops and implements a culture of continuous improvement through system redesign. • Create an empowering work environment that enables the transfer of knowledge into practice. • Fosters a culture of 'inclusiveness' through collaborative decision-making, and consultation in relation to the coordination of activity-based services, use of shared resources and operational issues. • Foster cultural change to embed CORE values, continuous quality improvement and best practice within nursing services. • Motivate team members through role modelling, appropriate delegation and team building initiatives, and foster an environment conducive to the professional development of staff. • Promotes a culture of the understanding of the rights and responsibilities of staff, patients and their families / carers. • Monitors and resolves potential / actual adverse or other events that impact on patient safety and clinical operations. **3. Financial and Human Resource Management** • Ensures that the Critical Care and Emergency Services are managed safely, timely, appropriately and efficiently and that future needs are incorporated into prospective planning processes. • Provide leadership in the management and monitoring of all resources for services under their responsibility and delegation. • Management of resources within their delegation and be accountable for defining and implementing strategies, which effectively manage services whilst maintaining patient care. • Collaborates in the development of a financial strategy to meet the Service's budgetary and financial goals. • Adopts effective strategies for the recruitment and retention of nursing staff within the Services.

		• Monitor staffing arrangements, overtime and rostering practices against agreed targets (using identified tools including Nursing Hours Per Patient Day and Reasonable Workloads guidelines) in consultation with CDNO and facility Director of Nursing & Midwifery. • Ensures that appropriate reporting mechanisms are in place to monitor and manage FTE targets and initiates timely and appropriate reporting and corrective action. • Facilitates and monitors performance management for staff and provides strategies to address weakness and develops strengths. **4. Quality, Safety and Risk Management** • Ensure the effective monitoring and evaluation of relevant key Critical Care and Emergency nursing performance indicators. • Ensure the principles of quality management are incorporated in the delivery of nursing care. • Oversee and lead on improving the quality of the patient environment and patient experience. • Ensures a safe and secure environment is promoted and maintained for patients, clients, staff, contractors and visitors. • Promotes a culture of safety and an environment conducive to the reporting of incidents and 'near misses'. • Ensures compliance with the incident notification system (IMS+) and the timely and appropriate management of incidents, in accordance with the Ministry of Health, LHD and site policies and the follow-up of actions and outcomes. • Ensures timely feedback to key stakeholders on the progress and outcomes of incident reports and all other quality improvement activities. • Ensures staff conduct and practice is in accordance with professional standards, legislation and ethical codes. • Ensures the timely and appropriate management of complaints and critical incidents, including follow-up and feedback. • Ensures that all nursing staff and non-nursing staff in the Service are appropriately registered and practice in accordance with their Position Description. • Reviews and analyses data on all components of the patient journey and experience and recommends strategies to address patient concerns. • Ensures the principles of continuous quality improvement are incorporated into the service, utilising Clinical Practice Improvement methodologies. • Planning and strategic leadership including participating in the development of strategic and operational plans for services. • Encourages and supports consumer and community involvement in quality management. • Ensure common standards of nursing practice within Critical Care and Emergency are based on available evidence and expert knowledge. • To ensure compliance with the standards contained within the Australian Council on Health Care Standards Guidelines for Accreditation. **5. Planning, Clinical Redesign and Change Management**

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		• Participate in assessing and analysing nursing resource utilisation within the Critical Care and Emergency Program and make recommendations for management of variances in consultation with the CDNO. • Collaboratively participate to forward plan resources/clinical nursing services for the Program and re-align as need is identified. • Contribute to and influence emerging trends within the organisation, nursing and health. • Contribute to the development of clinical service strategic and operational plans for the Program. • Participate in the analysis of the strategic/corporate plan for the organisation, division and nursing for continuing relevance and adjust direction in line with projected needs. • Participate in identifying key priorities, goals and objectives in the development of the Program's business and strategic plans. • Forward plan for nursing and service development initiatives by utilising performance measurements, industry averages and activity trends. • Manage technology and physical resources effectively and respond to emerging technologies. • Develop and promote innovative and contemporary nursing models of care. • Provide leadership and support for nursing clinical improvement and clinical redesign projects to improve clinical effectiveness. • Develop a structure and framework for innovation, creativity and change. • Facilitate and support staff in change management processes.

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Access, patient flow and performance KPIs for Critical Care and Emergency Services • Efficiently and safely operationalising agreed patient flow strategies and contributing to the development of improved Patient Flow initiatives, Population growth, ageing and consequence increase in patient activity and acuity. • Evaluating and improving models of care delivery and professional practice in collaboration with NUMs. • Lead and manage within a diverse and changing environment. • Recruitment and retention of a skilled nursing workforce in Critical Care and Emergency • Management of COVID-19 pandemic and related presentations
Decision Making	• Makes decisions using advanced reasoning skills and working autonomously in relation to day-to-day operations and clinical care of patients/clients within scope of practice. • Exercises independent professional knowledge and judgement to solve problems of a complex nature. • Human resource management – monitoring of skill mix utilisation, staffing profiles, recruitment and reduction in vacancies and overtime usage • Delegate appropriate portfolios and responsibilities to the Nurse Unit Managers and monitor performance in relation to same.

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	• Active participant in financial management, including development of annual budget for Critical Care and Emergency Services and monitoring of financial performance.
Communication	• Develop and foster a climate of open and transparent communication that ensures staff are informed of organisation and program goals, strategies and activities that facilitate the provision of safe patient care and service provision. • This position must maintain high level visibility and accessibility to the Facility and Program Executive teams. • The Nurse Manager Critical Care and Emergency needs to work closely with, communicate and liaise with a variety of facility, LHD, Ministry of Health and external stakeholders. These may include but are not limited to: o General Manager o Director of Nursing and Midwifery o Medical Directors, Critical Care and Emergency o Patient Flow Managers l After Hours Nurse Managers o Nursing and Midwifery Nurse Managers o Clinical Quality and Patient Safety Managers o Medical Heads of Departments o Multidisciplinary Team Leaders o Corporate Services o SESLHD Emergency and Critical Care Clinical Streams

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who**	Co-Director Nursing and Operations - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services.
		Medical Co Director - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services.
	Why	In partnership, the Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Program Medical Co-Director (MCD) and Co-Director Nursing and Operations (CDNO) | Deputy Director of Nursing and Midwifery (DDONM) will have overall responsible for the development and delivery of the Program's annual business plan, inclusive of implementing organisation-wide initiatives and delivering local improvements and projects that improve performance, the patient journey, workplace culture and organisational reputation.
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who**	NSW Ambulance Service and NSW Police Service
	Why	Liaise and network in the provision of best practice service and leadership
	Who	Consumers and carers / relatives
	Why	Provide expertise and advice on complex matters relating to escalated patient safety and quality matters.
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	Nurse Unit Manager 3 – Critical Care Medicine Nurse Unit Manager 3 – Emergency Department Clinical Nurse Consultant 2 Emergency Department Clinical Nurse Consultant 2 Critical Care Clinical Nurse Consultant 2 CERS Clinical Nurse Consultants 1 CERS Nurse Unit Manager 1 – Medical Imaging Department Administrative Officer Level 4 – Emergency Department Administrative Officer Level 4 – Critical Care & Gastroenterology Data Manager Program 1
Indirect Reports	Clinical Nurse Unit Manager(s) Nurse Practitioners Clinical Nurse Educators Patient Experience Officers Clinical Support Officers Administration Officers Registered Nurses & Midwives Endorsed Enrolled Nurses Assistants in Nursing Wardpersons

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

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Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check

		• *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration with the Australian Health Practitioner Regulation Agency (AHPRA)
2	Extensive clinical and operational management experience in at a senior level and possesses post graduate qualifications in Health Management or working towards same.
3	Demonstrated understanding of contemporary health care delivery challenges impacting on Critical Care and Emergency Departments, including Key Performance Indicators.
4	Demonstrated capacity to utilise high level problem solving, strong leadership skills, and the ability to motivate, inspire and manage staff to achieve service and professional goals.
5	Demonstrated commitment to quality improvement and risk management principles within an evidence based practice framework and relevant accreditation, standards and processes.
6	Demonstrated experience in the successful application of change management and clinical redesign principles.
7	Demonstrated experience in financial management and the ability to develop financial strategies and achieve goals.
8	Demonstrated high level interpersonal, verbal and written communication skills and an aptitude to utilise relevant information technology platforms.

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Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

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Section 11 – Capabilities for the Role

The capabilities (i.e. the knowledge, skills and abilities) for the role are obtained from the NSW Public Sector Capability Framework and any relevant occupation specific capability set.

The focus capabilities for the role are the capabilities in which occupants must demonstrate immediate competence. The behavioural indicators provide examples of the types of behaviours that would be expected at that level and should be reviewed in conjunction with the role's key accountabilities.

Select at least one Focus Capability from each Capability Group. A minimum of 4 and a maximum of 10 Focus Capabilities should apply to a role. If the role contains People Management capabilities, a minimum of 5 Focus Capabilities should apply.

Capability Group	Focus?	Capability	Level
Personal Attributes	☒	Display Resilience and Courage	Advanced
	☒	Act with Integrity	Advanced
	☐	Manage Self	
	☐	Value Diversity	
Relationships	☒	Communicate Effectively	Advanced
	☐	Commitment to Customer Service	
	☒	Work Collaboratively	Advanced
	☒	Influence and Negotiate	Advanced
Results	☐	Deliver Results	
	☒	Plan and Prioritise	Advanced
	☐	Think and Solve Problems	
	☒	Demonstrate Accountability	Advanced
Business Enablers	☒	Finance	Advanced
	☐	Technology	
	☐	Procurement and Contract Management	
	☐	Project Management	
People Management	☒	Manage and Develop People	Advanced
	☒	Inspire Direction and Purpose	Advanced
	☐	Optimise Business Outcomes	
	☐	Manage Reform and Change	

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Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Occasional
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Occasional
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable

Confined Spaces – areas where only one egress (escape route) exists	Infrequent
Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

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Position Description

Facility/Service	The Sutherland Hospital, SESLHD
Department	Program 1 - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Critical Care and Emergency Emergency Department
Manager	Nurse Manager Grade 4, - Critical Care and Emergency
Position Number	TBA
Cost Centre	163062

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Nurse Unit Manager Level 3 - Emergency Department	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	*If Yes, Please list each Classification and grade below*
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Nursing & Midwifery/Nurse Unit Manager	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Nursing Unit Manager Level 3 (NUM 3) is the registered nurse in charge of the Emergency Department, The Sutherland Hospital within SESLHD. The purpose of the Nursing Unit Manager Level 3, Emergency Department is to: • lead, direct and co-ordinate patient or client care;	

		• ensure the practice of nursing and/or midwifery is safe and efficient, maintaining standards of care through continual quality improvement initiatives. • lead and co-ordinate the nursing/midwifery and multi-disciplinary care team at the ward or unit level, and • monitor and manage the business and management functions and processes of the ward or unit As the leader of the Emergency Department, the NUM level 3 will demonstrate her/his capability through attitude, skills, behaviour and attributes, namely: • broad nursing experience and knowledge; • understanding and acceptance that patients are the central focus of service delivery; • professional integrity; • ethical conduct; • accountability; • advocacy; • enabling others; • cultivation of collaborative relationships and effective team work; • commitment to advancing the profession of nursing/midwifery and care provision The Nurse Unit Manager Level 3, whose responsibilities in relation to patient services, ward or unit management and staff management are in excess of those of a Nursing Unit Manager Level 2. The NUM 3 of the Emergency Department is responsible for working in collaboration and in consultation with the Nurse Manager – Critical Care and Emergency Department to ensure the delivery of optimal and safe patient care within the Emergency Department through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM3 works closely and collaboratively with the NM, clinical NUMs and CNC in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*Patient Care Co-ordination and the practice of Nursing*	Lead, direct and co-ordinate patient care in the ward/unit • Ensure staff employed in the Emergency Department Unit are aware of their responsibilities in coordinating the condition and progress of all patients in the ward environment, from admission to discharge, in accordance to NSW State Performance Indicators. • Provide leadership and support for the care and recognition of deteriorating patients and other clinical improvement initiatives, by ensuring that all staff have attended DETECT training.

		• Ensure staff compliance with the requirement to report all clinical incidents through IIMS. • Ensure that staff are aware of their responsibilities in relation to the nutritional intake of all patients and that they assist patients with meals when required. • Attend multidisciplinary ward/unit/team meeting/rounds where appropriate • Endeavour to ensure rosters are developed that provide an appropriate number and skill mix of staff to meet the patient care needs according to agreed profiles. • Ensure rosters meet the time frames of the NSW Nurses and Midwives (State), Award time frames. • Ensure that nurses employed in the Emergency Department are aware of their responsibility regarding identifying themselves, communicating what the plan of care is for their patients and when they may expect to be discharged. • Promote a culture where staff, patients and visitors are treated with courtesy and respect. • Ensure clinical supervision at the point of care occurs, in line with the Australian Nursing and Midwifery Council Decision Making Frameworks for Nurses and Midwives. Facilitate collaborative teams in the delivery of patient care • Implement a model of nursing care that accommodates and supports different levels of skill mix and experience – i.e. team nursing, caseloads. • Ensure that all staff understand their responsibilities and work within their scope of their practice, as determined by their Registration Body. • Provide clear guidelines that enable all staff to understand their clinical leadership responsibilities and function effectively in coordinating the provision of care by his/her team members. • Ensure that staff adhere to standardised approach to clinical handover, as per SESLHD procedure. • Ensure all staff are easily identified by patients and carers, by means which include their corporate uniform, where appropriate and ID badge. Use patient and carer feedback to inform service delivery • Facilitate a culture where staff meet and greet patients. • Support and maintain an audit trail that identifies how complaints and incidences are used to remodel service delivery. • Ensure complaints are managed in a timely manner and feedback provided to patients and carers; and • Utilise patient and carer stories that can be used to optimise service delivery. Enable a culture of enquiry and questioning about the practice of nursing/midwifery • Make informed decisions about practice improvement through regular quality reviews and audits, ensuring regular feedback to staff at ward/unit meetings. • Establish processes that ensure clinical staff receive feedback on their performance. • Ensure that the clinical handover between shifts is used as an educational opportunity for staff; and • Ensure that all staff are aware of their educational and supervisory responsibilities. Strive for the use of best practice and contemporary nursing knowledge in the delivery of nursing care. • Facilitate staff's awareness of and access to current policies and procedures. • Maintain work patterns and work structures to support and supervise beginning practitioners as they develop competence. • Foster a culture that encourages staff to source and utilise information/research to inform clinical practice; and

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		• Ensure that all staff attends mandatory (including clinical) training programs that are best suited to meet service need. Uphold the principles of practice as defined by the Nursing and Midwives Act 1991, ANMC Codes of Conduct and Codes of Ethics and Professional Conduct • Ensure all registered and enrolled nurses hold current registration, refer to SESLHD policy. • Ensure enrolled nurses who administer medication are endorsed by the Nursing and Midwifery Board of Australia and are reassessed and reviewed annually. Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures • Maintain an awareness of competency standards and utilise in the performance development process with staff. • Ensure nursing staff work within their scope of practice. • Encourage staff to maintain a professional portfolio; and • In line with organisational systems, ensure that new policies and procedures are implemented and complied with, at ward/unit level. • Adhere to all MOH, SESLHD and local policies and business rules related to the safe handling and administration of medications. Maintains a professional standard of conduct which reflect the values of SESLHD

Standard Key Accountabilities*	*Nursing staff management and Leadership*	Be an exemplary role model for the professions of nursing/midwifery • Model and lead by example through own behaviour and communication styles the value of patients and carers. • Model and lead by example through own behaviour and communication styles the value of the profession of nursing • Attend regular unit rounds where appropriate for the clinical context. • Meet and greet patients regularly where appropriate • Establishment of a succession plan for the unit Establish and maintain relationships of trust in the workplace • Participate in regular unit rounds where appropriate • Establish processes and practices that enable participation of all members of the health care team • Establish practices that enable giving and receiving feedback Create an empowering work environment that enables the transfer of knowledge into practice • Establish practices that enable staff to have up-to-date Performance Reviews and staff have professional development plans. • Enable, facilitate and lead change initiatives, including models of care • Recognise, nurture and grow talent • Establish processes and practices that enable participation of all members of the Health Care Team • Establish practices that enable giving and receiving feedback and reflection on practice. Have an awareness of broader professional and health care issues and activities • Participate in own professional development and professional activities within the organisation. • Participate as an active member in professional association

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		• Seek opportunities for self-professional development Inspire and support others to achieve their potential • Recognise, nurture and grow talent • Establish practices that enable giving and receiving feedback and reflection on practice Enable others to achieve a shared vision • Develop in collaboration with the health care team a shared vision and mission statement for the ward / unit • Model through own behaviour and communication the shared vision • Establish structures and processes that facilitate clinical supervision and mentoring for all members of the health care team

Standard Key Accountabilities*	*Ward/Unit/Team Management*	Ensure the human, physical and financial resources of the ward/unit are managed, in collaboration with relevant subject matter experts, to deliver safe and efficient health care • Ensure an appropriate system of internal controls exist and are maintained. • Participate in the annual development of the ward/unit staffing profile that determines the ward budget allocation. • Monitor and report on key performance indicators relevant to the ward/unit and develop strategies to address any issues including meeting unit budgets and FTE targets. • Within the respective unit, ensure coordination of functions between Clinical Support Officers and Administrative staff to ensure they support the work activities and outcomes required by the Nurse Unit Manager. Participate in problem solving in matters related to the functioning of the unit/ward • Model critical thinking • Enable others to participate in problem solving for themselves or as part of the team • Provide opportunities for others to be innovative • Support decision making with evidence • Demonstrate accountability for decisions that are made Establish and maintain processes to facilitate performance improvements • Facilitate ward meetings for all members of the health care team • Establish processes that enable the use of patients and carers feedback to develop services • Establish feedback processes to all staff that inform them of the ward/units performance Manage ward/unit staff to facilitate growth and development • Establish processes that ensure novice clinical staff are supported in their clinical practice and receive regular feedback on their performance • All staff have annual performance reviews and development plans established Monitor and maintain a safe environment for patients, staff and visitors in collaboration with the relevant subject matter experts • Establish processes and practices that enable participation of all members of the health care team to ensure that the ward/unit is safe

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		• Establish processes that include those staff with expertise in clinical and occupational safety where appropriate • Institute processes than ensure data and information collected is used to inform decisions • Establish processes than ensure patients, carers and visitors are informed about safe practices in the health care environment. Ensure and maintain knowledge and participation in business management activities within NSW Ministry of Health, Local Health Districts, organisational policy and procedures and beyond. • Participate where appropriate in activities outside the ward/unit, including in-services, conferences and membership to other groups • Develop processes that will enable feedback to all members of the health care team on key Ministry, LHD and organisation activities and initiatives • Create processes that will ensure ward/unit/team activities and initiatives align with those of the Ministry, LHD and organisation

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Balancing clinical and resource decision making within finite resources to ensure new models of care are sustainable and evidence based. • Matching patient demands to staffing resources. • Meeting benchmarks and key performance indicator
Decision Making	Overall responsibility for decisions pertaining to patient care coordination and the day to day management of the unit.
Communication	Ensuring effective, timely and appropriate communication between all members of the multidisciplinary team, patients, their family members / carers and the general public

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager
	Why?	To ensure service delivery is maintained and
	Who?	Executive team
	Why?	Escalate issues, receive guidance and updates on care priorities
	Who?	Nursing Staff
	Why?	Involvement in unit and patient care decisions
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Multidisciplinary team
	Why?	To ensure seamless delivery of quality care
	Who?	External healthcare providers and organisations

	Why?	To ensure appropriate Transfer of care
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	110 FTE
Indirect Reports	

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (e.g. $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia and current NSW Driver's License (if required by service).

2	Relevant management tertiary qualification or equivalent work experience, or a combination of study and work experience with a demonstrated commitment to professional development
3	A demonstrated knowledge and experience in the management and delivery of health care services
4	Proven ability in innovative clinical service delivery, harm minimisation and practice development
5	Effective interpersonal and communication skills that demonstrate the ability to engage, enable and manage teams
6	Proven ability to create and maintain a positive workplace culture and articulate and achieve a vision for nursing services
7	Recent clinical experience in the Emergency Department environment & demonstrated knowledge of clinical, financial & human resource management to support the daily operations of the department.

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Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

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Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable

Confined Spaces – areas where only one egress (escape route) exists	Infrequent
Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

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Position Description

Health
South Eastern Sydney
Local Health District

Facility/Service	The Sutherland Hospital, SESLHD
Department	Program 1 -Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services
Manager	Co-Director Nursing and Operations (CDNO) - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services
Position Number	711224
Cost Centre	163101

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		**Nurse Manager – Surgery, Anaesthetics and Perioperative Services**	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	*If Yes, Please list each Classification and grade below*
Award*		Public Health System Nurses' & Midwives' (State) Award	
Position Classification*		Nurse Manager Grade 4	
Job Category Coding (ROB)*		ANZSCO Code: 254415 Nurse Manager	
Job Classification Coding (ROB)*		Nurse Manager	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Nurse Manager Surgery, Anaesthetics and Perioperative Services is responsible for the operational, clinical and resource management ensuring the delivery of optimal and safe patient care within Surgery, Anaesthetics and Perioperative Services / Units. This position is pivotal to providing leadership, support and mentorship to the senior nursing leadership team to ensuring that they have the skills to lead the services. Primary responsibilities include appropriate management and co-ordination	

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		of staff which includes nurses, administrative and support staff, coordination of patient care and management of departmental processes and practice. The Nurse Manager Surgery, Anaesthetics and Perioperative Services works closely and collaboratively with the Surgery and Anaesthetics Medical Directors in order to ensure appropriate leadership in clinical, financial and human resource management and to support the daily operational activities of the departments. This position ensures that overall functioning of Surgery, Anaesthetics and Perioperative Services / Units is in accordance with the department's strategic plan and also ensures the maintenance of quality standards of care. The Nurse Manager promotes excellence in patient care and clinical service delivery and is a senior role in the organisation that participates as part of the senior leadership and executive team for the Program. The position acts as a leader in professional nursing practice, supporting, developing and promoting high standards of clinical care and continuously improving and developing services in response to changing consumer needs. The position will guide the development and implementation of contemporary models of practice and development and monitoring of staff review within the framework of the Workforce Strategic Plan.

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*		**1. Operational Performance and Governance** • To provide operational, clinical leadership and resource management to Surgery, Anaesthetics and Perioperative Services in collaboration with the hospital executive and Clinical Programs. • To be responsible for monitoring of specific Surgical performance indicators i.e. overdue elective surgery, operative theatre occupancy, first case on time, cancellations, Emergency Surgery Access, waitlists, extended day only and length of stay. • Identify actual and potential operational problems and coordinate the development of strategies and action plans to increase the effectiveness and efficiency of nursing services. • The position acts as a leader in professional nursing practice, supporting, developing and promoting high standards of quality clinical care and continuously improving and developing services in response to changing consumer needs. • The position will guide the development and implementation of contemporary models of practice and developing services in response to changing consumer needs. • Contribute to the clinical governance system and support strategies to ensure best practice in clinical care, and continuous improvement in quality and safety throughout all services.

		• Ensure clinical supervision at the point of care occurs, in line with the Australian Nursing and Midwifery Council Decision Making Frameworks for Nurses and Midwives. • Participate in the establishment, promotion and maintenance of evidence based practice in the delivery of nursing care. • Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures. • Maintains a professional standard of conduct which reflect the values of the Ministry of Health and the SESLHD. **2. Leadership and Management** • Provides leadership, advice and issues management as a key member of the Surgery, Anaesthetics and Perioperative Services leadership team. • Supports and mentors the Nurse Unit Managers in their roles through establishing and maintain relationships of trust in the workplace and inspire others to achieve their potential. • Promotes a culture of learning ensuring performance management and skill development activities are met. • Develops and implements a culture of continuous improvement through system redesign. • Create an empowering work environment that enables the transfer of knowledge into practice. • Fosters a culture of 'inclusiveness' through collaborative decision-making, and consultation in relation to the coordination of activity-based services, use of shared resources and operational issues. • Foster cultural change to embed CORE values, continuous quality improvement and best practice within nursing services. • Motivate team members through role modelling, appropriate delegation and team building initiatives, and foster an environment conducive to the professional development of staff. • Promotes a culture of the understanding of the rights and responsibilities of staff, patients and their families / carers. • Monitors and resolves potential / actual adverse or other events that impact on patient safety and clinical operations. **3. Financial and Human Resource Management** • Ensures that the Surgery, Anaesthetics and Perioperative Services are managed safely, timely, appropriately and efficiently and that future needs are incorporated into prospective planning processes. • Provide leadership in the management and monitoring of all resources for services under their responsibility and delegation. • Management of resources within their delegation and be accountable for defining and implementing strategies, which effectively manage services whilst maintaining patient care.

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		• Collaborates in the development of a financial strategy to meet the Service's budgetary and financial goals. • Adopts effective strategies for the recruitment and retention of nursing staff within the Services. • Monitor staffing arrangements, overtime and rostering practices against agreed targets (using identified tools including Nursing Hours Per Patient Day and Reasonable Workloads guidelines) in consultation with CDNO and facility Director of Nursing & Midwifery. • Ensures that appropriate reporting mechanisms are in place to monitor and manage FTE targets and initiates timely and appropriate reporting and corrective action. • Facilitates and monitors performance management for staff and provides strategies to address weakness and develops strengths. **4. Quality, Safety and Risk Management** • Ensure the effective monitoring and evaluation of relevant key Surgery, Anaesthetics and Perioperative Services nursing performance indicators. • Ensure the principles of quality management are incorporated in the delivery of nursing care. • Oversee and lead on improving the quality of the patient environment and patient experience. • Ensures a safe and secure environment is promoted and maintained for patients, clients, staff, contractors and visitors. • Promotes a culture of safety and an environment conducive to the reporting of incidents and 'near misses'. • Ensures compliance with the incident notification system (IMS+) and the timely and appropriate management of incidents, in accordance with the Ministry of Health, LHD and site policies and the follow-up of actions and outcomes. • Ensures timely feedback to key stakeholders on the progress and outcomes of incident reports and all other quality improvement activities. • Ensures staff conduct and practice is in accordance with professional standards, legislation and ethical codes. • Ensures the timely and appropriate management of complaints and critical incidents, including follow-up and feedback. • Ensures that all nursing staff and non-nursing staff in the Service are appropriately registered and practice in accordance with their Position Description. • Reviews and analyses data on all components of the patient journey and experience and recommends strategies to address patient concerns. • Ensures the principles of continuous quality improvement are incorporated into the service, utilising Clinical Practice Improvement methodologies. • Planning and strategic leadership including participating in the development of strategic and operational plans for services. • Encourages and supports consumer and community involvement in quality management. • Ensure common standards of nursing practice within Surgery, Anaesthetics and Perioperative Services are based on available evidence and expert knowledge.

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		• To ensure compliance with the standards contained within the Australian Council on Health Care Standards Guidelines for Accreditation. **5. Planning, Clinical Redesign and Change Management** • Participate in assessing and analysing nursing resource utilisation within the Surgery, Anaesthetics and Perioperative Services Program and make recommendations for management of variances in consultation with the CDNO. • Collaboratively participate to forward plan resources/clinical nursing services for the Program and re-align as need is identified. • Contribute to and influence emerging trends within the organisation, nursing and health. • Contribute to the development of clinical service strategic and operational plans for the Program. • Participate in the analysis of the strategic/corporate plan for the organisation, division and nursing for continuing relevance and adjust direction in line with projected needs. • Participate in identifying key priorities, goals and objectives in the development of the Program's business and strategic plans. • Forward plan for nursing and service development initiatives by utilising performance measurements, industry averages and activity trends. • Manage technology and physical resources effectively and respond to emerging technologies. • Develop and promote innovative and contemporary nursing models of care. • Provide leadership and support for nursing clinical improvement and clinical redesign projects to improve clinical effectiveness. • Develop a structure and framework for innovation, creativity and change. • Facilitate and support staff in change management processes.

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Access, patient flow and performance KPIs for Surgery, Anaesthetics and Perioperative Services • Efficiently and safely operationalising agreed patient flow strategies and contributing to the development of improved Patient Flow initiatives, Population growth, ageing and consequence increase in patient activity and acuity. • Evaluating and improving models of care delivery and professional practice in collaboration with NUMs. • Lead and manage within a diverse and changing environment. • Recruitment and retention of a skilled nursing workforce in Surgery, Anaesthetics and Perioperative Services. • Management of COVID-19 pandemic and related presentations
Decision Making	• Makes decisions using advanced reasoning skills and working autonomously in relation to day-to-day operations and clinical care of patients/clients within scope of practice. • Exercises independent professional knowledge and judgement to solve problems of a complex nature.

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	• Human resource management – monitoring of skill mix utilisation, staffing profiles, recruitment and reduction in vacancies and overtime usage • Delegate appropriate portfolios and responsibilities to the Nurse Unit Managers and monitor performance in relation to same. • Active participant in financial management, including development of annual budget for Surgery, Anaesthetics and Perioperative Services and monitoring of financial performance.
Communication	• Develop and foster a climate of open and transparent communication that ensures staff are informed of organisation and program goals, strategies and activities that facilitate the provision of safe patient care and service provision. • This position must maintain high level visibility and accessibility to the Facility and Program Executive teams. • The Nurse Manager Surgery, Anaesthetics and Perioperative Services needs to work closely with, communicate and liaise with a variety of facility, LHD, Ministry of Health and external stakeholders. These may include but are not limited to: o General Manager o Director of Nursing and Midwifery o Medical Directors, Critical Care and Emergency o Patient Flow Managers l After Hours Nurse Managers o Nursing and Midwifery Nurse Managers o Clinical Quality and Patient Safety Managers o Medical Heads of Departments o Multidisciplinary Team Leaders o Corporate Services o SESLHD Surgery, Anaesthetics and Perioperative Services Clinical Streams

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who**	Co-Director Nursing and Operations - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services.
		Medical Co Director - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services.
	Why	In partnership, the Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Program Medical Co-Director (MCD) and Co-Director Nursing and Operations (CDNO) | Deputy Director of Nursing and Midwifery (DDONM) will have overall responsible for the development and delivery of the Program's annual business plan, inclusive of implementing organisation-wide initiatives and delivering local improvements and projects that improve performance, the patient journey, workplace culture and organisational reputation.
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who**	
	Why	Liaise and network in the provision of best practice service and leadership
	Who	Consumers and carers / relatives
	Why	Provide expertise and advice on complex matters relating to escalated patient safety and quality matters.

Is this a Public Senior Executive Role which manages relationship at the Ministerial level?	NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	Nurse Unit Manager 3 – Operating Theatre Nurse Unit Manager 3 – Surgical Bookings,, Waitlist, Preadmission & Surgical Clinics Nurse Unit Manager 2 – Anaesthetics & Post Anaesthesia Care Unit Nurse Unit Manager 2 – Surgical Short Stay Unit Nurse Unit Manager 2 – Cooinda Nurse Unit Manager 2 – Jara Clinical Nurse Consultant – Urology/Continence/Stomal Therapy / Surgical Specialites Clinical Nurse Consultant –Surgical Specialties (General Surgery, ENT, Vascular, Ophthalmology) Clinical Nurse Consultant – Orthopaedics Administrative Officer Level 4 – Surgery & Anaesthetics Data Manager Program 1
Indirect Reports	Clinical Nurse Unit Manager(s) Clinical Nurse Educators Clinical Support Officers Administration Officers Registered Nurses & Midwives Endorsed Enrolled Nurses Assistants in Nursing Wardpersons Storeperson/s Operations Assistants CSSD Manager Sterilising Tech's

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check

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		• *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration with the Australian Health Practitioner Regulation Agency (AHPRA)
2	Extensive clinical and operational management experience in at a senior level and possesses post graduate qualifications in Health Management or working towards same.
3	Demonstrated understanding of contemporary health care delivery challenges impacting on Surgery, Anaesthetics and Perioperative Services, including Key Performance Indicators.
4	Demonstrated capacity to utilise high level problem solving, strong leadership skills, and the ability to motivate, inspire and manage staff to achieve service and professional goals.
5	Demonstrated commitment to quality improvement and risk management principles within an evidence based practice framework and relevant accreditation, standards and processes.
6	Demonstrated experience in the successful application of change management and clinical redesign principles.
7	Demonstrated experience in financial management and the ability to develop financial strategies and achieve goals.
8	Demonstrated high level interpersonal, verbal and written communication skills and an aptitude to utilise relevant information technology platforms.

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Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

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Section 11 – Capabilities for the Role

The capabilities (i.e. the knowledge, skills and abilities) for the role are obtained from the NSW Public Sector Capability Framework and any relevant occupation specific capability set.

The focus capabilities for the role are the capabilities in which occupants must demonstrate immediate competence. The behavioural indicators provide examples of the types of behaviours that would be expected at that level and should be reviewed in conjunction with the role's key accountabilities.

Select at least one Focus Capability from each Capability Group. A minimum of 4 and a maximum of 10 Focus Capabilities should apply to a role. If the role contains People Management capabilities, a minimum of 5 Focus Capabilities should apply.

Capability Group	Focus?	Capability	Level
Personal Attributes	☒	Display Resilience and Courage	Advanced
	☒	Act with Integrity	Advanced
	☐	Manage Self	
	☐	Value Diversity	
Relationships	☒	Communicate Effectively	Advanced
	☐	Commitment to Customer Service	
	☒	Work Collaboratively	Advanced
	☒	Influence and Negotiate	Advanced
Results	☐	Deliver Results	
	☒	Plan and Prioritise	Advanced
	☐	Think and Solve Problems	
	☒	Demonstrate Accountability	Advanced
Business Enablers	☒	Finance	Advanced
	☐	Technology	
	☐	Procurement and Contract Management	
	☐	Project Management	
People Management	☒	Manage and Develop People	Advanced
	☒	Inspire Direction and Purpose	Advanced
	☐	Optimise Business Outcomes	
	☐	Manage Reform and Change	

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Section 12 – Job Demands Checklist

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ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
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Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable

Confined Spaces – areas where only one egress (escape route) exists	Infrequent
Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

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Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

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Position Description

Facility/Service	The Sutherland Hospital, SESLHD
Department	Program 1 - Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services Operating Theatres
Manager	Nurse Manager Grade 4 - Surgery, Anaesthetics & Perioperative Services
Position Number	TBA
Cost Centre	163126

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Nursing Unit Manager Level 3 - Operating Theatres	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	*If Yes, Please list each Classification and grade below*
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Nurse Unit Manager, Level 3	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Nursing Unit Manager Level 3 (NUM3) is the registered nurse in charge of the Operating Theatres, The Sutherland Hospital within SESLHD. The purpose of the Nursing Unit Manager Level 3, Operating Theatres, is to: • lead, direct and co-ordinate patient or client care; • ensure the practice of nursing is safe and efficient, maintaining standards of care through continual quality improvement initiatives.	

		• lead and co-ordinate the nursing and multi-disciplinary care team at the ward or unit level, and • monitor and manage the business and management functions and processes of the ward or unit As the leader of the Operating Theatres, the NUM level 3 will demonstrate her/his capability through attitude, skills, behaviour and attributes, namely: • broad nursing/midwifery experience and knowledge; • understanding and acceptance that patients are the central focus of service delivery; • professional integrity; • ethical conduct; • accountability; • advocacy; • enabling others; • cultivation of collaborative relationships and effective team work; • commitment to advancing the profession of nursing/midwifery and care provision The Nurse Unit Manager Level 3, whose responsibilities in relation to patient services, ward or unit management and staff management are in excess of those of a Nursing Unit Manager Level 2. The NUM level 3 of the Operating Theatre is responsible for working in collaboration and in consultation with the Nurse Manager- Surgery, Anaesthetics & Perioperative Services to ensure the delivery of optimal and safe patient care within the Operating Theatre through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM3 works closely and collaboratively with the NM and clinical NUM in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department.

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*Patient Care Co-ordination and the practice of Nursing*	Lead, direct and co-ordinate patient care in the ward/unit • Ensure staff employed in the Operating Theatres are aware of their responsibilities in coordinating the condition and progress of all patients in the ward environment, from admission to discharge, in accordance to NSW State Performance Indicators. • Provide leadership and support for the care and recognition of deteriorating patients and other clinical improvement initiatives, by ensuring that all staff have attended DETECT training. • Ensure staff compliance with the requirement to report all clinical incidents through IIMS. • Ensure that staff are aware of their responsibilities in relation to the nutritional intake of all patients and that they assist patients with meals when required. • Attend multidisciplinary ward/unit/team meeting/rounds where appropriate • Endeavour to ensure rosters are developed that provide an appropriate number and skill mix of staff to meet the patient care needs according to agreed profiles.

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		• Ensure rosters meet the time frames of the NSW Nurses and Midwives (State), Award time frames. • Ensure that nurses employed in the Operating Theatres are aware of their responsibility regarding identifying themselves, communicating what the plan of care is for their patients and when they may expect to be discharged. • Promote a culture where staff, patients and visitors are treated with courtesy and respect. • Ensure clinical supervision at the point of care occurs, in line with the Australian Nursing and Midwifery Council Decision Making Frameworks for Nurses and Midwives. Facilitate collaborative teams in the delivery of patient care • Implement a model of nursing care that accommodates and supports different levels of skill mix and experience – i.e. team nursing, caseloads. • Ensure that all staff understand their responsibilities and work within their scope of their practice, as determined by their Registration Body. • Provide clear guidelines that enable all staff to understand their clinical leadership responsibilities and function effectively in coordinating the provision of care by his/her team members. • Ensure that staff adhere to standardised approach to clinical handover, as per SESLHD procedure. • Ensure all staff are easily identified by patients and carers, by means which include their corporate uniform, where appropriate and ID badge. Use patient and carer feedback to inform service delivery • Facilitate a culture where staff meet and greet patients. • Support and maintain an audit trail that identifies how complaints and incidences are used to remodel service delivery. • Ensure complaints are managed in a timely manner and feedback provided to patients and carers; and • Utilise patient and carer stories that can be used to optimise service delivery. Enable a culture of enquiry and questioning about the practice of nursing/midwifery • Make informed decisions about practice improvement through regular quality reviews and audits, ensuring regular feedback to staff at ward/unit meetings. • Establish processes that ensure clinical staff receive feedback on their performance. • Ensure that the clinical handover between shifts is used as an educational opportunity for staff; and • Ensure that all staff are aware of their educational and supervisory responsibilities. Strive for the use of best practice and contemporary nursing knowledge in the delivery of nursing care. • Facilitate staff's awareness of and access to current policies and procedures. • Maintain work patterns and work structures to support and supervise beginning practitioners as they develop competence. • Foster a culture that encourages staff to source and utilise information/research to inform clinical practice; and • Ensure that all staff attends mandatory (including clinical) training programs that are best suited to meet service need. Uphold the principles of practice as defined by the Nursing and Midwives Act 1991, ANMC Codes of Conduct and Codes of Ethics and Professional Conduct • Ensure all registered and enrolled nurses hold current registration, refer to SESLHD policy.

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		• Ensure enrolled nurses who administer medication are endorsed by the Nursing and Midwifery Board of Australia and are reassessed and reviewed annually. Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures • Maintain an awareness of competency standards and utilise in the performance development process with staff. • Ensure nursing staff work within their scope of practice. • Encourage staff to maintain a professional portfolio; and • In line with organisational systems, ensure that new policies and procedures are implemented and complied with, at ward/unit level. • Adhere to all MOH, SESLHD and local policies and business rules related to the safe handling and administration of medications. Maintains a professional standard of conduct which reflect the values of SESLHD

Standard Key Accountabilities*	*Nursing staff management and Leadership*	Be an exemplary role model for the professions of nursing/midwifery • Model and lead by example through own behaviour and communication styles the value of patients and carers. • Model and lead by example through own behaviour and communication styles the value of the profession of nursing • Attend regular unit rounds where appropriate for the clinical context. • Meet and greet patients regularly where appropriate • Establishment of a succession plan for the unit Establish and maintain relationships of trust in the workplace • Participate in regular unit rounds where appropriate • Establish processes and practices that enable participation of all members of the health care team • Establish practices that enable giving and receiving feedback Create an empowering work environment that enables the transfer of knowledge into practice • Establish practices that enable staff to have up-to-date Performance Reviews and staff have professional development plans. • Enable, facilitate and lead change initiatives, including models of care • Recognise, nurture and grow talent • Establish processes and practices that enable participation of all members of the Health Care Team • Establish practices that enable giving and receiving feedback and reflection on practice. Have an awareness of broader professional and health care issues and activities • Participate in own professional development and professional activities within the organisation. • Participate as an active member in professional association • Seek opportunities for self-professional development Inspire and support others to achieve their potential • Recognise, nurture and grow talent • Establish practices that enable giving and receiving feedback and reflection on practice

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		Enable others to achieve a shared vision • Develop in collaboration with the health care team a shared vision and mission statement for the ward / unit • Model through own behaviour and communication the shared vision • Establish structures and processes that facilitate clinical supervision and mentoring for all members of the health care team

Standard Key Accountabilities*	*Ward/Unit/ Team Management*	Ensure the human, physical and financial resources of the ward/unit are managed, in collaboration with relevant subject matter experts, to deliver safe and efficient health care • Ensure an appropriate system of internal controls exist and are maintained. • Participate in the annual development of the ward/unit staffing profile that determines the ward budget allocation. • Monitor and report on key performance indicators relevant to the ward/unit and develop strategies to address any issues including meeting unit budgets and FTE targets. • Within the respective unit, ensure coordination of functions between Clinical Support Officers and Administrative staff to ensure they support the work activities and outcomes required by the Nurse Unit Manager. Participate in problem solving in matters related to the functioning of the unit/ward • Model critical thinking • Enable others to participate in problem solving for themselves or as part of the team • Provide opportunities for others to be innovative • Support decision making with evidence • Demonstrate accountability for decisions that are made Establish and maintain processes to facilitate performance improvements • Facilitate ward meetings for all members of the health care team • Establish processes that enable the use of patients and carers feedback to develop services • Establish feedback processes to all staff that inform them of the ward/units performance Manage ward/unit staff to facilitate growth and development • Establish processes that ensure novice clinical staff are supported in their clinical practice and receive regular feedback on their performance • All staff have annual performance reviews and development plans established Monitor and maintain a safe environment for patients, staff and visitors in collaboration with the relevant subject matter experts • Establish processes and practices that enable participation of all members of the health care team to ensure that the ward/unit is safe • Establish processes that include those staff with expertise in clinical and occupational safety where appropriate • Institute processes than ensure data and information collected is used to inform decisions • Establish processes than ensure patients, carers and visitors are informed about safe practices in the health care environment.

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		Ensure and maintain knowledge and participation in business management activities within NSW Ministry of Health, Local Health Districts, organisational policy and procedures and beyond. • Participate where appropriate in activities outside the ward/unit, including in-services, conferences and membership to other groups • Develop processes that will enable feedback to all members of the health care team on key Ministry, LHD and organisation activities and initiatives • Create processes that will ensure ward/unit/team activities and initiatives align with those of the Ministry, LHD and organisation

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Balancing clinical and resource decision making within finite resources to ensure new models of care are sustainable and evidence based. • Matching patient demands to staffing resources. • Meeting benchmarks and key performance indicator
Decision Making	Overall responsibility for decisions pertaining to patient care coordination and the day to day management of the Operating Theatres
Communication	Ensuring effective, timely and appropriate communication between all members of the multidisciplinary team, patients, their family members / carers and the general public

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager
	Why?	To ensure service delivery is maintained and
	Who?	Executive team
	Why?	Escalate issues, receive guidance and updates on care priorities
	Who?	Nursing Staff
	Why?	Involvement in unit and patient care decisions
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Multidisciplinary team
	Why?	To ensure seamless delivery of quality care
	Who?	External healthcare providers and organisations
	Why?	To ensure appropriate Transfer of care
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	Approx. 60 FTE
Indirect Reports	

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (e.g. $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia and current NSW Driver License (if required by service).
2	Relevant management tertiary qualification or equivalent work experience, or a combination of study and work experience with a demonstrated commitment to professional development
3	A demonstrated knowledge and experience in the management and delivery of health care services
4	Proven ability in innovative clinical service delivery, harm minimisation and practice development
5	Effective interpersonal and communication skills that demonstrate the ability to engage, enable and manage teams

6	Proven ability to create and maintain a positive workplace culture and articulate and achieve a vision for nursing services
7	Recent clinical experience in the Operating Theatre / Perioperative environment & demonstrated knowledge of clinical, financial and human resource management to support the daily operations of the department

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Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

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Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable

Confined Spaces – areas where only one egress (escape route) exists	Infrequent
Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

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Position Description

Facility/Service	The Sutherland Hospital, SESLHD
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services Operating Theatres
Manager	Nurse Unit Manager Level 3 - Operating Theatres.
Position Number	TBA
Cost Centre	163126

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Nursing Unit Manager Level 1 - Operating Theatres	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	Current registration as a Registered Nurse/Midwife with the Nursing and Midwifery Board of Australia
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Nurse Unit Manager, Level 1	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The Nursing Unit Manager, Level 1 (NUM1) is the registered nurse in charge of the clinical operations of the Operating Theatres, reporting to the Nurse Unit Manager Level 3, Operating Theatres, The Sutherland Hospital within SESLHD. The purpose of the Nursing Unit Manager, Level 1 Operating Theatres is to: • lead, direct and co-ordinate patient or client care; • ensure the practice of nursing and/or midwifery is safe and efficient, maintaining standards of care through continual quality improvement initiatives.	

		• lead and co-ordinate the nursing/midwifery and multi-disciplinary care team at the ward or unit level, and • monitor and manage the business and management functions and processes of the ward or unit As the clinical leader of the unit, the NUM1 will demonstrate her/his capability through attitude, skills, behaviour and attributes, namely: • broad nursing/midwifery experience and knowledge; • understanding and acceptance that patients are the central focus of service delivery; • professional integrity; • ethical conduct; • accountability; • advocacy; • enabling others; • cultivation of collaborative relationships and effective team work; • commitment to advancing the profession of nursing/midwifery and care provision The NUM level 1 of the Operating Theatre is responsible for working in collaboration and in consultation with the Nurse Unit Manager Level 3 to ensure the delivery of optimal and safe patient care within the Operating Theatre. The primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM1 works closely and collaboratively with the NUM3 in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department.

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*Patient Care Co-ordination and the practice of Nursing*	• Lead, direct and co-ordinate patient care in the ward/unit • Facilitate collaborative teams in the delivery of patient care • Use patient and carer feedback to inform service delivery • Enable a culture of enquiry and questioning about the practice of nursing/midwifery • Strive for the use of best practice and contemporary nursing knowledge in the delivery of nursing care. • Uphold the principles of practice as defined by the Nursing and Midwives Act 1991, ANMC Codes of Conduct and Codes of Ethics and Professional Conduct • Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures

Standard Key Accountabilities*	*Nursing/Midwifery staff management and Leadership*	• Maintains a professional standard of conduct which reflect the values of SESLHD • Be an exemplary role model for the professions of nursing/midwifery • Establish and maintain relationships of trust in the workplace • Create an empowering work environment that enables the transfer of knowledge into practice • Have an awareness of broader professional and health care issues and activities • Inspire and support others to achieve their potential • Enable others to achieve a shared vision

Standard Key Accountabilities*	*Ward/Unit/Team Management*	• Ensure the human, physical and financial resources of the ward/unit are managed, in collaboration with relevant subject matter experts, to deliver safe and efficient health care • Participate in problem solving in matters related to the functioning of the unit/ward • Establish and maintain processes to facilitate performance improvements • Manage ward/unit staff to facilitate growth and development • Monitor and maintain a safe environment for patients, staff and visitors in collaboration with the relevant subject matter experts • Ensure and maintain knowledge and participation in business management activities within NSW Ministry of Health, Local Health Districts, organisational policy and procedures and beyond.

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Balancing clinical and resource decision making within finite resources to ensure new models of care are sustainable and evidence based. • Matching patient demands to staffing resources. • Meeting benchmarks and key performance indicator
Decision Making	Overall responsibility for decisions pertaining to patient care coordination and the day to day management of the unit.
Communication	Ensuring effective, timely and appropriate communication between all members of the multidisciplinary team, patients, their family members / carers and the general public

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager 4 Surgery, Anaesthetics & Perioperative Services
	Why?	To ensure service delivery is maintained as efficiently as possible
	Who?	Executive team

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	Why?	Escalate issues, receive guidance and updates on care priorities
	Who?	Nursing Staff
	Why?	Involvement in unit and patient care decisions
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Multidisciplinary team
	Why?	To ensure seamless delivery of quality care
	Who?	External healthcare providers and organisations
	Why?	To ensure appropriate Transfer of care
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	
Indirect Reports	Approx. 60 FTE

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (e.g. $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

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Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia.
2	Relevant management tertiary qualification or equivalent work experience, or a combination of study and work experience with a demonstrated commitment to professional development
3	A demonstrated knowledge and experience in the management and delivery of health care services
4	Proven ability in innovative clinical service delivery, harm minimisation and practice development
5	Effective interpersonal and communication skills that demonstrate the ability to engage, enable and manage teams
6	Proven ability to create and maintain a positive workplace culture and articulate and achieve a vision for nursing services
7	Recent clinical experience in an Operating Theatre / Perioperative Services

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Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

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Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

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Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

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Position Description

Facility/Service	The Sutherland Hospital, SESLHD
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services Anaesthetics and Post Anaesthesia Care Unit (PACU)
Manager	Nurse Manager 4 - Surgery, Anaesthetics & Perioperative Services
Position Number	101819
Cost Centre	163142

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Nursing Unit Manager Level 2 - Anaesthetics & Post Anaesthesia Care Unit	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	Current registration as a Registered Nurse/Midwife with the Nursing and Midwifery Board of Australia
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Nurse Unit Manager, Level 2	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role*	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
		All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Nursing Unit Manager Level 2 (NUM2) is the registered nurse in charge of the Anaesthetics & Post Anaesthesia Care Unit (PACU), reporting to the Nurse Manager 4 for Surgery, Anaesthetics and Perioperative services at The Sutherland Hospital within SESLHD. The purpose of the Nursing/Midwifery Unit Manager, Level 2 Anaesthetics & Post Anaesthesia Care Unit is to: • lead, direct and co-ordinate patient or client care;	

		• ensure the practice of nursing and/or midwifery is safe and efficient, maintaining standards of care through continual quality improvement initiatives. • lead and co-ordinate the nursing/midwifery and multi-disciplinary care team at the ward or unit level, and • monitor and manage the business and management functions and processes of the ward or unit As the leader of the unit, the NUM2 will demonstrate her/his capability through attitude, skills, behaviour and attributes, namely: • broad nursing/midwifery experience and knowledge; • understanding and acceptance that patients are the central focus of service delivery; • professional integrity; • ethical conduct; • accountability; • advocacy; • enabling others; • cultivation of collaborative relationships and effective team work; • commitment to advancing the profession of nursing/midwifery and care provision The NUM level 2 of the Anaesthetic and Post Anaesthesia Care Unit is responsible for working in collaboration and in consultation with the Nurse Manager- Surgery, Anaesthetics & Perioperative Services to ensure the delivery of optimal and safe patient care within Anaesthetics and Post Anaesthesia Care Unit through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM2 works closely and collaboratively with the NM in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department.

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*Patient Care Co-ordination and the practice of Nursing/Midwifery*	Lead, direct and co-ordinate patient care in the ward/unit • Ensure staff employed in the Anaesthetics & Post Anaesthesia Care Unit are aware of their responsibilities in coordinating the condition and progress of all patients in the ward environment, from admission to discharge, in accordance to NSW State Performance Indicators. • Provide leadership and support for the care and recognition of deteriorating patients and other clinical improvement initiatives, by ensuring that all staff have attended DETECT training. • Ensure staff compliance with the requirement to report all clinical incidents through IIMS. • Ensure that staff are aware of their responsibilities in relation to the nutritional intake of all patients and that they assist patients with meals when required.

		• Attend multidisciplinary ward/unit/team meeting/rounds where appropriate • Endeavour to ensure rosters are developed that provide an appropriate number and skill mix of staff to meet the patient care needs according to agreed profiles. • Ensure rosters meet the time frames of the NSW Nurses and Midwives (State), Award time frames. • Ensure that nurses employed in the Anaesthetics & Post Anaesthesia Care Unit are aware of their responsibility regarding identifying themselves, communicating what the plan of care is for their patients and when they may expect to be discharged. • Promote a culture where staff, patients and visitors are treated with courtesy and respect. • Ensure clinical supervision at the point of care occurs, in line with the Australian Nursing and Midwifery Council Decision Making Frameworks for Nurses and Midwives. Facilitate collaborative teams in the delivery of patient care • Implement a model of nursing care that accommodates and supports different levels of skill mix and experience – i.e. team nursing, caseloads. • Ensure that all staff understand their responsibilities and work within their scope of their practice, as determined by their Registration Body. • Provide clear guidelines that enable all staff to understand their clinical leadership responsibilities and function effectively in coordinating the provision of care by his/her team members. • Ensure that staff adhere to standardised approach to clinical handover, as per SESLHD procedure. • Ensure all staff are easily identified by patients and carers, by means which include their corporate uniform, where appropriate and ID badge. Use patient and carer feedback to inform service delivery • Facilitate a culture where staff meet and greet patients. • Support and maintain an audit trail that identifies how complaints and incidences are used to remodel service delivery. • Ensure complaints are managed in a timely manner and feedback provided to patients and carers; and • Utilise patient and carer stories that can be used to optimise service delivery. Enable a culture of enquiry and questioning about the practice of nursing/midwifery • Make informed decisions about practice improvement through regular quality reviews and audits, ensuring regular feedback to staff at ward/unit meetings. • Establish processes that ensure clinical staff receive feedback on their performance. • Ensure that the clinical handover between shifts is used as an educational opportunity for staff; and • Ensure that all staff are aware of their educational and supervisory responsibilities. Strive for the use of best practice and contemporary nursing knowledge in the delivery of nursing care. • Facilitate staff's awareness of and access to current policies and procedures. • Maintain work patterns and work structures to support and supervise beginning practitioners as they develop competence. • Foster a culture that encourages staff to source and utilise information/research to inform clinical practice; and • Ensure that all staff attends mandatory (including clinical) training programs that are best suited to meet service need. Uphold the principles of practice as defined by the Nursing and Midwives Act 1991, ANMC Codes of Conduct and Codes of Ethics and Professional Conduct

		• Ensure all registered and enrolled nurses hold current registration, refer to SESLHD policy. • Ensure enrolled nurses who administer medication are endorsed by the Nursing and Midwifery Board of Australia and are reassessed and reviewed annually. Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures • Maintain an awareness of competency standards and utilise in the performance development process with staff. • Ensure nursing staff work within their scope of practice. • Encourage staff to maintain a professional portfolio; and • In line with organisational systems, ensure that new policies and procedures are implemented and complied with, at ward/unit level. • Adhere to all MOH, SESLHD and local policies and business rules related to the safe handling and administration of medications. Maintains a professional standard of conduct which reflect the values of SESLHD
Standard Key Accountabilities*	*Nursing/Midwifery staff management and Leadership*	Be an exemplary role model for the professions of nursing/midwifery • Model and lead by example through own behaviour and communication styles the value of patients and carers. • Model and lead by example through own behaviour and communication styles the value of the profession of nursing • Attend regular unit rounds where appropriate for the clinical context. • Meet and greet patients regularly where appropriate • Establishment of a succession plan for the unit Establish and maintain relationships of trust in the workplace • Participate in regular unit rounds where appropriate • Establish processes and practices that enable participation of all members of the health care team • Establish practices that enable giving and receiving feedback Create an empowering work environment that enables the transfer of knowledge into practice • Establish practices that enable staff to have up-to-date Performance Reviews and staff have professional development plans. • Enable, facilitate and lead change initiatives, including models of care • Recognise, nurture and grow talent • Establish processes and practices that enable participation of all members of the Health Care Team • Establish practices that enable giving and receiving feedback and reflection on practice. Have an awareness of broader professional and health care issues and activities • Participate in own professional development and professional activities within the organisation. • Participate as an active member in professional association • Seek opportunities for self-professional development Inspire and support others to achieve their potential • Recognise, nurture and grow talent • Establish practices that enable giving and receiving feedback and reflection on practice Enable others to achieve a shared vision • Develop in collaboration with the health care team a shared vision and mission statement for the ward / unit • Model through own behaviour and communication the shared vision

		• Establish structures and processes that facilitate clinical supervision and mentoring for all members of the health care team
Standard Key Accountabilities*	*Ward/Unit/Team Management*	Ensure the human, physical and financial resources of the ward/unit are managed, in collaboration with relevant subject matter experts, to deliver safe and efficient health care • Ensure an appropriate system of internal controls exist and are maintained. • Participate in the annual development of the ward/unit staffing profile that determines the ward budget allocation. • Monitor and report on key performance indicators relevant to the ward/unit and develop strategies to address any issues including meeting unit budgets and FTE targets. • Within the respective unit, ensure coordination of functions between Clinical Support Officers and Administrative staff to ensure they support the work activities and outcomes required by the Nurse Unit Manager. Participate in problem solving in matters related to the functioning of the unit/ward • Model critical thinking • Enable others to participate in problem solving for themselves or as part of the team • Provide opportunities for others to be innovative • Support decision making with evidence • Demonstrate accountability for decisions that are made Establish and maintain processes to facilitate performance improvements • Facilitate ward meetings for all members of the health care team • Establish processes that enable the use of patients and carers feedback to develop services • Establish feedback processes to all staff that inform them of the ward/units performance Manage ward/unit staff to facilitate growth and development • Establish processes that ensure novice clinical staff are supported in their clinical practice and receive regular feedback on their performance • All staff have annual performance reviews and development plans established Monitor and maintain a safe environment for patients, staff and visitors in collaboration with the relevant subject matter experts • Establish processes and practices that enable participation of all members of the health care team to ensure that the ward/unit is safe • Establish processes that include those staff with expertise in clinical and occupational safety where appropriate • Institute processes than ensure data and information collected is used to inform decisions • Establish processes than ensure patients, carers and visitors are informed about safe practices in the health care environment. Ensure and maintain knowledge and participation in business management activities within NSW Ministry of Health, Local Health Districts, organisational policy and procedures and beyond. • Participate where appropriate in activities outside the ward/unit, including in-services, conferences and membership to other groups • Develop processes that will enable feedback to all members of the health care team on key Ministry, LHD and organisation activities and initiatives • Create processes that will ensure ward/unit/team activities and initiatives align with those of the Ministry, LHD and organisation

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Balancing clinical and resource decision making within finite resources to ensure new models of care are sustainable and evidence based. • Matching patient demands to staffing resources. • Meeting benchmarks and key performance indicator
Decision Making	Overall responsibility for decisions pertaining to patient care coordination and the day to day management of the unit.
Communication	Ensuring effective, timely and appropriate communication between all members of the multidisciplinary team, patients, their family members / carers and the general public

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager 4 Surgery, Anaesthetics & Perioperative Services
	Why?	To ensure service delivery is maintained as efficiently as possible
	Who?	Executive team
	Why?	Escalate issues, receive guidance and updates on care priorities
	Who?	Nursing Staff
	Why?	Involvement in unit and patient care decisions
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Multidisciplinary team
	Why?	To ensure seamless delivery of quality care
	Who?	External healthcare providers and organisations
	Why?	To ensure appropriate Transfer of care
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	Approx. 25 FTE
Indirect Reports	

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (e.g. $5,000.00).

As per delegation manual	As per delegation manual

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia.
2	Relevant management tertiary qualification or equivalent work experience, or a combination of study and work experience with a demonstrated commitment to professional development
3	A demonstrated knowledge and experience in the management and delivery of health care services
4	Proven ability in innovative clinical service delivery, harm minimisation and practice development
5	Effective interpersonal and communication skills that demonstrate the ability to engage, enable and manage teams
6	Proven ability to create and maintain a positive workplace culture and articulate and achieve a vision for nursing services
7	Recent clinical experience in the Anaesthetics/Post Anaesthesia Care/Peri Operative environment & demonstrated knowledge of clinical, financial & human resource management to support the daily operations of the department.

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
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Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

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Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Health
South Eastern Sydney
Local Health District

Facility/Service	The Sutherland Hospital
Department	Program 1 -Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services
Manager	Nurse Manager Grade 4 - Surgery, Anaesthetics and Perioperative Services
Position Number	711295
Cost Centre	163101

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Clinical Nurse Consultant Grade 2 – Surgical Specialties (General Surgery, Ophthalmology, ENT, Vascular)	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	*If Yes, Please list each Classification and grade below*
Award*		Public Health System Nurses & Midwives (State) Award	
Position Classification*		Clinical Nurse Consultant Grade 2	
Job Category Coding (ROB)*		Nursing & Midwifery, Clinical Nurse Consultant	
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		NO	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. All staff are expected to take reasonable care that their actions do not adversely affect the health and safety of others, that they comply with any reasonable instruction that is given them and with any reasonable policies/procedures relating to health or safety in the workplace, as well as notifying any hazards/risks or incidents to their managers. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital.	

		The Clinical Nurse Consultant – Surgical Specialties (General Surgery, Ophthalmology, ENT, Vascular) provides leadership and expertise in the care, management, education and support of patients within the Sutherland Hospital. The CNC works autonomously as well as being part of the multidisciplinary team. The CNC is responsible for the coordination of care for inpatients and outpatient related to Surgical Specialties. The CNC is an expert nurse who provides leadership, advice, recommendations on all aspects of nursing and consults on matters relating to safe and appropriate use of Surgical Specialties related nursing practices. The CNC provides information and education to enable high quality care; and provides evidence-based information, education and support to staff and patients. Clinical Nurse Consultant Grade 2 means: a registered nurse appointed as such to a position approved by the Health Service, who has at least 5 years full time equivalent post registration experience, with at least 3 years full time equivalent experience in the specialty field. In addition the employee must have approved post graduate nursing qualifications relevant to the field in which he/she is appointed to or such other qualifications or experience deemed appropriate by the Health Service. An employer may also require a higher qualification in the specialist nursing field where such qualification is considered essential for the performance of the individual position.

Section 2 – Key Accountabilities

Maintain responsibilities for personal and professional development by participating in training/education activities, and performance reviews in order to continuously improve the level of and quality of service.

Standard Key Accountabilities*	*(Free Text)*	**Domain 1 - Clinical Service and Consultancy** • Provides an expert client-centred consultancy practice participating in direct patient care provision • Provides education on complex clinical issues to clients and carers • Identifies and adopts innovative clinical practice models e.g. implementation and evaluation of new treatments, technologies, and therapeutic techniques relating to Surgical Specialties. • Participates/collaborates in the design and conduct of quality improvement initiatives. • Provides a complex client-centred consultancy practice within a mixed clinical environment and/or across a series of services **Domain 2 - Clinical Leadership** • Acts as a role model as an expert clinician in the clinical setting • Contributes to the development and management of clinical processes, e.g. care maps, clinical pathways. • Provides leadership in the ongoing review of clinical practice related to nursing presentation at The Sutherland Hospital. • Provides leadership in the ongoing review of clinical practice for a more complex service i.e. a service provided at multiple sites or by multiple CNCs across an area health service • Participates on state and on national working parties • Assumes leadership roles, which promote broader advancement of clinical practice, e.g. membership of editorial boards, leadership of

		position papers and development of advanced nursing practice standards **Domain 3 - Research** • Initiates, conducts and disseminates the findings of locally based research in Surgical Specialties. • Participates as co-researcher in larger studies • Manages research projects requiring clinical contribution from others • Adapts and applies related scientific research to a clinical specialty i.e. research from other scientific disciplines applied to nursing • Initiates original research projects • Disseminates own research results through specialist publications and presentations **Domain 4 – Education** • Participates in formal and informal education programs • Identifies clinical education needs • Collaborates with others in the development and delivery of education programs • Undertakes primary responsibility for the planning and implementation of specialist clinical education for the area health service • Develops significant education resources for nurses/midwives and other health care professional • Participates in the development and delivery of post graduate tertiary programs **Domain 5 – Clinical Services Planning and Management** • Identifies future issues and new directions for the service • Contributes to formal service and strategic planning processes within the organisation • Develops, implements and evaluates annual plans for nurse consultancy service • Provides ongoing comprehensive analyses of current practice and the impact of new directions on the clinical specialty service • Initiates, develops, implements and evaluates strategic changes for Surgical Specialties.

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	Balance the competing priorities of the position. Establish and maintain effective communication within the multidisciplinary team and across divisions, disciplines and affiliated health care providers in the community. Anticipate and respond quickly and appropriately to rapidly changing clinical and professional knowledge, environments and situations. Promote and consistently work from within a framework of Evidence Based

	Practice Foster a clinical environment that values and supports risk minimization and practice improvement
Decision Making	Clinical decisions within the boundaries of professional practice of a Registered Nurse with expert knowledge and experience of Surgical Specialties conditions. Exercise independent professional knowledge and judgement to solve problems of a complex clinical nature. Decisions likely to impact on service delivery or resource allocation must be made in consultation with management.
Communication	The Clinical Nurse Consultant will utilise excellent written and verbal communication skills to build strategic partnerships and improve clinical practice. A comprehensive formal report will be developed at the conclusion of any project undertaken, outlining the aims, methodology and outcomes of the project. Other reports and updates (written and verbal) will be provided by the Clinical Nurse Consultant as required.

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Medical, Nursing and Allied Health Staff
	Who?	Communication
	Who?	Nurse Manager
		Manager
Does this role routinely interact with external stakeholders?		
Key External Relationships	**Who?**	
	Why?	
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	NIL
Indirect Reports	NIL

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current Authority to Practice as a Registered Nurse/Midwife, Nursing and Midwifery Board of Australia and current NSW Driver's License (if required by service).
2	Minimum five years full time equivalent post qualification experience, with at least three years full time equivalent experience in the specialty field and post graduate qualifications relevant to the field of practice.
3	Proven clinical leadership skills and an ability to work collaboratively within a multidisciplinary framework with a demonstrated commitment to excellence in nursing practice.
4	Demonstrated effective communication and inter-personal skills across a variety of mediums and an understanding of the practice development framework.
5	Proven ability to implement changes and develop direction in clinical practice by the utilisation of evidence based research.
6	Demonstrated skills in strategic and clinical service planning including an understanding of organisational behaviour, change management and cultural change processes.
7	Demonstrated skills in clinical teaching, competency in the use of contemporary information systems and experience in the development of specialty education programs
8	Demonstrated clinical expertise in client-centred consultancy with the ability to work independently

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 11 – Capabilities for the Role

The capabilities (i.e. the knowledge, skills and abilities) for the role are obtained from the NSW Public Sector Capability Framework and any relevant occupation specific capability set.

The focus capabilities for the role are the capabilities in which occupants must demonstrate immediate competence. The behavioural indicators provide examples of the types of behaviours that would be expected at that level and should be reviewed in conjunction with the role's key accountabilities.

Select at least one Focus Capability from each Capability Group. A minimum of 4 and a maximum of 10 Focus Capabilities should apply to a role. If the role contains People Management capabilities, a minimum of 5 Focus Capabilities should apply.

Capability Group	Focus?	Capability	Level
Personal Attributes	☐	Display Resilience and Courage	
	☐	Act with Integrity	
	☐	Manage Self	
	☐	Value Diversity	
Relationships	☐	Communicate Effectively	
	☐	Commitment to Customer Service	
	☐	Work Collaboratively	
	☐	Influence and Negotiate	
Results	☐	Deliver Results	
	☐	Plan and Prioritise	
	☐	Think and Solve Problems	
	☐	Demonstrate Accountability	
Business Enablers	☐	Finance	
	☐	Technology	
	☐	Procurement and Contract Management	
	☐	Project Management	
People Management	☐	Manage and Develop People	
	☐	Inspire Direction and Purpose	
	☐	Optimise Business Outcomes	
	☐	Manage Reform and Change	

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Health
South Eastern Sydney
Local Health District

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services Operating Theatres
Manager	Nurse Unit Manager Level 3 - Operating Theatres
Position Number	TBA
Cost Centre	163126

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Clinical Nurse Educator – Operating Theatres	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	Current registration as a Registered Nurse/Midwife with the Nursing and Midwifery Board of Australia
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Clinical Nurse Educator	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. All staff are expected to take reasonable care that their actions do not adversely affect the health and safety of others, that they comply with any reasonable instruction that is given them with any reasonable policies/procedures relating to the health or safety in the workplace, as well as notifying any hazards/risks or incidents to their managers. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Clinical Nurse Educator (CNE) will be guided by the Nurse Unit Manager to lead, develop, co-ordinate, deliver/implement and evaluate education and learning for	

		nurses and other staff as required within The Sutherland Hospital, Operating Theatres. The CNE will provide clinical teaching, orientation, skill accreditation and professional development support for all nursing staff. Such education may include orientation and/or transitioning for new nursing staff, undergraduate and casual nurses as well as meeting the ongoing educational needs of existing nursing staff. The CNE will provide clinical supervision at the point of care within everyday clinical practice, in line with the ANMC Decision Making Frameworks for Nurses and Midwives.

Section 2 – Key Accountabilities

Maintain responsibilities for personal and professional development by participating in training/education activities, and performance reviews in order to continuously improve the level of and quality of service

Key Performance Areas / Duties:

The key performance areas have been developed under four domains: Professional Development and Education; Professional Practice; Quality Improvement and Management; and Enabling Others. Behaviour descriptors are included as a guide to assist with performance management of the role. They are not all inclusive and may vary with individual role requirements.

Standard Key Accountabilities	*1.Professional Development and Education*	1.1 Implement and evaluate clinical education programs and in-services for nursing/midwifery staff, including newly registered/enrolled nurses, nurses transitioning to clinical specialities. 1.2 Assist with the local orientation of all new nurses to the clinical area 1.3 Provide clinical support to newly registered/enrolled nurses, nurses transitioning to clinical specialities. 1.4 Identify individual learning needs of nursing/midwifery staff in consultation with the staff member, N/MUM and other key clinical support nurses, in order to support individual learning plans. 1.5 The clinical assessment of nursing/midwifery practice through demonstration of practice, targeted education, and certification of competency (where required). 1.6 Support staff to provide clinical supervision at the point of care within everyday clinical practice, 1.7 Develop and maintain clinical educational resources. 1.8 Utilise evidence based learning in clinical education.
	2. Professional Practice	2.1 Active participation in the development and review of nursing/midwifery practice. 2.2 Active involvement in activities that promote and engage others in meeting the philosophy, goals, values and objectives of the ward/unit, the organisation, the Area Health Service, and NSW Health. 2.3 Adhere to all MOH, SESLHD and local policies and business rules related to the safe handling and administration of medications 2.4 Perform the role professionally, collaboratively and constructively. 2.5 Model through behaviour and communication. 2.6 Actively participate in appropriate professional organisations. 2.7 Actively participate in ongoing education initiatives, which could include conferences, post graduate/enrolment education and publication of work undertaken. 2.8 Facilitation of change, for example the learning of new technologies and forms of documentation.

	3. Quality Improvement and Management	3.1 Participation in quality improvement and organisational accreditation activities. 3.2 Contributes to the performance review of other nursing/midwifery staff in liaison with and as requested by nursing/midwifery management 3.3 Active participation on relevant committees and working groups as required. 3.4 Provide information and advice concerning new and existing education resources and equipment required to meet the learning needs of nursing/midwifery staff in the clinical environment.
	4. Enabling Others	4.1 Act as a role model and learning resource for all nursing/midwifery staff. 4.2 Provide leadership to others. 4.3 Facilitate the integration of evidence based practice (EBP) into nursing/midwifery practice. 4.4 Encourage others to actively participate in appropriate professional organisations. 4.5 Encourage others to actively participate in ongoing education initiatives, including conferences, in services, post graduate/enrolment education and publication of work undertaken. 4.6 Facilitate and nurture life-long learning skills in others

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Identification of learning needs • Planning, development, delivery and evaluation of clinical education programs at ward/unit level to address learning needs • Development of a systematic approach to competency assessment of nursing/midwifery staff and relevant students • Use a variety of educational approached to address learning needs • Ensure that care is based on the best available evidence and that it complies with organizational, Local Health District, Ministry of Health policies and legislative requirements • Liaison with the Nurse/Midwife Manager, Nursing/Midwifery unit Manager in relation to nursing practice and performance issues
Decision Making	• Ability to identify and analyse problems, intervene, make sound decisions and act within policies and scope of practice • Reports issues/incidents to appropriate staff when required
Communication	• Establishment and maintenance of collaborative working relationships with all members of the multidisciplinary team. • Presents facts clearly, concisely and logically in verbal and written documents, reports and educational materials • Provides support for all team members in day to day and in rapidly changing or challenging situations • Participates in ward/unit meetings and appropriate committees and working party at ward/unit, facility and clinical stream levels

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nursing staff
	Why?	Coordinate education for learners with a range of learning needs; provide feedback which is timely, constructive and specific.
	Who?	Multidisciplinary team, supervisor/s, manager/s and professional leads
	Why?	Ensure consultation on current clinical practice, review of current education needs programs and changes
	Who?	SESLHD Nursing and Midwifery Directorate and Clinical Governance Directorate
	Why?	To meet accountabilities and responsibilities as outlined in the SESLHD CNE/CME Framework
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	External healthcare providers and organisations
	Why?	Make appropriate referrals to support patients' requirements on discharge and for ongoing care needs
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	NIL
Indirect Reports	NIL

Section 6 – Financial Delegation

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check

		• *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia
2	Holds a relevant clinical or education post registration qualification or 3 years clinical experience in the field
3	Effective communication and interpersonal skills
4	Understanding of teaching and learning in the health care environment (adult learning principles)
5	Demonstrated clinical teaching & facilitation skills
6	Demonstrated knowledge of competency attainment and assessment
7	Computer literacy and understanding of hospital information systems
8	Demonstrated education experience in an acute care facility within the specialty field.

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
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Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
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Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
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Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
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Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
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PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

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Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Health
South Eastern Sydney
Local Health District

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services Anaesthetics and Post Anaesthesia Care Unit (PACU)
Manager	Nurse Unit Manager Level 2 – Anaesthetics and Post Anaesthesia Care Unit (PACU)
Position Number	TBA
Cost Centre	163142

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Clinical Nurse Educator – Anaesthetics and Post Anaesthesia Care Unit (PACU)	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	Current registration as a Registered Nurse/Midwife with the Nursing and Midwifery Board of Australia
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Clinical Nurse Educator	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. All staff are expected to take reasonable care that their actions do not adversely affect the health and safety of others, that they comply with any reasonable instruction that is given them with any reasonable policies/procedures relating to the health or safety in the workplace, as well as notifying any hazards/risks or incidents to their managers. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Clinical Nurse Educator (CNE) will be guided by the Nurse Unit Manager to lead, develop, co-ordinate, deliver/implement and evaluate education and learning for	

		nurses and other staff as required within The Sutherland Hospital, Anaesthetics and Post Anaesthesia Care Unit (PACU). The CNE will provide clinical teaching, orientation, skill accreditation and professional development support for all nursing staff. Such education may include orientation and/or transitioning for new nursing staff, undergraduate and casual nurses as well as meeting the ongoing educational needs of existing nursing staff. The CNE will provide clinical supervision at the point of care within everyday clinical practice, in line with the ANMC Decision Making Frameworks for Nurses and Midwives.

Section 2 – Key Accountabilities

Maintain responsibilities for personal and professional development by participating in training/education activities, and performance reviews in order to continuously improve the level of and quality of service

Key Performance Areas / Duties:

The key performance areas have been developed under four domains: Professional Development and Education; Professional Practice; Quality Improvement and Management; and Enabling Others. Behaviour descriptors are included as a guide to assist with performance management of the role. They are not all inclusive and may vary with individual role requirements.

Standard Key Accountabilities	*1.Professional Development and Education*	1.1 Implement and evaluate clinical education programs and in-services for nursing/midwifery staff, including newly registered/enrolled nurses, nurses transitioning to clinical specialities. 1.2 Assist with the local orientation of all new nurses to the clinical area 1.3 Provide clinical support to newly registered/enrolled nurses, nurses transitioning to clinical specialities. 1.4 Identify individual learning needs of nursing/midwifery staff in consultation with the staff member, N/MUM and other key clinical support nurses, in order to support individual learning plans. 1.5 The clinical assessment of nursing/midwifery practice through demonstration of practice, targeted education, and certification of competency (where required). 1.6 Support staff to provide clinical supervision at the point of care within everyday clinical practice, 1.7 Develop and maintain clinical educational resources. 1.8 Utilise evidence based learning in clinical education.
	2. Professional Practice	2.1 Active participation in the development and review of nursing/midwifery practice. 2.2 Active involvement in activities that promote and engage others in meeting the philosophy, goals, values and objectives of the ward/unit, the organisation, the Area Health Service, and NSW Health. 2.3 Adhere to all MOH, SESLHD and local policies and business rules related to the safe handling and administration of medications 2.4 Perform the role professionally, collaboratively and constructively. 2.5 Model through behaviour and communication. 2.6 Actively participate in appropriate professional organisations. 2.7 Actively participate in ongoing education initiatives, which could include conferences, post graduate/enrolment education and publication of work undertaken. 2.8 Facilitation of change, for example the learning of new technologies and forms of documentation.

	3. Quality Improvement and Management	3.1 Participation in quality improvement and organisational accreditation activities. 3.2 Contributes to the performance review of other nursing/midwifery staff in liaison with and as requested by nursing/midwifery management 3.3 Active participation on relevant committees and working groups as required. 3.4 Provide information and advice concerning new and existing education resources and equipment required to meet the learning needs of nursing/midwifery staff in the clinical environment.
	4. Enabling Others	4.1 Act as a role model and learning resource for all nursing/midwifery staff. 4.2 Provide leadership to others. 4.3 Facilitate the integration of evidence based practice (EBP) into nursing/midwifery practice. 4.4 Encourage others to actively participate in appropriate professional organisations. 4.5 Encourage others to actively participate in ongoing education initiatives, including conferences, in services, post graduate/enrolment education and publication of work undertaken. 4.6 Facilitate and nurture life-long learning skills in others

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Identification of learning needs • Planning, development, delivery and evaluation of clinical education programs at ward/unit level to address learning needs • Development of a systematic approach to competency assessment of nursing/midwifery staff and relevant students • Use a variety of educational approached to address learning needs • Ensure that care is based on the best available evidence and that it complies with organizational, Local Health District, Ministry of Health policies and legislative requirements • Liaison with the Nurse/Midwife Manager, Nursing/Midwifery unit Manager in relation to nursing practice and performance issues
Decision Making	• Ability to identify and analyse problems, intervene, make sound decisions and act within policies and scope of practice • Reports issues/incidents to appropriate staff when required
Communication	• Establishment and maintenance of collaborative working relationships with all members of the multidisciplinary team. • Presents facts clearly, concisely and logically in verbal and written documents, reports and educational materials • Provides support for all team members in day to day and in rapidly changing or challenging situations • Participates in ward/unit meetings and appropriate committees and working party at ward/unit, facility and clinical stream levels

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nursing staff
	Why?	Coordinate education for learners with a range of learning needs; provide feedback which is timely, constructive and specific.
	Who?	Multidisciplinary team, supervisor/s, manager/s and professional leads
	Why?	Ensure consultation on current clinical practice, review of current education needs programs and changes
	Who?	SESLHD Nursing and Midwifery Directorate and Clinical Governance Directorate
	Why?	To meet accountabilities and responsibilities as outlined in the SESLHD CNE/CME Framework
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	External healthcare providers and organisations
	Why?	Make appropriate referrals to support patients' requirements on discharge and for ongoing care needs
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	NIL
Indirect Reports	NIL

Section 6 – Financial Delegation

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check

		• *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia
2	Holds a relevant clinical or education post registration qualification or 3 years clinical experience in the field
3	Effective communication and interpersonal skills
4	Understanding of teaching and learning in the health care environment (adult learning principles)
5	Demonstrated clinical teaching & facilitation skills
6	Demonstrated knowledge of competency attainment and assessment
7	Computer literacy and understanding of hospital information systems
8	Demonstrated education experience in an acute care facility within the specialty field.

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services Anaesthetics and Post Anaesthesia Care Unit (PACU)
Manager	Nurse Unit Manager Level 2 – Anaesthetics and Post Anaesthesia Care Unit (PACU)
Position Number	TBA
Cost Centre	163142

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Clinical Nurse Specialist Grade 2 – Pain, Anaesthetics and Post Anaesthesia Care	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	
Award*		*Public Health System Nurses' and Midwives' (State) Award*	
Position Classification*		Clinical Nurse/Midwife Specialist Grade 2	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*			
Primary Purpose of the role	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. All staff are expected to take reasonable care that their actions do not adversely affect the health and safety of others, that they comply with any reasonable instruction that is given them and with any reasonable policies/procedures relating to health or safety in the workplace, as well as notifying any hazards/risks or incidents to their managers. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital.	

		The Clinical Nurse Specialist Grade 2 Pain, Anaesthetics and Post Anaesthesia Care is a Registered Nurse responsible for the co-ordination of activities with regards to acute pain, anaesthesia and post anaesthesia care by providing expert client centred practice, consultation and education support to patients, their families and carers, nursing staff, junior medical officers and health care professionals, to ensure optimal pain management, anaesthetic and post anaesthesia clinical outcomes. The position involves working collaboratively with the Department of Anaesthetics, admitting and multidisciplinary team, acting as a clinical expert, professional role model and change agent to promote practice development, education, quality initiatives and enable the delivery of safe, efficient and high quality acute pain management, anaesthetic and post anaesthesia care. The Clinical Nurse Specialist Grade 2 provides complex consultancy service, clinical leadership, clinical supervision, provides direction, acts as a resource to other health care professionals and services to enhance capability and knowledge of staff and enable delivery of optimal care in relation to the care of Pain, Anaesthetic and Post Anaesthesia patients.

Section 2 – Key Accountabilities

Maintain responsibilities for personal and professional development by participating in training/education activities and performance reviews in order to continuously improve the level and quality of service.

Standard Key Accountabilities	*Care Delivery*	• Ensure optimal outcomes for Pain, Anaesthetic and Post Anaesthesia patients by maintaining and promoting best practice, including evaluation of care outcomes. • Develops clear communication, liaison and collaborative working relationships with Nursing/Midwifery Unit Managers; medical teams; allied health; other staff across the continuum of care. • Demonstrated effective communication through: o use of appropriate language when interacting with patients, o clinical and non-clinical partners; being courteous and considerate; o use of clear, concise and legible written communications within all documentation. • Involve patients and their carers' in planning care to meet their individual needs. • Anticipate patient/carer concerns and intervene early to resolve matters. • Take action to resolve complaints / concerns at the patient interface as soon possible. Ensure feedback to NUMs and other departmental heads as appropriate. • Maintain confidentiality on all issues relating to patients, colleagues and the organisation. • Treat all patients/carers and colleagues with respect while being responsive to their needs. • Maintain and act as a role model for appropriate hand hygiene measures at all times. • Participate in gathering information to identify the patient/carer experience and identify changes for implementation.

	Leadership	• Provide leadership in the: management; coordination and monitoring of Pain, Anaesthetic and Post Anaesthesia patients as they progress through their health care journey. • Provide effective leadership by: providing direction; guidance and feedback to all clinical staff in relation to the care of Pain, Anaesthetic and Post Anaesthesia patients. • Assume a leadership role in the maintenance of current Policies, Procedures and Standards. • Facilitate patient flow for Pain, Anaesthetic and Post Anaesthesia by: o ensuring that a documented plan of care is in place for complex patients; o development and adherence to clinical pathways; o coordinating discharge planning for complex patients. • Escalate clinical concerns, adverse events, critical incidents, 'near misses' and complaints to the relevant Manager. Document same in IMS+.
	Administration and Documentation	• Undertake all administrative and documentation requirements and ensure that they are initiated and completed in a professional and timely manner. • Complete and maintain contemporaneous documentation in the medical record that is objective, accurate and legible ensuring the documentation (e.g. nursing/midwifery history, nursing/midwifery care plans) meet the requirements of SESLHD policies and procedures and NSW Health Guidelines. • Complete documentation in relation to medication administration in accordance with NSW Health Policy. • Report incidents and document through notification report (IIMS) when appropriate and as per NSW Health Policy. • Participate in clinical and professional data collection as required.
	Technical Skills and Application	• Demonstrate the knowledge and application of skills required of a Clinical Nurse/Midwife Specialist in contemporary Pain, Anaesthetic and Post Anaesthesia Nursing/Midwifery Practice, including knowledge and understanding of appropriate equipment, legislation, policies and procedures. • Maintain mastery of all agreed Pain, Anaesthetic and Post Anaesthesia nursing/midwifery competencies. • Utilise proactive, problem solving approach in: assessing; planning; implementing and evaluating all aspects of clinical care. • Maintain competency in basic life support skills as appropriate through annual accreditation. • Be aware of and adhere to SESLHD policies and procedures and legislative requirements. • Be a driver of developing and maintaining, implementing and updating patient care plans and clinical pathways as indicated. • Maintain patient/client safety through an effective handover process
	Teamwork and Communication	• Provide effective leadership by providing direction, guidance and feedback to nursing/midwifery staff in relation to the care of Pain, Anaesthetic and Post Anaesthesia patients. • Work in collaboration with multidisciplinary staff across hospital and community services. • Assist nursing/midwifery staff to gain the requisite skills and knowledge to ensure maintenance of best practice standards for Pain, Anaesthetic and Post Anaesthesia patients. Feedback to NUM/MUM of any clinical concerns around staff competence.

		• Support and acknowledge the achievements of colleagues • Actively participate in relevant meetings. • Mentor nursing/midwifery students and new practitioners. Assist with development, implementation and evaluation of learning and development plans. • Participate in the orientation of new staff. • Act as resource person for other nursing and midwifery staff.
Standard Key Accountabilities	*Continuous improvement*	• Be familiar with and participate in the quality based accreditation program (NSQHS and WH&S Numerical Profiles). • Assist with coordinating and evaluating clinical standards for Pain, Anaesthetic and Post Anaesthesia • Ensure that quality services are delivered to both internal and external clients by leadership and participation in continuous improvement activities. • Review and reflect on own clinical practice to identify and act upon opportunities for improvement and professional development. • Participate in forums/workshops for development and review of practice models. • Identify and initiate unit based quality improvement activities participating in monitoring and evaluating outcomes.
	Enabling Others	• Provide information to consumers and carers regarding rights and responsibilities for participation in the service. • Act as a role model and learning resource for all nursing/midwifery staff as well as other health professionals. • Provide leadership to all nursing/midwifery staff as well as other health professionals. • Facilitate the integration of evidence based practice (EBP) into nursing practice. • Active involvement in activities that promote and engage others in meeting the philosophy, goals, core values and objectives of the ward/unit, the organisation, the Local Health District, and Ministry of Health. • Takes on a leadership role in the coordination of clinical care. • Provide supervision, guidance and delegation of tasks to enrolled nurses and support workers
	Work Health &Safety Responsibilities	• Take reasonable care of the health and safety of other persons at the workplace. • Cooperate with your employer with respect to WHS Legislative requirements. • Follow all written instructions on safety measures and procedures. • Use equipment and assistive devices and wear personal protective equipment, or clothing that is required by your employer. • Report any hazard detected in the workplace immediately to your supervisor. • Report any Accident / incident / injury / near miss occurring in the workplace immediately to your supervisor. • Attend training sessions as required by your employer. • Communicate and contribute to the WHS consultative process established within the workplace.

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Balance competing priorities of the position:
Decision Making	• Clinical decisions within the boundaries of professional practice of an RN with expert knowledge and experience of a Clinical Nurse Specialists • Exercise independent professional knowledge and judgement to solve problems of a complex clinical nature.
Communication	• Model communication that reflects the vision and goals of the organisation and Anaesthetic and Post Anaesthesia Care Unit and reflects the value of the profession of nursing. • Communicate in a transparent and respectful manner with the multidisciplinary team and across divisions, disciplines and affiliated health care providers.

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Unit Manager Level 2 Anaesthetics and Post Anaesthesia Care Unit
	Why?	Manager
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Staff/Patients/Carers
	Why?	Facilitates open communication to promote a high level of customer service
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	nil
Indirect Reports	

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration with the Nursing & Midwifery Board of Australia (AHPRA).
2	Relevant Post graduate qualifications in Pain, Anaesthetics or Post Anaesthesia or related specialty and at least 3 years recent experience working in the Pain, Anaesthetics and Post Anaesthesia clinical area
3	Demonstrated ability to manage complex clinical care and service delivery issues and problem solve through the development and use of clinical management plans.
4	Demonstrated ability to exercise extended autonomy of decision making while working as part of a multidisciplinary team and apply professional and ethical boundaries when dealing with complex situations
5	Demonstrated skills in the development & facilitation of patient and carer education and staff
6	Demonstrated high level written and verbal communication, interpersonal skills and the ability to identify key messages, issues and concerns when communicating with others.
7	Detailed knowledge and understanding of harm minimisation and evidence of leadership in safety and quality innovation.
8	Demonstrated competence in the use of health-related information technology

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 11 – Capabilities for the Role

The capabilities (i.e. the knowledge, skills and abilities) for the role are obtained from the NSW Public Sector Capability Framework and any relevant occupation specific capability set.

The focus capabilities for the role are the capabilities in which occupants must demonstrate immediate competence. The behavioural indicators provide examples of the types of behaviours that would be expected at that level and should be reviewed in conjunction with the role's key accountabilities.

Select at least one Focus Capability from each Capability Group. A minimum of 4 and a maximum of 10 Focus Capabilities should apply to a role. If the role contains People Management capabilities, a minimum of 5 Focus Capabilities should apply.

Capability Group	Focus?	Capability	Level
Personal Attributes	☐	Display Resilience and Courage	
	☐	Act with Integrity	
	☐	Manage Self	
	☐	Value Diversity	
Relationships	☐	Communicate Effectively	
	☐	Commitment to Customer Service	
	☐	Work Collaboratively	
	☐	Influence and Negotiate	
Results	☐	Deliver Results	
	☐	Plan and Prioritise	
	☐	Think and Solve Problems	
	☐	Demonstrate Accountability	
Business Enablers	☐	Finance	
	☐	Technology	
	☐	Procurement and Contract Management	
	☐	Project Management	
People Management	☐	Manage and Develop People	
	☐	Inspire Direction and Purpose	
	☐	Optimise Business Outcomes	
	☐	Manage Reform and Change	

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Health
South Eastern Sydney
Local Health District

Facility/Service	The Sutherland Hospital, SESLHD
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services Surgical Bookings, Waitlist, Pre Admission and Surgical Clinics
Manager	Nurse Manager 4 - Surgery, Anaesthetics & Perioperative Services
Position Number	TBA
Cost Centre	163005

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Nursing Unit Manager Level 3 - Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	*If Yes, Please list each Classification and grade below*
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Nurse Unit Manager, Level 3	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Nursing Unit Manager Level 3 (NUM3) is the registered nurse in charge of Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics within The Sutherland Hospital, SESLHD. The NUM 3 is responsible for the coordination and management of the surgical waitlists, monitor wait time KPI's to ensure patients are being treated within clinical	

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		appropriate timeframes, implementation of MoH policy and procedures, management of surgical bookings and pre admissions & surgical clinic staff. The purpose of the Nursing Unit Manager Level 3, Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics is to: • lead, direct and co-ordinate patient or client care; • ensure the practice of nursing and/or midwifery is safe and efficient, maintaining standards of care through continual quality improvement initiatives. • lead and co-ordinate the nursing/midwifery and multi-disciplinary care team at the ward or unit level, and • monitor and manage the business and management functions and processes of the ward or unit As the leader of the unit, the NUM/MUM will demonstrate her/his capability through attitude, skills, behaviour and attributes, namely: • broad nursing/midwifery experience and knowledge; • understanding and acceptance that patients are the central focus of service delivery; • professional integrity; • ethical conduct; • accountability; • advocacy; • enabling others; • cultivation of collaborative relationships and effective team work; • commitment to advancing the profession of nursing/midwifery and care provision The Nurse Unit Manager Level 3, whose responsibilities in relation to patient services, ward or unit management and staff management are in excess of those of a Nursing Unit Manager Level 2. The NUM level 3 is responsible for working in collaboration and in consultation with the Nurse Manager- Surgery, Anaesthetics & Perioperative Services to ensure the delivery of optimal and safe patient care through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM3 works closely and collaboratively with the NM in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department.

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*Patient Care Co-ordination and the practice of Nursing*	Lead, direct and co-ordinate patient care in the ward/unit • Ensure staff employed in the Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics are aware of their responsibilities in coordinating the condition and progress of all patients in the ward environment, from admission to discharge, in accordance to NSW State Performance Indicators.

		• Provide leadership and support for the care and recognition of deteriorating patients and other clinical improvement initiatives, by ensuring that all staff have attended DETECT training. • Ensure staff compliance with the requirement to report all clinical incidents through IIMS. • Ensure that staff are aware of their responsibilities in relation to the nutritional intake of all patients and that they assist patients with meals when required. • Attend multidisciplinary ward/unit/team meeting/rounds where appropriate • Endeavour to ensure rosters are developed that provide an appropriate number and skill mix of staff to meet the patient care needs according to agreed profiles. • Ensure rosters meet the time frames of the NSW Nurses and Midwives (State), Award time frames. • Ensure that nurses employed in the Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics are aware of their responsibility regarding identifying themselves, communicating what the plan of care is for their patients and when they may expect to be discharged. • Promote a culture where staff, patients and visitors are treated with courtesy and respect. • Ensure clinical supervision at the point of care occurs, in line with the Australian Nursing and Midwifery Council Decision Making Frameworks for Nurses and Midwives. Facilitate collaborative teams in the delivery of patient care • Implement a model of nursing care that accommodates and supports different levels of skill mix and experience – i.e. team nursing, caseloads. • Ensure that all staff understand their responsibilities and work within their scope of their practice, as determined by their Registration Body. • Provide clear guidelines that enable all staff to understand their clinical leadership responsibilities and function effectively in coordinating the provision of care by his/her team members. • Ensure that staff adhere to standardised approach to clinical handover, as per SESLHD procedure. • Ensure all staff are easily identified by patients and carers, by means which include their corporate uniform, where appropriate and ID badge. Use patient and carer feedback to inform service delivery • Facilitate a culture where staff meet and greet patients. • Support and maintain an audit trail that identifies how complaints and incidences are used to remodel service delivery. • Ensure complaints are managed in a timely manner and feedback provided to patients and carers; and • Utilise patient and carer stories that can be used to optimise service delivery. Enable a culture of enquiry and questioning about the practice of nursing/midwifery • Make informed decisions about practice improvement through regular quality reviews and audits, ensuring regular feedback to staff at ward/unit meetings. • Establish processes that ensure clinical staff receive feedback on their performance. • Ensure that the clinical handover between shifts is used as an educational opportunity for staff; and • Ensure that all staff are aware of their educational and supervisory responsibilities. Strive for the use of best practice and contemporary nursing knowledge in the delivery of nursing care. • Facilitate staff's awareness of and access to current policies and procedures.

		• Maintain work patterns and work structures to support and supervise beginning practitioners as they develop competence. • Foster a culture that encourages staff to source and utilise information/research to inform clinical practice; and • Ensure that all staff attends mandatory (including clinical) training programs that are best suited to meet service need. Uphold the principles of practice as defined by the Nursing and Midwives Act 1991, ANMC Codes of Conduct and Codes of Ethics and Professional Conduct • Ensure all registered and enrolled nurses hold current registration, refer to SESLHD policy. • Ensure enrolled nurses who administer medication are endorsed by the Nursing and Midwifery Board of Australia and are reassessed and reviewed annually. Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures • Maintain an awareness of competency standards and utilise in the performance development process with staff. • Ensure nursing staff work within their scope of practice. • Encourage staff to maintain a professional portfolio; and • In line with organisational systems, ensure that new policies and procedures are implemented and complied with, at ward/unit level. • Adhere to all MOH, SESLHD and local policies and business rules related to the safe handling and administration of medications. Maintains a professional standard of conduct which reflect the values of SESLHD

Standard Key Accountabilities*	*Nursing staff management and Leadership*	Be an exemplary role model for the professions of nursing • Model and lead by example through own behaviour and communication styles the value of patients and carers. • Model and lead by example through own behaviour and communication styles the value of the profession of nursing • Attend regular unit rounds where appropriate for the clinical context. • Meet and greet patients regularly where appropriate • Establishment of a succession plan for the unit Establish and maintain relationships of trust in the workplace • Participate in regular unit rounds where appropriate • Establish processes and practices that enable participation of all members of the health care team • Establish practices that enable giving and receiving feedback Create an empowering work environment that enables the transfer of knowledge into practice • Establish practices that enable staff to have up-to-date Performance Reviews and staff have professional development plans. • Enable, facilitate and lead change initiatives, including models of care • Recognise, nurture and grow talent • Establish processes and practices that enable participation of all members of the Health Care Team • Establish practices that enable giving and receiving feedback and reflection on practice.

		Have an awareness of broader professional and health care issues and activities • Participate in own professional development and professional activities within the organisation. • Participate as an active member in professional association • Seek opportunities for self-professional development Inspire and support others to achieve their potential • Recognise, nurture and grow talent • Establish practices that enable giving and receiving feedback and reflection on practice Enable others to achieve a shared vision • Develop in collaboration with the health care team a shared vision and mission statement for the ward / unit • Model through own behaviour and communication the shared vision • Establish structures and processes that facilitate clinical supervision and mentoring for all members of the health care team

Standard Key Accountabilities*	*Ward/Unit/Team Management*	Ensure the human, physical and financial resources of the ward/unit are managed, in collaboration with relevant subject matter experts, to deliver safe and efficient health care • Ensure an appropriate system of internal controls exist and are maintained. • Participate in the annual development of the ward/unit staffing profile that determines the ward budget allocation. • Monitor and report on key performance indicators relevant to the ward/unit and develop strategies to address any issues including meeting unit budgets and FTE targets. • Within the respective unit, ensure coordination of functions between Clinical Support Officers and Administrative staff to ensure they support the work activities and outcomes required by the Nurse Unit Manager. Participate in problem solving in matters related to the functioning of the unit/ward • Model critical thinking • Enable others to participate in problem solving for themselves or as part of the team • Provide opportunities for others to be innovative • Support decision making with evidence • Demonstrate accountability for decisions that are made Establish and maintain processes to facilitate performance improvements • Facilitate ward meetings for all members of the health care team • Establish processes that enable the use of patients and carers feedback to develop services • Establish feedback processes to all staff that inform them of the ward/units performance Manage ward/unit staff to facilitate growth and development • Establish processes that ensure novice clinical staff are supported in their clinical practice and receive regular feedback on their performance • All staff have annual performance reviews and development plans established

		Monitor and maintain a safe environment for patients, staff and visitors in collaboration with the relevant subject matter experts • Establish processes and practices that enable participation of all members of the health care team to ensure that the ward/unit is safe • Establish processes that include those staff with expertise in clinical and occupational safety where appropriate • Institute processes than ensure data and information collected is used to inform decisions • Establish processes than ensure patients, carers and visitors are informed about safe practices in the health care environment. Ensure and maintain knowledge and participation in business management activities within NSW Ministry of Health, Local Health Districts, organisational policy and procedures and beyond. • Participate where appropriate in activities outside the ward/unit, including in-services, conferences and membership to other groups • Develop processes that will enable feedback to all members of the health care team on key Ministry, LHD and organisation activities and initiatives • Create processes that will ensure ward/unit/team activities and initiatives align with those of the Ministry, LHD and organisation

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Balancing clinical and resource decision making within finite resources • Matching patient demands to staffing resources – ensuring equity of access for patients • Meeting benchmarks and key performance indicator for elective surgery waitlist
Decision Making	Overall responsibility for decisions pertaining to patient care coordination and the day to day management of the unit.
Communication	Ensuring effective, timely and appropriate communication between all members of the multidisciplinary team, patients, their family members / carers and the general public

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Clinical Program Director/Director of Nursing
	Why?	To provide and receive feedback regarding operational issues
	Who?	Executive team
	Why?	Escalate issues, receive guidance and updates on care priorities
	Who?	Nursing Staff
	Why?	Involvement in unit and patient care decisions

Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Multidisciplinary team
	Why?	To collaborate over patient care to optimise patient outcomes
	Who?	External healthcare providers and organisations
	Why?	To ensure appropriate transfer of care
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	12 FTE
Indirect Reports	

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (e.g. $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia and current NSW Driver's License (if required by service).
2	Relevant management tertiary qualification or equivalent work experience, or a combination of study and work experience with a demonstrated commitment to professional development
3	A demonstrated knowledge and experience in the management and delivery of health care services
4	Proven ability in innovative clinical service delivery, harm minimisation and practice development
5	Effective interpersonal and communication skills that demonstrate the ability to engage, enable and manage teams
6	Proven ability to create and maintain a positive workplace culture and articulate and achieve a vision for nursing services
7	Recent clinical experience in Perioperative / Surgical Bookings /Waitlist, environment & demonstrated knowledge of clinical, financial and human resource management to support the daily operations of the department.

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable

Confined Spaces – areas where only one egress (escape route) exists	Infrequent
Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

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Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Health
South Eastern Sydney
Local Health District

Facility/Service	The Sutherland Hospital, SESLHD
Department	Surgical Short Stay Unit
Manager	Nurse Manager 4 Surgery, Anaesthetics & Perioperative Services
Position Number	TBA
Cost Centre	163137

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Nursing Unit Manager, Level 2, Surgical Short Stay Unit	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	Current registration as a Registered Nurse/Midwife with the Nursing and Midwifery Board of Australia
Award*		NSW Public Health System Nurses' and Midwives' (State) Award	
Position Classification*		Nurse Unit Manager, Level 2	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		YES	• Clinical Nurse Educators • Registered Nurses • Enrolled Nurses • Clinical Support Officers
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital. The Nursing Unit Manager, Level 2 (NUM2) is the registered nurse in charge of the Surgical Short Stay Unit (SSSU), reporting to the Nurse Manager 4 for Surgery, Anaesthetics and Perioperative services at The Sutherland Hospital within SESLHD. The purpose of the Nursing Unit Manager, Level 2 Surgical Short Stay Unit is to: • lead, direct and co-ordinate patient or client care;	

		• ensure the practice of nursing and/or midwifery is safe and efficient, maintaining standards of care through continual quality improvement initiatives. • lead and co-ordinate the nursing/midwifery and multi-disciplinary care team at the ward or unit level, and • monitor and manage the business and management functions and processes of the ward or unit As the leader of the unit, the NUM3 will demonstrate her/his capability through attitude, skills, behaviour and attributes, namely: • broad nursing/midwifery experience and knowledge; • understanding and acceptance that patients are the central focus of service delivery; • professional integrity; • ethical conduct; • accountability; • advocacy; • enabling others; • cultivation of collaborative relationships and effective team work; • commitment to advancing the profession of nursing/midwifery and care provision The NUM level 2 of the Surgical Short Stay Unit is responsible for working in collaboration and in consultation with the Nurse Manager- Surgery, Anaesthetics & Perioperative Services to ensure the delivery of optimal and safe patient care within Surgical Short Stay Unit through established collaborative partnerships internal and external to the department. Primary responsibilities include appropriate management and coordination of staff which includes nurses, administrative and support staff, co-ordination of patient care and management of departmental processes and practice. The NUM2 works closely and collaboratively with the NM in order to ensure appropriate leadership in clinical, financial and human resourcing in order to support the daily operations of the department.

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*Patient Care Co-ordination and the practice of Nursing/Midwifery*	Lead, direct and co-ordinate patient care in the ward/unit • Ensure staff employed in the Surgical Short Stay Unit are aware of their responsibilities in coordinating the condition and progress of all patients in the ward environment, from admission to discharge, in accordance to NSW State Performance Indicators, e.g. NEAT. • Provide leadership and support for the care and recognition of deteriorating patients and other clinical improvement initiatives, by ensuring that all staff have attended DETECT training. • Ensure staff compliance with the requirement to report all clinical incidents through IIMS. • Ensure that staff are aware of their responsibilities in relation to the nutritional intake of all patients and that they assist patients with meals when required.

		• Attend multidisciplinary ward/unit/team meeting/rounds where appropriate • Endeavour to ensure rosters are developed that provide an appropriate number and skill mix of staff to meet the patient care needs according to agreed profiles. • Ensure rosters meet the time frames of the NSW Nurses and Midwives (State), Award time frames. • Ensure that nurses employed in the Surgical Short Stay Unit are aware of their responsibility regarding identifying themselves, communicating what the plan of care is for their patients and when they may expect to be discharged. • Promote a culture where staff, patients and visitors are treated with courtesy and respect. • Ensure clinical supervision at the point of care occurs, in line with the Australian Nursing and Midwifery Council Decision Making Frameworks for Nurses and Midwives. Facilitate collaborative teams in the delivery of patient care • Implement a model of nursing care that accommodates and supports different levels of skill mix and experience – i.e. team nursing, caseloads. • Ensure that all staff understand their responsibilities and work within their scope of their practice, as determined by their Registration Body. • Provide clear guidelines that enable all staff to understand their clinical leadership responsibilities and function effectively in coordinating the provision of care by his/her team members. • Ensure that staff adhere to standardised approach to clinical handover, as per SESLHD procedure. • Ensure all staff are easily identified by patients and carers, by means which include their corporate uniform, where appropriate and ID badge. Use patient and carer feedback to inform service delivery • Facilitate a culture where staff meet and greet patients. • Support and maintain an audit trail that identifies how complaints and incidences are used to remodel service delivery. • Ensure complaints are managed in a timely manner and feedback provided to patients and carers; and • Utilise patient and carer stories that can be used to optimise service delivery. Enable a culture of enquiry and questioning about the practice of nursing/midwifery • Make informed decisions about practice improvement through regular quality reviews and audits, ensuring regular feedback to staff at ward/unit meetings. • Establish processes that ensure clinical staff receive feedback on their performance. • Ensure that the clinical handover between shifts is used as an educational opportunity for staff; and • Ensure that all staff are aware of their educational and supervisory responsibilities. Strive for the use of best practice and contemporary nursing knowledge in the delivery of nursing care. • Facilitate staff's awareness of and access to current policies and procedures. • Maintain work patterns and work structures to support and supervise beginning practitioners as they develop competence. • Foster a culture that encourages staff to source and utilise information/research to inform clinical practice; and • Ensure that all staff attends mandatory (including clinical) training programs that are best suited to meet service need. Uphold the principles of practice as defined by the Nursing and Midwives Act 1991, ANMC Codes of Conduct and Codes of Ethics and Professional Conduct • Ensure all registered and enrolled nurses hold current registration, refer to SESLHD policy.

		• Ensure enrolled nurses who administer medication are endorsed by the Nursing and Midwifery Board of Australia and are reassessed and reviewed annually. Establish and maintain a standard of practice that meets the ANMC Australian Nursing and Midwifery Council Incorporated (ANMC) competence standards, NSW Ministry of Health (NSW MoH), Local Health District (LHD) and organisational policy and procedures • Maintain an awareness of competency standards and utilise in the performance development process with staff. • Ensure nursing staff work within their scope of practice. • Encourage staff to maintain a professional portfolio; and • In line with organisational systems, ensure that new policies and procedures are implemented and complied with, at ward/unit level. • Adhere to all MOH, SESLHD and local policies and business rules related to the safe handling and administration of medications. Maintains a professional standard of conduct which reflect the values of SESLHD

Standard Key Accountabilities*	*Nursing/Midwifery staff management and Leadership*	Be an exemplary role model for the professions of nursing/midwifery • Model and lead by example through own behaviour and communication styles the value of patients and carers. • Model and lead by example through own behaviour and communication styles the value of the profession of nursing • Attend regular unit rounds where appropriate for the clinical context. • Meet and greet patients regularly where appropriate • Establishment of a succession plan for the unit Establish and maintain relationships of trust in the workplace • Participate in regular unit rounds where appropriate • Establish processes and practices that enable participation of all members of the health care team • Establish practices that enable giving and receiving feedback Create an empowering work environment that enables the transfer of knowledge into practice • Establish practices that enable staff to have up-to-date Performance Reviews and staff have professional development plans. • Enable, facilitate and lead change initiatives, including models of care • Recognise, nurture and grow talent • Establish processes and practices that enable participation of all members of the Health Care Team • Establish practices that enable giving and receiving feedback and reflection on practice. Have an awareness of broader professional and health care issues and activities • Participate in own professional development and professional activities within the organisation. • Participate as an active member in professional association • Seek opportunities for self-professional development Inspire and support others to achieve their potential • Recognise, nurture and grow talent • Establish practices that enable giving and receiving feedback and reflection on practice Enable others to achieve a shared vision • Develop in collaboration with the health care team a shared vision and mission statement for the ward / unit • Model through own behaviour and communication the shared vision

		• Establish structures and processes that facilitate clinical supervision and mentoring for all members of the health care team
Standard Key Accountabilities*	*Ward/Unit/Team Management*	Ensure the human, physical and financial resources of the ward/unit are managed, in collaboration with relevant subject matter experts, to deliver safe and efficient health care • Ensure an appropriate system of internal controls exist and are maintained. • Participate in the annual development of the ward/unit staffing profile that determines the ward budget allocation. • Monitor and report on key performance indicators relevant to the ward/unit and develop strategies to address any issues including meeting unit budgets and FTE targets. • Within the respective unit, ensure coordination of functions between Clinical Support Officers and Administrative staff to ensure they support the work activities and outcomes required by the Nurse Unit Manager. Participate in problem solving in matters related to the functioning of the unit/ward • Model critical thinking • Enable others to participate in problem solving for themselves or as part of the team • Provide opportunities for others to be innovative • Support decision making with evidence • Demonstrate accountability for decisions that are made Establish and maintain processes to facilitate performance improvements • Facilitate ward meetings for all members of the health care team • Establish processes that enable the use of patients and carers feedback to develop services • Establish feedback processes to all staff that inform them of the ward/units performance Manage ward/unit staff to facilitate growth and development • Establish processes that ensure novice clinical staff are supported in their clinical practice and receive regular feedback on their performance • All staff have annual performance reviews and development plans established Monitor and maintain a safe environment for patients, staff and visitors in collaboration with the relevant subject matter experts • Establish processes and practices that enable participation of all members of the health care team to ensure that the ward/unit is safe • Establish processes that include those staff with expertise in clinical and occupational safety where appropriate • Institute processes than ensure data and information collected is used to inform decisions • Establish processes than ensure patients, carers and visitors are informed about safe practices in the health care environment. Ensure and maintain knowledge and participation in business management activities within NSW Ministry of Health, Local Health Districts, organisational policy and procedures and beyond. • Participate where appropriate in activities outside the ward/unit, including in-services, conferences and membership to other groups • Develop processes that will enable feedback to all members of the health care team on key Ministry, LHD and organisation activities and initiatives • Create processes that will ensure ward/unit/team activities and initiatives align with those of the Ministry, LHD and organisation

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	• Balancing clinical and resource decision making within finite resources to ensure new models of care are sustainable and evidence based. • Matching patient demands to staffing resources. • Meeting benchmarks and key performance indicator
Decision Making	Overall responsibility for decisions pertaining to patient care coordination and the day to day management of the unit.
Communication	Ensuring effective, timely and appropriate communication between all members of the multidisciplinary team, patients, their family members / carers and the general public

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager 4 Surgery, Anaesthetics & Perioperative Services
	Why?	To ensure service delivery is maintained as efficiently as possible
	Who?	Executive team
	Why?	Escalate issues, receive guidance and updates on care priorities
	Who?	Nursing Staff
	Why?	Involvement in unit and patient care decisions
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Multidisciplinary team
	Why?	To ensure seamless delivery of quality care
	Who?	External healthcare providers and organisations
	Why?	To ensure appropriate Transfer of care
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	Approx 10FTE
Indirect Reports	

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (e.g. $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current unrestricted registration as a Registered Nurse/Midwife with the Nursing & Midwifery Board of Australia.
2	Relevant management tertiary qualification or equivalent work experience, or a combination of study and work experience with a demonstrated commitment to professional development
3	A demonstrated knowledge and experience in the management and delivery of health care services
4	Proven ability in innovative clinical service delivery, harm minimisation and practice development
5	Effective interpersonal and communication skills that demonstrate the ability to engage, enable and manage teams
6	Proven ability to create and maintain a positive workplace culture and articulate and achieve a vision for nursing services
7	Recent clinical experience in the Surgical Short Stay Unit/Peri Operative environment & demonstrated knowledge of clinical, financial & human resource management to support the daily operations of the department.

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Facility/Service	The Sutherland Hospital
Department	Program 1 -Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services Surgery, Anaesthetics and Perioperative Services
Manager	Nurse Manager Grade 4 - Surgery, Anaesthetics and Perioperative Services
Position Number	720600
Cost Centre	163101

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Clinical Nurse Consultant Grade 2 - Urology/Continence/Stomal Therapy	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	*If Yes, Please list each Classification and grade below*
Award*		Public Health System Nurses & Midwives (State) Award	
Position Classification*		Clinical Nurse Consultant Grade 2	
Job Category Coding (ROB)*		Nursing & Midwifery, Clinical Nurse Consultant	
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		NO	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	All staff are expected to act as an appropriate and effective role model and promote culture and supporting practices that reflect the NSW Health CORE values of **Collaboration, Openness, Respect** and **Empowerment** through demonstrated behaviours and interactions with patients, clients and employees. All staff are expected to take reasonable care that their actions do not adversely affect the health and safety of others, that they comply with any reasonable instruction that is given them and with any reasonable policies/procedures relating to health or safety in the workplace, as well as notifying any hazards/risks or incidents to their managers. The vision for nursing at The Sutherland Hospital (TSH) is to build a united team that provides compassionate care to our community through **T**ransformational, **S**upportive and **H**olistic nursing and midwifery. SESLHD nursing and midwifery values of Caring, Integrity, Respect, Influence, Innovation and Inspiration guide us in achieving the nursing and midwifery vision at The Sutherland Hospital.	

		The Clinical Nurse Consultant – Urology/Continence/Stomal Therapy provides leadership and expertise in the care, management, education and support of patients within the Sutherland Hospital. The CNC works autonomously as well as being part of the multidisciplinary team. The CNC is responsible for the coordination of care for inpatients and outpatient related to urological, continence and stomal therapy. The CNC is an expert nurse who provides leadership, advice, recommendations on all aspects of nursing and consults on matters relating to safe and appropriate use of urological, continence and stoma related nursing practices. The CNC provides information and education to enable high quality care; and provides evidence-based information, education and support to staff and patients. Clinical Nurse Consultant Grade 2 means: a registered nurse appointed as such to a position approved by the Health Service, who has at least 5 years full time equivalent post registration experience, with at least 3 years full time equivalent experience in the specialty field. In addition the employee must have approved post graduate nursing qualifications relevant to the field in which he/she is appointed to or such other qualifications or experience deemed appropriate by the Health Service. An employer may also require a higher qualification in the specialist nursing field where such qualification is considered essential for the performance of the individual position.

Section 2 – Key Accountabilities

Maintain responsibilities for personal and professional development by participating in training/education activities, and performance reviews in order to continuously improve the level of and quality of service.

Standard Key Accountabilities*	*(Free Text)*	**Domain 1 - Clinical Service and Consultancy** • Provides an expert client-centred consultancy practice participating in direct patient care provision • Provides education on complex clinical issues to clients and carers • Identifies and adopts innovative clinical practice models e.g. implementation and evaluation of new treatments, technologies, and therapeutic techniques relating to Urology/Continence/Stomal Therapy • Participates/collaborates in the design and conduct of quality improvement initiatives. • Provides a complex client-centred consultancy practice within a mixed clinical environment and/or across a series of services **Domain 2 - Clinical Leadership** • Acts as a role model as an expert clinician in the clinical setting • Contributes to the development and management of clinical processes, e.g. care maps, clinical pathways. • Provides leadership in the ongoing review of clinical practice related to nursing presentation at The Sutherland Hospital. • Provides leadership in the ongoing review of clinical practice for a more complex service i.e. a service provided at multiple sites or by multiple CNCs across an area health service • Participates on state and on national working parties

		• Assumes leadership roles, which promote broader advancement of clinical practice, e.g. membership of editorial boards, leadership of position papers and development of advanced nursing practice standards **Domain 3 - Research** • Initiates, conducts and disseminates the findings of locally based research in Urology/Continence/Stomal Therapy • Participates as co-researcher in larger studies • Manages research projects requiring clinical contribution from others • Adapts and applies related scientific research to a clinical specialty i.e. research from other scientific disciplines applied to nursing • Initiates original research projects • Disseminates own research results through specialist publications and presentations **Domain 4 – Education** • Participates in formal and informal education programs • Identifies clinical education needs • Collaborates with others in the development and delivery of education programs • Undertakes primary responsibility for the planning and implementation of specialist clinical education for the area health service • Develops significant education resources for nurses/midwives and other health care professional • Participates in the development and delivery of post graduate tertiary programs **Domain 5 – Clinical Services Planning and Management** • Identifies future issues and new directions for the service • Contributes to formal service and strategic planning processes within the organisation • Develops, implements and evaluates annual plans for nurse consultancy service • Provides ongoing comprehensive analyses of current practice and the impact of new directions on the clinical specialty service • Initiates, develops, implements and evaluates strategic changes for Urology/Continence/Stomal Therapy

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	Balance the competing priorities of the position. Establish and maintain effective communication within the multidisciplinary team and across divisions, disciplines and affiliated health care providers in the community. Anticipate and respond quickly and

	appropriately to rapidly changing clinical and professional knowledge, environments and situations. Promote and consistently work from within a framework of Evidence Based Practice Foster a clinical environment that values and supports risk minimization and practice improvement
Decision Making	Clinical decisions within the boundaries of professional practice of a Registered Nurse with expert knowledge and experience of Urology/Continence/Stomal Therapy conditions. Exercise independent professional knowledge and judgement to solve problems of a complex clinical nature. Decisions likely to impact on service delivery or resource allocation must be made in consultation with management.
Communication	The Clinical Nurse Consultant will utilise excellent written and verbal communication skills to build strategic partnerships and improve clinical practice. A comprehensive formal report will be developed at the conclusion of any project undertaken, outlining the aims, methodology and outcomes of the project. Other reports and updates (written and verbal) will be provided by the Clinical Nurse Consultant as required.

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Medical, Nursing and Allied Health Staff
	Who?	Nurse Manager
	Who?	
Does this role routinely interact with external stakeholders?		
Key External Relationships	**Who?**	
	Why?	
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	NIL
Indirect Reports	NIL

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual

Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Current Authority to Practice as a Registered Nurse/Midwife, Nursing and Midwifery Board of Australia and current NSW Driver's License (if required by service).
2	Minimum five years full time equivalent post qualification experience, with at least three years full time equivalent experience in the specialty field and post graduate qualifications relevant to the field of practice.
3	Proven clinical leadership skills and an ability to work collaboratively within a multidisciplinary framework with a demonstrated commitment to excellence in nursing practice.
4	Demonstrated effective communication and inter-personal skills across a variety of mediums and an understanding of the practice development framework.
5	Proven ability to implement changes and develop direction in clinical practice by the utilisation of evidence based research.
6	Demonstrated skills in strategic and clinical service planning including an understanding of organisational behaviour, change management and cultural change processes.
7	Demonstrated skills in clinical teaching, competency in the use of contemporary information systems and experience in the development of specialty education programs
8	Demonstrated clinical expertise in client-centred consultancy with the ability to work independently

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 11 – Capabilities for the Role

The capabilities (i.e. the knowledge, skills and abilities) for the role are obtained from the NSW Public Sector Capability Framework and any relevant occupation specific capability set.

The focus capabilities for the role are the capabilities in which occupants must demonstrate immediate competence. The behavioural indicators provide examples of the types of behaviours that would be expected at that level and should be reviewed in conjunction with the role's key accountabilities.

Select at least one Focus Capability from each Capability Group. A minimum of 4 and a maximum of 10 Focus Capabilities should apply to a role. If the role contains People Management capabilities, a minimum of 5 Focus Capabilities should apply.

Capability Group	Focus?	Capability	Level
Personal Attributes	☐	Display Resilience and Courage	
	☐	Act with Integrity	
	☐	Manage Self	
	☐	Value Diversity	
Relationships	☐	Communicate Effectively	
	☐	Commitment to Customer Service	
	☐	Work Collaboratively	
	☐	Influence and Negotiate	
Results	☐	Deliver Results	
	☐	Plan and Prioritise	
	☐	Think and Solve Problems	
	☐	Demonstrate Accountability	
Business Enablers	☐	Finance	
	☐	Technology	
	☐	Procurement and Contract Management	
	☐	Project Management	
People Management	☐	Manage and Develop People	
	☐	Inspire Direction and Purpose	
	☐	Optimise Business Outcomes	
	☐	Manage Reform and Change	

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Constant
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Frequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Frequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Frequent
Restraining – involvement in physical containment of patients/clients	Occasional
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Occasional
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Occasional
Fumes – exposure to noxious or toxic fumes	Infrequent
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Infrequent
Hazardous Substances – e.g. dry chemicals, glues	Infrequent
Noise – environmental/background noise necessitates people raise their voice to be heard	Occasional
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Occasional
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Occasional
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics & Peri Operative Services Critical Care and Emergency Emergency Department
Manager	Nurse Manager 4 – Critical Care and Emergency
Position Number	TBA
Cost Centre	163061

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Administration Officer Level 4 – Emergency Department	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	
Award*		Health Employees Administrative Staff (State) Award	
Position Classification*		Admin Off Lvl 4	
Job Category Coding (ROB)*		Administration & Health Records/Administration	
Job Classification Coding (ROB)*		531111 General Clerk	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		NO	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	To provide timely and efficient high level administrative support to the Director of Emergency Department and Nurse Manager Critical Care and Emergency and the clinical staff within the Department.	

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*(Free Text)*	• Provision of general administrative and clerical support to the Emergency Department, in particular the Director. This includes but not limited to, answering incoming calls, compiling correspondence, data processing/entry, filing, photocopying, scheduling appointments,

		collection and delivery of mail, faxing relevant forms/documentation as directed by the Head of Department. • Co-ordinate, prepare, distribute and provide support for departmental meetings, including but not limited to: agendas, minutes, room bookings, tutorials, peer review, clinical audits and quality assurance and catering as per requests. The Administrative Officer Level 4, will maintain a high standard of accuracy in written communication (i.e. correspondence, minutes, protocols, memorandums, rosters etc.) • Coordinate, compile and finalise department medical rosters in consultation with Director, consultants and medical staff. Maintain medical staff rosters in Health Roster. Manage leave applications for senior and junior medical staff. • Collate data as required by the department or as directed by management • Maintain the appointment diary for the Director of Emergency and monitor their inbox to ensure urgent mail is actioned or delegated. • Maintain and manage departmental data base and records for effective administrative support for the department. • Manage commencement of senior and junior medical staff including liaison with relevant external services, workforce operations, medical administration and finance departments. • Monitor and evaluate administrative processes, continual medical education, systems and procedures with the aim to improve efficiency and ensure delivery of quality services to internal and external stakeholders. • Ensure confidentiality of all documentation within the department is maintained as per relevant policy. • Use of packages including MS word, excel, outlook and powerpoint, other systems such as Health Roster, Oracle - iProcurement, iExpense, ROB,iPM, eMR, eClaims, Winc, StaffLink

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	Complete tasks to a high standard within set deadlines and an ability to prioritise workloads Adapt to new and changing computer systems, software updates and changing priorities	
Decision Making	Work independently under limited direction and within constraints set by senior management Escalate more complex issues outside the scope of the position description to the Director.	
Communication	Ability to communicate effectively with senior clinicians, other administrative staff and patients to ensure service delivery is met.	

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager Business Support & Project Officer
	Why?	Professional management, development and rostering
	Who?	Director Department Emergency
	Why?	Receive direction, escalate issues and communicate effectively
	Who?	Medical officers, Team members
	Why?	Share information, coordinate workloads, build professional relationships and receive enquiries
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Patients and external clinicians
	Why?	Provide information, receive and respond to feedback, efficiency of service
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	NIL
Indirect Reports	NIL

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check

		• *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Demonstrated experience in providing high level administrative and clerical support while managing own workload under minimal supervision.
2	Demonstrated organisational and time management skills including the ability to manage conflicting priorities and solve problems.
3	Demonstrated ability to work within a multidisciplinary team environment.
4	Well-developed interpersonal, written and verbal communication skills necessary to build and maintain collaborative relationships with a diverse range of health professionals and stakeholders.
5	Demonstrated proficiency in the use of computers and standard office software packages as well as the ability to learn and adapt quickly to new systems and processes.
6	Demonstrated commitment to maintaining and role modelling a high standard of professional conduct and confidentiality.
7	Demonstrated ability to write reports, documents and correspondence, including drafting complex correspondence for senior medial officers, accurately and clearly.
8	

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Constant
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Frequent
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Frequent
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Infrequent
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Infrequent
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Occasional
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Repetitive
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Repetitive
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Not Applicable
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Frequent
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Repetitive
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Not Applicable
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Constant
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Occasional
Unpredictable People – e.g. dementia, mental illness, head injuries	Infrequent
Restraining – involvement in physical containment of patients/clients	Not Applicable
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Not Applicable
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Occasional
Gases – working with explosive or flammable gases requiring precautionary measures	Not Applicable
Fumes – exposure to noxious or toxic fumes	Not Applicable
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Not Applicable
Hazardous Substances – e.g. dry chemicals, glues	Not Applicable
Noise – environmental/background noise necessitates people raise their voice to be heard	Frequent
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Not Applicable

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Not Applicable
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Not Applicable
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Not Applicable

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
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	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics & Peri Operative Services Critical Care and Emergency Critical Care Medicine
Manager	Nurse Manager 4 – Critical Care and Emergency
Position Number	TBA
Cost Centre	163040

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Administration Officer Level 4 – Critical Care Medicine & Gastroenterology	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	
Award*		Health Employees Administrative Staff (State) Award	
Position Classification*		Admin Off Lvl 4	
Job Category Coding (ROB)*		Administration & Health Records/Administration	
Job Classification Coding (ROB)*		531111 General Clerk	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		NO	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	To provide timely and efficient high level administrative support to the Director of Critical Care Medicine, Gastroenterology department, Nurse Manager Critical Care & Emergency and the clinical staff within the departments.	

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*(Free Text)*	• Provision of general administrative and clerical support to the Department of Critical Care Medicine and Gastroenterology, in particular the Director, medical officers and senior staff. This includes but not limited to, answering incoming calls, compiling correspondence, data

		processing/entry, filing, photocopying, scheduling appointments, collection and delivery of mail, faxing relevant forms/documentation as directed by the Head of Department. • Co-ordinate, prepare, distribute and provide support for departmental meetings, including but not limited to: agendas, minutes, room bookings, tutorials, peer review, clinical audits and quality assurance and catering as per requests. The Administrative Officer Level 4, will maintain a high standard of accuracy in written communication (i.e. correspondence, minutes, protocols, memorandums, rosters etc.) • Coordinate, compile and finalise department medical rosters in consultation with Director, consultants and medical staff. Maintain medical staff rosters in Health Roster. Manage leave applications for senior and junior medical staff. • Collate data as required by the department or as directed by management • Maintain the appointment diary for the Director of CCM and monitor their inbox to ensure urgent mail is actioned or delegated. • Maintain and manage departmental records and data bases for effective administrative support for the department. • Manage commencement of senior and junior medical staff including liaison with relevant external services, workforce operations, medical administration and finance departments. • Monitor and evaluate administrative processes, continual medical education, systems and procedures with the aim to improve efficiency and ensure delivery of quality services to internal and external stakeholders. • Ensure confidentiality of all documentation within the department is maintained as per relevant policy • Use of packages including MS word, excel, outlook and powerpoint, other systems such as Health Roster, Oracle - iProcurement, iExpense, ROB,iPM, eMR, eClaims, Winc, StaffLink.

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Challenges	Complete tasks to a high standard within set deadlines and an ability to prioritise workloads Adapt to new and changing computer systems, software updates and changing priorities
Decision Making	Work independently under limited direction and within constraints set by senior management Escalate more complex issues outside the scope of the position description to the Director.
Communication	Ability to communicate effectively with senior clinicians, other administrative staff and patients to ensure service delivery is met.

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager Business Support & Project Officer
	Why?	Professional management, development and rostering
	Who?	Director Critical Care Medicine and HoD Gastroenterology
	Why?	Receive direction, escalate issues and communicate effectively
	Who?	Medical officers, Team members
	Why?	Share information, coordinate workloads, build professional relationships and receive enquiries
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Patients and external clinicians
	Why?	Provide information, receive and respond to feedback, efficiency of service
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	NIL
Indirect Reports	NIL

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check

		• *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

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2	Demonstrated organisational and time management skills including the ability to manage conflicting priorities and solve problems.
3	Demonstrated ability to work within a multidisciplinary team environment.
4	Well-developed interpersonal, written and verbal communication skills necessary to build and maintain collaborative relationships with a diverse range of health professionals and stakeholders.
5	Demonstrated proficiency in the use of computers and standard office software packages as well as the ability to learn and adapt quickly to new systems and processes.
6	Demonstrated commitment to maintaining and role modelling a high standard of professional conduct and confidentiality.
7	Demonstrated ability to write reports, documents and correspondence, including drafting complex correspondence for senior medial officers, accurately and clearly.
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Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
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Standing – remaining standing without moving about to perform tasks	Constant
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Frequent
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Frequent
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Infrequent
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Infrequent
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Occasional
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Repetitive
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Repetitive
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Not Applicable
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Frequent
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Repetitive
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Not Applicable
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Constant
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Occasional
Unpredictable People – e.g. dementia, mental illness, head injuries	Infrequent
Restraining – involvement in physical containment of patients/clients	Not Applicable
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Not Applicable
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Occasional
Gases – working with explosive or flammable gases requiring precautionary measures	Not Applicable
Fumes – exposure to noxious or toxic fumes	Not Applicable
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Not Applicable
Hazardous Substances – e.g. dry chemicals, glues	Not Applicable
Noise – environmental/background noise necessitates people raise their voice to be heard	Frequent
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Not Applicable

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Not Applicable
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Not Applicable
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Not Applicable

Word Counts

Section 1	*Position Title*	200 characters
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Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
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Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Facility/Service	The Sutherland Hospital, South Eastern Sydney Local Health District
Department	Program 1 -Critical Care, Emergency, Surgery, Anaesthetics and Perioperative Services
Manager	Nurse Manager - Critical Care & Emergency; Nurse Manager - Surgery, Anaesthetics & Perioperative Services
Position Number	TBA
Cost Centre	163101

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?	YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:	Data and Analytics Manager - Critical Care, Emergency, Surgery, Anaesthetics & Peri Operative Services	
Does this role require Multiple Awards? Specific classifications (if applicable):	NO	*If Yes, Please list each Classification and grade below*
Award*	Health Managers (State) Award	
Position Classification*	Health Manager Level 2	
Job Category Coding (ROB)*	Research & Analytics	
Job Classification Coding (ROB)*	Data Analytics	
Speciality Coding (ROB)	Data Analytics Management	
Does this require Senior Executive Level Standards?	NO	Choose Yes or No depending on the scope and role of the position holder
Does this role manage or supervise others?*	NO	Choose Yes or No depending on the scope and role of the position holder
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"		The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it. Lead and manage data operations of the Critical Care, Emergency & Surgery departments to facilitate delivery of quality, cost effective services and the achievement of business and service objectives.
		The Data Manager is responsible for all activities needed to ensure optimal data quality for Critical Care, Emergency, Gastroenterology & Surgery departments to meet the clinical, research, business intelligence and mandatory reporting requirements. This role will also provide leadership to clerical staff within the clinical program to assist with data compilation, quality and integrity.

Section 2 – Key Accountabilities

Standard Key Accountabilities*		• Provide expert analysis, advice and recommendations on data, to support departmental objectives and decision-making • Develop and implement initiatives and procedures to improve data quality, accuracy and integrity • Support innovation within by identifying opportunities for system and process improvements, to ensure premium service delivery • Provide a high level of leadership and management to ensure services are delivered within agreed timeframes, quality standards and budgetary constraints • Build and maintain strategic relationships by liaising, consulting and negotiating with internal and external stakeholders to identify key data and analytics issues and provide effective solutions • Promote continual improvement and focus on superior service by establishing and reviewing performance indicators and relevant reporting systems • Provide troubleshooting support and education of databases to staff within the program • Prepare high level correspondence to ensure the timeliness of all data reporting to internal and external stakeholders • Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees. • Ensure all minimum data set items are recorded and prepare mandatory data reports for the Ministry of Health KPI Service Agreements. • Prepare ad hoc reports as requested. • Provide consistent high quality, strategic reports, analysis and recommendations. • Maintain up to date skills and knowledge. • Collect clinical indicator, compile reports and send data for - ANZICS database (COMET), OT and Endoscopy Information System (SurgiNet, ProVation), FirstNet, eMR, iPM, HIE, eRIC. • Act as the data custodian and ensure integrity is maintained by auditing and amending errors.

Section 3 – Key Challenges

Challenges	▪ Balance limited resources to meet competing stakeholder needs and expectations, whilst prioritising a diverse range of issues and demands encountered simultaneously ▪ Provide consistently high quality, strategic reports, analysis and recommendations on data and ensure work is accurate and timely
Decision Making	▪ Autonomously manage workloads and undertake negotiations around timelines for delivery of services
Communication	▪ Internally, the Data Manager is required to communicate regularly with the Nurse Manager, Critical Care & Emergency and Nurse Manager, Surgery, Anaesthetics & Perioperative Services, to meet the needs of the program. Externally, the Data Manager is required to develop and maintain effective relationships with government agencies

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager, Critical Care & Emergency Nurse Manager, Surgery, Anaesthetics & Perioperative Services
	Why?	Develop relationship to support managers and effectively deliver on objectives
	Who?	Colleagues and internal stakeholders
	Why?	Ensure the data requirements of the department are met and that integrity is maintained. Work cohesively, promote strong culture and achieve goals
Does this role routinely interact with external stakeholders ?		YES
Key External Relationships	**Who?**	eHealth, MoH, other LHD's
	Why?	Ministry of Health related reporting
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Direct Reports	Nil
Indirect Reports	Administration Officers in the Critical Care & Gastroenterology, Emergency, Surgery & Anaesthetics departments

Section 6 – Financial Delegation

As per delegation manual	*N/A*

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Tertiary qualifications in data analytics or health information management or equivalent, relevant work experience in data management or health information management
2	Demonstrated knowledge of database management and an ability to apply that knowledge to achieve high standards of quality, accuracy and integrity in the management of data
3	Well-developed leadership, communication and interpersonal skills with the ability to motivate and coordinate staff
4	Proven capacity to develop creative and innovative solutions in order to improve productivity and effectiveness for stakeholders
5	Well-developed analytical skills including a demonstrated ability to analyse complex financial and performance related data and interpret information to determine data trends and issues
6	Demonstrated ability to prepare reports and presentations to effectively communicate data information in a clear and concise format
7	Demonstrated ability to develop processes and procedures in accordance with approved guidelines and effectively communicate and support the implementation of change
8	Exceptional organisational and time management skills, with the ability to negotiate and manage expectations of multiple stakeholders in a multidisciplinary team

Section 9 – Other Requirements (Optional)

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees

Section 12 – Job Demands Checklist

PHYSICAL DEMANDS - Description (Comment)	FREQUENCY
Sitting – remaining in a seated position to perform tasks	Constant
Standing – remaining standing without moving about to perform tasks	Occasional
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Occasional
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Occasional
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Infrequent
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Occasional
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Occasional
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Occasional

Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Occasional
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Constant
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Infrequent
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Constant
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Constant
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Infrequent
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Infrequent
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Infrequent
Unpredictable People – e.g. dementia, mental illness, head injuries	Infrequent
Restraining – involvement in physical containment of patients/clients	Infrequent
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Infrequent
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Not Applicable
Gases – working with explosive or flammable gases requiring precautionary measures	Not Applicable
Fumes – exposure to noxious or toxic fumes	Not Applicable
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Not Applicable
Hazardous Substances – e.g. dry chemicals, glues	Not Applicable
Noise – environmental/background noise necessitates people raise their voice to be heard	Infrequent
Inadequate Lighting – risk of trips, falls or eyestrain	Infrequent
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Infrequent
Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Infrequent
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Infrequent
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Not Applicable

Position Description

Health
South Eastern Sydney
Local Health District

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics & Peri Operative Services Surgery, Anaesthetics & Peri Operative Services Surgery & Anaesthetics
Manager	Nurse Manager 4-Surgery Anaesthetics, Perioperative Services
Position Number	TBA
Cost Centre	163010

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Administration Officer Level 4 – Surgery and Anaesthetics	
Does this role require Multiple Awards? Specific classifications (if applicable):		NO	
Award*		Health Employees Administrative Staff (State) Award	
Position Classification*		Admin Off Lvl 4	
Job Category Coding (ROB)*		Administration & Health Records/Administration	
Job Classification Coding (ROB)*		531111 General Clerk	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		NO	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	To provide timely and efficient high level administrative support to the Director of Surgery, Director of Anaesthetics and Nurse Manager Surgery, Anaesthetics, Perioperative services and the clinical staff within the Department.	

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*(Free Text)*	• Provision of general administrative and clerical support to Department Heads - Surgery & Anaesthetics, medical officers and senior staff. This includes but not limited to, answering incoming calls, compiling correspondence, data processing/entry, filing, photocopying, scheduling

		appointments, collection and delivery of mail, faxing relevant forms/documentation as directed by the Head of Department. • Co-ordinate, prepare, distribute and provide support for departmental meetings, including but not limited to: agendas, minutes, room bookings, tutorials, peer review, clinical audits and quality assurance and catering as per requests. The Administrative Officer Level 4, will maintain a high standard of accuracy in written communication (i.e. correspondence, minutes, protocols, memorandums, rosters etc.) • Coordinate, compile and finalise department medical rosters in consultation with Director, consultants and medical staff. Maintain medical staff rosters in Health Roster. Manage leave applications for senior and junior medical staff. • Collate data as required by the department or as directed by management • Maintain the appointment diary for the Director of Anaesthetics and the Director of Surgery and may be required to monitor their inbox to ensure urgent mail is actioned or delegated. • Maintain and manage departmental data bases and records for effective administrative support for the department. • Manage commencement of senior and junior medical staff including liaison with relevant external services, Human resources, medical administration and finance departments. • Monitor and evaluate administrative processes, continual medical education, systems and procedures with the aim to improve efficiency and ensure delivery of quality services to internal and external stakeholders. • Ensure confidentiality of all documentation within the department is maintained as per relevant policy • Use of packages including MS word, excel, outlook and PowerPoint, other systems such as Health Roster, Oracle - iProcurement, iExpense, ROB,iPM, eMR, eClaims, Winc, StaffLink.

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	Complete tasks to a high standard within set deadlines and an ability to prioritise workloads Adapt to new and changing computer systems, software updates and changing priorities	
Decision Making	Work independently under limited direction and within constraints set by senior management Escalate more complex issues outside the scope of the position description to the Director.	
Communication	Ability to communicate effectively with senior clinicians, other administrative staff and patients to ensure service delivery is met.	

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Manager Business Support Project Officer
	Why?	Professional management, development and rostering
	Who?	Director Department Anaesthetics Director Department Surgery
	Why?	Receive direction, escalate issues and communicate effectively
	Who?	Medical officers, Team members
	Why?	Share information, coordinate workloads, build professional relationships and receive enquiries
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	**Who?**	Patients and external clinicians
	Why?	Provide information, receive and respond to feedback, efficiency of service
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	NIL
Indirect Reports	NIL

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation Manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check

		• *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Demonstrated extensive experience in providing high level administrative and clerical support while managing own workload under minimal supervision.
2	Demonstrated organisational and time management skills including the ability to manage conflicting priorities and solve problems.
3	Demonstrated ability to work within a multidisciplinary team environment.
4	Well-developed interpersonal, written and verbal communication skills necessary to build and maintain collaborative relationships with a diverse range of health professionals and stakeholders.
5	Demonstrated proficiency in the use of computers and standard office software packages as well as the ability to learn and adapt quickly to new systems and processes.
6	Demonstrated commitment to maintaining and role modelling a high standard of professional conduct and confidentiality.
7	Demonstrated ability to write reports, documents and correspondence, including drafting complex correspondence for senior medial officers, accurately and clearly.
8	

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Constant
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Frequent
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Frequent
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Infrequent
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Infrequent
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Occasional
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Repetitive
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Repetitive
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Not Applicable
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Frequent
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Repetitive
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Not Applicable
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Not Applicable
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Constant
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Occasional
Unpredictable People – e.g. dementia, mental illness, head injuries	Infrequent
Restraining – involvement in physical containment of patients/clients	Not Applicable
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Not Applicable
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Occasional
Gases – working with explosive or flammable gases requiring precautionary measures	Not Applicable
Fumes – exposure to noxious or toxic fumes	Not Applicable
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Not Applicable
Hazardous Substances – e.g. dry chemicals, glues	Not Applicable
Noise – environmental/background noise necessitates people raise their voice to be heard	Frequent
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Not Applicable

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Not Applicable
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Not Applicable
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Not Applicable

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Peri Operative Services Surgery, Anaesthetics and Peri Operative Services Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics
Manager	Nurse Unit Manager Level 3 - Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics
Position Number	TBA
Cost Centre	163005

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Administrative Assistant Level 3 – Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics	
Does this role require Multiple Awards? Specific classifications (if applicable):			*If Yes, Please list each Classification and grade below*
Award*		Health Employees Administrative Staff (State) Award	
Position Classification*		Admin Off Lvl 3	
Job Category Coding (ROB)*		Administration Assistant	
Job Classification Coding (ROB)*			
Speciality Coding (ROB)		599999	
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		NO	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	This position will provide administrative and clerical support to the Surgical Bookings office, the Pre Admission and Surgical Clinics, the Nurse Unit manager and clinical staff. The AO will work between Surgical Bookings & Waitlist and the Pre Admission & Surgical Clinics. The position is responsible for ensuring the Surgical Bookings Office operates efficiently whilst maintaining an accurate waiting list for patients requiring a medical/surgical procedure. The Administrative Assistant will processes and plan surgical admissions and meet Ministry Of Health requirements in relation to admission criteria. Ensuring that patients are processed appropriately through the continuum of care from waiting list to preadmission, admission and procedure. The position is responsible for providing administration and clerical support to facilitate smooth operation of the Pre Admission and Surgical Clinics.	

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*(Free Text)*	• To ensure excellent customer service to meet the needs of all customers according to documented procedures. • Maintain an accurate waiting list of patients requiring a medical/surgical/diagnostic procedure. • Process and plan booked admissions. • Meet NSW Ministry of Health requirements in relation to admission criteria. • To comply with the daily processes associated with booked admissions to hospital. • Process RFA's in line with MoH policy. • Monitor RFA drop box. • Waitlist patients within appropriate clinical timeframes. • Advise patients of surgery dates. • Provide NUM Surgical Bookings, Waitlist, Pre Admission & Surgical Clinic details of patients who will not meet the Elective Surgery Access Performance targets. • Action and complete WLCOS each month. • Maintain NRFC (not ready for care) patients each month by ensuring all patients are contacted and notes are transcribed in iPM and on RFA audit sheet. • Attend meeting to discuss theatres lists, patients and urgent issues. • To maintain waitlist in line with NSW MOH Policies and Guidelines. Allocate and maintain records of current bookings with dates for admission. • Maintain activity workload statistics providing a monthly report to NUM Surgical Bookings, Waitlist, Pre Admission & Surgical Clinics on current status and changes to waitlists. • Arrange theatre dates in consultation with the Manager, Registrar or attending Medical Officer (AMO) and confirm with patients. • Arrange preadmission appointments where possible allocate date to Day Surgery patients when the Referral for Admission (RFA) form is received. • Email/Fax a list of patients on the AMOs upcoming theatre session. List to be generated from SurgiNet. • Forward a copy of the waiting list to allocated AMO's each month • Arrange interpreter for the Preadmission Clinic (PAC) appointment as necessary. • Contact patients if they fail to arrive for clinic or surgery appointments

		• Negotiate PAC appointment time with the nurse in charge for any patient that requires clinical assessment outside of their "specialty" clinic. • Prepare all necessary documentation prior to the patients appointment and store in appropriate folder • The patient or responsible person is to check accuracy of all information on front sheet and labels. • Confirm classification with patient and have appropriate forms signed • Ensure patient is given correct, timely and adequate information regarding financial classification. • Collect patient files for day's pre admission and surgical clinics and ensure all notes are there • Admit patients on eMR as they arrive, check points of ID – medicare card, address, date of birth, etc • Liaise with bookings clerks as required • Ensure patients notes ready for appointment for appropriate team • LAN page medical officer and other health professional as required and when patient ready to be seen. • Book interpreters for DOS and clinic appointments • Other administrative duties as required – dropping off scripts, keep clinic rooms stocked, maintain stationary supplies, post leeters • PBRC Billings as appropriate

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	Manage competing demands and maintain focus on quality in a high work volume environment.
Decision Making	Ability to work with minimal supervision within established guidelines and flexibility to make appropriate changes in short timeframes in consultation with relevant team members
Communication	Effective communication with patients and team members.

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Unit Manager
	Why?	To provide administrative support and to receive direction, supervision, support and development.
	Who?	Surgical teams
	Why?	To ensure exceptional service to all patients
	Who?	

	Why?	
Does this role routinely interact with external stakeholders?		
Key External Relationships	**Who?**	Patients and carers
	Why?	Maintaining effective relationship with patients and families to ensure optimal service delivery
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	Nil
Indirect Reports	nil

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Experience working efficiently in a busy administrative role in a complex organisation, requiring the ability to plan, organise and prioritise own workloads accurately within a changing environment.
2	Demonstrated capacity to identify and respond quickly to urgent matters, applying a problem solving approach to challenges.
3	Ability to provide high level of customer service by demonstrated advanced interpersonal skills in both verbal and written forms.
4	High level organisational and time management skills with proven ability to follow guidelines and procedures
5	Proven high level of accuracy and attention to detail.
6	Ability to work effectively within a multidisciplinary team environment.
7	Experience maintaining Hospital wait lists in line with Ministry of Health policies.
8	Demonstrated proficiency in the use of computers and standard office software packages including NSW Health based systems.

Section 9 – Other Requirements (Optional)

Other requirements are to be populated where audit essential requirements have been identified in the position.

Other Requirements	*(Mandatory)*	• Act as an appropriate and effective role model and promote a culture and supporting practices that reflect the organisational values through demonstrated behaviours and interactions with patients/clients/employees • *Staff who supervise others:* Recruit, coach, mentor, and performance develop staff, to develop the capabilities of the team to undertake changing roles, responsibilities and to provide for succession within the unit • *Staff who supervise others:* Manage delegated financial responsibilities, through the development and maintenance of appropriate strategies and effective allocation of resources, to ensure optimal health outcomes are managed within budget
	(Free Text)	

Section 10 – Disqualification Questions

Disqualification questions are questions that relate to mandatory requirements for a position. These are requirements that should prevent a candidate from submitting an application. Desired requirements can be added as pre-screening questions.

Disqualification Questions	*Currently Unavailable*

Section 11 – Capabilities for the Role

The capabilities (i.e. the knowledge, skills and abilities) for the role are obtained from the NSW Public Sector Capability Framework and any relevant occupation specific capability set.

The focus capabilities for the role are the capabilities in which occupants must demonstrate immediate competence. The behavioural indicators provide examples of the types of behaviours that would be expected at that level and should be reviewed in conjunction with the role's key accountabilities.

Select at least one Focus Capability from each Capability Group. A minimum of 4 and a maximum of 10 Focus Capabilities should apply to a role. If the role contains People Management capabilities, a minimum of 5 Focus Capabilities should apply.

Capability Group	Focus?	Capability	Level
Personal Attributes	☐	Display Resilience and Courage	
	☐	Act with Integrity	
	☐	Manage Self	
	☐	Value Diversity	
Relationships	☐	Communicate Effectively	
	☐	Commitment to Customer Service	
	☐	Work Collaboratively	
	☐	Influence and Negotiate	
Results	☐	Deliver Results	
	☐	Plan and Prioritise	
	☐	Think and Solve Problems	
	☐	Demonstrate Accountability	
Business Enablers	☐	Finance	
	☐	Technology	
	☐	Procurement and Contract Management	
	☐	Project Management	
People Management	☐	Manage and Develop People	
	☐	Inspire Direction and Purpose	
	☐	Optimise Business Outcomes	
	☐	Manage Reform and Change	

Section 12 – Job Demands Checklist

The purpose of this checklist is to manage the risk associated with the position in relation to the occupant. It may be used to provide information about the position to a Health Professional required to perform a pre-employment medical assessment.

PHYSICAL DEMANDS - Description (Comment)	**FREQUENCY**
Sitting – remaining in a seated position to perform tasks	Frequent
Standing – remaining standing without moving about to perform tasks	Constant
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Frequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Frequent
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Frequent
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Infrequent
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Infrequent
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Frequent
Lifting/Carrying – moderate lifting and carrying (10 to 15 kg)	Infrequent
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Occasional
Reaching – arms fully extended forward or raised above shoulder	Occasional
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Occasional
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Occasional
Hand and Arm Movements – repetitive movements of hands and arms	Repetitive
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Repetitive
Work at Heights – using ladders, footstools, scaffolding, or other objects to perform work	Not Applicable
Driving/Riding – controlling the operation of a vehicle (e.g. car, truck, bus, motorcycle, bicycle)	Not Applicable
SENSORY DEMANDS - Description (Comment)	**FREQUENCY**
Sight – use of sight is an integral part of work performance (e.g. viewing of X-Rays, computer screens)	Frequent
Hearing – use of hearing is an integral part of work performance (e.g. phone enquiries)	Repetitive
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Repetitive
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Not Applicable
Touch – use of touch is an integral part of work performance	Not Applicable
PSYCHOSOCIAL DEMANDS - Description (Comment)	**FREQUENCY**
Distressed People – e.g. emergency or grief situations	Constant
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Occasional
Unpredictable People – e.g. dementia, mental illness, head injuries	Infrequent
Restraining – involvement in physical containment of patients/clients	Not Applicable
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Not Applicable
ENVIRONMENTAL DEMANDS - Description (Comment)	**FREQUENCY**
Dust – exposure to atmospheric dust	Occasional
Gases – working with explosive or flammable gases requiring precautionary measures	Not Applicable
Fumes – exposure to noxious or toxic fumes	Not Applicable
Liquids – working with corrosive, toxic or poisonous liquids or chemicals requiring personal protective equipment (PPE)	Not Applicable
Hazardous Substances – e.g. dry chemicals, glues	Not Applicable
Noise – environmental/background noise necessitates people raise their voice to be heard	Frequent
Inadequate Lighting – risk of trips, falls or eyestrain	Occasional
Sunlight – risk of sunburn exists from spending more than 10 minutes per day in sunlight	Not Applicable
Extreme Temperatures – environmental temperatures are less than 15°C or more than 35°C	Not Applicable
Confined Spaces – areas where only one egress (escape route) exists	Not Applicable

Slippery or Uneven Surfaces - greasy or wet floor surfaces, ramps, uneven ground	Not Applicable
Inadequate Housekeeping - obstructions to walkways and work areas cause trips and falls	Not Applicable
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Not Applicable

Word Counts

Section 1	*Position Title*	200 characters
	Primary Purpose of the Role	3400 characters
Section 2	*Standard Key Accountabilities*	3500 characters
Section 3	*Key Challenges – Challenges*	1000 characters
	Key Challenges – Decision Making	1000 characters
	Key Challenges – Communication	1000 characters
Section 4	*Key Relationships – Who (each)*	200 characters
	Key Relationships – Why (each)	500 characters
Section 7	*Essential Requirements*	3500 characters
Section 8	*Selection Criteria (each)*	1000 characters
Section 9	*Other Requirements*	3800 characters
Section 10	*Disqualification Questions*	200 characters

Position Description

Facility/Service	The Sutherland Hospital
Department	Program 1 – Critical Care, Emergency, Surgery, Anaesthetics and Peri Operative Services Surgery, Anaesthetics and Peri Operative Services Operating Theatre
Manager	Nurse Unit Manager Level 3- Operating Theatre
Position Number	TBC
Cost Centre	163126

Section 1 – Role Details

Contains key information about the role. Fields marked with asterisk (*) are mandatory

Does this role require Job Demand Check List?		YES	*All positions require a Job Demand Checklist to be completed*
Position Description Title *:		Administrative Assistant Level 2 – Operating Theatre Reception	
Does this role require Multiple Awards? Specific classifications (if applicable):		YES	
Award*		Health Employees Administrative Staff (State) Award	
Position Classification*		Admin Off Lvl 2	
Job Category Coding (ROB)*		Administration & Health records/Administration	
Job Classification Coding (ROB)*		542112 Admissions Clerk	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		NO	
Does this role manage or supervise others?*		NO	
Primary Purpose of the role* A concise summary of the primary purpose of the role, answering the question: "Why does this role exist?"	*(Mandatory)*	The vision for South Eastern Sydney Local Health District (SESLHD) is 'exceptional care, healthier lives'. SESLHD is committed to enabling our community to be healthy and well, and to providing the best possible compassionate care when people need it.	
	(Free Text)	This position is responsible for providing a combination of excellent frontline reception service to customers as well as undertaking a variety of administrative responsibilities as directed by the Nurse Unit Manager Level 3- Operating Theatre and the clinical team.	

Section 2 – Key Accountabilities

Describe what is expected of the position and express the end results required of the position. Each accountability statement should comprise a responsibility and an expected outcome. This part of the position description describes "what" is performed and "why" it is performed.

Standard Key Accountabilities*	*(Free Text)*	• Take responsibility for being a point of contact for the Operating Theatres and ensure the optimum service delivery for the patients, carers, staff, visitors • Provide consistent high quality customer service as a person of first contact including telephone, email enquiries and personal contact

		with patient, carers, staff and visitors to ensure delivery of an efficient and effective service. • Provide an efficient administrative and general clerical service. Type and format correspondence as required. Photocopy, fax, email, scan relevant documents. • Other administrative services include, but not limited to, telephone enquiries, ordering, theatres list preparation and distribution. • Attend and participate in relevant meetings and committees. • Ensure a high degree of accuracy in the completion, recording and filing of all paperwork related to the tasks of the role. Ensure tasks related to eMR are accurate. • Provide administrative and clerical support service, managing work priorities and work flow within allocated resources to ensure delivery of efficient and effective patient focused services. • Ensure privacy and confidentiality are maintained at all times.

Section 3 – Key Challenges

This section describes the complexity of the job, the influences on it, and the influence that it has. The Key Challenges should not restate the Key Accountabilities. We recommend not to have more than 2-3 "Key Challenges" in total. Write two or three sentences concise statements

Challenges	Manage competing demands and maintain focus on quality in a high work volume environment.
Decision Making	Ability to work with minimal supervision within established guidelines and flexibility to make appropriate changes in short timeframes in consultation with relevant team members Prioritise daily workload to complete required tasks
Communication	Effective communication skills with patients, visitors, health professionals/clinicians, managers and colleagues.

Section 4 – Key Relationships

The key Internal/External stakeholders and customers the role is expected to interact with routinely, rather than periodically. Concentrating on those communication requirements that are critical to the achievement of the role's primary objective(s).

Key Internal Relationships	**Who?**	Nurse Unit Manager
	Why?	To provide administrative support and to receive direction, supervision, support and development.
	Who?	Clinical teams
	Why?	To ensure exceptional service to all patients
	Who?	
	Why?	
Does this role routinely interact with external stakeholders?		
	Who?	Patients and carers

Key External Relationships	**Why?**	Maintaining effective relationship with patients and families to ensure optimal service delivery
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		NO

Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	Nil
Indirect Reports	nil

Section 6 – Financial Delegation

Note either "as per delegation manual" or "other", if selecting other specify the monetary value of the financial delegation (eg $5,000.00).

As per delegation manual	As per delegation manual
Other $	

Section 7 – Essential Requirements

Information (where relevant) about essential role requirements, such as: whether the role is identified, qualifications requirements, employment screening checks, licence requirements etc.

Other Requirements	*(Mandatory)*	• All staff are required to complete and submit a Pre-employment Health Declaration Form • Dependant on position applied for you will need to complete/provide a Working with Children Check (WWCC), National Police Check (NPC) and/or Aged Care Check • *Staff who supervise others:* As a leader you are expected to support the organisation achieve the aims of the safety management system, to establish and maintain a positive health and safety culture in the workplace and to consult with workers and others when making decisions that may impact upon the health, safety and welfare of those in the workplace. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies and procedures relating to work health safety and wellbeing
	(Free Text)	

Section 8 – Selection Criteria

The selection criteria should be based on the accountabilities that have been identified for the position and are used to make sound and fair selection decisions. Please add all standard selection criteria in to separate Selection Criteria boxes.

1	Demonstrated ability to plan, prioritise and organise work activities within deadlines.
2	Demonstrated attention to detail with a high level of accuracy when working with computer systems and processes.
3	Effective communication, interpersonal and customer service skills (written, verbal, email and telephone).
4	Demonstrated ability to apply knowledge of electronic systems and computer software to achieve job outcomes.
5	Proven ability to work independently and as a team member to achieve quality service outcomes.
6	Ability to be flexible and adaptable to changing priorities and processes.

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