



ST VINCENT'S  
HEALTH NETWORK  
SYDNEY

# Heart Lung Stream Interventional Cardiology Service

Staffing model changes

21 December 2021

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Heart Lung Stream Manager

# Acknowledgement

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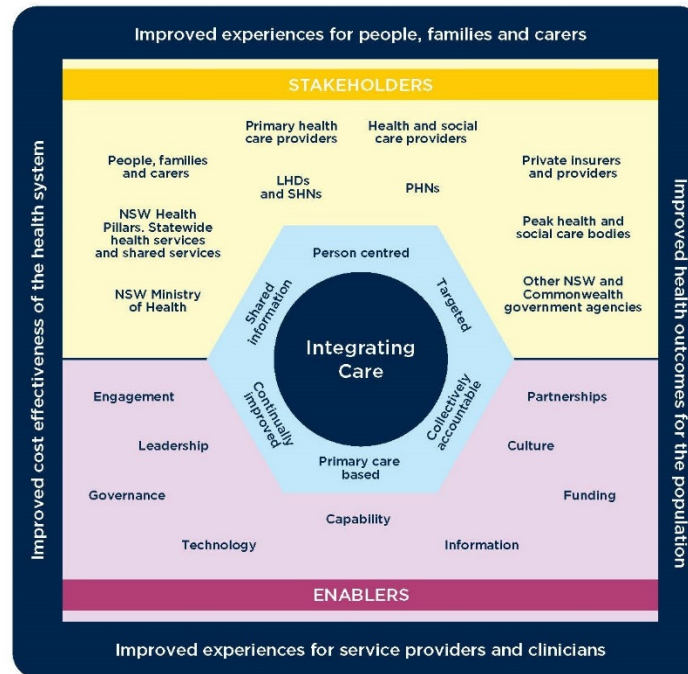
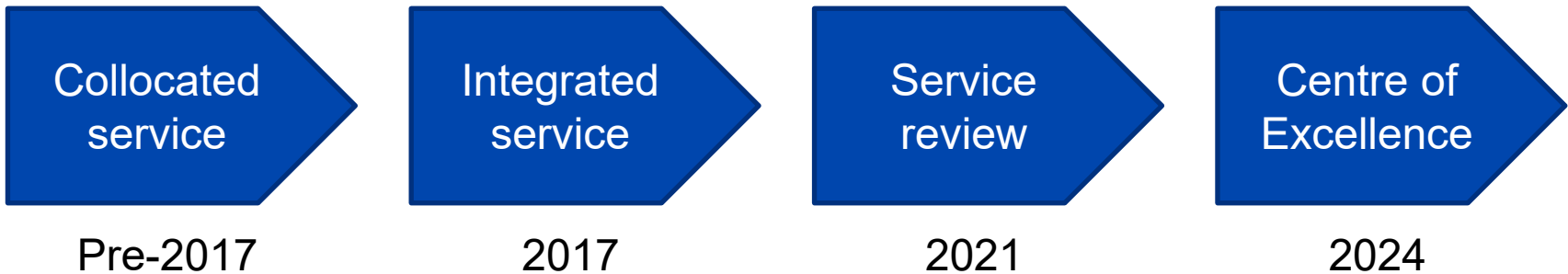
We acknowledge the Gadigal people of the Eora nation, the traditional custodians of the lands on which we are meeting today. We acknowledge that they have occupied and cared for these lands over countless generations, and we celebrate their continuing contribution to the life of these regions.

# Overview

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- The Interventional Service has been operating as a Collaborative Service since 2017
- The Interventional Service is experiencing unprecedented pressures and demands – activity across both hospitals is increasing with new and innovative technologies emerging
- We need staffing to resource operational demands and to ensure a safe, efficient and patient centred approach to care
- A new management model is being proposed to increase staff and patient satisfaction, increase efficiency across the service and strategically plan the move towards establishing the Heart Lung Centre of Excellence

# Background



# What is changing and why?

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## Staffing

Increase in resources

Improved leadership structure



## Process

Procedural bookings waitlist

Documentation improvements



## Technology

Installation of new haemodynamics system

Better tracking of resources used in every procedure



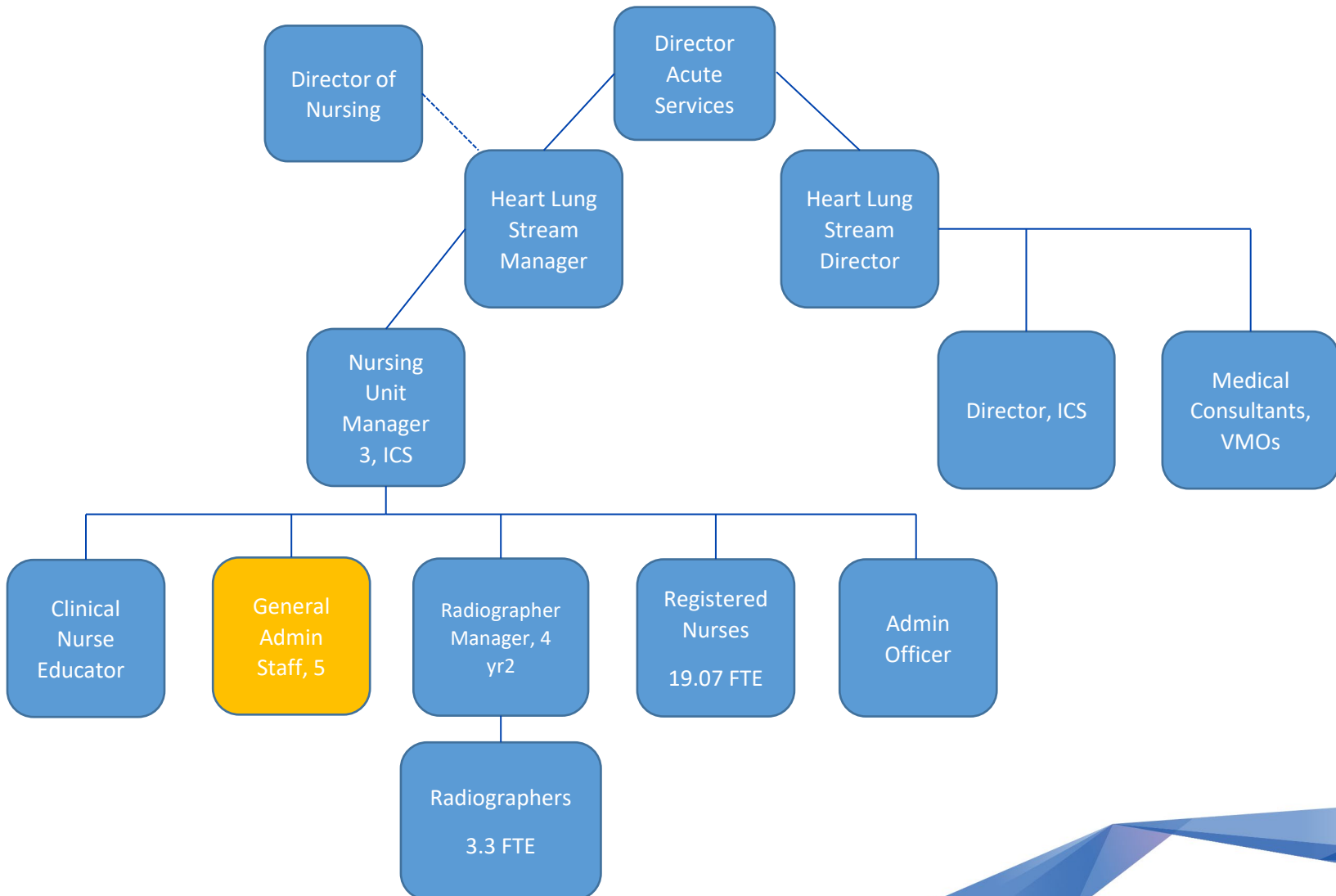
## Cultural

Supportive work environment

Focus upon quality improvement



# Current Organisation Chart






# Nursing Staff

Employed	Current	Proposed	Variance
NUM 1	-	1.0FTE	1.0FTE
NUM 3	1.0FTE	-	0.0FTE
NM 3	-	1.0FTE	↑ 1.0FTE
CNE	1.0FTE	1.0FTE	0.0FTE
RNs	19.07FTE	*23.87FTE	↑ *4.8FTE
<b>Total</b>	<b>21.07FTE</b>	<b>26.87FTE</b>	<b>5.8FTE additional</b>

\*Nursing staff are to assist with stock checking and restocking duties so that they are familiar with the location, type, amount and expiry of stock

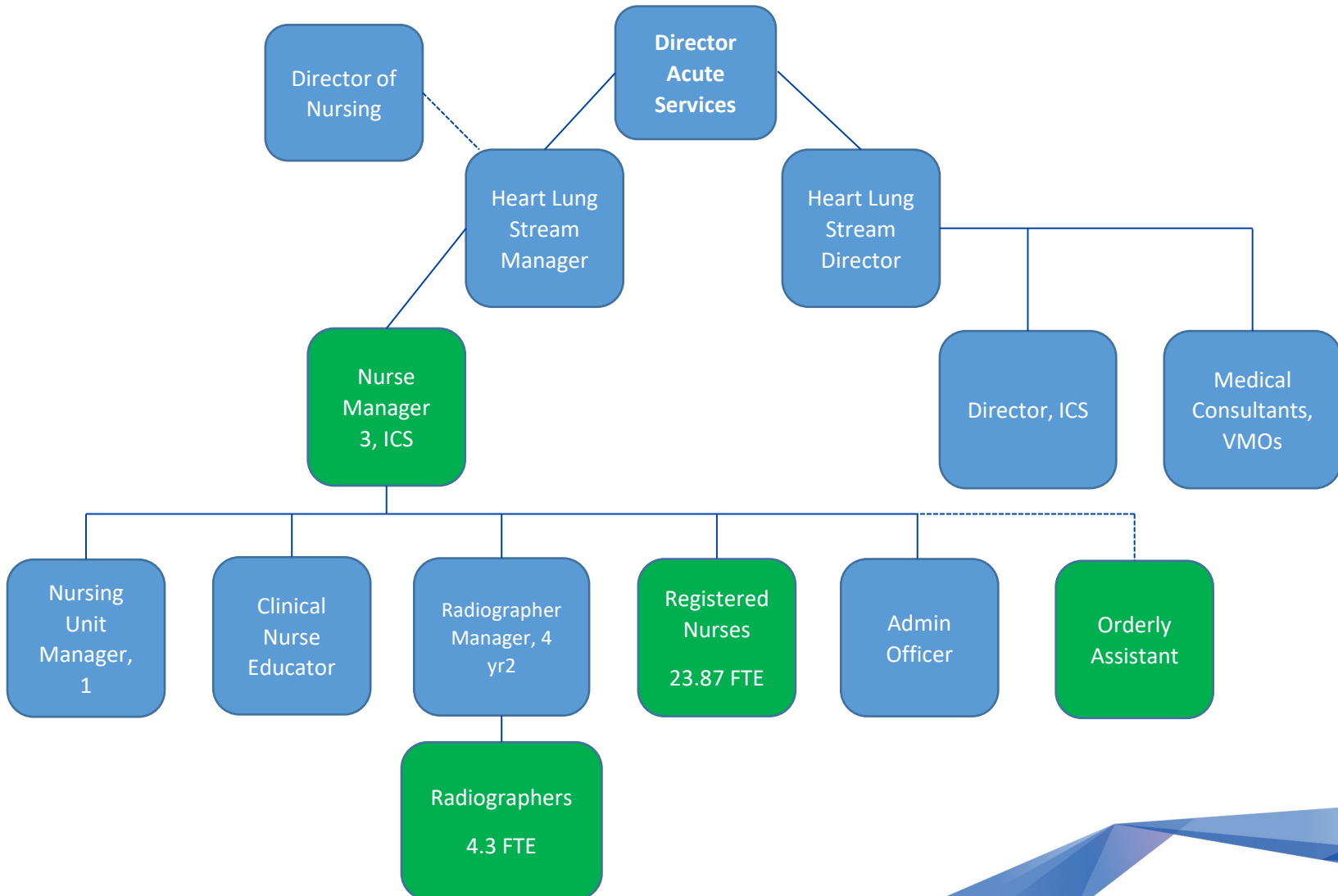
# Allied Health and Medical

Employed	Current	Proposed	Variance
Admin Officer	1.0FTE	1.0FTE	0.0FTE
Rad Manager 4, Yr2	1.0FTE	1.0FTE	0.0FTE
Radiographers	3.3FTE	*4.3FTE	 *1.0FTE
GAS 5	1.0FTE	0.0FTE	 1.0FTE
Orderly	0.0FTE	1.0FTE	 1.0FTE
<b>Total</b>	<b>6.3FTE</b>	<b>7.3FTE</b>	<b>Additional 1.0FTE</b>

\*Radiographers are to assist with stock checking and restocking duties so that they are familiar with the location, type, amount and expiry of stock



# Proposed Organisation Chart



# Plan – how will we achieve this?

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- Finalise Position Descriptions
- Recruitment drive
- Interview process
- Orientation and on-boarding

# Timeline

Task	21 Dec	3 Jan	22 Feb
Industrial consultation	✓		
Team Meeting	✓		
Inform external key stakeholders (SVPH)	✓		
Recruitment drive		✓	
Roster Rework			✓
Orientation and on-boarding			✓

# Frequently asked questions

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## **Will there be a reduction in FTE?**

The FTE will be increased by 1.0FTE Nurse Manager, 4.8 Nurses, 1.0 Wards Person and 1.0FTE Radiographer.

The reduction of FTE includes 1.0FTE General Administration Staff.

## **Who is my Manager?**

The Nurse Manager 3 will be the Direct Manager for all nursing staff.

The Nurse Manager 3 will work with the Radiographer Manager to ensure a safe and efficient service.

The Nursing Unit Manager 1 will work closely with the Floor Coordinators and Radiographer Manager to ensure the day-to-day management of the labs, which will include the management of stock. They will co-ordinate the running of the labs and delegate nursing and wards people accordingly to ensure an efficient service.

# Frequently asked questions

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## **Will my daily work duties change?**

There will be a change to your daily work duties, which will include the restocking of equipment in the storage areas to ensure staff are familiar with stock availability, stock placement and stock expiry dates. This will be performed in conjunction with the NUM1. Stock replacement will include the responsibility of ensuring a safe workplace (ie. Stock deliveries are replaced in a timely manner without obstruction to corridors/clinical areas)

## **Will office arrangements change?**

We are working on a plan which will be finalised following the consultation period.

# What does success look like?

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## Patients

Improve patient care and the patient experience



## Staff

Enhance staff experience



## Vision

Articulate a clear vision and strategy for the Interventional Cardiology Service



## Collaboration

Ongoing development of a robust model of care which delivers an integrated, collaborative care service to **all** patients



# Questions

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# Support

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We understand that this will be a period of change, and we appreciate your support as we redesign the ICS operational direction to support our long term strategy.

If you have any concerns or queries, please direct them to:

## Director Acute Services

- Todd McEwan ([todd.mcewan@svha.org.au](mailto:todd.mcewan@svha.org.au))

## Director of Nursing

- Anna Thornton ([anna.thornton@svha.org.au](mailto:anna.thornton@svha.org.au))

## Heart Lung Clinical Stream Manager

- Nicole de Tullio ([nicole.detullio@svha.org.au](mailto:nicole.detullio@svha.org.au))

## People & Culture Business Partner

- Rio Pun ([rio.pun@svha.org.au](mailto:rio.pun@svha.org.au))

## Employee Assistance Program (EAP)

AccessEAP Ph: 1800 818 728

