Restructure – Consultation Document (Procedure reference PR2014_016)

Document control sheet

Contact for enquiries and proposed changes:

Anne Bajuk

Email: Anne.bajuk@health.nsw.gov.au

Phone: 0407 745 601

Project sponsor

Name Anne Bajuk

Position Service Director/Site Manager MQH

Executive Project sponsor

Name: Andrea Taylor

Position: Director MHDA

Contents

Stage 1 – Scop	pe, Plan and Approval	3	
1.1 The Nee	ed for Change	3	
1.1.1	Description of Service	3	
1.1.2	Reason and Purpose for the Restructure	3	
1.1.3	Current Structure	4	
1.1.4	Position Descriptions	4	
1.2 Restruc	ture Plan	5	
1.2.1	Proposed New Structure	5	
1.2.2	Proposed Changes to Position Descriptions	5	
1.2.3	Impact on services and functions	5	
1.2.4	Likely impact on employees	5	
Stage 2 – Con	sultation	6	
2.1 Notifica	tion to employees	6	
2.2 Notification to Union/Industrial Bodies and other relevant parties			
Stage 3 – Implementation			
tage 4 – Review			

Stage 1 - Scope, Plan and Approval

1.1 The Need for Change

1.1.1 Description of Service

Macquarie Hospital is a declared, low-secure, 195 bed tertiary mental health facility for adult acute admissions and slow stream rehabilitation services for consumers with schizophrenia, dual diagnosis and other enduring mental illnesses.

1.1.2 Reason and Purpose for the Restructure

On 1 December 2023, the Pathways to Community Living Initiative (PCLI) Stage 2 team was realigned from the Director of Governance and Operations, MHDA, to the Service Director, Macquarie Hospital., Following this change in governance, a natural next step, in order to incorporate the PCLI Program Manager, Health Manager 4 (HM4) into the executive team, is an evaluation of this position's role and portfolios was undertaken with the intent of developing the position into an Allied Health/PCLI Manager role (HM4).

The intent of the PCLI transition from the Director of Governance and Operation, MHDA to the Service Director Macquarie Hospital, was to improve integration of services and professional alignment of clinical positions. The PCLI clinicians work closely with the whole of the hospital multi-disciplinary team (MDT). Much of the PCLI clinical work is naturally aligned with the Allied Health teams on site and their clinical work is interdependent and complementary in achieving successful consumer transitions to the community.

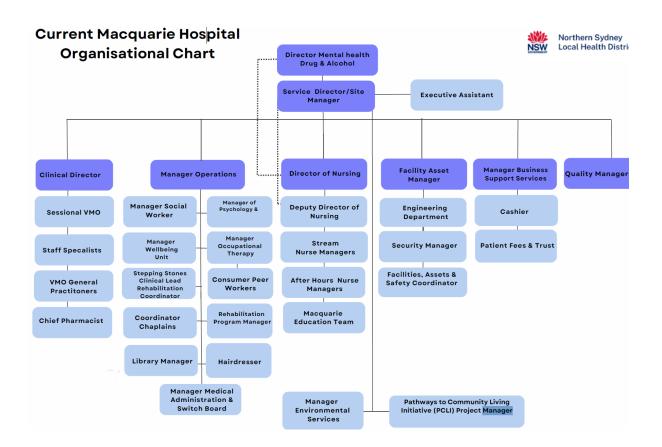
Internal relativities reflect, the Operations Manager, Macquarie Hospital (HM4) is the line manager for six [6] Allied Health Team Leaders (some with multi-disciplinary teams under their management) plus five [5] other teams on site including Medical Administration, Library Manager, Hairdresser, Volunteers and Chaplains, as well as being operationally responsible for the District Health Information Services on site, plus having the portfolio of Heath Share Food services to the hospital. A wide variety of additional whole of site portfolios fall under this role which is part of the Macquarie Hospital Executive Team and participates in the executive on call roster on a rotational basis.

In comparison, the PCLI Program Manager (HM4) has line management of the PCLI Team Leader and has a pivotal liaison role with the Ministry of Health. The proposal to transition this position into an Allied Health/ PCLI Manager role would allow for further enhancement of the close working relationship between the PCLI clinical team and the Allied Health teams on site. This would create a more streamlined approach to teams working together to manage complex transitions of long stay consumers. The position would also be required to participate in the Executive on call roster.

The realignment would ensure equitable workload distribution between the two HM 4 positions and enable the Operations Manager position to have a clearer operational focus and emphasis on the wider strategic and organisational opportunities required to meet future and current service need in a large and complex service.

Additionally, the positional changes would align with the MHDA structure that has a newly appointed Director of Allied Health and Clinical Programs and thus creates clear professional pathways for staff development and support.

1.1.3 Current Structure



1.1.4 Current Position Descriptions

The change in role for the existing PCLI Manager will allow for this role to be part of the Executive team.

No Clinical or Corporate Services teams will have a change in their structure, FTE or budget.

The Line Managers of five [5] clinical teams will have a change in reporting line from the Operations Manager to the Allied Health/ PCLI Manager. These teams are the Occupational Therapy team, the Psychology team, the Social Work team, the Stepping Stones team and the Rehabilitation Program team.

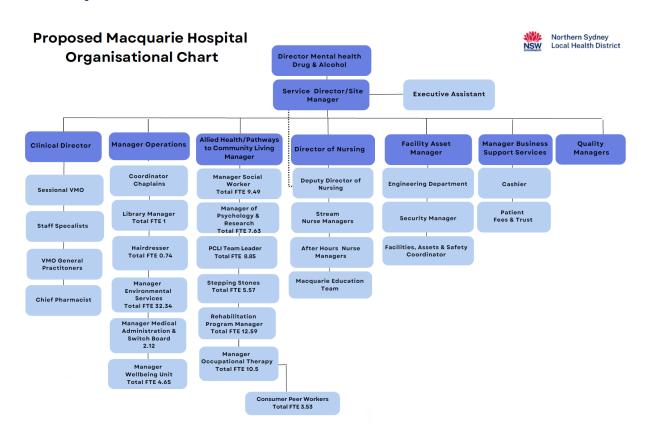
The PCLI 2 team leader will have a change in reporting line to the Allied Health/ PCLI Manager.

The Environmental Service Manager (HM1) will have a change of line manager from the Service Director to the Operations Manager.

Current Position Descriptions for the PCLI Manager HM 4 and the Operations Manager HM 4 attached at Tab A (i & ii)

1.2 Restructure Plan

1.2.1 Proposed New Structure



Following analysis and review, all existing HM 4 functions remain serviced within the proposed new structure.

1.2.2 Proposed Changes to Position Descriptions

Proposed Position Descriptions for the Allied Health / PCLI Manager HM 4 and the Operations Manager HM 4 attached at Tab B (i & ii).

All other roles are a change in reporting line only as noted in 1.1.4

1.2.3 Impact on services and functions

Position	FTE	Status
PCLI Program Manager (HM4)	1.0	Fixed term temporary contract to 31/07/2024
Operations Manager (HM4)	1.0	Permanent contract

1.2.4 Likely impact on employees

The Operations Manager (HM4) 1.0 FTE is permanently recruited to and will experience a change in staff that report to the position.

The most impacted position is the PCLI Program Manager (HM4), 1.0 FTE with the incumbent employed on a fixed term temporary contract until 31/07/2024. This position requires an updated position description as per TAB B and following the consultation process as part of the realignment, would go out to open recruitment as a permanent position.

The other team leaders will experience a change in line manager as mentioned above in 1.1.4

Stage 2 - Consultation

2.1 Notification to employees

The Service Director/Site manager will provide letters to affected staff across the Executive Team; Operations Teams; Allied Health Teams; and PCLI Team.

The Executive will consult with staff impacted by the proposed changes.

A broad consultation meeting outlining the change in reporting lines is planned to be held with all affected staff with an opportunity to ask questions.

2.2 Notification to Union/Industrial Bodies and other relevant parties

The relevant unions that need to be consulted include:

- NSW Nurses and Midwives Association.
- Australian Salaried Medical Officers Foundation.
- Health Services Union.

A letter outlining the change in reporting lines and impact on staff will be provided to each association. If there are any issues that arise from this, then a meeting with the union will be held to understand any issues.

Stage 3 - Implementation

It is intended that the key change of operational reporting lines is completed by the end of July 2024.

The table below indicates the key actions to occur and the proposed timeframe.

Action	Timeframe (by when)
Send correspondence to the affected staff, and unions	14 May 2024
Meetings with affected Staff	TBA May 2024
Three weeks consultation period concludes	3 June 2024
Pending no USCC requested by unions, Allied Health /	17 June 2024
PCLI HM 4 position to progress to recruitment	

Stage 4 - Review

The review of the realignment will be conducted in 6 months after the realignment to analyse whether the Service was able to improve and integrate the PCLI program within Macquarie Hospital and achieve further enhancement of the close working relationship between the PCLI clinical team and the Allied Health teams on site.