Health
South Eastern Sydney
Local Health District

The Garrawarra Centre

Restructure Consultation Paper

Senior Management Structure

Please provide feedback to
Nicole Borg, Business Support Project Officer,
nicole.borg@health.nsw.gov.au

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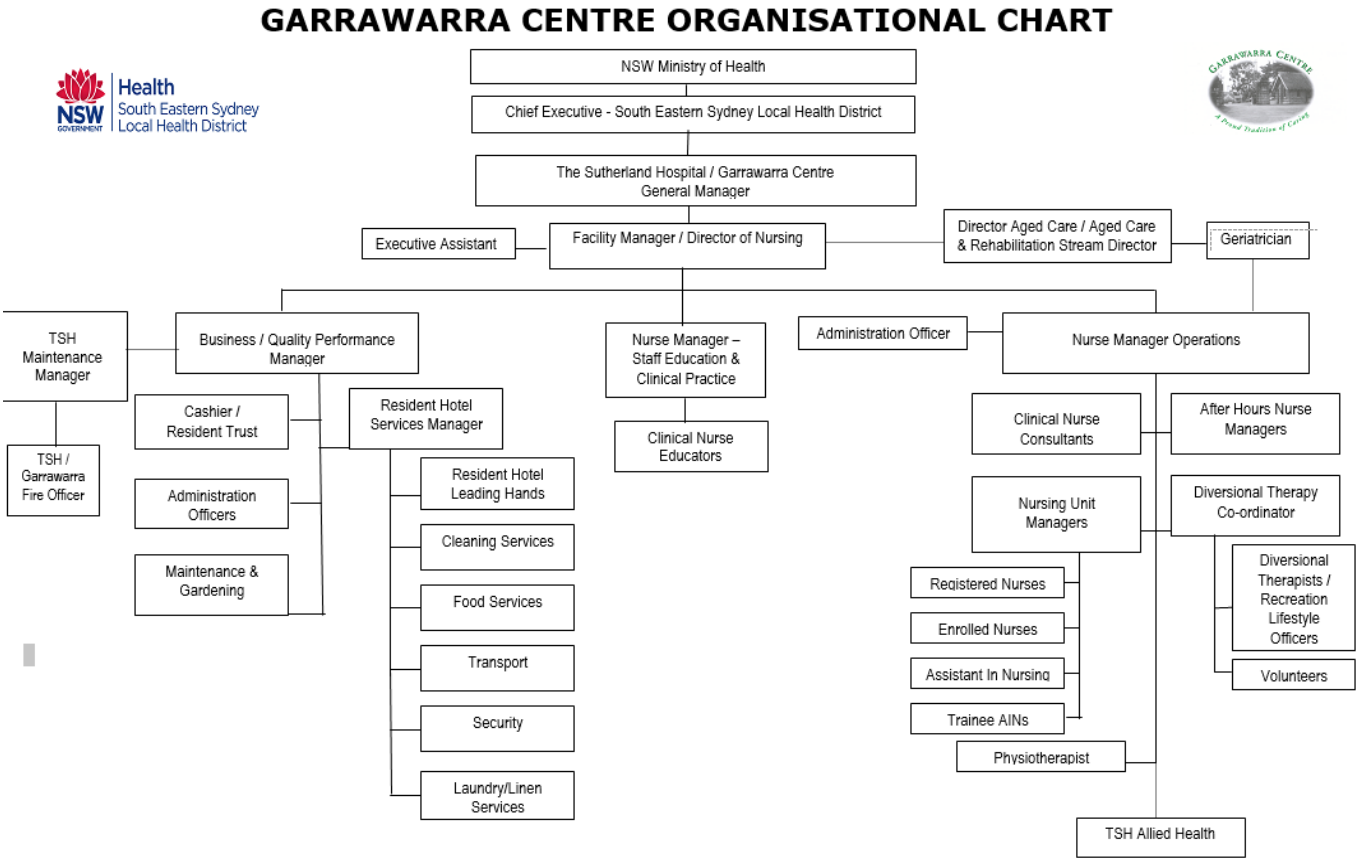
1. Overview of The Garrawarra Centre

1.1 Current Organisational Structure



1.2 Responsibilities of the Garrawarra Centre

The Garrawarra Centre (GC) is a residential aged care facility (RACF) in southern Sydney located at Waterfall, providing high level care to dementia clients across NSW.It is a part of South Eastern Sydney Local Health District (SESLHD). Our purpose in SESLHD and the Garrawarra Centre is to enable our community to be healthy and well; and to provide the best possible compassionate care when people need it.

The Garrawarra Centre as a residential aged care provider supports accommodation for older people who are unable to continue living independently in their own homes and who need ongoing help with everyday tasks. The GC is an approved provider of residential aged care and must provide a range of care and services to residents, including social care,accommodation services and help with day-to-day tasks, personal care, and clinical care.

The General Manager is responsible for the management of The Sutherland Hospital (TSH) & Garrawarra Centre (GC) and through the Executive Leadership team, is responsible for the management of physical, human and financial resources to ensure the delivery of safe and efficient patient care, as well as the achievement of other SESLHD, NSW Health and Commonwealth Aged Care objectives.

2.1 Rationale

The SESLHD Journey to Excellence Strategy 2018 - 2021 identifies that the transformational journey will build local capacity and capability with a vision of improving systems and support for value-based change and improvement to meet the growing demands of the community and deliver safe, quality and compassionate patient care. It proposes considerable changes for health service provision with more sustainable options, preventative measures and earlier interventions within the community.

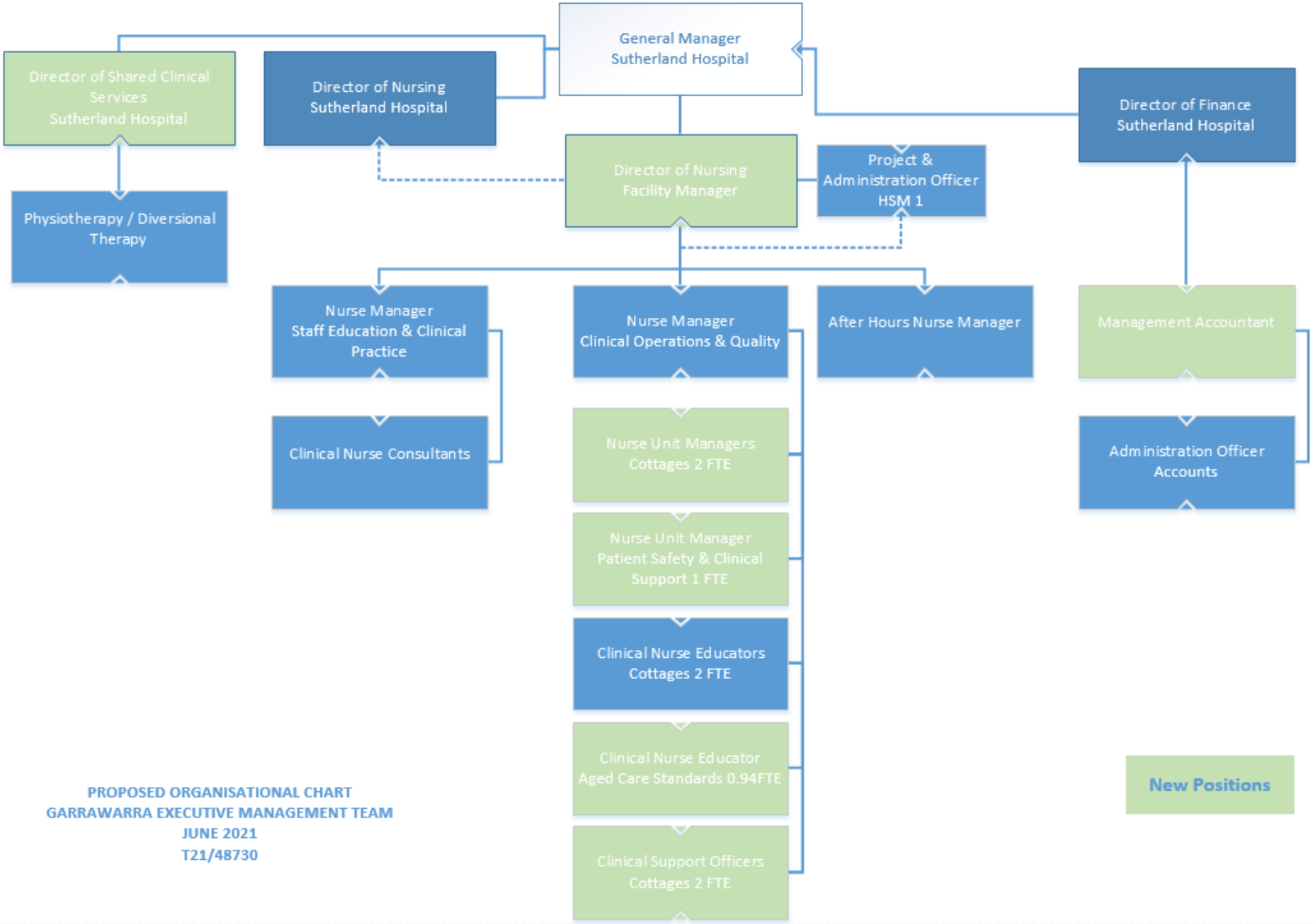
The Aged Care Commision identifies through the (8) National Aged Care Standards a focus on how systems support the delivery of safe and quality aged care services. It is expected the organisation has governance systems in place to assess, monitor and drive improvement in the quality and safety of the care and services they provide. This includes making sure consumers have a quality experience. Organisations are expected to plan for, and manage internal and external emergencies and disasters and have effective infection prevention and control procedures in place

The governing body of the organisation is responsible for promoting a culture of safe, inclusive and quality, care and services in the organisation. The governing body of the organisation is also responsible for overseeing the organisation's strategic direction and policies for delivering care to meet the Quality AC Standards.

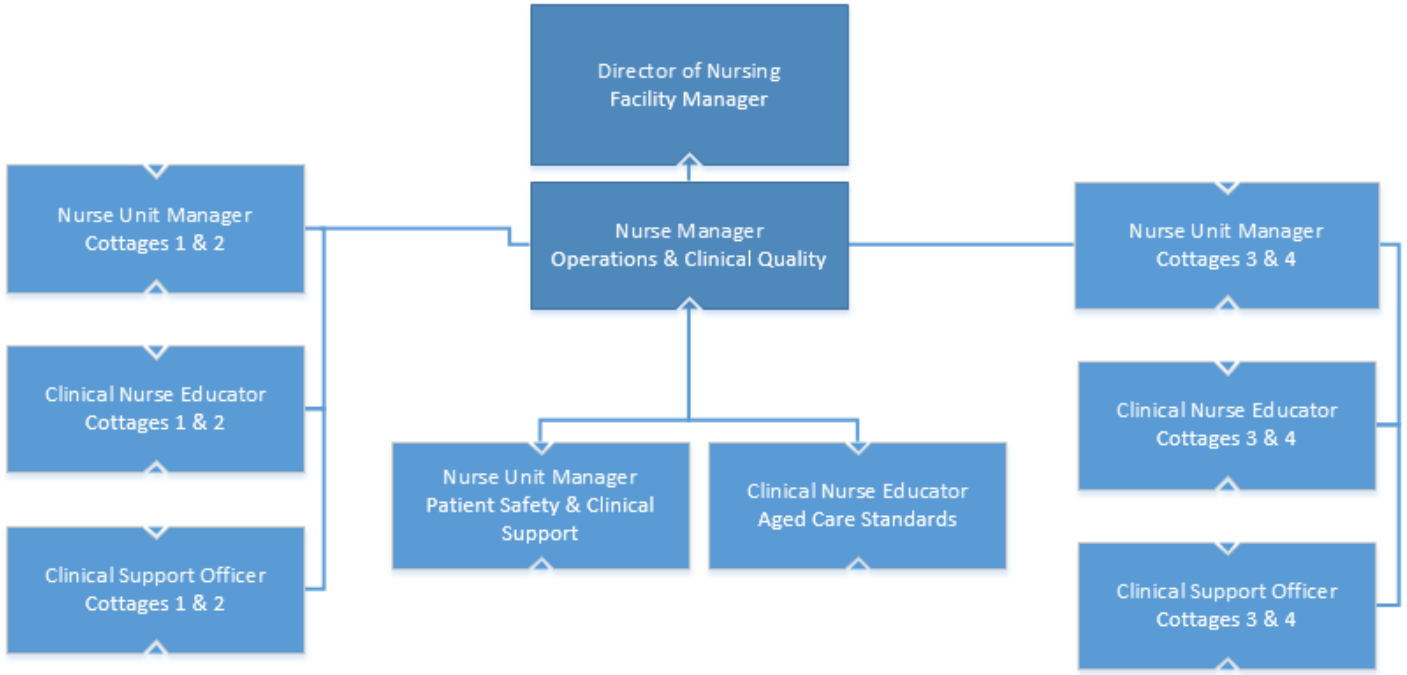
To provide a secure future and enable the Garrawarra Centre to be a transformation-led organisation we are committed to the provision of a culture of safe inclusive and quality care and a service that is embedded in all aspects of organisational life and owned by everyone. It is the organisation's (Garrawarra and TSH) governing body that enables this through its leadership, decisions made and directions set for the organisation. It will be reflected in how the organisation communicates its meaning and purpose to the workforce, consumers and those outside the service. The existing management structure will be realigned to reflect the needs of a Residential Aged Care Facility aligned with a NSW Health acute care facility.

Successful transformation of the GC will require integrated ownership of clinical, operational, financial objectives and outcomes. It will provide the leadership team and clinicians with autonomy and accountability to make decisions on how to improve service and performance, and to implement changes that will best serve them, their residents and their consumers. In consultation with A Excellence (an expert team in residential aged care standards) in regards to high performing RACF's the GC should reflect how it is addresses changes to the aged care assessment as it transitions from the Aged Care Funding Instrument to the AA NAC assessment tool, while demonstrating how it addresses the needs of residents with high level behavioural diagnosis and idenitifes care needs that meet best practice guidelines.

To be able to achieve this at the GC and to align with SESLHD and TSH strategic objectives there will be a realignment of the current leadership structure. This is aimed at meeting the aged care governance arrangments which will deliver appropriate support, including financial, patient safety and administrative, so that care provided at the resident level is compassionate,skillful and timely.



PROPOSED ORGANISATIONAL CHART
GARRAWARRA EXECUTIVE MANAGEMENT TEAM
JUNE 2021
T21/48730



GARRAWARRA CENTRE
PROPOSED COTTAGE STRUCTURE
June 2021

3. Proposed changes to Position Descriptions

3.1 Summary of proposed changes to positions

3.1.1 Positions to be deleted

Current Position	FTE	Proposed Action	Classification	Grade	Commentary
Facility Manager / Director of Nursing *Temporarily filled as NM5*	1.0	Delete	Nurse Manager	7	Non acute facility. Role supported by TSH GM and DONM
Nurse Unit Manager *Permanently filled*	4.0	Delete	Nurse Unit Manager	2	Retaining 3 NUM (EOI) Realignment to cottages & Patient Safety
Business & Quality Performance *Permanently filled*	1.0	Delete	HSM	3	Role no longer required
Administration Officer Rostering *Permanently filled*	1.0	Delete	Administration Officer	3	Match to CSO A03
Administration Officer Reception *Permanently filled*	1.0	Delete	Administration Officer	3	Match to CSO A03
Administration Officer Cashier *Permanently filled*	1.0	Delete	Administration Officer	5	Role no longer required
Executive Assistant to Facility Manager *Permanently filled*	1.0	Delete	Administration Officer	6	Role no longer required
Clinical Nurse Educator *Permanently filled* *FTE to move to new Standards Role*	0.94	Delete	CNE		Match FTE to Aged Care Standards Clinical Nurse Educator

3.1.2 Proposed new positions

New Position	FTE	Proposed Action	Classification	Grade	Commentary
Director of Nursing / Facility Manager	1.0	New	Nurse Manager	6	In line with non-acute aged care Facility Manager
Nurse Unit Manager Cottages 1&2	1.0	New	Nurse Unit Manager	2	Supporting pod model
Nurse Unit Manager Cottages 3&4	1.0	New	Nurse Unit Manager	2	Supporting pod model
Nurse Unit Manager Patient Safety and Clinical Support	1.0	New	Nurse Unit Manager	2	Provide specific support and development across cottage pods
Clinical Nurse Educator Aged Care Standards	1.0	New	Clinical Nurse Educator	2	Provding specific guidance and support re: Aged care assessments
Director of Shared Clinical Services *Existing Shared Clinical Services Director TSH*	0.2	New	Allied Health		To provide professional governance of AH
Project & Administration Officer	1.0	New	HSM	1	Project & administrative support of the Leadership Team
Clinical Support Officer Cottages *Proposed match to deleted A03 roles*	2.0	New	Administration Officer	3	Enhanced support to NUM and other clinical staff in cottage pods

3.1.3 Proposed new reporting lines

Department	Current Reporting Line	Proposed New ReportingLine	Commentary
Physiotherapy; DiversionalTherapy; Recreation Lifestyle Officers	Nurse Manager Operations	Director of Shared Clinical Services	Professional accountability
After Hours Nurse Managers	Nurse Manager Operations	Facility Manager	Align with operations
Clinical Nurse Consultants	Nurse Manager Operations	Staff Education & Clinical Practice Manager	Align with Education Manager
Clinical Nurse Educator Aged Care Standards	Nurse Manager Staff Education & Clinical Practice	Nurse Unit Managers Cottages	Part of cottage pod team. Indirect reporting line to NM Education
Administration Officer Accounts	Business & Quality Performance Manager	Management Accountant-TSH/GC	Provide administrative support to the Management Accountant

3.2 Details of proposed changes to positions, new positions and reporting lines

3.2.1 Proposed changes to Director of Nursing / Facility Manager

Director Nursing/Facility Manager (DON/FM) will be responsible for the operation, development and delivery of GC'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.
The DON/FM is responsible and accountable for the delivery of high quality clinical services, education and research, and day-to-day management of the GC within allocated resources.

Recent changes to the SESLHD Corporate Services directorate has repointed the responsibility of corporate and facility management to the new SESLHD corporate leadership team. Functions previously managed by the DON/FM will be reduced due to these new roles, however oversight of the Facilty due to the remote location and isolation from TSH will ensure governace is maintained . Corprate staff within these portfolios now report through to the Corporate and Legal Directorate but will have day to day communicaitons with the DON/ Facilty Manager for items impacting residents and staff.

The DON/FM will continue to work closely with the TSH Medical & Nursing Co-Director of Program 2 (Aged Care,Rehabilitation and medical specialites) to support greater linkage for the GC resident in addressing individual care needs.

The DON/FM will provide professional leadership and management accountability for delivering high quality patient centered care according to nursing clinical standards and

practice, and quality and safety outcomes through appropriate nurse staffing levels and skill mix.

The DON/FM will also support the Nurse Managers in talent and performance development and enhancement of their staff and building leadership capabilities across the centre.

This proposal provides enhancement of support staff such as a Management Accountant and a high level Project and Executive assistance to the DON/FM and leadership team. Additionally the creation of the Cottage Pod model with the addition of clinical support officers for the NUMs, re-pointing of clinical educators and the inclusion of a patient safety NUM, promotes greater focus on the resident and aspects of care.

A professional link with the TSH DON&M (NM8) will provide professional nursing guidance and support. The role is currently being filled temporarily as a Nurse Manager 5.

The DON/FM is a member of the TSH/GC Executive Leadership Team and reports directlyto the TSH/GC General Manager.

The role is graded as a Nurse Manager 6 in the new structure.

3.2.2 Proposed changes to Nurse Unit Managers (NUM2)

There are currently 4 FTE Nurse Unit Managers (NUM2) at Garrawarra. It is proposed that 4 FTE be deleted with the proposal as follows;

It is proposed that two cottage pods be established. Each pod will provide co-ordination and management of resident care. It is proposed that each pod comprises of two cottages with a dedicated Nurse Unit Manager, Clinical Nurse Educator and Clinical Support Officer. As these structures are not currently in place it is noted that the addition of a Clinical Support officer for each cottage pod will provide administrative and rostering support as a minimum, for the cottage NUMs.

This structure will also be supported by the proposed Nurse Unit Manager Patient Safety & Clinical Support who will provide support to the cottage pods in the quality and safety agenda of residents along side the Clinical Nurse Educator Aged Care Standards.

It is proposed that 2.0 FTE Nurse Unit Manager (NUM) roles be created with each NUM assigned to oversee two cottages. It is proposed that these roles are classified as NUM 2 and will report to the Nurse Manager Operations and Clinical Quality.

It is proposed that 1.0 FTE Nurse Unit Manager Patient Safety and Clinical Support role be created (see 3.2.3). Overall this is a reduction of Nurse Unit Manager positions by 1.0 FTE.

3.2.3 Proposed new position: Nurse Unit Manager Patient Safety and Clinical Support

The Nurse Unit Manager (NUM) Patient Safety & Clinical Support is responsible for the delivery of GC quality and safety initiatives and the delivery of local improvements and projects that improve care outcomes, workplace culture and organisational reputation. Meeting the requirement of Standard 7 this role will support the workforce in their day-to-day practice and can protect against risk and improve the care outcomes for consumers.

The role provides leadership to the clinical teams to support staff in addressing patient safety, IIMs reporting and items for action to enhance care of residents. The role is the link between all cottages in ensuring clinical education and quality and safety process is maintained and addressed for all residents. It is proposed this role will work closely with the cottage pod NUMs to ensure consistency in practice that aligns to the aged care standards and the SESLHD Quality Framework in a manner that is meaningful to clinical staff, to promote positive change and provide critical support to the GC in the patient safety agenda. The position will have responsibility for the Patient Safety agenda and will report to the NM Clinical Operations & Quality.

It is proposed this role will be classified as a Nurse Unit Manager Level 2.

3.2.4 Proposed new position: Clinical Nurse Educator Aged Care Standards

The Aged Care Funding Instrument (ACFI) is a tool used to measure a residents' level of care required, their daily living activities, their behaviour and complex health needs. Assessment can include continence, mobility, nutrition,personal hygiene, toileting, cognitive ability and behaviour, wandering, verbal behaviour, physical behaviour, depression, medication, and complex health care.

Due to the complexity of assessment and documentation required to complete these assessments accurately it is proposed that a CNE be realigned to ensure education and support to timely and accurate assessments. The position would report directly to the Nurse Manager Clinical Operations and Quality and have an operational link to the Management Accountant TSH/GC to promote an understanding of how the asssessment tool impacts individual residents care needs.

This role supports the higher level understanding for all clinical staff in the aged care assessment to meet not only Aged Care minimum standards of care but ensure all aspects of clinical assessment are well documented, articulated to family and implemented with individual residents. In line with the Aged Care legislation, assessment is an ongoing requirement and requires ongoing education in the tool for new staff in the clinical arena.

This role links closely with the Patient Safety NUM and the cottage pod NUMs to maintain consistency in practice for the residential aged care patient.

3.2.5 Proposed new position: Clinical Support Officer

The Clinical Support Officer (CSO) is responsible for supporting work activities of the nursing staff. The CSO will provide administrative and transactional services for members of the healthcare teams in the Cottage pods under the direction of the NUM.

It is proposed that 2.0 FTE Clinical Support officer roles (A03) be created that will support two cottages each. These roles will be managed by respective Nurse Unit Manager of each cottage group. It is proposed that the deleted A03 Administration roles be matched to the newly created CSO roles.

3.2.6 Proposed changes to Business & Quality Performance Manager

It is proposed that the Business and Quality Performance Manager position be deleted.

The functions of this role will be allocated to the following proposed new positions:

- Business to Management Accountant (recruited)
- Quality Performance to NUM Patient Safety and Clinical Support

Facility management components of the role previously undertaken will be repointed to the Corporate and Legal Directorate.

3.2.7 Proposed changes to Administrative Support

The current administrative support at Garrawarra comprises of:

- Executive Assistant A06 supporting the Facility Manager
- Administration Officer A05 Cashier
- Administrative Officer A03 Reception/Admin
- Administrative Officer A03 Accounts
- Administrative Officer A03 Rostering

It is proposed the administrative support services be realigned to the following:

- Propose new position Project and Administration Officer (HSM1) to the Leadership Team
- Executive Assistant A06 be deleted with some functions of this role undertaken by the proposed Project & Administration Officer to the Leadership team
- Administration Officer A03 Accounts be retained with new reporting line
- Administration Officer A05 Cashier be deleted with the functions of this role undertaken by the Management Accountant
- Administration Officer A03 Roster be deleted

- Administration Officer A03 Reception/Admin be deleted

It is proposed that the deleted A03 positions (Rostering and Reception/Admin) be matched to the proposed newly created Clinical Support Officer roles.

3.2.8 Proposed new position: Project and Administration Officer

The Project & Administration Officer is responsible for ensuring the efficient and professional functioning and support to the leadership team at the Garrawarra Centre. The Leadership Team comprises of the DoN / Facility Manager, the Nurse Manager Clinical Operations & Quality and the Nurse Manager Staff Education & Clinical Practice and the Management Accountant. The position provides first line contact with external and internal stakeholders wishing to access the DoN / Facility Manager and other members of the leadership team and therefore carries significant responsibility in respect to relationship building and customer service.

This position provides high level customer service and administration support to the leadership team and stakeholders. The incumbent will be required to engage and influence multiple stakeholders to establish and manage key projects across the centre to drive continual innovation and efficiencies.

It is proposed that this role is classified as a HSM1 and will report directly to the DoN / Facility Manager

3.2.9 Proposed new position: Management Accountant

It is proposed that a Management Accountant be appointed who is an degree qualified Accountant and specialises in aged care funding initiatives, reconciliation of funds for residential accommodation and all aspects relating to the aged care funding stream, in addition thiswill support the general business and financial functions of the GC & TSH. This role is currently being recruited.

This role will link closely with the leadership team and the NUM Patient Safety & Clinical Support and CNE Standards to ensure all requirements of the Aged Care Act are met and addressed.

This role will report directly to the Director of Finance, Performance and Development (TSH/GC) and will have an operational reporting line to the DoN / Facility Manager

This role will be classified as a Health Service Manager 3.

3.2.10 Proposed new position: Director of Shared Clinical Services

The GC Allied Health Team comprises of a physiotherapist, the Diversional Therapy Team and Recreation Lifestyle Officers. These positions currently report to the Nurse Manager Operations. In addition there is a visiting speech therapist and dietician that attend the site from TSH.

It is proposed that the Director of Shared Clinical Services (Allied Health) role at The Sutherland Hospital be enhanced to manage the Allied Health Services at Garrawarra. This will provide professional and operational support to allied health services.

It is proposed that the role of Director of Shared Clinical Services TSH be increased by 0.2 FTE to provide educational and professional support to these services.

4. The recruitment and matching process

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 OrganisationalRestructures and Other Reforms in SESLHD.*

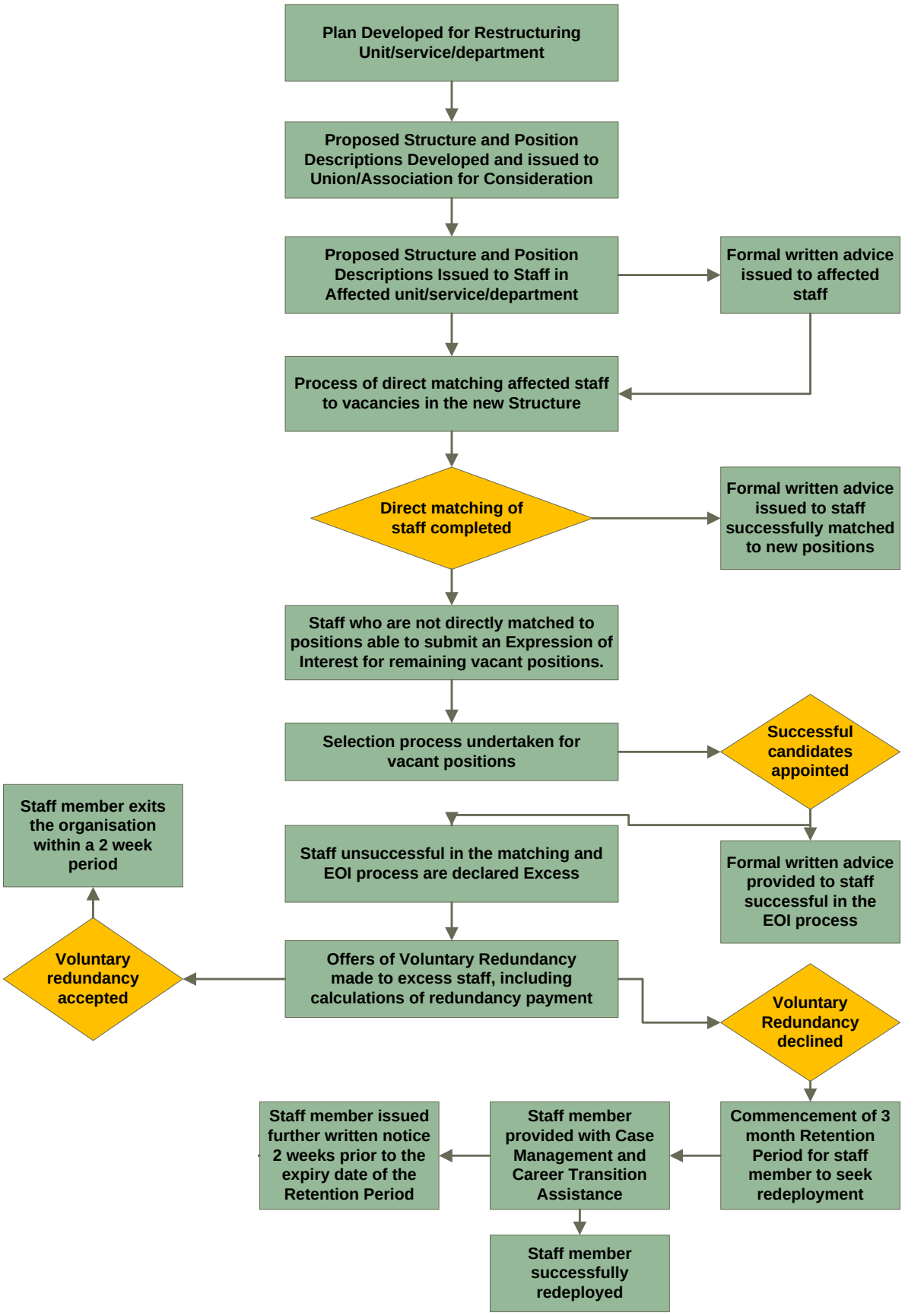
Once final approval has been obtained from the Chief Executive, all staff who will be affected by deletions or other changes will be informed in writing that they are affected.
Expressions of interest will be requested from affected staff for vacant positions. Affected staff will receive case management support immediately. Following assessment of EOI applications, written advice will be given to staff appointed to positions and staff not matched or appointed 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 an offer of voluntary redundancy will receive case management and career assistance.

5. Employee Assistance Program

Staff are reminded of the availability of the Employee Assistance Program throughConverge 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.

PROCESS MAP FOR ORGANISATIONAL RESTRUCTURES



6. Consultation

Staff that would be significantly impacted by the proposals set out in this document have been contacted individually and advised of the proposed changes.

Consultation will commence with staff and associations in line with NSW Health PD2012_021 *Managing Excess Staff of the NSW Health Service* on release of theRestructure Consultation Paper.

Staff directly impacted by this restructure have been consulted.
Position descriptions are available on request and are currently undergoing the Grading Committee process.

After the consultation phase has closed, formal approval to proceed with implementation of the new structure and management of excess employees will besought from the Chief Executive and the Ministry of Health. Once this approval is obtained, workforce transition activities will commence.

7. Restructure Timeframe

Action	Detail	Estimated Dates
Release Restructure consultation paper	Provision of consultation paper to affected staff and unions/association	29 November 2021
Completion of consultation phase		14 December 2021
Feedback reviewed and considered	Consultation Paper Feedback finalised and responded	15 December 2021
Approval by Chief Executive to proceed with structure	Submit brief to CE for final approval of structure	17 November 2021
Written advice issued to affected staff	Letters to advise staff of "affected status'	20 December 2021
Submission of expressions of interest for vacant positions	EOI application form	w/c 17 January 2022
Selection process for positions	Assessment of EOI application (interview if more than one applicant for one position, or, position is higher grade than applicant currently)	w/c 24 January 2022
Unfilled new roles to be advertised	Advertisement of all unfilled roles	w/c 31 January 2022
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	w/c 14 February 2022
Written advice issued to Staff appointed to positions	Letter to advise of appointment to successfulapplicants	w/c 25 February 2022
Voluntary redundancies declined/accepted		w/c 4 March 2022
Staff who declined VR's to be provided with case management and career assistance	Letter to advise of allocation of People & Culture Business Partner for case management	w/c 4 March 2022
Staff who accepted VR's to exit SESLHD		31 March 2022

8. Attachments

Position descriptions

8.1 Clinical Nurse Educator- Aged Care Standards
8.2 Clinical Support Officer A03
8.3 Project and Administration Officer HSM 1
8.4 Facility Manager NM6
8.5 Nurse Unit Manager Cottages
8.6 Nurse Unit Manager Patient Safety and Clinical Support Safety

8.1 **Aged Care Standards Clinical Nurse Educator**

Facility/Service	Garrawarra Centre
Department	
• Manager	Nurse Manager Clinical Operations and Quality
• Position Number	
• Cost Centre	

- 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 – Aged Care Standards	
Does this role require Multiple Awards? Specific classifications (if applicable):		Choose an item.	*If Yes, Please list each Classification and grade below*
Award*		Nurses and Midwives State Award	
Position Classification*		Clinical Nurse Educator	
Job Category Coding (ROB)*		Nursing and Midwifery	
Job Classification Coding (ROB)*		Clinical Nurse Educator	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		Choose an item.	
Does this role manage or supervise others?*		Choose an item.	
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)	The Clinical Nurse Educator Aged Care Standards provides coordination, delivery and evaluation of clinical nurse education (including programs) at the cottage level. Specifically this role will focus on the Aged Care Quality Standards and the assessment and documentation required for the aged care funding model. The role will co-ordinate the required education of staff in conducting the necessary assessments required that measure how much subsidy a residential aged care facility receives to cover the care of each resident. Each resident requires assessment on the level of care they require, their daily living activities, behaviour and complex health needs. Assessment can include continence, mobility, nutrition, personal hygiene, toileting, cognitive ability, wandering, verbal behaviour, physical behaviour, depression, medication, and complex health care.	

- ## 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)*	• Professional Development and Education
		  • Implement and evaluate clinical education programs and in-services for nursing staff, including newly registered/enrolled nurses, nurses transitioning to clinical specialties.
		  • Provide clinical support to newly registered/enrolled nurses/AIN nurses transitioning to clinical specialties.
		  • Identify individual learning needs of nursing staff in consultation with the staff member, NUM and other key clinical support nurses, in order to support individual learning plans.
		  • The clinical assessment of nursing practice through demonstration of practice, targeted education, and certification of competency (where required).
		  • Support staff to provide clinical supervision at the point of care within everyday clinical practice.
		  • Develop and maintain clinical educational resources.
		  • Utilise evidence based learning in clinical education.
		• Professional Practice
		  • Active participation in the development and review of nursing practice.
		  • Active involvement in activities that promote and engage others in meeting the philosophy, goals, values and objectives of the ward/unit, the organisation, the Local Health District, and NSW Health.
		  • Adhere to all MOH, Commonwealth and SESLHD and local policies and business rules related to the safe handling and administration of medications.
		  • Perform the role professionally, collaboratively and constructively.
		  • Model through behaviour and communication.
		  • Actively participate in appropriate professional organisations.
		  • Actively participate in ongoing education initiatives, which could include conferences, post graduate/enrolment education and publication of work undertaken.
		  • Facilitation of change, for example the learning of new technologies and forms of documentation
		• Quality Improvement and Management
		  • Participation in quality improvement and organisational accreditation activities.
		  • Contributes to the performance review of other nursing staff in liaison with and as requested by nursing management.
		  • Active participation on relevant committees and working groups as required.

		• Provide information and advice concerning new and existing education resources and equipment required to meet the learning needs of nursing staff in a clinical environment. • Enabling Others • Act as a role model and learning resource for all nursing staff. • Provide leadership to others. • Facilitate the integration of evidence based practice (EBP) into nursing practice. • Encourage others to actively participate in appropriate professional organisations. • Encourage others to actively participate in ongoing education initiatives, including conferences, in services, post graduate/enrolment education and publication of work undertaken. • 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 gaps in the aged care assessment; introduction and education of staff in a changing aged care environment
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

• 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?	Direct Manager of patient areas
	Who?	Patient Safety NUM
	Why?	Compliance with quality & safety standards and reporting
	Who?	NM Staff Education & Clinical Practice
	Why?	Direct line manager

Does this role routinely interact with external stakeholders?		YES
Key External Relationships	Who?	TSH Clinical Educators
	Why?	Professional alignment
	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	nil
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 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	Demonstrated 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 knowledge of Aged Care Quality Standards and the documentation required for the aged care funding models

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	Choose an item.
	☐	Act with Integrity	Choose an item.
	☐	Manage Self	Choose an item.
	☐	Value Diversity	Choose an item.
Relationships	☐	Communicate Effectively	Choose an item.
	☐	Commitment to Customer Service	Choose an item.
	☐	Work Collaboratively	Choose an item.
	☐	Influence and Negotiate	Choose an item.
Results	☐	Deliver Results	Choose an item.
	☐	Plan and Prioritise	Choose an item.
	☐	Think and Solve Problems	Choose an item.
	☐	Demonstrate Accountability	Choose an item.
Business Enablers	☐	Finance	Choose an item.
	☐	Technology	Choose an item.
	☐	Procurement and Contract Management	Choose an item.
	☐	Project Management	Choose an item.
People Management	☐	Manage and Develop People	Choose an item.
	☐	Inspire Direction and Purpose	Choose an item.
	☐	Optimise Business Outcomes	Choose an item.
	☐	Manage Reform and Change	Choose an item.

• 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	Repetitive
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Repetitive
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Infrequent
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	Occasional

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)	Not Applicable
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Infrequent
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)	Repetitive
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)	Repetitive
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	Repetitive
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	Choose an item.
ENVIRONMENTAL DEMANDS - Description (Comment)	FREQUENCY
Dust – exposure to atmospheric dust	Infrequent
Gases – working with explosive or flammable gases requiring precautionary measures	Infrequent
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	Frequent
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	Not Applicable
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	Infrequent
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Frequent

8.2 Clinical Support Officers - Cottages

Facility/Service	Garrawarra Centre
Department	
Manager	Nurse Unit Manager
Position Number	
Cost Centre	160039

- 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 Support Officer Cottages	
Does this role require Multiple Awards? Specific classifications (if applicable):		No	*If Yes, Please list each Classification and grade below*
Award*		Administrative State Award	
Position Classification*		Admin Clinical Support Officer Lvl 3	
Job Category Coding (ROB)*		Administration	
Job Classification Coding (ROB)*		Clinical Support	
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)	The Clinical Support Officer (CSO) is responsible for supporting work activities of the Nurses, Medical and Allied Health staff with locally determined shift times based on resident and service delivery needs. • The CSO may provide support across the facility or to more than one service. • The CSO is required to work closely with existing administrative staff. • The CSO role compliments existing roles, systems and processes within the organisation. • The CSO is expected to provide timely and accurate administrative / transactional services for members of the healthcare team in their designated cottages under the direction of the Nurse Unit Manager (NUM). • The CSO works under broad supervision, however is required to take some independent action. Scope exists for exercising initiative in the application of established work practices and	

		procedures. Decisions affecting the overall functioning and management of the cottages will remain the responsibility of the NUM.

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)*	• Data Entry and Reporting
		  • Maintain an accurate and up to date Nursing Roster in HealthRoster
		  • Update StaffLink and generate requested reports
		  • Data entry of the Nursing Workload Tool
		  • Prepare information for monthly reports
		  • Collect and record data sets requested by the NUM
		  • Coordinate and submit reports requested within prescribed timeframes
		  • Provide a high standard of data maintenance and support
		• Workforce Matters
		  • Monitor and record leave for all nursing staff
		  • Follow up and correct any pay inquiries for all nursing staff
		  • Attend and ensure the cottage allocation book is accurate
		  • Update the communication book and notice boards within the cottages
		  • Maintain an annual leave roster for all nursing staff
		  • Monitor and updating nursing registration records in Stafflink
		  • Monitor and report on mandatory education due for nursing staff
		  • Schedule and coordinate appraisals as per the area workforce policy
		  • Monitor and update mandatory staff aged care checks
		• Resource Management
		  • Delegated procurement tasks, including stock ordering, barcoding and placing required orders through Stafflink
		  • Monthly review of stock maximum and minimum reports in collaboration with the clinical staff
		  • Assist the NUM in the purchasing of new equipment
		  • Attend and follow up on maintenance issues identified by staff, visitors or residents
		  • Attend monthly environmental audits of the ward/unit area
		  • Assist in managing the stock levels within the area
		  • Monitor and coordinate biomedical equipment maintenance (ensuring they are tested and tagged annually)
		• Documentation / Records Management
		  • Maintain the ward/units hazard risk register
		  • Maintain the ward/units chemical registrar/MSDS inventory
		  • Ensure the designated WH&S notice board is up to date

		• Prepare and disseminate ward/unit meetings minutes and agendas • Maintain a register of nursing staff qualifications • Ensure the sign off of new policies and executive directives by all clinical staff, and maintain a register of same • Monitor work cover certificate due dates and ensure notification of injury within 24 hours • General Administrative Duties • Support of all clinical staff within the cottage • Maintenance of the ward/unit meeting minutes folder and distribution • Creation of spread sheets as requested • Typing letters and minutes • Assist with inquiries and telephone • Maintenance of staff resource folders e.g. Diversity health, WH&S, Chemical Registrar • Contributes to cottage initiatives and team activities

•

• 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	Coordinate workflow as requested, and complete work within identified timeframes
Decision Making	Scope exists for exercising initiative in the application of established work practices and procedures. Decisions affecting the overall functioning and management of the area remains the responsibility of the NUM.
Communication	High quality of written and verbal communication. Establish and maintain effective working relationships with staff at all levels. Maintain focus on delivering a high quality clinical support service

• 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?	
	Why?	
	Who?	
	Why?	
	Who?	
	Why?	
Does this role routinely interact with external stakeholders ?		Choose an item.
Key External Relationships	Who?	
	Why?	
	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 Criminal Record Check (NCRC) 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	Holds or is willing to undertake a Certificate III in Health Administration on equivalent
2	Demonstrated experience in an administrative support position in a healthcare setting

3	Demonstrated high level communication skills including accurate spelling, good comprehension, confidence in the spoken word and ability to deal confidently and courteously with people at all levels
4	Demonstrated capacity to work under broad supervision and to undertake a diverse range of tasks as an effective member of a team in high pressure, high volume work environment.
5	Computer literacy with demonstrated experience in word processing, data entry, spreadsheet and database software in a health environment
6	Strong organisational and problem solving skills and the ability to meet deadlines.

- ## 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	Choose an item.
	☐	Act with Integrity	Choose an item.
	☐	Manage Self	Choose an item.
	☐	Value Diversity	Choose an item.
Relationships	☐	Communicate Effectively	Choose an item.
	☐	Commitment to Customer Service	Choose an item.
	☐	Work Collaboratively	Choose an item.
	☐	Influence and Negotiate	Choose an item.
Results	☐	Deliver Results	Choose an item.
	☐	Plan and Prioritise	Choose an item.
	☐	Think and Solve Problems	Choose an item.
	☐	Demonstrate Accountability	Choose an item.
Business Enablers	☐	Finance	Choose an item.
	☐	Technology	Choose an item.
	☐	Procurement and Contract Management	Choose an item.
	☐	Project Management	Choose an item.
People Management	☐	Manage and Develop People	Choose an item.
	☐	Inspire Direction and Purpose	Choose an item.
	☐	Optimise Business Outcomes	Choose an item.
	☐	Manage Reform and Change	Choose an item.

- ## 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	Frequent
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	Not Applicable
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Not Applicable
Kneeling – remaining in a kneeling posture to perform tasks	Not Applicable
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Not Applicable
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
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	Infrequent
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Infrequent
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Infrequent
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Frequent
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)	Repetitive
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)	Infrequent
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	Occasional
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	Infrequent
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Infrequent
ENVIRONMENTAL DEMANDS - Description (Comment)	FREQUENCY
Dust – exposure to atmospheric dust	Infrequent
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	Not Applicable
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	Infrequent
Confined Spaces – areas where only one egress (escape route) exists	Not Applicable
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	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

8.3 Project and Administration Officer

Facility/Service	The Garrawarra Centre
Department	
Manager	Facility Manager / Director of Nursing
Position Number	
Cost Centre	160021

- 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 *:		Project and Administration Officer	
Does this role require Multiple Awards? Specific classifications (if applicable):		Choose an item.	*If Yes, Please list each Classification and grade below*
Award*		Health Managers (State) Award	
Position Classification*		Health Mgr Lvl 1	
Job Category Coding (ROB)*		Administration	See ROB Job Coding guide for assistance
Job Classification Coding (ROB)*		Executive Support	See ROB Job Coding guide for assistance
Speciality Coding (ROB)			See ROB Job Coding guide for assistance
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)	The Project and Administration Officer is responsible for ensuring the efficient and professional functioning and support to the entire Garrawarra leadership team. The position provides first line contact with external and internal stakeholders wishing to access the Facility Manager/DoN and other members of the leadership team and therefore carries significant responsibility in respect to relationship building and customer service. The Project and Administration Officer will provide project management support in all areas.	

- 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)*	• Perform a wide range of Project management and high level administration tasks for the Facility Manager and leadership team. Monitoring work priorities to ensure delivery of efficient and effective outcomes aligned with business and/or service plan requirements and provide project management and administration support to the Leadership team. Including maintaining project documentation and reporting on project plans to ensure project outcomes are achieved on time, on budget and to quality standards. • Coordinate incoming and outgoing correspondence for the Leadership team in relation to requests from the Chief Executive, Ministerial responses and briefings; prepare responses and draft briefings for the Facility Manager and members of the leadership team as delegated; • Maintain the Facility manager's electronic diary and co-ordinate appointments for the Leadership team; prepare and distribute business papers for various committees and provide secretariat support for the same; whilst maintaining a high level of confidentiality and diplomacy in relation to all tasks; • Organise functions/workshops and room bookings • Utilise Content Manager and maintain effective records management and good record keeping practices; • Promote a culture and supportive practice that reflects the organisational values through demonstrated behaviours and interactions with health care service consumers, carers and families and employees and provide a high quality customer service role by dispensing advice and assistance to visitors to the GC •Participate in human resource management functions including recruitment, orientation, induction in line with NSW Health and South Eastern Sydney Local Health District policies and procedures. • Assist with the development and implementation of policies, procedures, standards and practices regarding the functioning of the Garrawarra Centre Management Unit and ensure that work practices adhere to the Work Health and Safety and Risk Management guidelines. • Perform other duties as requested by the Facility Manager and management team, consistent with the role.

• 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	• Working under tight timeframes to deliver a high quality of service. • Managing the leadership schedule for optimal use of time. • Participate constructively in the introduction of new technology to enhance efficiency and productivity while maintaining the quality and volume of documentation processed. • Coordinate, evaluate and compile documentation for the management team's review and approval. Records management. • Data management • Time management • Document customer complaints in person or via telephone with confidentiality and compassion and refer same to the Complaints/Medico legal Manager.
Decision Making	Exercise sound judgement and initiative on a daily basis in assessing and adjusting deadlines, in liaison with the management team • Maintain a good knowledge of the

	hospital and health system to enable accurate registration and allocation of documents for action in response to requests • Ensure all principles and guidelines are followed in relation to Work, Health and Safety and Management and ensure safe work practices are followed at all times, including the correct use of equipment
Communication	Represent the management in an ethical and professional manner • Manage and maintain internal relationships between the Executive team, Senior Management team and staff of the Sutherland Hospital and Community Health Service • Manage and maintain relationships with key stakeholders of the Garrawarra Centre and The Sutherland Hospital, both internal and external

- ## 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?	Members of the Leadership Team GC
	Why?	Essential administrative support of these positions
	Who?	Administrative Staff
	Why?	Establishment of concurrent processes throughout the site
	Who?	
	Why?	
Does this role routinely interact with external stakeholders?		YES
Key External Relationships	Who?	General Manager's Unit – The Sutherland Hospital
	Why?	Additional professional support and link to the General Manager TSH
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		Choose an item.

- ## Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	0
Indirect Reports	0

- ## 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	nil
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 actively support and demonstrate your commitment to the organisation's safety management system; to establish and maintain a positive health and safety culture; to consult with workers and others when making decisions that may impact upon the health, safety and wellbeing of those in the workplace; acquire and keep up-to-date knowledge of work health and safety matters; ensure that all workers understand their health and safety obligations and are sufficiently trained in health and safety policy and procedures; report any safety incidents, injury, hazards, risks, concerns or unsafe behaviour in the SESLHD IMS+ safety reporting system within 24 hours, and take appropriate actions to eliminate or minimise related risk to as low as reasonably practicable. • *Staff who do not supervise others:* You must take all reasonable care for yourself and others and comply with any reasonable instruction, policies, procedures and training relating to work health, safety and wellbeing, including identifying and notifying any safety incidents, injury, hazards, risks, concerns or unsafe behaviour to the manager and reporting these in the SESLHD IMS+ safety reporting system within 24 hours.
	(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 calibre project management and administrative support at an executive level in a health care setting
2	Demonstrated initiative and ability to anticipate and meet the needs of the Facilities Manager and members of the leadership team
3	Demonstrated excellent written and verbal communication skills with the ability to prepare briefings and prepare reports
4	Proven experience in administering senior level committees, including but not limited to preparation and distribution of agendas, minute taking and follow up of actions
5	Proven ability to problem solve, prioritise workload with competing priorities and meeting of deadlines
6	Proven ability to handle controversial and emotive issues/information confidently and confidentially
7	High-level information technology and systems skills, including records management and reporting processes, office systems, word processing and spreadsheet packages

- ## 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	Infrequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Not Applicable
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Not Applicable
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Not Applicable
Kneeling – remaining in a kneeling posture to perform tasks	Not Applicable
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Not Applicable
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
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)	Infrequent
Lifting/Carrying – heavy lifting and carrying (16kg and above)	Not Applicable
Reaching – arms fully extended forward or raised above shoulder	Not Applicable
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Not Applicable
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Not Applicable
Hand and Arm Movements – repetitive movements of hands and arms	Frequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Frequent
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)	Frequent
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	Occasional
Aggressive and Uncooperative People – e.g. drug/alcohol, dementia, mental illness	Occasional
Unpredictable People – e.g. dementia, mental illness, head injuries	Occasional
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	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	Not Applicable
Inadequate Lighting – risk of trips, falls or eyestrain	Not Applicable
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	Infrequent
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

8.4 Director of Nursing / Facility Manager

Facility/Service	Garrawarra Centre
Department	
• Manager	General Manager - TSH
• Position Number	
• Cost Centre	

- 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 *:		Director of Nursing / Facility Manager	
Does this role require Multiple Awards? Specific classifications (if applicable):		Choose an item.	*If Yes, Please list each Classification and grade below*
Award*		Public Health System Nurses & Midwives State Award	
Position Classification*		Nurse Manager Grade 6	
Job Category Coding (ROB)*			
Job Classification Coding (ROB)*			
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		Choose an item.	
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)	This role requires clinical leadership of the Garrawarra Centre and oversight of the operational management of service provision to the residents. To ensure high quality care of residents through effective management of the physical, human and financial resources of the Garrawarra Centre and to achieve the objectives of the Centre and the Local Health District.	

- 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)*	Manage delivery of the Centre's Clinical, Nursing and Support Services;

		Lead the Centre Executive Staff to ensure the effective current and future management of the Centre; Contribute to budget planning ensure costs of operation are monitored and prioritised activities and objectives are completed in collaboration with the Management Accountant, Director of Finance, TSH and General Manager TSH; Liaise with district corporate directors to ensure governance systems are in place, with appropriate monitoring and compliance process; Collaborate with the Management Account to ensure compliance of Commonwealth based funding to minimise any adverse effects and ensure its effectiveness; Maintain Aged Care Accreditation status and act on any recommendations outlined by the Australian Aged Care Quality Agency. Achieve and maintain Commonwealth Certification for the Centre and its services in accordance with the relevant Federal and State legislation.

- ## 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	Challenges: • Set goals, formulate and coordinate the implementation of plans to achieve identified outcomes across a range of services. • Develop an operational plan and strategic plan for the nursing service • Manage the process and contribute to the implementation of organisational change, evaluate the outcome and adjust direction
Decision Making	Decision Making: • Provide leadership as a resource person and role model in the clinical setting and in professional relationships and mentor less experienced staff. • Lead the development of policy relating to nursing practice and provide leadership through direction and support to staff. • Develop an environment which promotes continuous improvement in practice. • Develop a culture within the organisation, which is open to critical reflection and change.
Communication	Represent nurses and consult with staff and other health professionals appropriately. Identify and mediate conflict between individuals. • Represent the nursing service inside and outside the organisation at a local level. Identify and mediate conflict between groups. • Manage media relations related to local issues within a policy framework and represent the service at a local level. • Represent the nursing service in a range of forums including State and National.

- ## 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?	General Manager The Sutherland Hospital and Garrawarra Centre
	Why?	Receive guidance, leadership and direction.
	Who?	Director of Nursing The Sutherland Hospital
	Why?	Provide expert advice, guidance and support in the delivery of core activities
	Who?	Co Director Aged, Rehabilitation and Medicine specialties
	Why?	Alignment with the TSH Clinical Programs

Does this role routinely interact with external stakeholders?		YES
Key External Relationships	Who?	Residents and relatives and carers of residents
	Why?	
	Who?	Australian Nursing and Midwifery Council (ANMC), NSW Ministry of Health (NSW MoH), other health organisations and NGOs
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		Choose an item.

- ## Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	6
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	
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 with the Nursing and Midwifery Board of Australia
2	Demonstrated recent experience in health service management in a health care setting
3	Demonstrated knowledge of resident safety and clinical governance in an aged care setting
4	Comprehensive knowledge of the Aged Care Funding instrument and Australian Aged Care Quality Standards
5	Demonstrated proven ability to lead, influence workplace culture and motivate staff
6	Demonstrated experience in risk management, change management, improvement systems and nursing practice development
7	Demonstrated high level interpersonal and written communication skills
8	NSW unrestricted drivers licence

- ## 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	Choose an item.
	☐	Act with Integrity	Choose an item.
	☐	Manage Self	Choose an item.
	☐	Value Diversity	Choose an item.
Relationships	☐	Communicate Effectively	Choose an item.
	☐	Commitment to Customer Service	Choose an item.
	☐	Work Collaboratively	Choose an item.
	☐	Influence and Negotiate	Choose an item.
Results	☐	Deliver Results	Choose an item.
	☐	Plan and Prioritise	Choose an item.
	☐	Think and Solve Problems	Choose an item.
	☐	Demonstrate Accountability	Choose an item.
Business Enablers	☐	Finance	Choose an item.
	☐	Technology	Choose an item.
	☐	Procurement and Contract Management	Choose an item.
	☐	Project Management	Choose an item.
People Management	☐	Manage and Develop People	Choose an item.
	☐	Inspire Direction and Purpose	Choose an item.
	☐	Optimise Business Outcomes	Choose an item.
	☐	Manage Reform and Change	Choose an item.

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	Infrequent
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	Infrequent
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Infrequent
Kneeling – remaining in a kneeling posture to perform tasks	Not Applicable
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Not Applicable
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Frequent
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	Infrequent
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Infrequent
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	Occasional
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)	Occasional
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)	Infrequent
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Infrequent
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	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	Infrequent
ENVIRONMENTAL DEMANDS - Description (Comment)	FREQUENCY
Dust – exposure to atmospheric dust	Infrequent
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	Not Applicable
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	Infrequent
Confined Spaces – areas where only one egress (escape route) exists	Not Applicable
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	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

8.5 Nurse Unit Manager – Cottages

Facility/Service	The Garrawarra Centre
Department	
• Manager	Nurse Manager Operations and Clinical Quality
• Position Number	
• Cost Centre	

- 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 – Garrawarra Centre	
Does this role require Multiple Awards? Specific classifications (if applicable):		Choose an item.	*If Yes, Please list each Classification and grade below*
Award*		Public Health System Nurses and Midwives (State) Award	
Position Classification*		Nurse Unit Mgr Lvl 2	
Job Category Coding (ROB)*		Nursing & Midwifery	
Job Classification Coding (ROB)*		Nurse Unit Manager	
Speciality Coding (ROB)			
Does this require Senior Executive Level Standards?		Choose an item.	
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 is the registered nurse in charge of a ward/unit or group of wards/units or a service within SESLHD. The purpose of the Nursing Unit Manager at the Garrawarra Centre is to: lead, direct and co-ordinate resident 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 cottage level; monitor and manage the business and management functions and processes of the cottages.	

		As the leader of the unit, the NUM will demonstrate her/his capability through attitude, skills, behaviour and attributes, namely: •broad nursing/midwifery experience and knowledge; •understanding and acceptance that residents 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 and care provision

- ## 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)*	Resident Care Coordination and the practice of Nursing Lead, direct and co-ordinate resident care in the cottages; Facilitate collaborative teams in the delivery of resident care; Use resident and carer feedback to inform service delivery; Enable a culture of enquiry and questioning about the practice of nursing; 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; Nursing Staff Management and Leadership 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; Cottage/Team Management Ensure the human, physical and financial resources of the cottages 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 cottages; Establish and maintain processes to facilitate performance improvements; Manage cottage staff to facilitate growth and development;

		Monitor and maintain a safe environment for residents, 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 residents demands to staffing resources; meeting benchmarks and key performance indicator.
Decision Making	Overall responsibility for decisions pertaining to resident 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, resident, 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?	Facility Manager
	Why?	Governance of facility
	Who?	Nurse Manager Operations and Clinical Quality
	Why?	Direct line manager
	Who?	Nurse Unit Managers - Cottages
	Why?	Peer relationship to support Quality and Safety agenda
Does this role routinely interact with external stakeholders ?		YES
Key External Relationships	Who?	
	Why?	
	Who?	
	Why?	
	Who?	
	Why?	
Is this a Public Senior Executive Role which manages relationship at the Ministerial level?		Choose an item.

- ## Section 5 – Staffing/Responsible for

Number of direct and indirect reports to position.

Direct Reports	
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	
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 Criminal Record Check (NCRC) 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 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 management of aged care patients with an interest in aged care dementia is desired
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 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	Choose an item.
	☐	Act with Integrity	Choose an item.
	☐	Manage Self	Choose an item.
	☐	Value Diversity	Choose an item.
Relationships	☐	Communicate Effectively	Choose an item.
	☐	Commitment to Customer Service	Choose an item.
	☐	Work Collaboratively	Choose an item.
	☐	Influence and Negotiate	Choose an item.
Results	☐	Deliver Results	Choose an item.
	☐	Plan and Prioritise	Choose an item.
	☐	Think and Solve Problems	Choose an item.

	☐	Demonstrate Accountability	Choose an item.
Business Enablers	☐	Finance	Choose an item.
	☐	Technology	Choose an item.
	☐	Procurement and Contract Management	Choose an item.
	☐	Project Management	Choose an item.
People Management	☐	Manage and Develop People	Choose an item.
	☐	Inspire Direction and Purpose	Choose an item.
	☐	Optimise Business Outcomes	Choose an item.
	☐	Manage Reform and Change	Choose an item.

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	Infrequent
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	Infrequent
Kneeling – remaining in a kneeling posture to perform tasks	Not Applicable
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Not Applicable
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	Infrequent
Pushing/Pulling/Restraining – using force to hold/restrain or move objects toward or away from the body	Infrequent
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Infrequent
Hand and Arm Movements – repetitive movements of hands and arms	Occasional
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Frequent
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)	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)	Occasional
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	Occasional
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	Frequent
Exposure to Distressing Situations – e.g. child abuse, viewing dead/mutilated bodies	Infrequent
ENVIRONMENTAL DEMANDS - Description (Comment)	FREQUENCY
Dust – exposure to atmospheric dust	Infrequent
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	Infrequent
Confined Spaces – areas where only one egress (escape route) exists	Not Applicable
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	Not Applicable
Working At Heights – ladders/stepladders/scaffolding are required to perform tasks	Not Applicable
Biological Hazards – exposure to body fluids, bacteria, infectious diseases	Occasional

8.6 Nurse Unit Manager Patient Safety and Clinical Support

Facility/Service	The Garrawarra Centre
Department	
• Manager	Nurse Manager Operations and Clinical Quality
• Position Number	
• Cost Centre	

- 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 – Patient Safety and Clinical Support	
Does this role require Multiple Awards? Specific classifications (if applicable):		Choose an item.	*If Yes, Please list each Classification and grade below*
Award*		Public Health System Nurses and Midwives (State) Award	
Position Classification*		Nurse Unit Mgr Lvl 2	
Job Category Coding (ROB)*		Nursing & Midwifery	
Job Classification Coding (ROB)*		Nurse Unit Manager	
Speciality Coding (ROB)		Patient Safety	
Does this require Senior Executive Level Standards?		Choose an item.	
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)	Reporting to the Nurse Manager Operations and Clinical Quality and in collaboration with the cottage pod NUMs you will be responsible for directing staff within the organisation toward improvements that support the reduction of resident harm, and seek to ensure the quality of resident care through a commitment to excellence and innovation, in partnership with local clinical teams.	

- 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)*	Actively promote safe, reliable, person-centred and effective healthcare, an open and just culture and achievement of service and corporate objectives relating to resident safety and clinical quality; Contribute as a core member of relevant resident safety and quality committees and other key groups which monitor serious preventable adverse events, disclosure and reporting, to identify risk reduction strategies to mitigate or prevent the reoccurrence of same or similar events; Monitor and support systems and processes to ensure that patients and carers are provided with open honest and improvement-focused information when errors occur; In collaboration with the cottage NUM, investigate and manage incidents recorded in IMS+ ; Establish processes to improve reliability of systems and actively influence service developments as relevant, to reduce risk and improve patient safety; Direct staff toward process improvements that support the reduction of harm and other factors that contribute to unintended adverse resident outcomes; Contribute to the development, monitoring and review of policies and procedures pertaining to resident safety and aged care; Preparation of reports, information and papers in collaboration with cottage NUMs, required for the Facility Resident Safety and Clinical Quality Committee; Participate effectively in local teams to create the conditions, time and priority for staff to work on improvements in patient safety.

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- 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	Managing competing priorities in a timely and efficient manner to ensure patient safety and clinical quality objectives are achieved. • Operating within a rapidly changing healthcare environment, as a result of changing priorities and structure, and the ability to maintain focus on individual resident care and the priorities for resident safety and clinical quality improvement. • Increasing participation in resident safety and clinical quality programs by identifying and networking with highly engaged clinicians as potential champions in clinical quality improvement. • Providing decisive, objective and appropriate advice when divergence from accepted clinical practice is identified, or following review of information in relation to system processes and competently lead formal review processes. • Maintaining and enhancing effective professional relationships and communication with staff and consumers within and external to SESLHD.
Decision Making	Apply high level analytical skills to evaluate complex and detailed clinical and other information to identify variations from accepted clinical practice, policy, standards and legislation, and recommend appropriate actions to ensure patient safety and quality of care is safeguarded and improved. • Demonstrate capacity to manage own workload and make informed decisions, working to tight and often changing timeframes • In consultation with the Nurse Manager Operations and Clinical Quality, make judgments and determine changes to systems and processes following

	assessment of adverse clinical events, including whether an event warrants escalation under the Management of Complaint or Concern about a Clinician policy, or to Workforce Resources.
Communication	Identify emerging issues/risks and their implications • Keep informed, advise and receive instructions • Provide regular updates on key projects, issues, and priorities • Contribute to decision making stakeholders: • Provide expert advice, assistance and support • Ensure an integrated organisational approach to resident safety and quality improvement initiatives. • Develop and maintain effective working relationships, engaging and consulting in the delivery of organisational objectives Executive: • Provide expert advice • Escalate sensitive issues and propose solutions • Receive guidance and provide regular updates on key projects, issues and priorities

- ## 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?	Facility Manager
	Why?	Governance of facility
	Who?	Nurse Manager Operations and Clinical Quality
	Why?	Direct line manager
	Who?	Nurse Unit Managers - Cottages
	Why?	Peer relationship to support Quality and Safety agenda
Does this role routinely interact with external stakeholders ?		YES
Key External Relationships	Who?	Clinical Governance Unit SESLHD / TSH
	Why?	Ensuring awareness of competency standards in relation to quality and safety and to monitor & maintain a safe environment for patients staff & visitors in line with policy and legislation
	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	0
Indirect Reports	0

- ## 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 $	nil

- ## 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 Criminal Record Check (NCRC) 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 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

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	Choose an item.
	☐	Act with Integrity	Choose an item.
	☐	Manage Self	Choose an item.
	☐	Value Diversity	Choose an item.
Relationships	☐	Communicate Effectively	Choose an item.
	☐	Commitment to Customer Service	Choose an item.
	☐	Work Collaboratively	Choose an item.
	☐	Influence and Negotiate	Choose an item.
Results	☐	Deliver Results	Choose an item.
	☐	Plan and Prioritise	Choose an item.
	☐	Think and Solve Problems	Choose an item.
	☐	Demonstrate Accountability	Choose an item.
Business Enablers	☐	Finance	Choose an item.
	☐	Technology	Choose an item.
	☐	Procurement and Contract Management	Choose an item.
	☐	Project Management	Choose an item.
People Management	☐	Manage and Develop People	Choose an item.
	☐	Inspire Direction and Purpose	Choose an item.
	☐	Optimise Business Outcomes	Choose an item.
	☐	Manage Reform and Change	Choose an item.

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	Infrequent
Walking – floor type: even/uneven/slippery, indoors/outdoors, slopes	Infrequent
Running – floor type: even/uneven/slippery, indoors/outdoors, slopes	Infrequent
Bend/Lean Forward from Waist – forward bending from the waist to perform tasks	Infrequent
Trunk Twisting – turning from the waist while sitting or standing to perform tasks	Infrequent
Kneeling – remaining in a kneeling posture to perform tasks	Infrequent
Squatting/Crouching – adopting a squatting or crouching posture to perform tasks	Not Applicable
Leg/Foot Movement – use of leg and/or foot to operate machinery	Not Applicable
Climbing (stairs/ladders) – ascend/descend stairs, ladders, steps	Not Applicable
Lifting/Carrying – light lifting and carrying (0 to 9 kg)	Not Applicable
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	Infrequent
Head/Neck Postures – holding head in a position other than neutral (facing forward)	Infrequent
Hand and Arm Movements – repetitive movements of hands and arms	Infrequent
Grasping/Fine Manipulation – gripping, holding, clasping with fingers or hands	Infrequent
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)	Frequent
Smell – use of smell is an integral part of work performance (e.g. working with chemicals)	Frequent
Taste – use of taste is an integral part of work performance (e.g. food preparation)	Frequent
Touch – use of touch is an integral part of work performance	Frequent
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	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	Not Applicable
Inadequate Lighting – risk of trips, falls or eyestrain	Not Applicable
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	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	Occasional