

26 November 2021

Hunter New England Local Health District

By email

Dear

RE: Change Management Plan – Administration Services – The New Maitland Hospital

The Health Services Union (*HSU*) has sought and received feedback from members in relation to the Change Management Plan – Administration Services – The New Maitland Hospital (*Plan*). Serious and significant concerns have been raised in relation to understaffing, work health and safety (*WHS*), work satisfaction, staff turnover, a lack of information and consultation with administrative and clinical staff impacted by the proposed changes, the short period of time within which these substantial changes are planned to be implemented, amongst other things.

We write to express our initial views on these matters.

Delayed timeline

A significant concern of the HSU and its members is the intention to implement sweeping changes in line with the move to the New Maitland Hospital (*NMH*) and to complete consultation by 31 December 2021.

Our view, in light of the significant issues identified below, is that any changes must be undertaken cautiously and with sufficient time to consider and deal with all of the issues identified. There is not currently sufficient time to resolve the issues identified.

The HSU's view is that consultation should continue until all issues are resolved.

Workloads, understaffing and the risk of injury

The proposal provides that with no increase to current staffing levels, noting the historical increase in patients dealt with by the service without any increase in staffing levels, staff will be required to cover all in patient units, all 45 outpatient clinics (increased from nine), undertake new or different duties, and work in new and unfamiliar locations.

The HSU is concerned that increasing workloads on an already overstretched administrative service is likely to lead to job creep, overworking, significantly increased stress, job dissatisfaction, and high staff turnover. Our view is that those impacts are very likely to lead to an increase in both physical and psychological workplace injuries.

We request detailed information about how WHS risks associated with the proposed changes were identified, the risks that were identified, and, in accordance with the WHS legislation in NSW, the measures that have been or will be implemented to eliminate those risks.

Further, we note that administrative staff are often placed in the position of being unable to take annual or other leave because of a lack of relieving staff. The inability to take regular leave from work is likely to lead to further WHS risks.

To ensure the safety of all employees, we propose that where any changes to staffing levels are to be made, it is appropriate, at a minimum, to increase staffing in line with the proposal with no corresponding decrease in staffing. Further consultation with staff, both clinical and non-clinical, should occur in relation to the need to increase administrative staffing across the service to ensure all employees are able to access their full entitlement to all forms of leave.

Hotdesking / Activity Based Work

Concerns have also been raised in relation to hotdesking / activity-based work.

First, there are concerns that hotdesking will create several foreseeable WHS issues including: risks associated with placing/removing foot pedals under the desk each day or multiple times per day, proper ergonomic setup, infection control issues (particularly during a pandemic). Please detail how WHS risks associated with the proposed changes were identified, the risks that were identified, and, in accordance with the WHS legislation in NSW, the measures that have been or will be implemented to eliminate those risks.

Second, because of the inconsistent nature of the work performed, members are concerned that having to book desks for particularly tasks will be impractical, impact on the quality, timeliness and consistency of work, and cause productivity losses. Please identify how these issues will be overcome.

Third, the HSU's view is that employees deserve a consistent workspace so as to feel comfortable and a sense of belonging in their workplace.

Hotdesking should not be utilised until the above concerns are resolved.

Speech to text

We note that the plan relied on resource savings achieved secondary to speech to text technology being deployed. We understand that this system is not currently fully implemented and there are likely to be various issues which, unless properly implemented over an extended period of time, are likely to negate any efficiency gains.

Please provide the information relied upon to support the proposition that speech to text technology will reduce the workload of current staff sufficiently to justify any reduction in staff.

Staff Specialist Support

We object to the proposal to reduce Staff Specialist Support. Administrative staff in the area provide specialised assistance to Staff Specialists and are key to the proper delivery of health services to the public.

Please provide the information relied upon to support the proposal of reducing staff in this area.

Kurri Kurri Hospital Weekend Coverage

The plan indicates that switchboard at Kurri Kurri Hospital is operated over 7 days and proposes to divert switchboard to NMH on those days.

Administrative services at Kurri Kurri Hospital on weekends includes preparing ophthalmology surgery on Mondays including preparing records on weekends and making contact with patients on Saturday, dealing with patients on the waitlist, updating patient details, identifying and preparing files from Friday's surgeries so that clinical staff can complete patient safety follow-up.

If it is proposed that no or reduced administrative support is provided on weekends at Kurri Kurri Hospital, please detail how and by which staff those duties will be undertaken. Please detail how staff and patient safety will be protected despite those changes.

At this stage, our view is that no decrease in administrative support at Kurri Kurri Hospital is warranted or should occur.

East Maitland Community Health Service

We note that the recommendation of 1 FTE being moved from the East Maitland Community Health Service is based on there being a greater need for the FTE at the NMH.

1. Please provide the information relied upon to determine that East Maitland Community Health Service does not require 2.2FTE.
2. Please also detail the duties which are currently performed by administrative staff at East Maitland Community Health Service which will no longer be performed. Please also identify the staff who will undertake those duties.
3. Please detail the impacts of the changes on rostering and coverage for leave.

At this stage, our view is that no decrease in administrative support at East Maitland Community Health Service is warranted.

Other further information required

Our members have expressed concerns generally about a lack of information provided in relation to the proposed changes. In addition to the information requested above, the HSU and its members request the following information:

1. The proposal appears to indicate that staff will be moved from their current position and workplace and be redeployed. Please detail how affected staff will be identified, consulted, and the options which will be provided to those staff (including redundancy and redeployment options).
2. Where there is a reduction in staff in any area (for example, at the East Maitland Community Health Service, Staff Specialist Support and Front of House), please provide a detailed breakdown of the current duties which will no longer be undertaken by staff in those areas.
3. Where staff are moved into a new work area, or where staff will be required to work across different work areas, please detail how those staff will be appropriately trained and supervised, how having various staff covering work across different areas will improve service delivery, and how staff will be identified and selected for those roles.
4. Where staff are required to work across differing areas, please detail how those staff will be graded (we assume staff will be graded in accordance with the highest applicable grade to the work they may be required to perform).
5. Where clinical staff are to receive reduced administrative support, please detail how those staff have been made aware of the reduced administrative support and the reasons provided to those staff for the reduction (noting the importance of administrative staff understanding the boundaries of their duties).
6. Please provide further details about the proposed staggered start times, including the proposed start and finish times, how staff will be consulted about the impacts of those new start/finish times, and how the impacts on staff (including their personal circumstances) will affect any requirement to alter their current start and finish times.
7. Several currently funded administrative positions are yet to be filled. When will steps be taken to fill those positions?

Risk of industrial action

Considering the importance of the issues raised above, and the feedback we have received from members, we foresee the possibility that if the change management timeline is not appropriately extended, and the issues above are not appropriately resolved, that industrial action may result. That would be particularly unfortunate if it occurred at or around the time of the move to the New Maitland Hospital.

We again restate our view that to ensure the well-being and safety of staff, ensure patient safety and the quality of work currently provided, and safeguard the delivery of health care to the public, all of the above issues must be resolved and sufficient time must be allowed for that to occur.

Yours sincerely



Jeremy Lappin

Industrial Officer

Health Services Union

Email: Jeremy.Lappin@hsu.asn.au