

NSLHD Management Review Consultation Pack

Northern Sydney Local Health District

October 2024

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1. Introduction

As Chief Executive of Northern Sydney Local Health District (NSLHD) I am committed to ensuring we continue to provide high-quality care to our community and deliver on our strategic plan and clinical services plans and many other important priority areas within our budgetary envelope.

The district is committed to being fiscally responsible as we shift from the COVID-19 response phase into a business-as-usual operating model. We are adapting to a challenging healthcare sector and need to strengthen the system to ensure we have a financially sustainable future.

This has required us to make some difficult decisions including a review of our management structures aimed at identifying savings and efficiencies. This review is just one part of a broader set of initiatives currently underway to secure a financially sustainable future for NSLHD.

This Management Review Consultation Pack proposes changes designed to limit impact to frontline clinical service delivery and instead focus on management and support services roles where efficiencies can be gained by reducing our staffing levels.

These proposed changes have been thoughtfully planned to minimise any impact on frontline services, ensuring that patient safety and care remain our top priorities. No frontline clinical roles will be affected as part of this management review.

We are now engaging in consultations with staff regarding each affected role, and we genuinely want to hear your feedback on the proposed changes as we continue to provide the best possible support to our staff during this unsettling period. Supporting our people during this time will be a key focus.

Following consultation, every effort will be made to retain affected staff by redeploying them to other vacant roles at the same level and skills either at NSLHD or within the NSW Public Service through the Workforce Mobility Program.

I welcome and appreciate everyone's input as we progress through the next two weeks of consultation.

Thank you in advance for taking the time to review the Management Review proposal - your thoughts and feedback are highly valued.

2. Overview of Northern Sydney Local Health District

2.1 Background

There are four geographic health sectors within NSLHD: Hornsby Ku-ring-gai, Northern Beaches, Lower North Shore and Ryde Hunters Hill. Each sector has an acute hospital with an emergency department, along with a broad range of other acute, sub-acute and community health services.

Clinical services in NSLHD are organised across four acute hospitals.

Royal North Shore Hospital, Hornsby Ku-ring-gai Hospital, Ryde Hospital and Northern Beaches Hospital, one sub-acute hospital at Mona Vale and an Adolescent and Young Adult Hospice at Manly. There are two clinical directorates in NSLHD; Mental Health Drug and Alcohol, which includes Macquarie Hospital; and Primary and Community Health. Clinical and other support services include Medical Imaging, Pharmacy and Allied Health, Aboriginal and Torres Strait Islander Health, and Carer Support.

Under the leadership of the Ministry of Health, healthcare in NSLHD is well supported by a network of specialist health organisations including NSW Ambulance, Health Infrastructure NSW, HealthShare NSW, NSW Health Pathology and eHealth NSW, and pillar agencies including the Agency for Clinical Innovation, the Clinical Excellence Commission, the Bureau of Health Information, the Health Education and Training Institute and the Cancer Institute NSW.

Additional services in NSLHD are provided through arrangements with Affiliated Health Organisations including Hammond Care (subacute palliative care, ambulatory and home-based rehabilitation and older persons mental health services) and Royal Rehab (specialist brain and spinal injury rehabilitation).

2.2 Cases for Change

To support our current savings initiatives, the District proposes a staffing reduction strategy which proposes to delete FTE equating to circa \$4 million in salaries savings per year. A proportional reduction in FTE across management, administrative and support services structures in the District will enable this to be targeted and ensure we do not impact frontline clinical service delivery. The efficiencies will be delivered across the District, recognising efficiencies within each directorate, site or service.

The aim of the restructure is to:

- Improve efficiency and cost effectiveness
- Meet our obligations to support government savings initiatives

The proposed staffing reduction consultation period and any subsequent implementation will adhere to all relevant legislation, policies and Award requirements.

3. Impact

The District proposes to delete 21 positions held by permanent employees (18 FTE) and 5 vacant positions will be deleted (4.7 FTE). The proposal has considered how Health Manager and support positions have been distributed across the District. Given this, the allocation is more heavily weighted to District directorates rather than our hospitals and services. There is no impact on frontline clinical services as a result of these proposed changes.

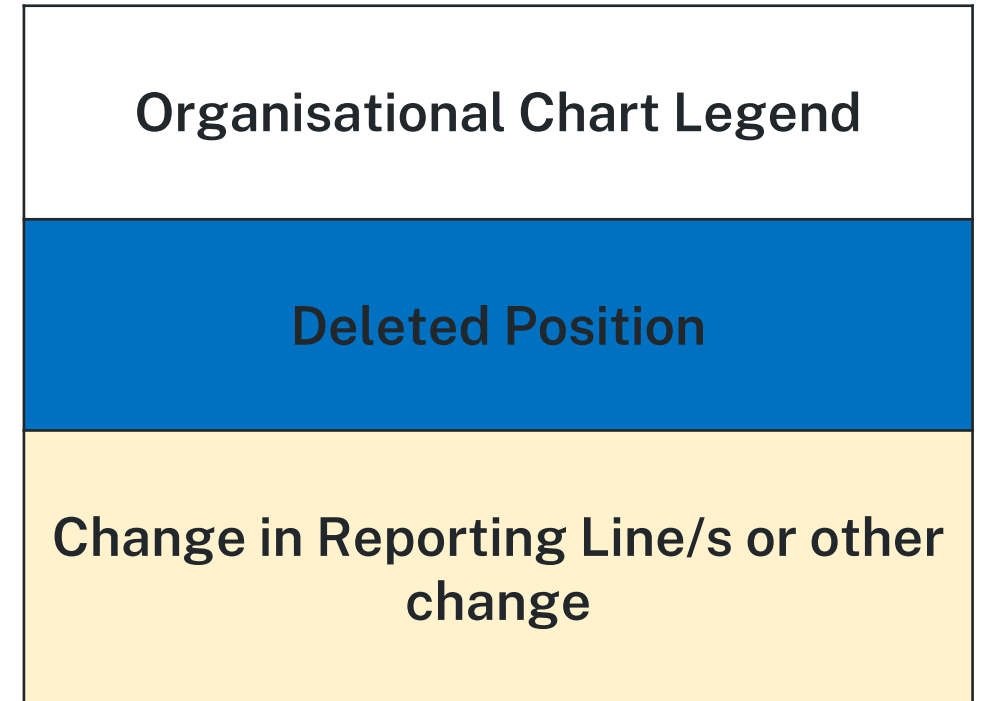
Participation in the [Workforce Mobility Program \(WMP\)](#) will be mandatory for those eligible staff impacted by the deletion of their position, as per NSW Health policy, simultaneous with our internal redeployment process. The indicative breakdown of directorates/facilities, and classifications impacted is as follows (noting there are also some vacant positions that are proposed to be deleted without incumbent employees).

Position Classification	FTE	Employees
Health Managers	14.3 FTE	16
Administration Officers	1.8 FTE	2
Medical	0.4 FTE	1
Allied Health	1.5 FTE	2

Further information

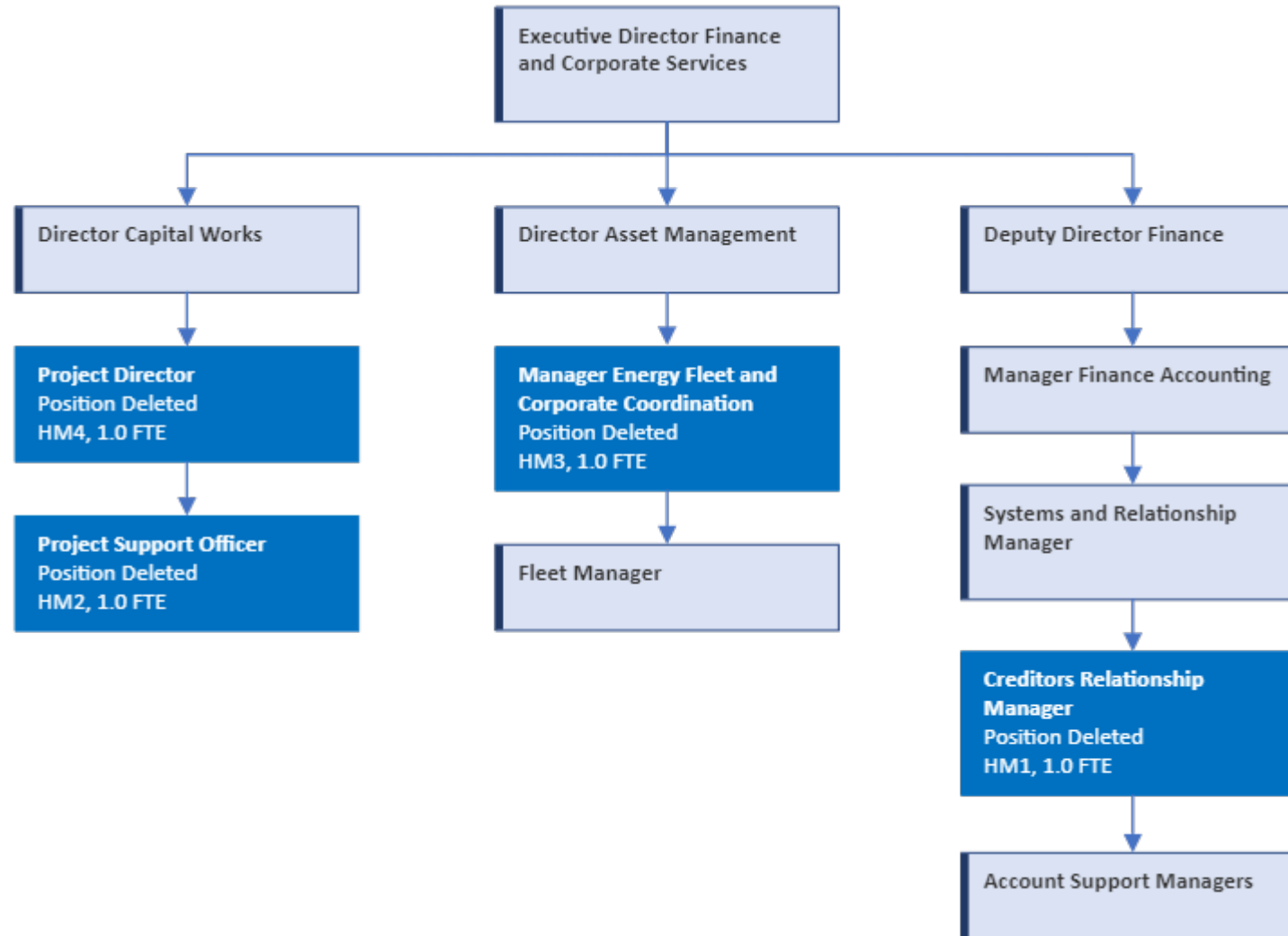
Each unit or department in scope for the Management review has been included as follows to illustrate the specific positions that are proposed to be deleted.

An organisational structure chart and position list is provided.

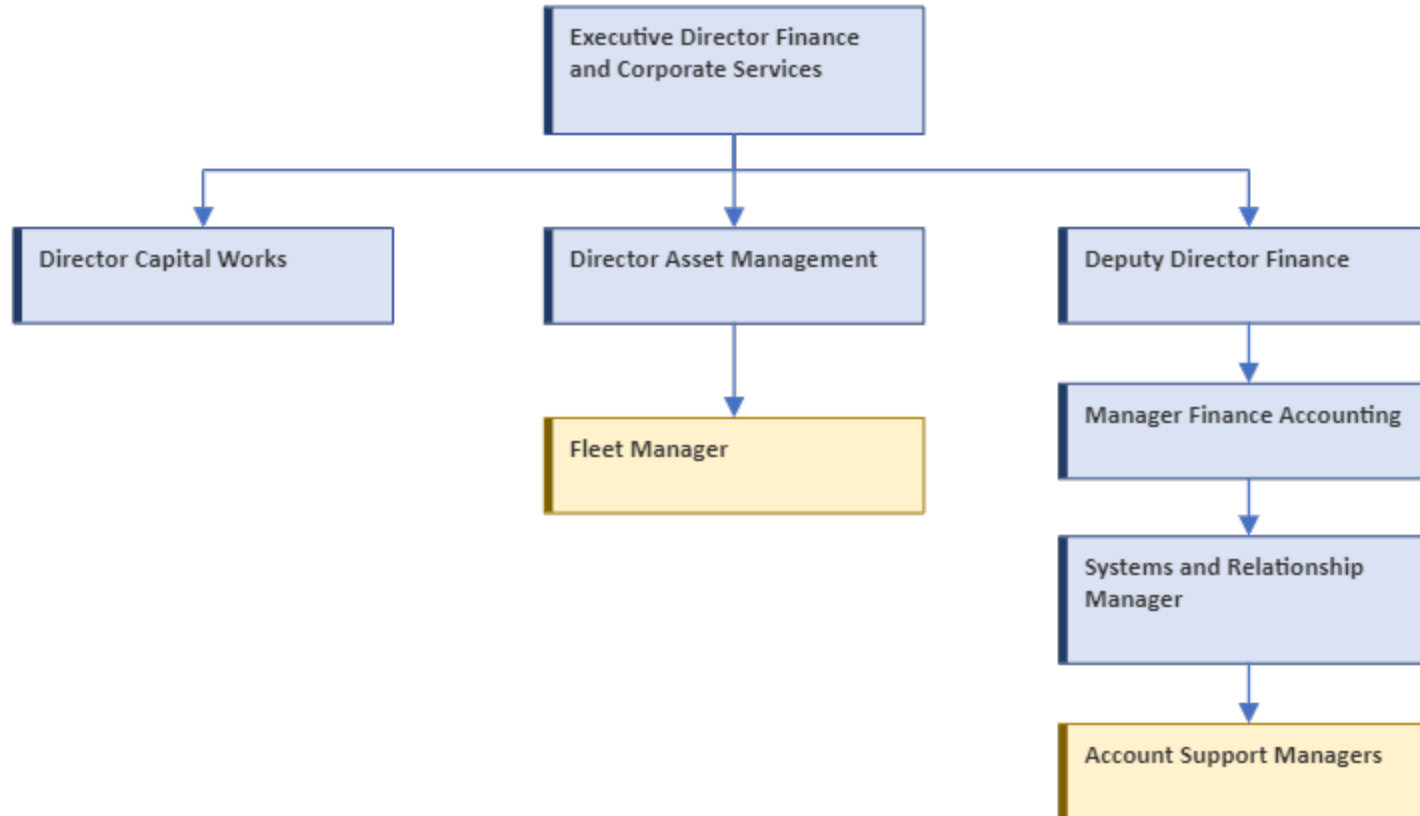


4. Finance & Corporate Services

4.1 Current Organisational Structure



4.2 Proposed Organisational Structure

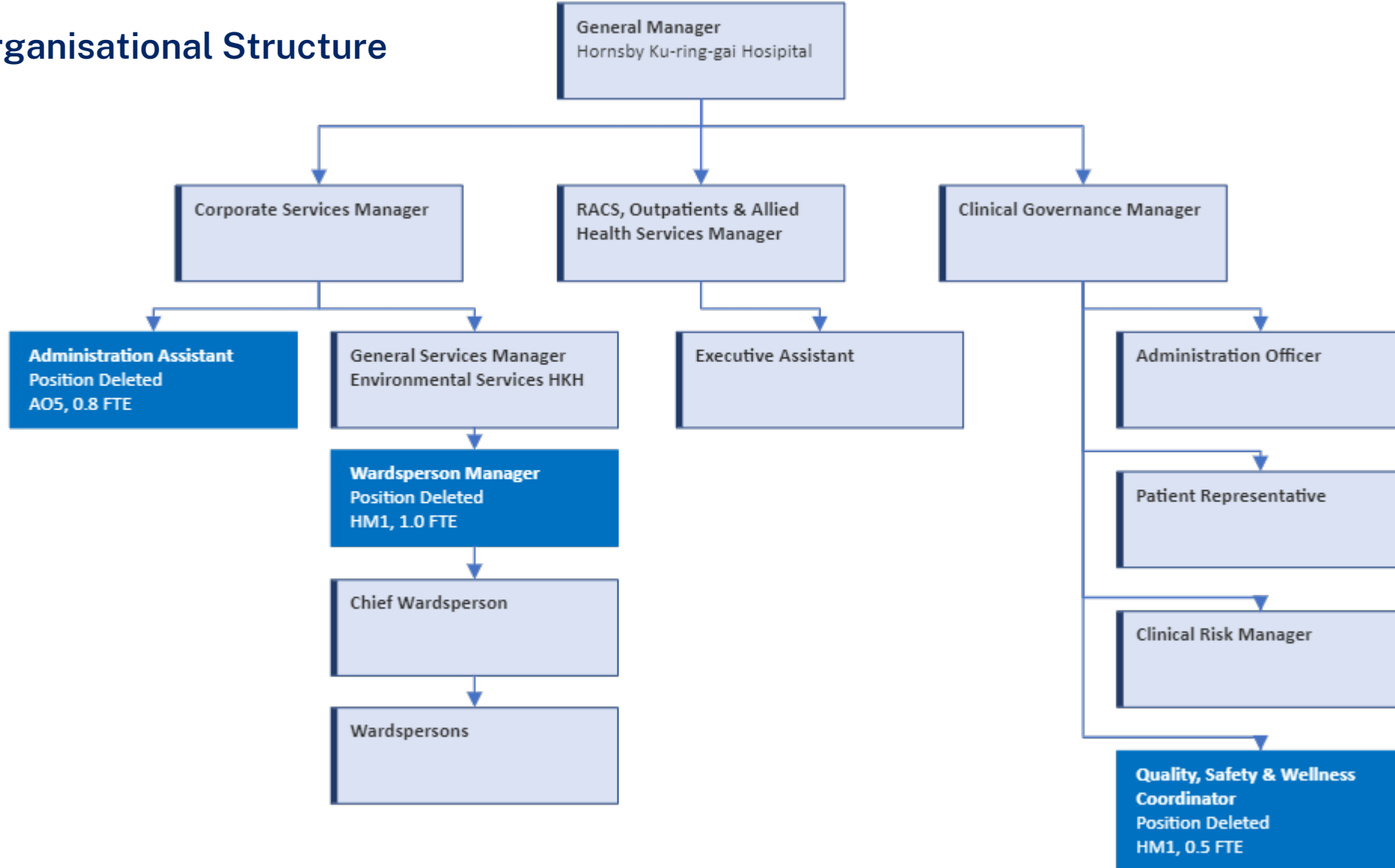


4.3 Proposed Changes to Positions – Finance & Corporate Services

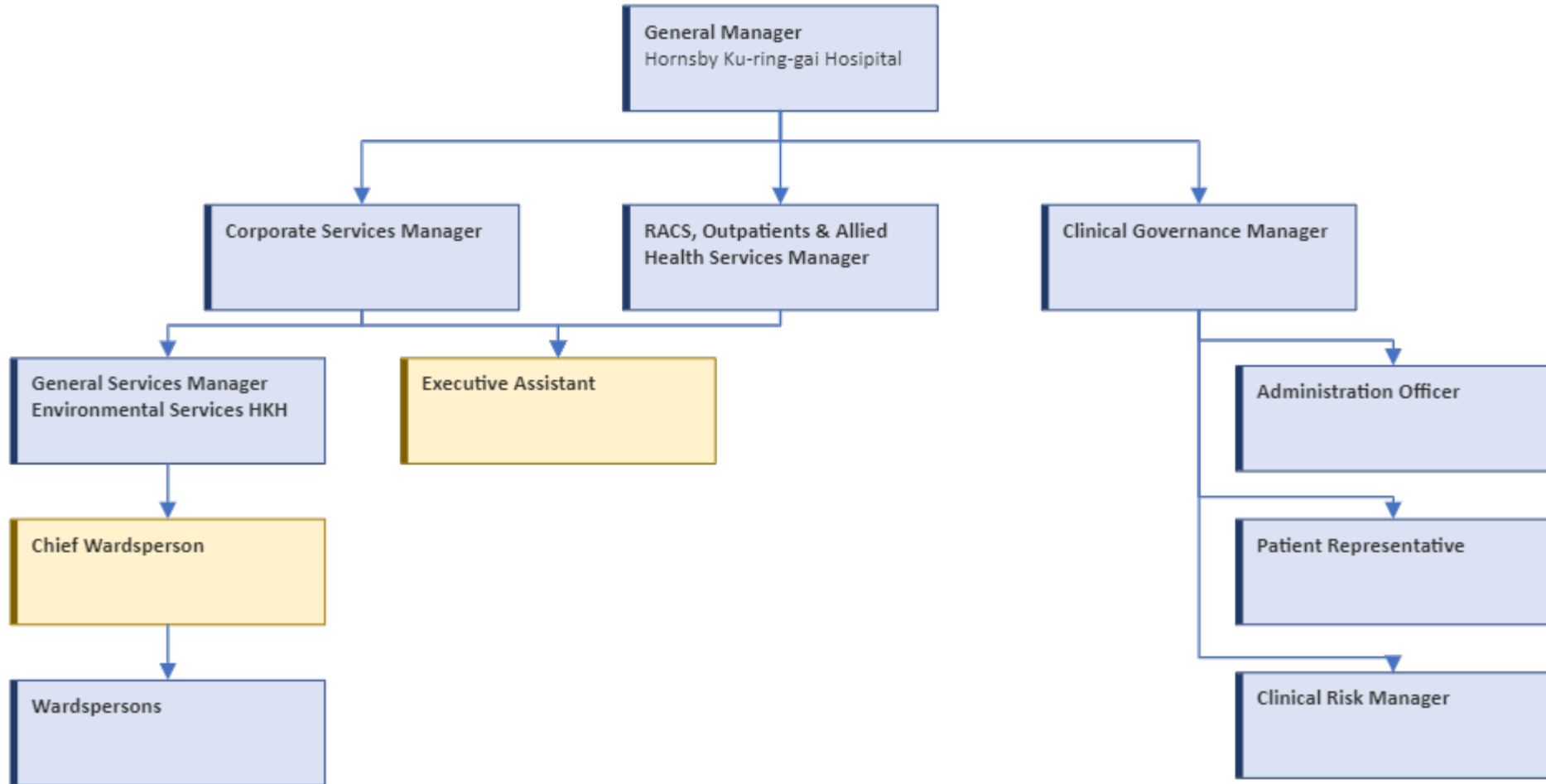
Classification	Position	Grade	Nature of Change
Health Manager	Project Director	HM4	Position deletion (substantive employee)
Health Manager	Manager Fleet, Energy & Corporate Co-Ordination	HM3	Position deletion (substantive employee)
Health Manager	Project Officer	HM2	Position deletion (substantive employee)
Health Manager	Creditors Relationship Manager	HM1	Position deletion (substantive employee)

5. Hornsby Ku-ring-gai Health Service

5.1 Current Organisational Structure



5.2 Proposed Organisational Structure

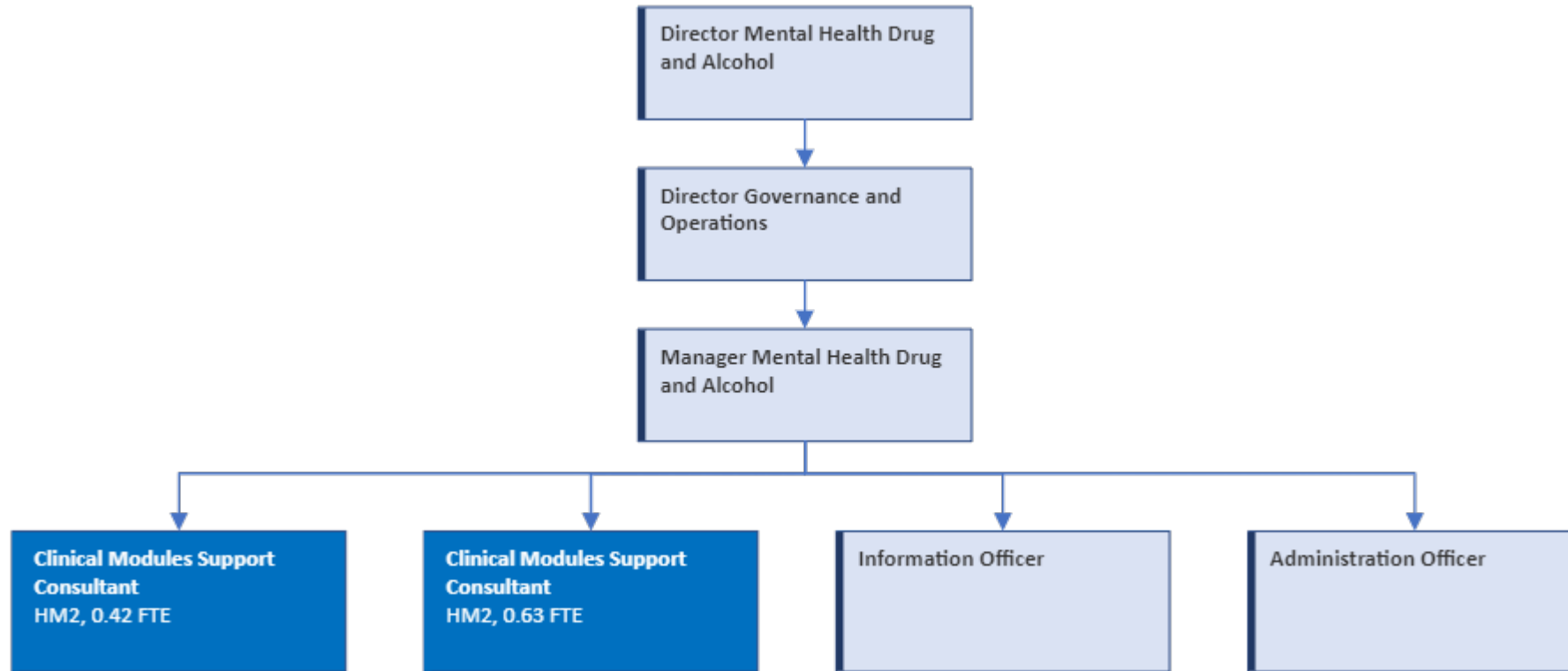


5.3 Proposed Changes to Positions – Hornsby Ku-ring-gai Health Service

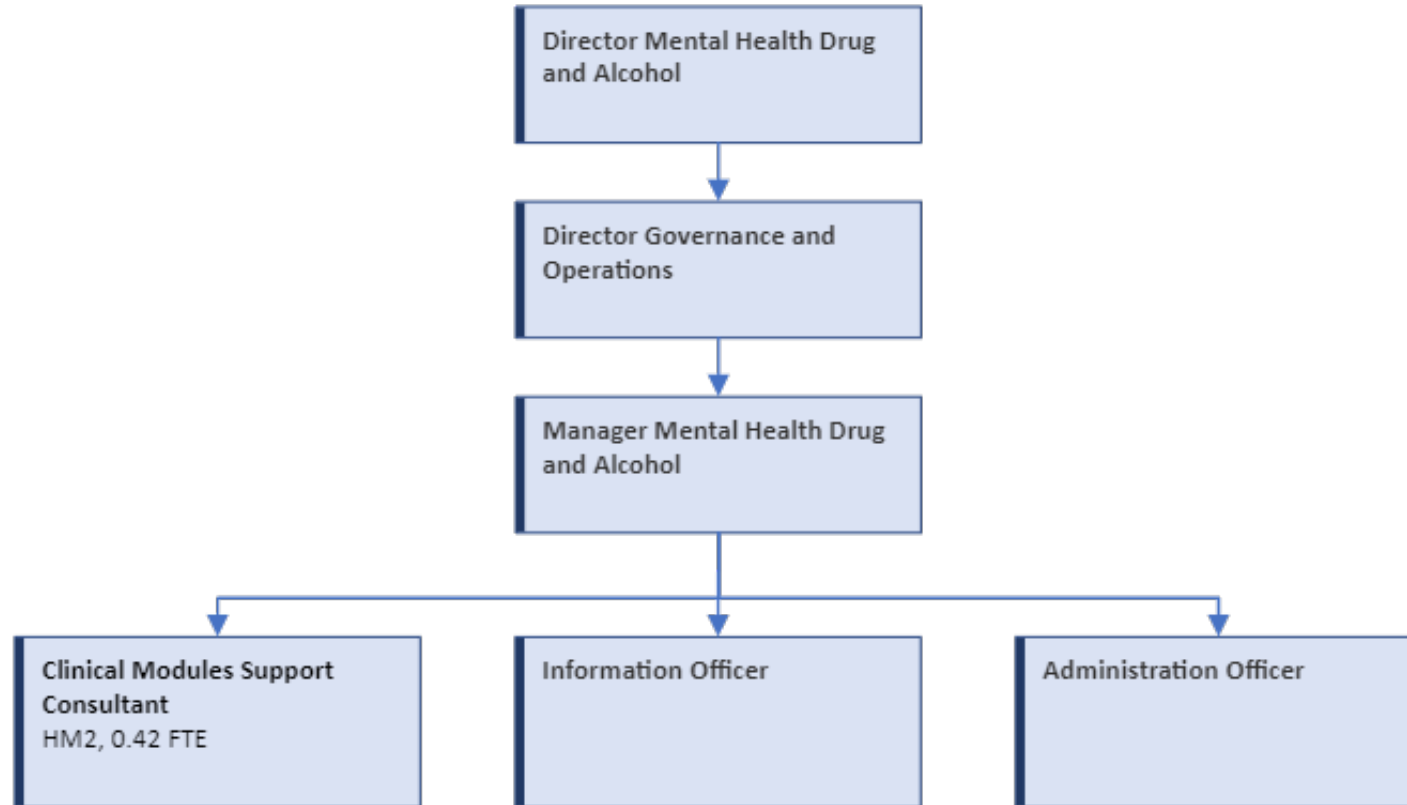
Classification	Position	Grade	Nature of Change
Health Manager	Wards Person Manager	HM1	Position deletion (substantive employee)
Health Manager	Clinical Governance	HM1	Position deletion (substantive employee)
Administration Officer	Executive Assistant	A05	Position deletion (substantive employee)

6. Mental Health, Drug & Alcohol

6.1 Current Organisational Structure



6.2 Proposed Organisational Structure

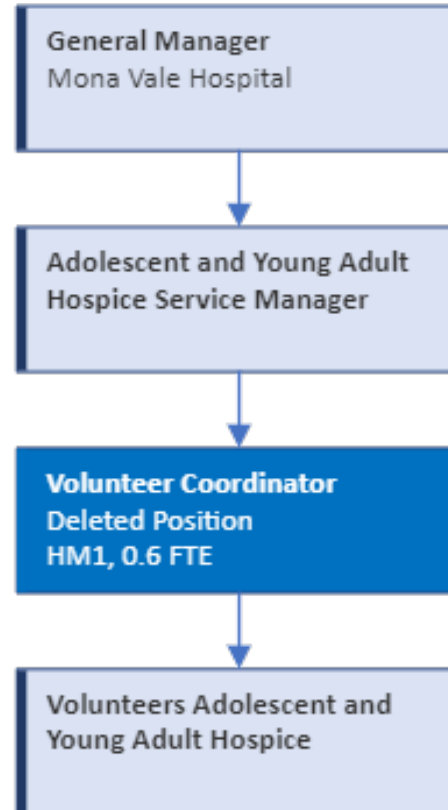


6.3 Proposed Changes to Positions – Mental Health, Drug & Alcohol

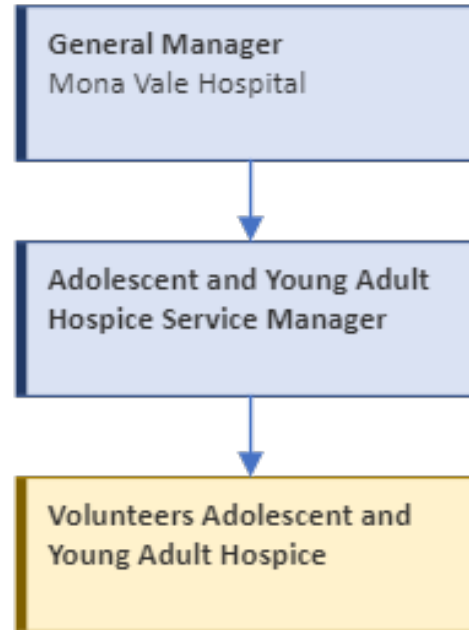
Classification	Position	Grade	Nature of Change
Health Manager	Clinical Modules Support Consultant	HM2	FTE Reduction (substantive employee)

7. Mona Vale Hospital

7.1 Current Organisational Structure



7.2 Proposed Organisational Structure

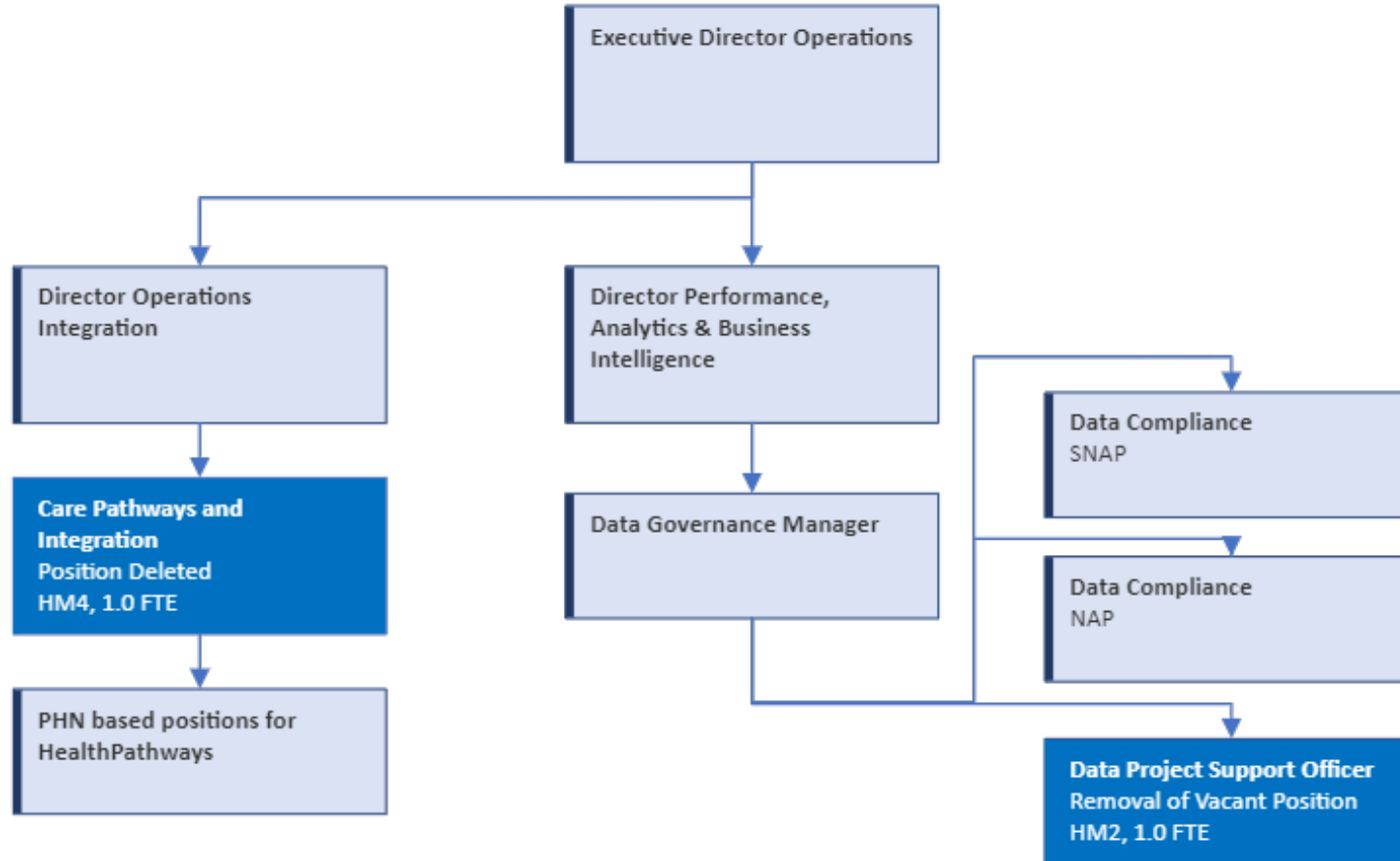


7.3 Proposed Changes to Positions – Mona Vale Hospital

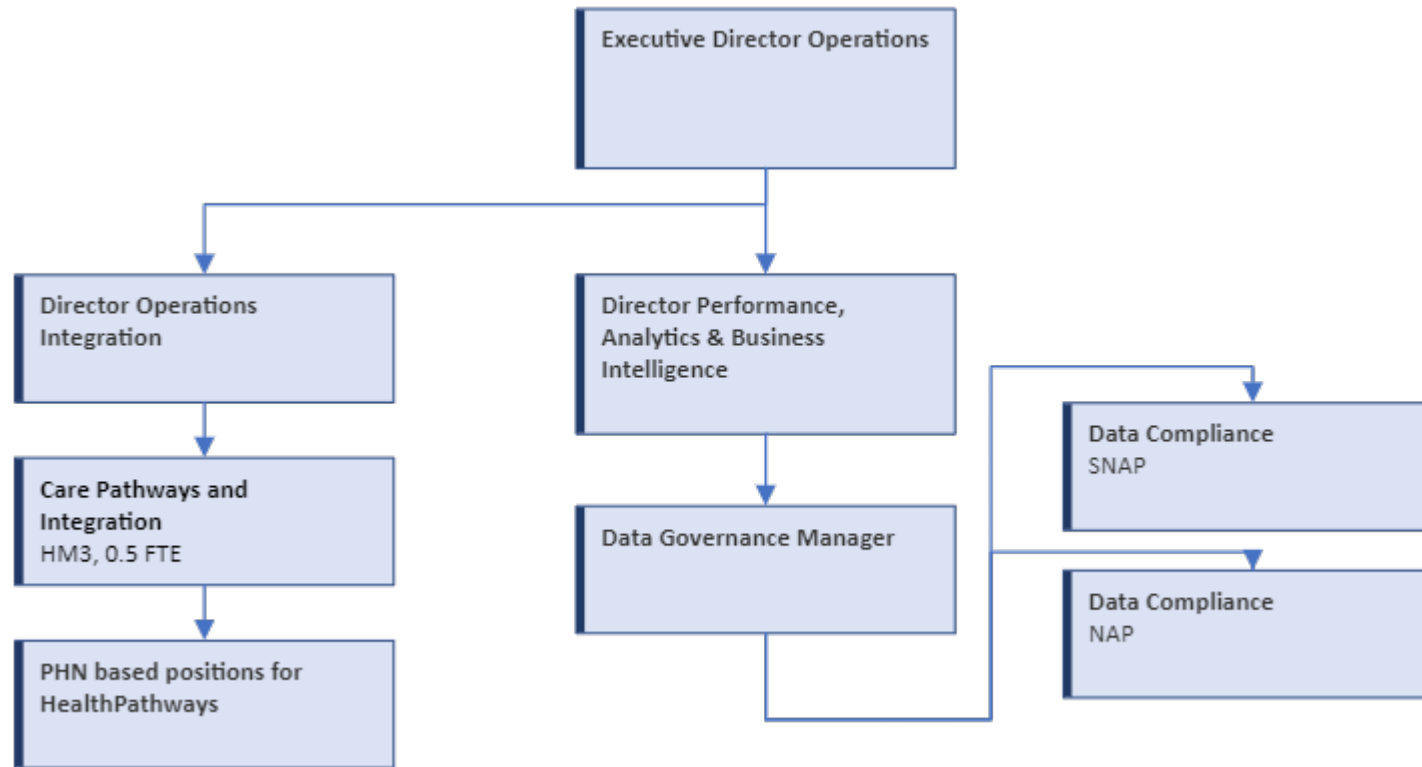
Role Type	Position	Grade	Nature of Change
Health Manager	Volunteer Coordinator	HM1	Position deletion (substantive employee)

8. Operations

8.1 Current Organisational Structure



8.2 Proposed Organisational Structure

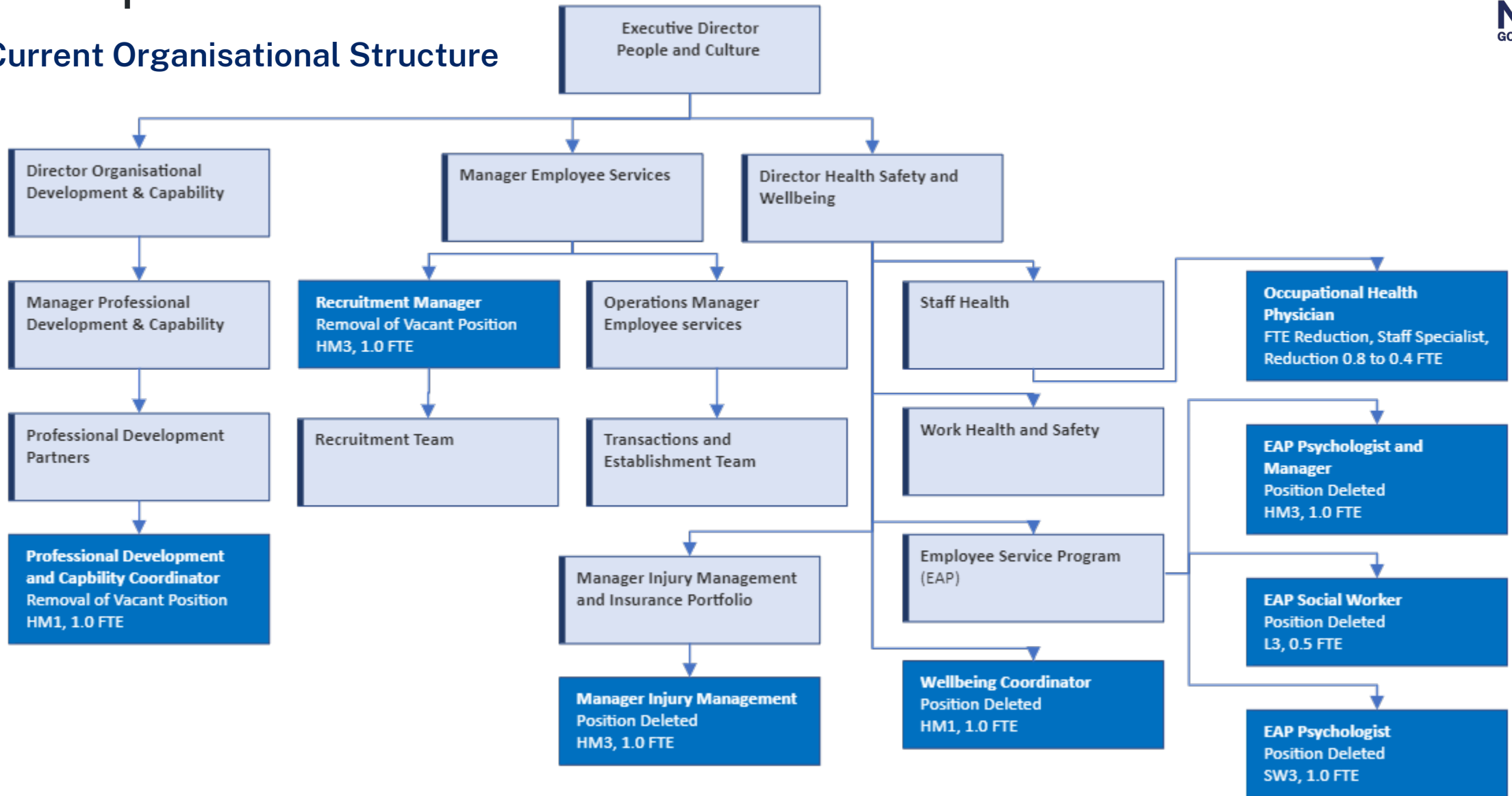


8.3 Proposed Changes to Positions – Operations

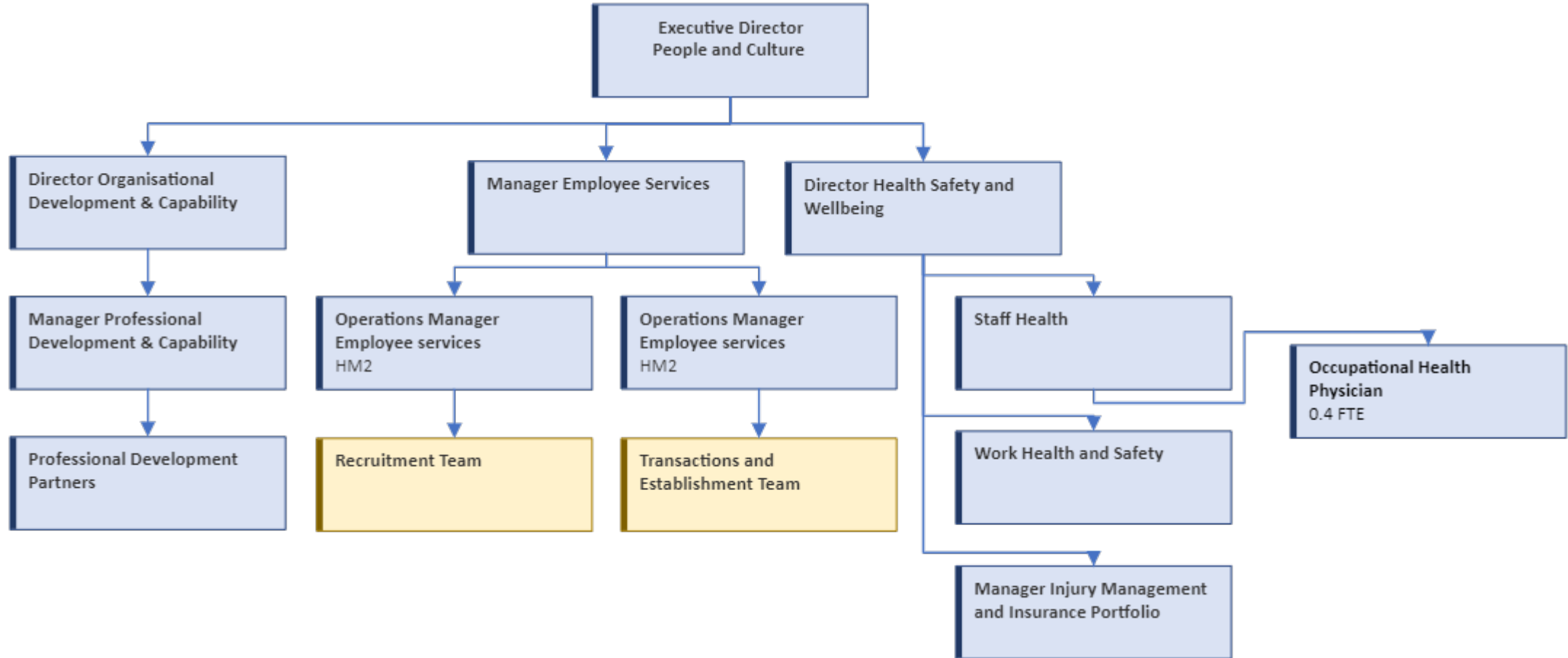
Role Type	Position	Grade	Nature of Change
Health Manager	Manager, Care Pathways & Integration	HM4	Position deletion (substantive employee)
Health Manager	Data Project & Support Officer	HM2	Removal of vacant position

9. People and Culture

9.1 Current Organisational Structure



9.2 Proposed Organisational Structure

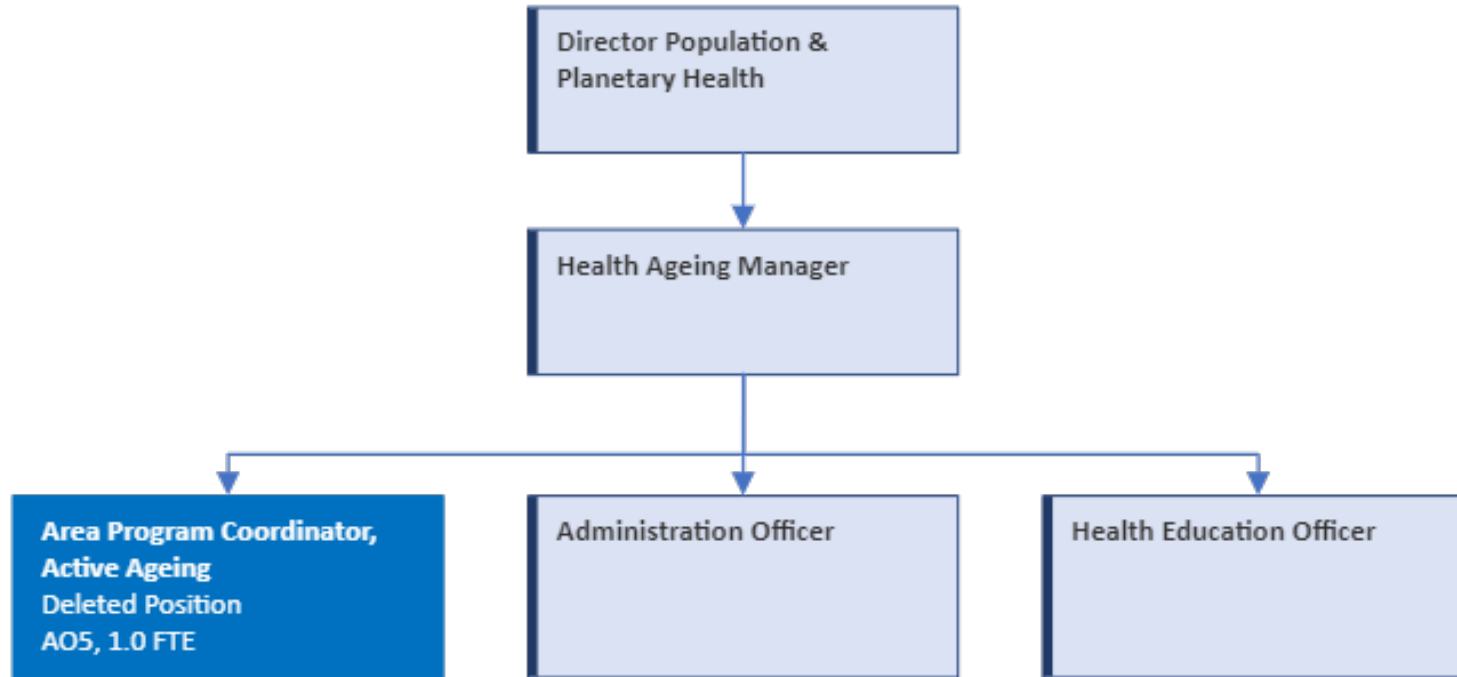


9.3 Proposed Changes to Positions – People and Culture

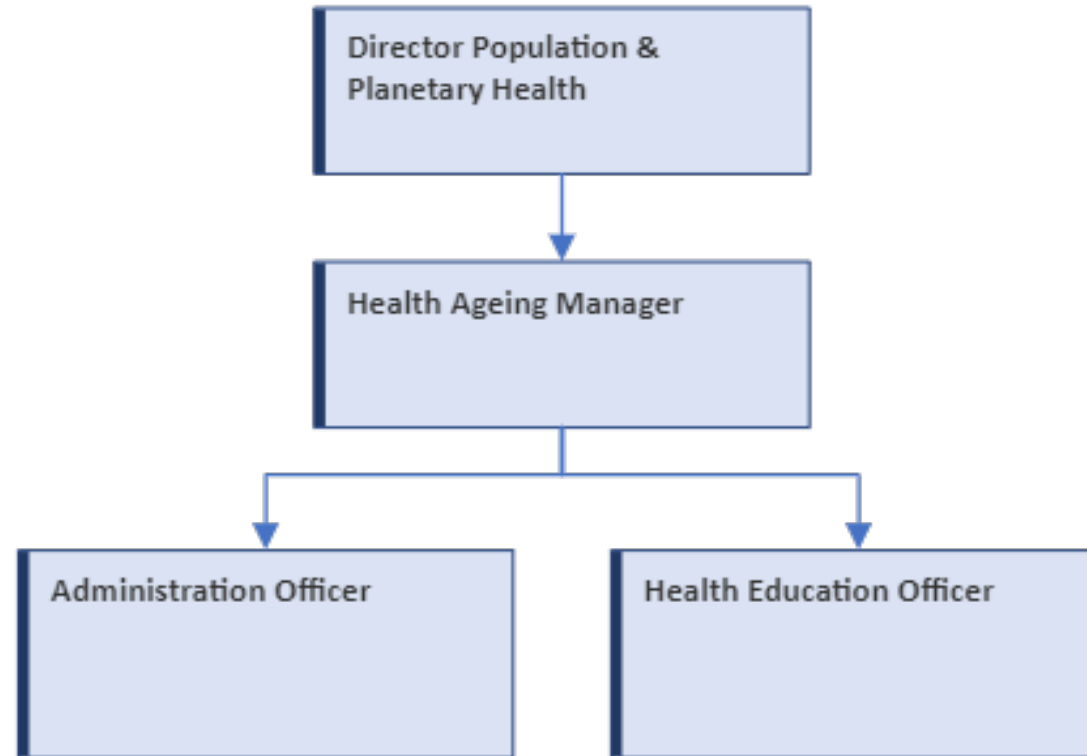
Role Type	Position	Grade	Nature of Change
Health Manager	Injury Management Manager	HM3	Position deletion (substantive employee)
Health Manager	EAP Psychologist and Manager	HM3	Position deletion (substantive employee)
Health Manager	Wellbeing Coordinator	HM1	Position deletion (substantive employee)
SPsych	EAP Counsellor	L3	Position deletion (substantive employee)
SW3	EAP Psychologist	SW3	Position deletion (substantive employee)
Senior SS	Occupational Health Physician	Senior Staff Specialist	Position deletion (substantive employee)
Health Manager	Recruitment Manager	HM3	Removal of vacant position
Health Manager	ODaC Coordinator	HM1	Removal of vacant position

10. Population and Planetary Health

10.1 Current Organisational Structure



10.2 Proposed Organisational Structure

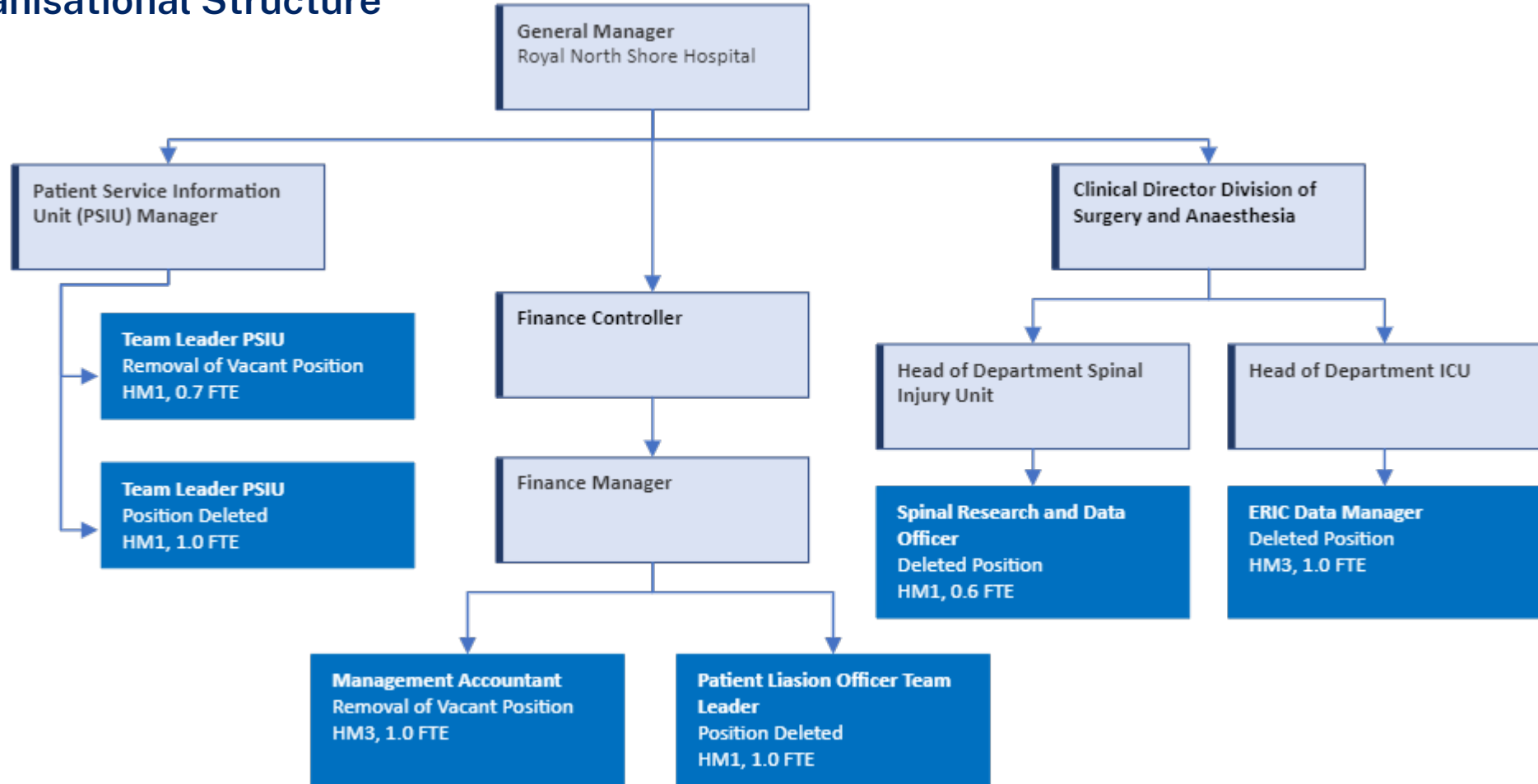


10.3 Proposed Changes to Positions – Population and Planetary Health

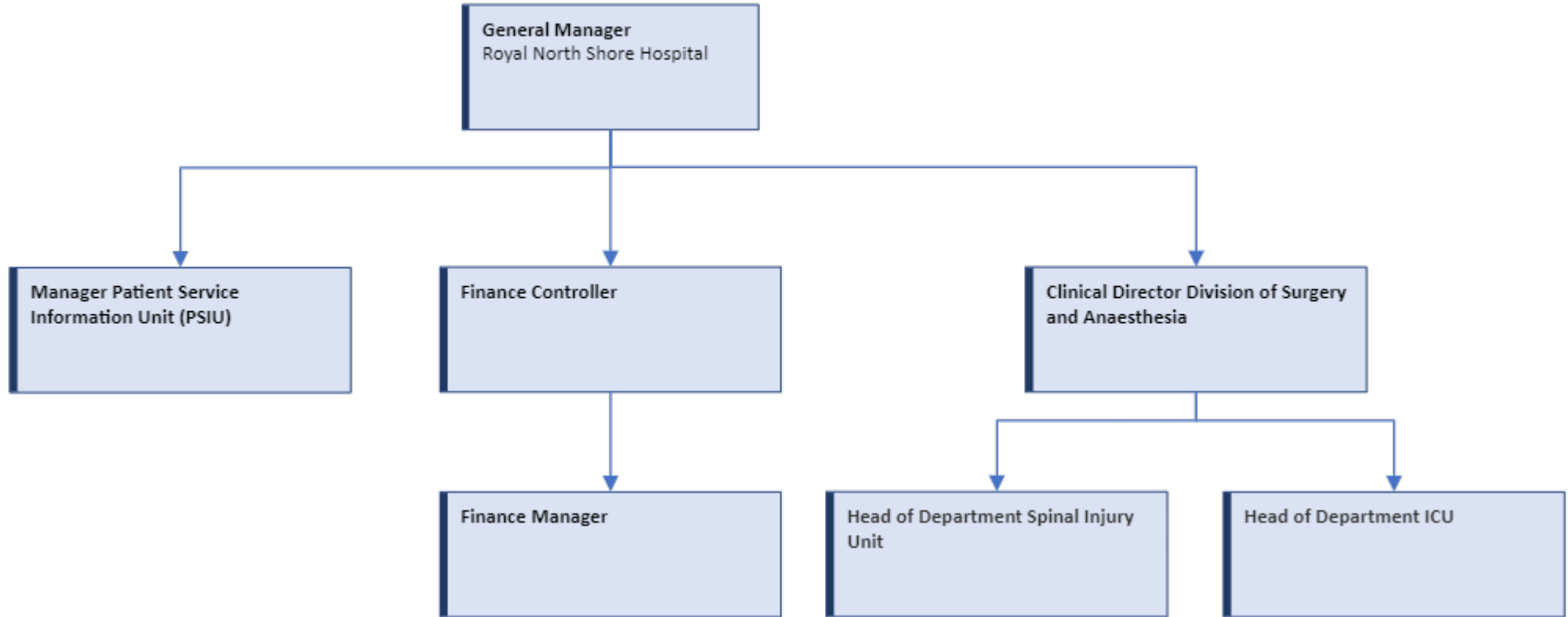
Role Type	Position	Grade	Nature of Change
Administration Officer	Area Program Coordinator	A05	Position deletion (substantive employee)

11. Royal North Shore Hospital

11.1 Current Organisational Structure



11.2 Proposed Organisational Structure



11.3 Proposed Changes to Positions – Royal North Shore Hospital

Role Type	Position	Grade	Nature of Change
Health Manager	ERIC Data Manager	HM3	Position deletion (substantive employee)
Health Manager	Management Accountant	HM3	Removal of vacant position
Health Manager	PLO Team Leader	HM1	Position deletion (substantive employee)
Health Manager	Spinal Research and Data Officer	HM1	Position deletion (substantive employee)
Health Manager	Team Leader	HM1	Position deletion (substantive employee)
Health Manager	Team Leader	HM1	Removal of vacant position

13. Consultation Plan

Consultation will occur with impacted employees and will also require consultation with the Health Services Union (HSU) and Australian Salaried Medical Officers Federation (ASMOF), in accordance with NSW Health PD2012_021 *Managing Excess Staff of the NSW Health Service*, on release of the Restructure Consultation Pack.

The relevant manager will have individual discussions with all position holders and departments who are directly impacted by the proposal prior to the consultation period opening.

Support will be provided to impacted staff throughout the process.

14. Timetable

Stage	Milestone Date
Consultation Commences	Tuesday, 8 October 2024
Consultation Completes	Monday, 21 October 2024
Employee communication of outcome	Week commencing Monday, 21 October 2024
Referral to Workforce Mobility Program	Week commencing Monday, 21 October 2024
End of WMP period	8 weeks after commencement
Employee communication of outcome	Week following WMP period

15. Employee Assistance Program

Employees are reminded of the availability of the general external Employee Assistance Program (EAP) for assistance, counselling and support. You can call the customer service team on 1300 307 912, or book online at www.peoplesense.au/YKZ-DU9.

*Note: To book online you will first spend about two minutes setting up a client profile. This streamlines future bookings and allows you to access the live appointments calendar. **At any point during the online booking process, you have the option of calling the customer service number for booking assistance.***

Employees who are directly impacted by this change will have access to onsite support from PeopleSense and will be provided with an online booking process.

16. How to give feedback

Comments or feedback on the proposal can be submitted in writing to the Executive Director People and Culture by **5:00pm on Monday, 21 October 2024** at
NSLHD-ManagementReview2024@health.nsw.gov.au