

Realignment – Consultation Document (Procedure reference PR2014_016)

Document control sheet

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1. Scope, Plan and Approval

1.1 The Need for Change

1.1.1 Description of Service

Allied Health staff provide inpatient services for acute, rehabilitation and outpatient services including community rehabilitation and aged care services across both Royal North Shore and Ryde Hospitals.

1.1.2 Background

In 2018 the management of Royal North Shore (RNS) and Ryde Hospitals was separated to two independent entities. Services were appropriately realigned over the following twelve months with the exception of Allied Health. In 2020 there was a pause on realignments because of the COVID-19 situation.

In 2022 a new position of Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services was established to enhance professional and operational leadership for Ryde Hospital, valuable contribution to the Ryde Hospital Executive, Ryde Hospital Allied Health staff and overall hospital operations. Additionally, the Director of Allied Health and Community Services for RNSH was successfully recruited to permanently.

The focus of the change is to ensure that Ryde Hospital's Allied Health Service dedicates support to the growing needs of Ryde Hospital which is poised for expansion to meet the increasing demand from local community areas, Ryde and Hunters Hill, for health services due to projected population growth in these areas.

1.1.3 Current Leadership Structure

The FTE figures included in this section are taking into consideration both operational and professional reports.

Physiotherapy

The leadership structure for the **Physiotherapy** service across RNS and Ryde Hospital currently consists of a Head of Department (Level 7, Grade 3), a Deputy Head of Department (RNS) (Level 7, Grade 1), and a Deputy Head of Department (Ryde) (Level 7, Grade 1).

Ryde Physiotherapy is divided into two teams Acute and Rehabilitation, each team has a Team Leader who report to the Deputy Head of Department, Physiotherapy. The department currently comprises of approximately 26.15 FTE.

RNS Physiotherapy department currently comprises of approximately 95.5 FTE.

Occupational Therapy

The leadership structure for the **Occupational Therapy** service across RNS and Ryde Hospital currently consists of a Head of Department (Level 7, Grade 2), a Deputy Head of Department (RNS) (Level 6), and a Unit Head (Ryde) (Level 5).

Ryde Occupational Therapy Department is divided into two teams Acute and Rehabilitation, with a Team Leader for Rehabilitation, who reports to the Unit Head. The department currently comprises of approximately 15 FTE.

RNS Occupational Therapy Department currently comprises of approximately 35.45 FTE.

Nutrition and Dietetics

The leadership structure for the **Nutrition and Dietetics** service across RNS and Ryde Hospital currently consists of a Head of Department (Level 7, Grade 2), a Deputy Head of Department (RNS) (Level 6), and a Unit Head (Ryde) (Level 5).

The Ryde department currently comprises of approximately 7.04 FTE.

The RNS department currently comprises of approximately 33.89 FTE

Social Work

The leadership structure for the **Social Work** service across RNS and Ryde Hospitals currently consists of a Head of Department (Level 7, Grade 2), a Deputy Head of Department (RNS) (Level 6), and a Unit Head (Ryde) (Level 5).

Ryde Social Work Department is divided into two teams Acute and Rehabilitation. The Rehabilitation team have a Level 3 Team lead that reports to the Unit Head, while the Acute team report directly to the Unit Head. The department currently comprises of approximately 9.76 FTE.

RNS Social Work department currently comprises of approximately 38.4 FTE.

Speech Pathology

The leadership structure for the **Speech Pathology** service across RNS and Ryde Hospitals currently consists of a Head of Department (Level 6) and a Team Leader (Ryde) (Level 4).

Ryde Speech Pathology department currently comprises of approximately 5.74 FTE.

RNS Speech Pathology department currently comprises of approximately 16.54 FTE.

Podiatry

The leadership structure for the **Podiatry** service across RNS and Ryde Hospitals currently consists of a Head of Department (Level 5).

Ryde Podiatry department currently comprises of approximately 2.52 FTE.

RNS Podiatry department currently comprises of approximately 4.9 FTE.

Orthotics

The leadership structure for the **Orthotics** service across RNS and Ryde Hospitals currently consists of a Head of Department (Level 5).

Ryde Podiatry department currently comprises of approximately 0.4 FTE.

RNS Podiatry department currently comprises of approximately 7.2 FTE.

Community Aged-Care and Rehabilitation Service, Ryde Hospital

The leadership structure for the **Community Aged-Care and Rehabilitation Service** (CAREs) currently consists of a manager position (Level 5) who oversees the CAREs service 7.8 FTE.

This department is operationalised solely within Ryde Hospital. It will not be impacted in the proposed changes, therefore is out of scope of this realignment.

Community Aged Care Service, RNS Hospital

The leadership structure for the **Community Aged-Care Service RNS hospital** currently consists of a Manager (Health Manager 3).

This department is solely based at RNS Hospital and currently comprises of approximately 15.6 FTE.

This department will not be impacted in the proposed changes, therefore is out of scope of this realignment.

1.1.4 Current Organisational Charts

Current Organisational Charts attached (Appendix A)

1.1.5 Current Position Descriptions

Current Position Descriptions attached (Appendix B)

1.2 Realignment Plan

1.2.1 Reason and Purpose of the Realignment

Initial Proposal

In recognition of the decentralisation of Ryde's Allied Health teams from reporting into the Executive at Royal North Shore Hospital to reporting into the Executive Team at Ryde Hospital, it is proposed that the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital is to be established as the Manager for all Allied Health teams at Ryde Hospital.

Further, given the sole responsibility that will now be allocated to the teams at Ryde Hospital, the establishment of Head of Department roles will need to be created at Ryde Hospital as the responsibilities of the current Unit Head positions will now be aligned to the Department Head classification within the NSW Health Service Health Professionals (State) Award.

Operational Realignment Proposal

Following the consideration into a number of different options in proceeding with the separation of the Allied Health Services at Royal North Shore and Ryde Hospitals, it is proposed to proceed with an operational realignment of the two services. This operational realignment will allow both RNS and Ryde Hospitals Allied Health services to continue the establishment of their respective

independent teams and governance arrangements to meet the needs of their patients and service obligations.

The proposed change will result in the Ryde Hospital Allied Health teams reporting into the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital. Further, given the sole responsibility for staff and services will now be allocated to the teams at Ryde Hospital, the establishment of Head of Department roles will need to be created at Ryde Hospital. This will reflect the change in responsibilities of the current Unit Head positions which will now be aligned to the Department Head classification within the NSW Health Service Health Professionals (State) Award, or as varied from time to time.

Following the realignment of the two services, a review into the grading of Allied Health Management grades will occur in a separate district wide review, ensuring grading is consistent and fair across the District. It is proposed that no impact upon the classifications of the Allied Health Heads of Department, Deputy Heads of Department or Unit Heads will occur until this district wide review is complete, at which time the gradings will be considered.

1.2.2 Proposed new structure and impact

Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital

Currently the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital provides notional operational leadership to the Ryde Hospital Allied Health services and provides Executive leadership for the Allied Health services at Ryde Hospital.

In the proposed new structure, the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services will provide dedicated, professional and operational management of approximately 70 FTE (operational reports) specific to Ryde Hospital. The role forms part of the Ryde Executive with responsibility also for Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Director, Division of Allied Health & Community Services

Currently, the Director, Division of Allied Health & Community Services covers both Ryde and Royal North Shore services.

In the proposed new structure, the Director, Division of Allied Health & Community Services will provide dedicated professional and operational management of approximately 198 FTE (operational reports) specific to Royal North Shore Hospital.

Physiotherapy

The realignment of these services will result in the below changes to the leadership structure across the **Physiotherapy** service.

The current **Head of Department** will be allocated solely to RNSH and will no longer be responsible for the Allied Health Physiotherapy department at Ryde Hospital;

The current **Deputy Head of Department (RNS)** will remain reporting directly to the Physiotherapy Head of Department;

The current **Deputy Head of Department (Ryde)** role is proposed to be changed to a Department Head position and will report directly to the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Occupational Therapy

The realignment of these services will result in the below changes to the leadership structure across the **Occupational Therapy** service.

The current **Head of Department** will be allocated solely to RNSH and will no longer be responsible for the Allied Health Occupational Therapy department at Ryde Hospital;

The current **Deputy Head of Department (RNS)** will remain reporting directly to the Occupational Therapy Head of Department;

The current **Unit Head (Ryde)** role is proposed to be changed to a Department Head position and will report directly to the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Nutrition and Dietetics

The realignment of these services will result in the below changes to the leadership structure across the **Nutrition** service.

The current **Head of Department** will be allocated solely to RNSH and will no longer be responsible for the Allied Health Nutrition and Dietetics department at Ryde Hospital;

The current **Deputy Head of Department (RNS)** will remain reporting directly to the Nutrition and Dietetics Head of Department;

The current **Unit Head (Ryde)** role is proposed to be changed to a Department Head position and will report directly to the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Social Work

The realignment of these services will result in the below changes to the leadership structure across the **Social Work** service.

The current **Head of Department** will be allocated solely to RNSH and will no longer be responsible for the Allied Health Social Work department at Ryde Hospital;

The current **Deputy Head of Department (RNS)** will remain reporting directly to the Social Work Head of Department;

The current **Unit Head (Ryde)** role is proposed to be changed to a Department Head position and will report directly to the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Speech Pathology

The realignment of these services will result in the below changes to the leadership structure across the **Speech Pathology** service.

The current **Head of Department** will be allocated solely to RNSH and will no longer be responsible for the Allied Health Speech Pathology department at Ryde Hospital;

The current **Unit Head (Ryde)** role is proposed to be changed to a Department Head position and will report directly to the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Podiatry

The realignment of these services will result in the below changes to the reporting structure for the **Podiatry** service.

The current **Head of Department** will continue to report to the Director, Division of Allied Health & Community Services with any decisions regarding operational and human resource matters at Ryde Hospital to be made jointly by the Director, Division of Allied Health & Community

Services and the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Orthotics

The realignment of these services will result in the below change to the reporting structure for the **Orthotics** service.

The current **Head of Department** will continue to report to the Director, Division of Allied Health & Community Services with any decisions regarding operational and human resource matters at Ryde Hospital to be made jointly by the Director, Division of Allied Health & Community Services and the Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services at Ryde Hospital.

Community Aged-Care and Rehabilitation Service

This department will not be impacted in the proposed changes, therefore is out of scope of this realignment.

Community Aged Care Service

This department will not be impacted in the proposed changes, therefore is out of scope of this realignment.

1.2.3 Proposed New Organisational Charts

Proposed Organisational Charts attached (Appendix A)

1.2.4 Proposed New Position Descriptions

Proposed Position description template attached (Appendix C)

1.2.5 Likely impact on services and functions

The proposed changes will allow for the Allied Health Services at RNS and Ryde Hospitals to establish their respective independent teams and governance arrangements to meet the needs of their patients and service obligations.

The proposed changes will impact upon the Podiatry and Orthotic Heads of Department uniquely with the establishment of a dual reporting line.

Daily operations/functions of the services will not be directly impacted as a result of the realignment.

2. Consultation and Communication Strategy

Consultation will be required after the proposal document and corresponding brief has been approved by the Chief Executive.

2.1 Notification to employees

At the initial stage the Director, Division of Allied Health & Community Services, Manager Allied Health, Rehabilitation, Aged Care and Ambulatory Care Services and Site General Managers will meet with all Allied Health Heads of Departments, Deputy Heads of Departments and Unit Heads to introduce the proposed Allied Health structure for both Royal North Shore and Ryde Hospitals. Formal correspondence regarding the realignment will also be distributed to Allied Health staff and the HSU for wider consultation.

An extended 4 week window of opportunity will be provided for all allied health staff across the two hospitals to provide feedback regarding the proposed structure due to the seasonal break and staff will be taking planned leave.

This consultation includes presentation of organisational charts, impacted roles, key milestones to the change management project and reference to formal consultation with industrial organisations.

Team meetings and memos will be used to provide information and discuss the implementation of the changes specific to their discipline and operating model.

2.2 Notification to Union/Industrial Bodies and other relevant parties

Consultation is required following the proposal document and corresponding brief being approved by the RNS and Ryde Hospital Executives and NSLHD Chief Executive.

This realignment consultation paper which includes the proposed new organisational structure is being provided for consultation. The consultation paper will be sent to the Health Services Union including an invitation to meet and discuss the proposal as a Union Specific Consultative Committee (USCC), should they request.

The dates of the consultation period will be approximately 9 December 2022 to 13 January 2023. It is planned that consultation regarding this proposal will be finalised by 13 February 2023.

3. Implementation

Following the consultation period with staff and union cohorts, it is proposed that new Department Head position descriptions for Physiotherapy, Occupational Therapy, Nutrition and Dietetics, Social Work and Speech Pathology are reviewed in line with the Restructuring in Northern Sydney Local Health District procedure during consultation with the union.

Proposed Timetable

| Date | Actions | Responsibility |
|---------------|--|---|
| W/C 5 Dec | Hold Allied Health Senior Management meeting to discuss proposed realignment and consultation process. | AH Leads & Site GMs |
| W/C 5 Dec | Send all Allied Health Staff Memo with Consultation documents. | Site GMs |
| W/C 5 Dec | Send letter and consultation paper to HSU. | HR |
| W/C 16 Jan 23 | Review and incorporate consultation feedback into realignment plans and documents working closely with Allied Health Senior Management. <i>If changes have been made to the original proposed realignment, as a result of the consultation process, the modified proposal will be reviewed by RNS and Ryde Executive and NSLHD Executive.</i> | AH Leads, AH Senior Management, Site GMs and HR |
| W/C 30 Jan 23 | Finalise outcome of consultation and provide communication to impacted staff and advise all staff and HSU of the final structure and implementation timetable. | AH Leads, Site GMs and HR |
| W/C 30 Jan 23 | Finalise NSLHD wide communications regarding new Allied Health structure. | Site GMs, HR |

4. Review

The realignment will be reviewed 6 months following implementation to ensure reasonable workload under the new structure and to assess efficiency and staff satisfaction with the realignment.

Attachments

Appendix A – Current and Proposed organisational charts

Appendix B – Current position descriptions

Appendix C – Proposed drafted position descriptions

Appendix D – Memo to all staff

Appendix E – HSU consultation