

Ref FOI19-23

Freedom of Information Request: FOI19/23

I refer to your application received by Canberra Health Services on 30 May 2019 in which you sought access to information under the *Freedom of Information Act 2016* (the Act).

In your application you have requested:

"I would like documents related to the Independent Culture Review Panel;

- Correspondence between members of the Independent Health Culture Panel, the Minister for Health and Wellbeing and the CEO of Canberra Health Services and other senior officials in Canberra Health Services during the panel's existence and after the panel submitted its report. This also includes correspondence between the Minister, ACT Health and Canberra Health Services sparked by documents sent by members of the Independent Health Culture Panel to the Minister for Health and Wellbeing, ACT Health and Canberra Health Services.
- Reports prepared for the CEO of Canberra Health Services and other senior officials in Canberra Health Services related to the findings of the Independent Panel and implementation of its recommendations.
- Documents related to the involvement of Canberra Health Services in a preparation of a response to the report of the Independent Panel on Health Culture.
- Communications strategy for the release of the Interim and final report on health culture and communications strategy and associated correspondence.
- Documents related to the initial meeting of the Culture Review Oversight
 Group on 28 March 2019 including agenda, minutes, notes, reports prepared
 for the meeting, action items and correspondence related to the work of the
 Oversight Group since 28 March 2019. This does not include purely
 administrative details such as time and venue of the meeting."

I am an Information Officer appointed by the Director-General of ACT Health under section 18 of the Act to deal with access applications made under Part 5 of the Act. ACT Health Directorate was required to provide a decision on your access application by 19 July 2019.

Decision on access

Searches were completed for relevant documents and 31 documents were identified that fall within the scope of your request.

I have included as <u>Attachment A</u> to this decision the schedule of relevant documents. This provides a description of each document that falls within the scope of your request and the access decision for each of those documents.

I have decided to grant access in full to 5 documents relevant to your request and partial access to 26 documents, as I consider it to be information that would, on balance, be contrary to the public interest to disclose under the test set out in section 17 of the Act.

I have decided to grant access, under section 50 of the Act, to copies of documents with deletions applied to information that I consider would be contrary to the public interest to disclose.

My access decisions are detailed further in the following statement of reasons and the documents released to you are provided as <u>Attachment B</u> to this letter.

In reaching my access decision, I have taken the following into account:

- The FOI Act;
- The contents of the documents that fall within the scope of your request;
- The views of relevant third parties; and
- The Human Rights Act 2004.

Documents 2-4, 8, 9, 11, 13-20, 22-27, and 29-31 of the identified documents contains information that I consider, on balance, to be contrary to the public interest to disclose under the test set out in section 17 of the Act as the information contained in these folios is personal information.

Public Interest Factors Favouring Disclosure

I have identified that there are no factors favouring disclosure of this information under Schedule 2, section 2.1.

Public Interest Factors Favouring Non-Disclosure

 Schedule 2.2 (a) (ii) prejudice the protection of an individual's right to privacy or any other right under the Human Rights Act 2004. These were the email addresses of non-government third parties and mobile telephone numbers. On balance, the information identified is contrary to the public interest and I have decided not to disclose this information.

Documents 1, 10, 12, 22, and 31 of the identified documents contains information that I consider, on balance, to be contrary to the public interest to disclose under the test set out in section 17 of the Act as the information may prejudice an agency's ability to obtain confidential information and the management function of the agency.

Public Interest Factors Favouring Disclosure

- Schedule 2.1 (a) (i) the release of the document could be expected to promote open discussion of public affairs and enhance the government's accountability;
- Schedule 2.1(a) (ii) the release of the documents could contribute to positive and informed debate on important issues or matters of public interest.

Public Interest Factors Favouring Non-Disclosure

- Schedule 2.2 (a) (xii) prejudice an agency's ability to obtain confidential information; and
- Schedule 2.2 (a) (xv) prejudice the management function of an agency or the conduct of industrial relations by an agency.

Although I consider the factors favouring disclosure to be relevant, they are significantly outweighed by the factors favouring non-disclosure, therefore on balance, the information identified is considered contrary to the public interest and I have decided not to disclose this information.

Charges

Processing charges are not applicable to this request.

Online publishing - disclosure log

Under section 28 of the Act, ACT Health maintains an online record of access applications called a disclosure log. Your original access application, my decision and documents released to you in response to your access application will be published in the ACT Health disclosure log not less than three days but not more than 10 days after the date of this decision. Your personal contact details will not be published.

Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is

published in ACT Health's disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman
GPO Box 442
CANBERRA ACT 2601
Via email: ACTFOI@ombudsman.gov.au.

ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision.

Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal Level 4, 1 Moore St GPO Box 370 Canberra City ACT 2601 Telephone: (02) 6207 1740 http://www.acat.act.gov.au/

If you have any queries concerning ACT Health Directorate's processing of your request, or would like further information, please contact the FOI Coordinator on (02) 5124 9829 or email HealthFOI@act.gov.au.

Yours sincerely

Jamne Hammat

Executive Group Manager

People and Culture

July 2019



FREEDOM OF INFORMATION REQUEST SCHEDULE

Please be aware that under the *Freedom of Information Act 2016*, some of the information provided to you will be released to the public through the ACT Government's Open Access Scheme. The Open Access release status column of the table below indicates what documents are intended for release online through open access.

Personal information or business affairs information will not be made available under this policy. If you think the content of your request would contain such information, please inform the contact officer immediately.

Information about what is published on open access is available online at: http://www.health.act.gov.au/public-information/consumers/freedom-information

NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	File No
	"I would like documents related to the Independent Culture Review Panel;	FOI19/23
	 Correspondence between members of the Independent Health Culture Panel, the Minister for Health and Wellbeing and the CEO of Canberra Health Services and other senior officials in Canberra Health Services during the panel's existence and after the panel submitted its report. This also includes correspondence between the Minister, ACT Health and Canberra Health Services sparked by documents sent by members of the Independent Health Culture Panel to the Minister for Health and Wellbeing, ACT Health and Canberra Health Services. Reports prepared for the CEO of Canberra Health Services and other senior officials in Canberra Health Services related to the findings of the Independent Panel and implementation of its recommendations. 	

•	Documents related to the involvement of Canberra Health
	Services in a preparation of a response to the report of the
	Independent Panel on Health Culture.

- Communications strategy for the release of the Interim and final report on health culture and communications strategy and associated correspondence.
- Documents related to the initial meeting of the Culture Review
 Oversight Group on 28 March 2019 including agenda, minutes,
 notes, reports prepared for the meeting, action items and
 correspondence related to the work of the Oversight Group since
 28 March 2019. This does not include purely administrative
 details such as time and venue of the meeting."

Ref No	No of Folios	Description	Date	Status	Reason for non-release or deferral	Open Access release status
1.	1	Letter from Mick Reid to CEO	18 December 2018	Partial release	Schedule 2.2 (a) (xii) (xv)	YES
2.	2	Email from Mick Reid to CEO	7 January 2019	Partial release	Schedule 2.2 (a) (ii)	YES
3.	3 - 4	Email from CEO to Nicole Stevenson	9 January 2019	Partial release	Schedule 2.2 (a) (ii)	YES
4.	5 - 6	Email from CEO to Nicole Stevenson	16 January 2019	Partial release	Schedule 2.2 (a) (ii)	YES
5.	7 - 8	Email from Janine Hammat to CEO and attachment	18 January 2019	Full release		YES
6.	9 - 10	Email from CEOHealth to WorkplaceCultureReview	22 January 2019	Full release		YES

7.	1 - 12	Email from CHS Media to CEOHealth	29 January 2019	Full release		YES
8.	13 - 14	Email CHS DLO to Christine Whittall and Olivia Tzavalas and agenda	29 January 2019	Partial release	Schedule 2.2 (a) (ii) Out of scope	YES
9.	15 - 28	Email from Cynthia Douglas to CEO and attachments	30 January 2019	Partial release	Schedule 2.2 (a) (ii)	YES
10.	29	Letter to Mick Reid from CEO	February 2019	Partial release	Schedule 2.2 (a) (xii) (xv)	YES
11.	30	Email from Christina Grant to Nicole Stevenson	12 February 2019	Partial release	Schedule 2.2 (a) (ii)	YES
12.	31 – 33	Email from Tania Vlahos to CEOHealth and attachment	12 February 2019	Partial release	Schedule 2.2 (a) (xii) (xv)	YES
13.	34 – 36	Email from Christina Grant to Nicole Stevenson	13 February 2019	Partial release	Schedule 2.2 (a) (ii)	YES
14.	37 – 41	Email from Christina Grant to DGACTHealth, CEOHealth and Mark Dykgraaf and attachments	21 February 2019	Partial release	Schedule 2.2 (a) (ii)	YES
15.	42	Email from Christina Grant to Nicole Stevenson, Kanta Toraskar and Vanessa Dal Molin.	27 February 2019	Partial release	Schedule 2.2 (a) (ii)	YES
16.	43	Email from Christina Grant to Nicole Stevenson	28 February 2019	Partial release	Schedule 2.2 (a) (ii)	YES
17.	44 - 45	Email from Christina Grant to Vanessa Dal Molin	28 February 2019	Partial release	Schedule 2.2 (a) (ii)	YES

18.	46	Email from Christina Grant to Nicole Stevenson	28 February 2019	Partial release	Schedule 2.2 (a) (ii)	YES
19.	47 - 48	Email from Christina Grant to Nicole Stevenson and Vanessa Dal Molin	1 March 2019	Partial release	Schedule 2.2 (a) (ii)	YES
20.	49	Email from Christina Grant to Nicole Stevenson	1 March 2019	Partial release	Schedule 2.2 (a) (ii)	YES
21.	50 - 226	Email from Janine Hammat to CEO and attachment	12 March 2019	Full release		YES
22.	227 – 229	Email from Tania Vlahos to Kanta Toraskar, Nicole Stevenson and CEOHealth and attachment	27 March 2019	Partial release	Schedule 2.2 (a) (ii) (xii) (xv)	YES
23.	230 - 250	Email from Tania Vlahos to Kanta Toraskar, Nicole Stevenson and CEOHealth and attachment	1 April 2019	Partial release	Schedule 2.2 (a) (ii)	YES
24.	251 - 265	Email from Tania Vlahos to Kanta Toraskar, Nicole Stevenson, CEOHealth and Barb Reid and attachment	1 April 2019	Partial release	Schedule 2.2 (a) (ii)	YES
25.	266 - 281	Email from Janine Hammat to Nicole Stevenson and attachment	4 April 2019	Partial release	Schedule 2.2 (a) (ii)	YES
26.	282 - 283	Email from Tania Vlahos to Kanta Toraska and Nicole Stevenson	9 May 2019	Partial release	Schedule 2.2 (a) (ii)	YES
27.	284 - 291	Email from Charlotte Harper to CEOHealth and attachments	14 May 2019	Partial release	Schedule 2.2 (a) (ii)	YES
28.	292 - 306	Email from CEO (Olivia Tzavalas) to CEOHealth and attachments	16 May 2019	Full release		YES

29.	307 - 308	Email from Tania Vlahos to CEOHealth and Barb Reid and attachment	22 May 2019	Partial release	Schedule 2.2 (a) (ii)	YES
30.	309 - 310	Email from Tania Vlahos to CEOHealth and Barb Reid and attachment	23 May 2019	Partial release	Schedule 2.2 (a) (ii)	YES
31.	311 – 314	Email from Janine Hammat to CEOHealth and Nicole Stevenson and attachment	28 May 2019	Partial release	Schedule 2.2 (a) (ii) (xii) (xv)	YES
	Total No of Docs					

INDEPENDENT REVIEW INTO THE WORKPLACE CULTURE WITHIN ACT PUBLIC HEALTH SERVICES

CONFIDENTIAL

Ms Bernadette McDonald Chief Executive Officer Canberra Health Services

Dear Bernadette

Congratulations on your appointment!

As you will recall, it was agreed that I would write to the executives of the public ACT Health Services to ensure you are aware of areas of concern emerging from our deliberations.



I welcome the opportunity to discuss these areas with you if you wish.

Yours sincerely

Sullin

Mick Reid Chair

18 December 2018

From:

Mick Reid

Sent:

Monday, 7 January 2019 9:17 AM

To:

McDonald, Bernadette (Health)

Cc:

Subject:

Re: Review

Bernadette

Happy new year to you too!

Thanks for the heads up. I'll get Christina to follow up.

See you soon

Mick

Sent from my iPhone

On 7 Jan 2019, at 8:19 am, McDonald, Bernadette (Health) < Bernadette.McDonald@act.gov.au > wrote:

UNCLASSIFIED

Dear Mick,

Happy new year, I hope you have had a lovely Christmas.

Recently I have been speaking with a colleague from Western Health in Melbourne who described to me work they have been doing on culture. There are several aspects which they are getting great results from and have partnered with Deakin University to take a research approach.

I thought it may be interesting in terms of the review.

Regards

Bernadette

Bernadette McDonald

Chief Executive Officer

Canberra Health Services

Phone: 02 5124 2728 | Email: <u>bernadette.Mcdonald@act.gov.au</u> Building 24, Level 2, Canberra Hospital, Yamba Drive, Garran ACT 2605

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<image001.jpg>

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From:

McDonald, Bernadette (Health)

Sent:

Wednesday, 9 January 2019 10:22 AM

To:

Stevenson, Nicole (Health)

Subject:

RE: Review

UNCLASSIFIED

There is a contact at Western Health

She leads their organisational development function.

В

Bernadette McDonald Chief Executive Officer Canberra Health Services

Phone: 02 5124 2728 | Email: <u>bernadette.Mcdonald@act.gov.au</u> Building 24, Level 2, Canberra Hospital, Yamba Drive, Garran ACT 2605

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Canberra Health Services

From: Stevenson, Nicole (Health)

Sent: Wednesday, 9 January 2019 9:36 AM

To: McDonald, Bernadette (Health) <Bernadette.McDonald@act.gov.au>

Subject: FW: Review

UNCLASSIFIED

Let me know and I can get back to Christina 😥

Ta

From: Christina Grant

Sent: Tuesday, 8 January 2019 9:10 AM

To: Stevenson, Nicole (Health) < Nicole.Stevenson@act.gov.au >

Cc: Grant, Christina (Health) < Christina.Grant@act.gov.au >; Workplace Culture Review Submissions

<submissions@culturereviewacthealth.com>

Subject: FW: Review

Hi Nicole,

Mick has asked me to follow up with some information Bernadette was passing to him about the work Western Health in Melbourne is doing with Deakin University. I would be most grateful if you could advise how Bernadette would like to proceed in sharing the information e.g. is there a contact as Western Health or would she prefer to meet / have a teleconference with Mick to discuss?

Thanks Christina

From: Mick Reid

Sent: Monday, January 7, 2019 9:17 AM

To: McDonald, Bernadette (Health) < Bernadette. McDonald@act.gov.au>

Cc: Christina Grant

Subject: Re: Review

Bernadette
Happy new year to you too!
Thanks for the heads up. I'll get Christina to follow up.
See you soon
Mick

Sent from my iPhone

On 7 Jan 2019, at 8:19 am, McDonald, Bernadette (Health) < Bernadette.McDonald@act.gov.au> wrote:

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I thought it may be interesting in terms of the review. Regards

Bernadette

Bernadette McDonald Chief Executive Officer Canberra Health Services

Phone: 02 5124 2728 | Email: <u>bernadette.Mcdonald@act.gov.au</u> Building 24, Level 2, Canberra Hospital, Yamba Drive, Garran ACT 2605

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<image001.jpg>

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From:

McDonald, Bernadette (Health)

Sent:

Wednesday, 16 January 2019 8:18 AM

To:

Stevenson, Nicole (Health)

Subject:

FW: email from Mick Read to Bernadette McDonald [SEC=UNCLASSIFIED]

Follow Up Flag:

Follow up

Due By:

Wednesday, 16 January 2019 4:00 PM

Flag Status:

Completed

UNCLASSIFIED

Nic, I found it, can we draft a letter to Mick saying we received it and thanks.

b

Bernadette McDonald

Chief Executive Officer

Canberra Health Services

Phone: 02 5124 2728 | Email: bernadette.Mcdonald@act.gov.au

Building 24, Level 2, Canberra Hospital, Yamba Drive, Garran ACT 2605

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Canberra Health Services

From: CEOHealth

Sent: Wednesday, 9 January 2019 4:56 PM

To: McDonald, Bernadette (Health) <Bernadette.McDonald@act.gov.au>

Subject: FW: email from Mick Read to Bernadette McDonald [SEC=UNCLASSIFIED]

UNCLASSIFIED

Hi Bern,

For you to action. Let me know if there is anything I can do.

Olivia

From: Grant, Christina (Health)

Sent: Wednesday, 9 January 2019 2:41 PM To: CEOHealth < CEOHealth@act.gov.au>

Cc: WorkplaceCultureReview < WorkplaceCultureReview@act.gov.au >; Mick Reid

Subject: email from Mick Read to Bernadette McDonald [SEC=UNCLASSIFIED]

Good afternoon Bernadette,

Please find below and email from Mick Reid in relation to the review.

Please let me know if you have any questions.

Regards

Christina

Dear Bernadette, I hope this message finds you well. Previously we have spoken about bullying and harassment issues in the of the Canberra Hospital. I am writing only to let you know that a staff member from that team, has written to me asking that I raise with you the possibility of her being offered a transfer to another part of the Hospital. I understand that has been on a period of extended long-service leave (related to this bullying and harassment) which is now exhausted. When faced with returning to the same workplace has decided to resign effective rather than return. I appreciate these situations are not always easy to fix quickly but thought I would bring the matter to your attention in case you wished to intervene. I have previously made clear to that while I am happy to pass this matter one, as the Chair of the Review I have no power to intervene in these matters. Regards, Mick Mick Reid, Chair Independent Review into the Workplace Culture within ACT Health

From: Hammat, Janine (Health)

Sent: Friday, 18 January 2019 7:31 AM **To:** McDonald, Bernadette (Health)

Cc: Stevenson, Nicole (Health); CEOHealth; Canberra Health Services People and Culture

Subject: Draft Letter for Independent Review

Attachments: Health Letter.docx

UNCLASSIFIED For-Official-Use-Only

Hi Bernadette – please see draft letter attached as requested.

Regards,

Janine

Janine Hammat

Executive Director People and Culture

Canberra Health Services

Phone: 02 6205 1086 | Email: janine.hammat@act.gov.au Level 3, 2-6 Bowes St, WODEN ACT 2606

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Canberra Health Services

Mr Mick Reid Chair Independent Review

Dear Mick

Thank you for your letter dated 18 December 2018 highlighting the number of areas raised as having a poor workplace culture and/or ongoing issues with bullying and harassment. Thank you also for your congratulations on my appointment.

Further detail would be useful to better understand the concerns raised and I welcome any additional information you can provide. For example, a number of the listed areas are very large, and it would be useful to know if the concerns raised came from specific units within the larger Divisions listed.

As a matter of priority, my intention is to conduct further diagnostics and scoping to fully understand the workplace cultural issues and implement appropriate interventions to address the identified issues. It is my intention to follow up with each of the areas identified to work through the specific issues. This work will be led by Janine Hammat, Executive Director, People and Culture, Canberra Health Services (CHS).

I have implemented restorative processes in some areas already identified since I commenced in CHS and I intend to further develop and implement a culture strategy for CHS over the coming months.

As you may also be aware, Canberra Health Services, will be conducting a whole of organisation Workplace Culture Survey this year. The survey data and analysis will no doubt help to further inform and support our workplace culture improvement activities.

Your sincerely

Bernadette McDonald Chief Executive Officer Canberra Health Services

18 January 2019

From:

CEOHealth

Sent:

Tuesday, 22 January 2019 5:51 PM

To:

WorkplaceCultureReview

Cc:

Stevenson, Nicole (Health)

Subject:

Letter of Response - Workplace Culture - 21 January 2019 [SEC=UNCLASSIFIED]

Attachments:

Letter of response to Mr Mick Reid - Workplace Culture - 21 January 2019.pdf

Good afternoon Mr Reid

Please find attached correspondence from Bernadette McDonald in response to your letter of 18 December 2018.

Kind regards

Christine Whittall | Acting Executive Officer
Phone: 5124 5804 | christine.whittall@act.gov.au
Office of the Chief Executive Officer | Canberra Health Services
PO Box 11, WODEN ACT 2606 | act.gov.au



Canberra Health Services

Mr Mick Reid Chair Independent Review Panel

Dear Mr Reid

Thank you for your letter dated 18 December 2018 highlighting the number of areas raised as having a poor workplace culture and/or ongoing issues with bullying and harassment. Thank you also for your congratulations on my appointment.

Further detail would be useful to better understand the concerns raised and I welcome any additional information you can provide. For example, a number of the listed areas are very large, and it would be useful to know if the concerns raised came from specific units within the larger Divisions listed.

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I have implemented restorative processes in some areas already identified since I commenced at CHS and I intend to further develop and implement a culture strategy for CHS over the coming months.

As you may also be aware, Canberra Health Services will be conducting a whole of organisation Workplace Culture Survey this year. The survey data and analysis will no doubt help to further inform and support our workplace culture improvement activities.

Your sincerely

Bernadette McDonald Chief Executive Officer Canberra Health Services

Bmo mulel

2 | January 2019

From: Harper, Charlotte (Health) on behalf of Canberra Health Services Media

Sent: Tuesday, 29 January 2019 3:44 PM

To: CEOHealth

DDGClinical; Whittall, Christine (Health); Tzavalas, Olivia (Health); Alexander, Tonia

(Health)

Subject: FW: Plan for independent review release [SEC=UNCLASSIFIED]

Importance: High

Hi Bernadette,

Cc:

Please see Minister's timeline re Culture Review below.

Charlotte

From: Johnston, ClaireV

Sent: Tuesday, 29 January 2019 3:11 PM

To: Harper, Charlotte (Health) < Charlotte. Harper@act.gov.au>; Pulli, Tracey (Health) < Tracey. Pulli@act.gov.au>; Dal

Molin, Vanessa (Health) < Vanessa. DalMolin@act.gov.au>

Cc: Sendaba, Bethel < Bethel. Sendaba@act.gov.au>; Attridge, Vanessa < VanessaS. Attridge@act.gov.au>; Phillips,

Georgia <Georgia.Phillips@act.gov.au>; Nock, Thomas <Thomas.Nock@act.gov.au>

Subject: Plan for independent review release

Importance: High

Hi all

I've just been confirming the plan for the review's interim report release later this week.

Confirming the media will be given the report around **4pm on Thursday** under embargo **until 11am Friday**. A doorstop will then take place with the Minister and Panel Chair.

Happy to discuss. Let me know what your plans are with staff emails.

INTERIM REPORT PLAN:

29 Jan	 Review Panel gives report to CHS, ACTH, Calvary in lock up for final OK.
30 Jan	Review Panel gives report to Minister.
	 9:30AM: Minister receives briefing from ACTH, CHS.
31 Jan	 4PM: Minister's office provides report to media under strict embargo
	for 11am 1 Feb.
1 Feb	 9AM (TBC): Email goes out to all Health Staff from respective agencies.
	 11AM: Embargo lifts and report goes up on ACT Health website.
	 11AM: Minister's office sends out Minister's media release.
	 11AM: Doorstop with Mick Reid and Minister at Legislative Assembly.
	TBC: CHS, ACTH and Calvary to do their own media as required
	(statements and/or doorstops)

DOCUMENTS:

Documents	To be prepared by

Talking points and Q and A	ACT Health / CHS
Q and A	МО
Email for Health Staff	ACT Health / CHS / Calvary
Media statements	ACT Health / CHS / Calvary
Minister's media release	МО
Letter for stakeholders	МО

Cheers Claire

Claire Johnston | Deputy Director, ACT Government Communications Unit Meegan Fitzharris MLA

Minister for Health & Wellbeing | Minister for Higher Education | Minister for Medical and Health Research | Minister for Transport | Minister for Vocational Education and Skills

Phone: 02 6205 0022 | Mobile: 0452 597 459 | Email: <u>ClaireV.Johnston@act.gov.au</u>

From:

Pini, Sallyanne (Health) on behalf of CHS DLO

Sent:

Tuesday, 29 January 2019 5:40 PM

To:

Whittall, Christine (Health); Tzavalas, Olivia (Health)

Cc: Subject: CEOHealth; Attwood, Courtney (Health); CHS DLO CHS Meeting Papers - ACT HD and CHS Executive Meeting with Minister Fitzharris

Attachments:

CHS Papers - ACTHD & CHS Executive Meeting with Minister Fitzharris - 30 January

2019.pdf

UNCLASSIFIED For-Official-Use-Only

Hi all – see attached papers for the Minister's meeting tomorrow. Apologies for the delay in sending.

Sallyanne Pini | Directorate Liaison Officer | Canberra Health Services

Phone: 02 620 55030 | Mobile: Email: CHS

Email: CHSDLO@act.gov.au

Office of Meegan Fitzharris MLA | Minister for Health and Wellbeing | ACT Government

Office of Shane Rattenbury MLA | Minister for Mental Health and Justice Health | ACT Government

Legislative Assembly Building, London Circuit | GPO Box 1020, Canberra ACT 2601



ACT Health



AGENDA MINISTER FOR HEALTH AND WELLBEING MEETING

Date Wednesday 30 January 2019

Time 9:30am - 11:30am

Location Minister Fitzharris' Office

Joint ACT Health Directorate and Canberra Health Services – 60 mins

1. Independent Review of Culture in the ACT Health System

Michael De'Ath
Chris Bone

For Discussion

From: Douglas, Cynthia (Health)

Sent: Wednesday, 30 January 2019 11:35 AM

To: McDonald, Bernadette (Health)

Cc: CEOHealth; Harper, Charlotte (Health); Greenaway, Elaine (Health)

Subject: FOR URGENT ACTION: Independent Review into the Workplace Culture within ACT

Public Health Services

Attachments: Issues management plan template.docx; all staff messages (EG edits).docx; DRAFT

Media release - Interim Report of the Independent Review into Workplace Culture

welcomed.docx

Importance: High

UNCLASSIFIED Sensitive

Hi Bernadette

Please find attached for your comment/review the following documents around the Review into Workplace Culture that Elaine Charlotte and I have made some comments in track changes mode:

- Joint all staff message to be released at 3.00 pm on Wednesday 30 January, informing staff of the Interim Report's impending release
- Joint all staff message to be released at 10.30 am on Friday 1 February, before a media embargo is lifted on the report document
- Joint media statement to be released after 11.00 am on Friday 1 February, after the Minister's media release has been issued.

You have not been asked to review or approve the Issues Management Plan, which includes the communications approach. I am concerned about the approach ACT Health have taken, which seems to position ACT Health and an extensive governance structure as controlling culture change activities for both CHS and Calvary. This belief that culture can be shaped by people outside an organisation is out of step with the latest research and industry best practice which would strongly argue that culture can only be fixed from within and organisation through good leadership and alignment of staff around:

- Vision: where the organisation wants to go together
- · Mission: what they do together
- Guiding behavioral principles: how they expect all associates to behave

The tone of the materials produced by ACT Health and the approach they propose is very bureaucratic and I suspect will be met with cynicism from both clinical organisations.

Is it the intention that any cultural work we do in the future will need to be developed and/or approved by ACT Health and the various committees that form part of their governance structure?

Kind Regards

Cynthia

Cynthia Douglas Director Communication and Government Relations Unit Canberra Health Services Ph 02 6207 9149 From: Southwell, Hoami (Health)

Sent: Tuesday, 29 January 2019 7:00 PM

To: Douglas, Cynthia (Health) < Cynthia.Douglas@act.gov.au >; Harper, Charlotte (Health)

<<u>Charlotte.Harper@act.gov.au</u>>

Cc: Greenaway, Elaine (Health) < Elaine.Greenaway@act.gov.au >; Dal Molin, Vanessa (Health)

< Vanessa.DalMolin@act.gov.au >; Jelbart, Merryn (Health) < Merryn.Jelbart@act.gov.au >; Pulli, Tracey (Health)

<Tracey.Pulli@act.gov.au>

Subject: For action: Independent Review into the Workplace Culture within ACT Public Health Services

Importance: High

UNCLASSIFIED Sensitive

Good afternoon Cynthia and Charlotte,

As you would know, the **Independent Review into the Workplace Culture within ACT Public Health Services** is scheduled to deliver its interim report to the Minister for Health and Wellbeing on 31 January 2019, with a final report due by the end of March 2019 (or earlier).

We are working with the Minister's Office and across organisations to prepare media and communications for the Interim Report's public release. This includes joint messaging from Director General ACT Health Directorate, CEO Canberra Health Services and CEO Calvary ACT Hospitals.

Attached is the Issues Management Plan for your information and reference.

Please find the following joint materials for your urgent review and CEO's approval:

- Joint all staff message to be released at 3.00 pm on Wednesday 30 January, informing staff of the Interim Report's impending release
- Joint all staff message to be released at 10.30 am on Friday 1 February, before a media embargo is lifted on the report document
- Joint media statement to be released after 11.00 am on Friday 1 February, after the Minister's media release has been issued.

In reviewing these materials, please mark up any changes in track changes mode.

We're working to some very tight frames. **The deadline for approvals is 11.30am 30 January 2019.** The Minister and Leadership team are aware of these materials, their contents and the need for urgent approval.

Please note: Information contained within these documents is classified as sensitive until release, and should not be circulated other than for the purposes of approval.

Thank you for your assistance. Please get in touch if you have any questions.

Kind regards,

Hoami Southwell

Communication Manager
Communication and Government Relations Branch
ACT Health Directorate
P: 02 5124 9468
Level 3, 2-6 Bowes St, Woden ACT 2606

I work part-time Monday - Thursday

ISSUES MANAGEMENT PLAN



Independent Review into the Workplace Culture within ACT Public Health Services

The Independent Review into the Workplace Culture within ACT Public Health Services is scheduled to deliver its interim report to the Minister for Health and Wellbeing on 31 January 2019, with a final report due by end March 2019 (or earlier).

Minister: Minister for Health and Wellbeing

Line area: Office of the Director General

Background/Purpose

On 10 September 2018, the Minister for Health and Wellbeing, Meegan Fitzharris MLA, issued a statement on workplace culture which included several new initiatives designed to build on the work that has already been undertaken to improve culture within the ACT public health system. This included the establishment of an Independent Panel to conduct a review of culture into the ACT Public Health System.

The Panel is required to deliver an interim report to the Minister by 31 January 2019, with a final report due on or before the end of March 2019.

The Review Panel's report will generate significant interest from staff, stakeholders, media and the public.

It will be important that there are clear messages provided to staff around process, and there is a strong public response from Government and the Executive Leadership Team from within the three primary health services (ACT Health, Canberra Health Services and Calvary Health Care).

In terms of the Government's response to recommendations, it is likely that there will be a need to involve the Chief Minister, Treasury and Economic Development Directorate to address any potential recommendations targeted at a whole of government level.

This Plan has been developed to ensure that there is a coordinated and consistent approach in the handling of the response to the interim report. This Plan will be reviewed in preparation for the delivery of the final report.

Key messages

The below key messages will be used for internal and external communications where appropriate.

 On 10 September 2018, the Minister for Health and Wellbeing announced the establishment of an Independent Review into the Workplace Culture within ACT Public Health Services.

ISSUES MANAGEMENT PLAN



- On 21 September 2018, the Government announced the appointment of an Independent Panel to lead the Review. The Panel comprised of Mr Mick Reid (Chair), Ms Fiona Brew and Professor David Watters (Members) and was supported by an independent secretariat.
- The Panel has delivered its Interim Report to the Minister for Health and Wellbeing.
- The Government welcomes the report and will now take the time to carefully consider its contents and determine how best to implement the recommendations.
- The Government supports in-principle all recommendations made at this stage, and will
 commence the process of effective and efficient implementation across all our public health
 services.
- The Government will await the delivery of the Panel's final report before providing a formal and final response.
- The ACT Government invests significantly in the delivery of public health services to ensure safe, high quality healthcare for the ACT community and our surrounding region. In addition to taking care of our community, we are also working hard to ensure that our staff are looked after.
- Improving workplace culture and staff engagement within our healthcare system is a priority for the ACT Government.
- The issue of culture within public health services has been raised as a concern at a national level. The ACT Government is now leading the way in addressing these concerns for the ACT.
- The report highlights that there have already been a number of positive changes made, and the new Executive team across the ACT public health system is committed to further improvements.
- We are confident that the Panel's report will provide the momentum needed to continue to improve our public health system.
- It will not be appropriate to discuss individuals' circumstances and feedback.

Risks and sensitivities

The below table outlines the risks and sensitivities

Staff are not appropriately informed of the Review's developments, particularly the upcoming release of the interim and final reports Staff become anxious about the findings of the Review and media response MITIGATION STRATEGIES All staff messages will be prepared to provide staff with early warning of pending release of the reports. Ensure staff receive information prior to external media reporting on the interim report. Staff messages to include supports that are available to them.

ISSUES MANAGEMENT PLAN



		abo pro	nagers to be pre-briefed by the Leadership team ut the upcoming public release. Information to be vided to assist them to talk to their staff about process.
3.	Criticism in relation to the Review and how it was undertaken, and whether it will effect real change. • Criticism that the Review should have been a Board of Inquiry.	and Development stro hea tole the syst	Chair of the panel will be available to brief media stakeholders. elop clear messages that communicate there the ing willingness to look after staff across the public lth system. This includes messaging about zero trance to inappropriate workplace behaviours and new executive team across the public health tem who are prioritising work to improve kplace culture.
4.	Criticism that individual concerns were not effectively managed by the Panel's members.	esta • Ind app	relop clear messaging that the Review was not ablished to investigate individual concerns. vidual matters would have (if Panel deemed ropriate) been referred to the appropriate hority for investigation.

Communication action plan

The below table outlines the internal and external communications approach

Timing	Activity/opportunity	Approach
Key events / media a	approaches	
29 January 2019 10.30am – 1.00pm	A lock up has been arranged by the Panel. Health staff in attendance will be: Director General, ACT Health, CEO, CHS and CEO of Calvary ACT Hospitals	This meeting has been arranged by the Review Panel to brief attendees on the interim report.
29/30 January 2019	Minister for Health and Wellbeing to receive a copy of the embargoed report from the Panel.	The Chair of the Panel will be available to take calls and further discuss the contents of the report, if required.
30 January 2019	Minister for Health and Wellbeing and Minister for Mental Health to be briefed by Director General on proposed approach to implement review recommendations	Brief to be provided to Ministers by 30 January 2019.
30 January 2019 3.00pm release	 DG/CEO/CEO of Calvary ACT Hospitals message: It is recommended that a coordinated message is sent to all staff across the ACT health system reminding them that the Review Panel is due to provide their interim report to Government by 31 January 2018. 	See draft message attached.

ISSUES MANAGEMENT PLAN



31 January 2019 1.30pm – 2.00pm 31 January 2019 4pm to media	DG to meet with Executive Team (by teleconference) to advise of the planned release of the report and potential media on 1 February. Cascading messaging for managers to be emailed to all executives who will be asked to arrange meetings with their staff on 1 February 2019. Minister for Health and Wellbeing to release the interim report to media (under-embargo until 11am on 1 February 2019)	 CEO and CEO of Calvary ACT Hospitals may also wish to plan a similar meetings. See attached dot points for the teleconference (for DG, CEO and CEO of Calvary ACT Hospitals) See attached cascading message for executives to use in briefing staff Minister's Office to arrange release of the report. ACT Health to arrange for the report to be placed onto the ACT Health website and made live from 1 February 2019.
1 February 2019 10am (1 hour prior to Media Embargo lift)	All staff message from DG, CEO and CEO of Calvary ACT Hospitals advising of the release of the report and details on how to access – plus process for implementation of recs/next steps	See draft message attached. Link to report on Health Hub and Calvary intranet.
1 February 2019 10am (or just prior to above message going being sent) 1 February 2019 11am 1 February 2019	Interim report published to the Culture Review page of the ACT Health Intranet Interim Report published to the ACT Health Internet page (public) Minister's Media Release to be issued:	Draft website content to be developed Draft website content to be developed
11am 1 February 2019 11am	Minister and Chair of the Panel to do media Door Stop	Advice from MO is that no health staff will be required for stand up.
1 February 2019 11am release (concurrently with embargo lift)	DG, CEO and CEO of Calvary ACT Hospitals to issue a joint media statement responding to the interim report — to be provided to media under embargo on 31 January 2019. Only if required: DG, CEO — media stand-up to be coordinated Stand up to be held at 6 Bowes Street, Level 5 conference room.	A joint statement from the three leaders will demonstrate that there is a cohesive and coordinated response to the Review of Culture. • See draft message attached.
4 – 5 February 2019	We understand that the Review Panel will meet with stakeholders. • Meeting arranged with DG, CEO and CEO of Calvary ACT Hospitals on 5 February from 1pm – 2pm	 These meetings will be arranged directly by the Review Panel secretariat. No health involvement required. We understand that the Chair of the Panel will have no further direct engagement with staff.

ISSUES MANAGEMENT PLAN



Late February/early March	Review Panel to provide the final report to Minister	This is an estimated timeframe.
Late February/early March	Briefing to be prepared by ACT Health Directorate for Ministers as soon as the report can be accessed. Support for Ministers in relation to any media and communication requirements etc will also be provided.	Briefing to be developed within a day of receiving the final report. Discussions to take place with the Minister's Offices in relation to media requirements
Late February/early March	DG/CEO/ CEO of Calvary ACT Hospitals message: It is recommended that a coordinated message is sent to all staff advising of the finalisation of the Review's report. At this stage, it is proposed that staff forums are arranged. DG/CEO/CEO of Calvary ACT Hospitals to arrange their own forums and dates for their staff.	Draft message to be developed.

Approvals

Action officer/s: Vanessa Dal Molin - ext. 49401

Communications:

- Internal Communications Merryn Jelbart ext. 49649
- Media Tracey Pulli ext. 53708

Clearance -

Director General, ACT Health:

Chief Executive Officer, Canberra Health Services

Draft message to all ACT Health, CHS and Calvary staff from:

- Director General ACT Health,
- Chief Executive Officer, Canberra Health Services, and
- Chief Executive Officer, Calvary ACT Hospitals

To be released 30 January 2019 - 3.00pm release

Dear colleagues

You will be aware that on 10 September 2018, the Minister for Health and Wellbeing announced the establishment of an Independent Review into the Workplace Culture within ACT Public Health Services. On 21 September 2018, the Government released the Review's terms of reference of the review and announced the appointment of an independent pPanel tasked to lead the review it.

The terms of reference for the <u>rReview</u> require the <u>pPanel</u> to provide their Interim Report to the Minister for Health and Wellbeing by 31 January 2019. -We understand that the Panel is on track to do this <u>and that</u>. We further understand that <u>t</u>the Minister is likely to release the Interim Report by the end of this week.

Following the release of the Interim Report Wwe will carefully consider the contents of the Interim Report its contents and recommendations and recommendations. We will respond appropriately and establish a formal plan for implementation. Further details will be provided to you as soon as they are available.

We would like to assure you that we will be seriously considering the contents of the report and any recommendations made. This report provides us with an important opportunity to implement positive change within our organisations, building on the improvements that we have already achieved. We will be looking to all staff to assist in this process.

We are anticipating significant interest in the release of the \underline{r} Report, from staff, stakeholders and the media. We encourage you to discuss any concerns you may have with your \underline{e} Executive leaders and line \underline{a} rea-managers. Other options for support include:

- talking to a <u>Respect Equity and Diversity (RED) contact officer</u>
- contacting your relevant <u>Employee Assistance Program (EAP)</u> for free, confidential counselling
- contacting the following Human Resources (HR) Units:

Canberra Health Services Workforce Relations Unit	Telephone: 5124 9610 Email: chswr@act.gov.au
ACT Health Directorate HR Unit	Telephone: 5124 9201 Email: <u>HDHR@act.gov.au</u>
Calvary Health Care HR Unit	Telephone: Email:

- beyondblue support service call 1300 22 4636 or visit <u>www.beyondblue.org.au</u>
- Lifeline call 13 11 14 or visit www.lifeline.org.au
- MensLine Australia call 1300 789 978 or visit www.mensline.org.au
- Suicide Call Back Service call 1300 659 467 or visit <u>www.suicidecallbackservice.org.au</u>
- SANE Australia Helpline call 1800 18 SANE (7263) or visit www.sane.org

We will provide you with further more information as soon as it becomes available.

Draft message to all ACT Health, CHS and Calvary staff from:

- Director General ACT Health,
- Chief Executive Officer, Canberra Health Services and
- CEO, Calvary ACT Hospitals

To be released 1 February 2019 - 10.30am

Dear colleagues

Earlier this week we wrote to you about the upcoming release of the Interim Report of the Independent Review into the Workplace Culture within ACT Public Health Services.

We can now advise that the Minister for Health and Wellbeing will publicly release the report later this morning. The <u>rReport</u> is now available for all staff to review [insert hyperlink]. We encourage all staff to you to to take the time to read <u>itthe Interim Report in detail.</u>

Our understanding is that tThe Review Panel has indicated that they will be-meeting with stakeholders over the coming week and. It will then look to finalise the rReport without delay.

We welcome the Panel's Interim Report and will now carefully consider its contents and recommendations. — We will await the final report before developing a formal response. In the meantime, we are commencing work to establish an Implementation Team, including the recruitment of a Project Lead, who will be tasked with developing a Territory wide project plan to implement the recommendations. As the recommendations span across all public health services, the Implementation Team will sit within the ACT Health Directorate, working closely with Canberra Health Services and Calvary Health Care.

There will be a strong governance framework in place to -ensure there is alignment across all organisations and levels of leadership and to established to oversight and drive the implementation of the Report's-recommendations in the report. This will-, includeing the establishment of an Implementation Response Committee, to be chaired by the Minister for Health and Wellbeing, and an Implementation Steering Group, chaired by the Director General, ACT Health. Terms of Reference will be developed for both of these groups, and will be shared with you.

As we have previously communicated to you, we will be seriously considering the contents of both the Interim and Final Reports, including all of the recommendations are taking the report seriously—

These reports it provides us with a significant opportunity to all work together, across organisations, to improve our workplace culture and staff engagement.

The Government makes a significant investment in the delivery of public health services to ensure safe, high quality care is provided for the ACT community and the surrounding region. -Whilst we are taking care of our community, we will also be working hard to ensure that all our staff are looked after and are provided with every opportunity to excel.

This is our opportunity to effect change in our working environments, and environments and lead the nation in developing a positive workplace culture across our health system. —We are already seeing initiatives being rolled out that are designed to improve our workplace culture and provide you with additional mechanisms to <u>raise and</u> address your concerns.

If you have any questions in relation to about the Interim Report or the implementation process, please raise these with your managers in the first instance or email CultureReviewImplementation@act.gov.au

Staff forums will be held across the three organisations once the Final Report is released. <u>Further More information details on about these forums will be provided soon.</u>



Media release

Under embargo until 11am Friday 1 February 2019

Leaders of ACT public health system welcome Interim Report on workplace culture

The ACT Health Directorate, Canberra Health Services and Calvary Healthcare have today welcomed the release of the Interim Report of the Independent Review into the Workplace Culture within ACT Public Health Services pranel today.

The Independent Review into the Workplace Culture within ACT Public Health Services into workplace culture has been Formatted: Font: Not Bold important for our public health system and for the staff who work in our health services.

The Interim Report is being taken very seriously. All recommendations have been accepted in-principle, with the ACT Health Directorate to lead a territory-wide response to the Independent Review.

The implementation of recommendations will be supported by the establishment of a new implementation Steering Group and Team.

The Steering Group will include the Director-General of ACT Health and the CEO's of Canberra Health Services and Calvary ACT Hospitals to ensure work continues to be given the highest priority across the organisations. Recruitment of the Implementation Team, which will operate for three years, will begin shortly.

The Minister for Health and Wellbeing will also Chair a high level Implementation Response Committee who which will be tasked with oversighting the implementation process and ensuring that momentum in delivering recommendations is maintained.

In addition, ACT Health, Canberra Health Services and Calvary Healthcare will continue to work with the Independent Review Panel to better understand areas of concern identified as part of the Interim Report and develop further initiatives to address specific issues raised.

ACT Health Directorate Director-General Michael De'Ath said ACT Health was absolutely committed to improving workplace culture and staff engagement across our public health services.

"The Interim Report released today provides the opportunity to effect real change within the working environments of our health services," Mr De'Ath said.

"We are taking the report's findings very seriously. Through the governance processes that will be established, we will ensure recommendations are implemented effectively and efficiently. We will also ensure staff are appropriately engaged in the process.

"We have strong values and a lot of dedicated and hardworking people within our organisations and it's important that we also acknowledge the many positives that are highlighted in the Interim Report.

"With the work that has been underway over the past 12 months, we are already seeing a shift towards a more positive workforce culture. We will continue to build on this as we begin to implement the recommendations."

Canberra Health Services CEO Ms Bernadette McDonald said it was clear from the Interim Report that while the organisation has made significant inroads to address culture issues, there was still much work to do.

"To continue providing the high standard of care Canberrans have come to expect from our public health system, we must care for the people who deliver it," Ms McDonald said.

"Ensuring staff feel valued, can express their views without fear or favour and can work together effectively is of the utmost importance for me as the CEO.

"Initiatives already underway to address workplace culture include the introduction of an Employee Advocate role, regular staff forums and the formation of an Occupational Violence Working Group.

"Over the next three months, we will progress the development of vision and values for Canberra Health Services as a new organisation. The outcomes from the Independent Review will inform this work."

The CEO of Calvary ACT Hospitals Ms Barbara Reid said her organisation would work closely with ACT Health to support the implementation of recommendations at Calvary public hospital.

"INSERT," Ms Reid said.

"INSERT"

Statement ends

Media contact/s:

ACT Health

M 0403 344 080

M 0466 948 935

E healthmedia@act.gov.au E chsmedia@act.gov.au

Canberra Health Services

Calvary Healthcare

M XXXX XXX XXX

ACT Government | ACT Health Directorate

GPO Box 158, Canberra ACT 2601

0403 344 080



www.health.act.gov.au



Mr Mick Reid Chair Independent Review Panel

Dear Mr Reid

Thank you for your letter of 12 February 2019 regarding

I have asked my Executive Assistant to arrange a time to discuss this with you via phone next week.

I appreciate you raising this issue with me and look forward to discussing with you in further detail.

Your sincerely

Bernadette McDonald Chief Executive Officer Canberra Health Services

February 2019

From:

Grant, Christina (Health)

Sent:

Tuesday, 12 February 2019 9:55 AM

To:

Stevenson, Nicole (Health)

Subject:

Questions from the Chair [SEC=UNCLASSIFIED]

Importance:

High

Hi Nicole,

I hope this message finds you well and sorry to bother you.

Mick has asked me to quickly request a form of words (maybe 2 or 3 sentences) that describe the new arrangements CHS is putting in place with ANU to cover salary arrangements for academic clinicians. My understanding from the meeting last week is that CHS has negotiated for ANU to pick up the bill in some cases?

I am sorry but the panel is now working feverishly to prepare the final report as they have agreed to deliver it early to the Minister. As a result I will need the words in the next day or so - It would be great if this new arrangement could be reflected.

Please let me know if this is problematic or if there are any questions.

Regards

Christina

Christina Grant | Director

Phone: 6207 3043 | Mobile: Email: christina.grant@act.gov.au

Office of the Review | Independent Review into the Workplace Culture within ACT Public Health Services

2 Bowes St, Philip, ACT 2602 | GPO Box 825, Canberra, ACT 2601

www.health.act.gov.au/Culture-Review

From:

Vlahos, Tania (Health)

Sent:

Tuesday, 12 February 2019 1:58 PM

To:

CEOHealth

Cc:

WorkplaceCultureReview; Stevenson, Nicole (Health)

Subject:

Referral from Mick Reid 12 Feb 2019

Attachments:

Chair to CEO re referrals Feb 19.pdf

UNCLASSIFIED

Dear CEO CHS

Please find attached a letter from Mr Mick Reid.

Kind regards

Tania

Tania Vlahos | Senior Project Officer

Phone: 6207 3013 | Email: tania.vlahos@act.gov.au or

Office of Review | Independent Review into Workplace Culture within ACT Public Health Services

Level 2, 2 Bowes St, WODEN ACT 2606 | PO Box 17, WODEN, ACT 2606

Office of the Review ph: 6205 9555 www.health.act.gov.au/Culture-Review

INDEPENDENT REVIEW INTO THE WORKPLACE CULTURE WITHIN ACT PUBLIC HEALTH SERVICES

CONFIDENTIAL

Ms Bernadette McDonald Chief Executive Officer Canberra Health Services

Dear Bernadette

As you will recall, it was agreed that I would write to the executives of the ACT public health services to ensure you are aware of areas of concern emerging from our deliberations.

I write to you about an issue that has been highlighted in the context of the feedback following the release of the Interim Report. That is,

I welcome the opportunity to discuss this further with you if you wish.

Yours sincerely

Mick Reid

Chair

12 February 2019

Sudin

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www.health.act.gov.au | Phone: 132281 | Publication No XXXXX

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From:

Grant, Christina (Health)

Sent:

Wednesday, 13 February 2019 9:25 AM

To:

Stevenson, Nicole (Health)

Subject:

RE: Questions from the Chair [SEC=UNCLASSIFIED]

Great thanks very much!

From: Stevenson, Nicole (Health)

Sent: Wednesday, 13 February 2019 9:24 AM

To: Grant, Christina (Health) < Christina. Grant@act.gov.au> **Subject:** RE: Questions from the Chair [SEC=UNCLASSIFIED]

UNCLASSIFIED

Morning, sorry for the delay in responding..

What about???? Canberra Health Services and the Australian National University are working collaboratively on jointly funded appointments.



From: Grant, Christina (Health)

Sent: Tuesday, 12 February 2019 3:54 PM

To: Stevenson, Nicole (Health) < <u>Nicole.Stevenson@act.gov.au</u> > **Subject:** RE: Questions from the Chair [SEC=UNCLASSIFIED]

Thanks Nicole,

I appreciate you point – I guess the challenge is having enough in the statement to address the concerns raised with the Panel.

How about: "Canberra Health Services and the Australian National University are working collaboratively on shared appointments and funding arrangements."

Is that to specific?

Christina

From: Stevenson, Nicole (Health)

Sent: Tuesday, 12 February 2019 3:12 PM

To: Grant, Christina (Health) < Christina.Grant@act.gov.au **Subject:** RE: Questions from the Chair [SEC=UNCLASSIFIED]

UNCLASSIFIED

Hi Christina

Bernadette would prefer to not to specifically mention how these roles are funded. They will be jointly funded as they are joint appointments however there has been no solid decision on what this will look like.

Nic

From: Grant, Christina (Health)

Sent: Tuesday, 12 February 2019 2:31 PM

To: Stevenson, Nicole (Health) < <u>Nicole.Stevenson@act.gov.au</u> > **Subject:** RE: Questions from the Chair [SEC=UNCLASSIFIED]

Thanks Nicole!

Sorry to harp on this point but the Chair has specifically asked about funding. Can I confirm if the shared appointments included shared funding arrangements where ANU pays some or all of the academic portion of the clinician's salary?

Regards Christina

From: Stevenson, Nicole (Health)

Sent: Tuesday, 12 February 2019 2:28 PM

To: Grant, Christina (Health) < Christina.Grant@act.gov.au Subject: RE: Questions from the Chair [SEC=UNCLASSIFIED]

UNCLASSIFIED

Hi Christina

See words below that can be used in the report.

Canberra Health Services and the Australian National University are working collaboratively on shared appointments.

Cheers

Nic

From: Grant, Christina (Health)

Sent: Tuesday, 12 February 2019 9:55 AM

To: Stevenson, Nicole (Health) < <u>Nicole.Stevenson@act.gov.au</u> > **Subject:** Questions from the Chair [SEC=UNCLASSIFIED]

Importance: High

Hi Nicole,

I hope this message finds you well and sorry to bother you.

Mick has asked me to quickly request a form of words (maybe 2 or 3 sentences) that describe the new arrangements CHS is putting in place with ANU to cover salary arrangements for academic clinicians. My understanding from the meeting last week is that CHS has negotiated for ANU to pick up the bill in some cases?

I am sorry but the panel is now working feverishly to prepare the final report as they have agreed to deliver it early to the Minister. As a result I will need the words in the next day or so - It would be great if this new arrangement could be reflected.

Please let me know if this is problematic or if there are any questions.

Regards Christina

Christina Grant | Director

Phone: 6207 3043 | Mobile: Email: christina.grant@act.gov.au

Office of the Review | Independent Review into the Workplace Culture within ACT Public Health Services

2 Bowes St, Philip, ACT 2602 | GPO Box 825, Canberra, ACT 2601 www.health.act.gov.au/Culture-Review

From:

Grant, Christina (Health)

Sent:

Thursday, 21 February 2019 10:55 AM

To:

DGACTHealth; CEOHealth; Dykgraaf, Mark (Health)

Cc:

Dal Molin, Vanessa (Health); Stevenson, Nicole (Health);

Subject:

Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

Attachments:

Implementation Timeline - Draft V3.pdf

Good morning,

Please find attached the draft implementation timeline for inclusion in the Final Report as discussed with the Review Panel on 5 February 2019.

We have endeavoured to incorporate your input from that meeting and would welcome any further comments or suggestions you may have by COB 28 February 2019.

Please let me know fi you have any questions.

Regards

IMPLEMENTATION TIMELINE: Independent Review into the Workplace Culture within ACT Public Health Services

Timeline for inclusion in the Review's Final Report as discussed between the Panel and ACT Health Senior Executives on 5 February 2019.

2021 2020 6 Months 2019 Review mechanisms and integrate Commence values and vision work Conduct all staff survey (evaluate) Commence developing suite of Plan and conduct first summit Community Health Services Implement/monitor suite of Planning, procurement and **Embed Vision and Values** foundational work Program delivery Implementation measures Actions measures Evaluate Implementation Service and Calvary Public Hospital Health Directorate Canberra Health Services Canberra Health s/peal ₹ 7 ₹ Hospital in conjunction with the Health Directorate integrated with strategy and constantly reflected in 2. That Canberra Health Service and Calvary Public 3. That a program designed to promote a healthier Hospital to map a plan of improved clinical services implemented across the ACT Public Health System. Calvary Public Hospital and the Health Directorate. Advocacy Reporting System (PARS) and Co-worker leadership. To achieve this the Health Directorate vision and values are lived, embraced at all levels, reflect on elements of a great health service streams of the community health services within develop an appropriate suite of measures that: 4. The Health Directorate convene a summit of review mechanisms to better integrate clinical 5. The CEO of Canberra Health Services should 1. That the three arms of the ACT Public Health should take the lead in providing the necessary Vanderbilt University Medical Centre's Patient process to re-engage with staff in ensuring the implementation by Canberra Health Services, The model adopted should be based on the Canberra Health Services and Calvary Public senior clinicians and administrators of both System should commence a comprehensive engage clinicians in their development. culture to reduce inappropriate workplace behaviour and bullying and harassment be monitor patient/client perspectives of tools and guidelines and coordinate the Observation Reporting System (CORS). the Clinical Divisional Structures. coordination and collaboration. both culture and strategy outcomes/experience Recommendation

9 2020 2021	E Wonths	G Wontins	Organie	9 Wonths	6 Wentrs	12 Months	9 Wanths		5.Working	Museum Market Ma		6 Marths	5. C 38 C O
Actions 2019	Commence re-opening of communication lines	Establish Non-government Organisations Leadership Group	Continue meetings	Review existing arrangements (develop relationships, define positions)	Produce academic partnership and fraining strategy	Implement academic partnership, and training strategy	Commence negotiations	implement MOU	Agree measures	Origoring and reporting	Develop governance participation	Commence participation	Monitor participation
Implementation lead/s	Health Directorate			Health Directorate			Health Directorate C.		Canberra Health Services and Calvary Hospital O		Camberra Health Service and Calvary Hospital		
Recommendation	6. That the Health Directorate re-establish open lines of communication with the NGO sector and	other external stakeholders. The proposal by the Alcohol, Tobacco and Other Drug Association (ATODA) and the Mental Health Community	Coalition ACT (MHCC) to establish a peak NGO Leadership Group to facilitate this new partnership is supported.	7. The initiatives already underway to develop a valued and more coordinated research strategy in partnership with the academic sector and others are strongly supported. These provide a mechanism to address culture encourage professional	elopment, education, training, r er strategic issues.		8. That discussions occur between ACT and NSW with a view to developing a Memorandum of Understanding (Mol I) for immoved collaboration	between the two health services systems for joint Ministerial consideration.	Clinical engagement throughout the ACT Public Health System, particularly by the medical profession, needs to be significantly improved. Arread manufacture of monthly improved.	restricts integrated to monitoring such improvenient can need to be developed through consensus by both clinicians and executives. Such measures should include participation in safety, quality and improvement meetings, reviews and other strategy and policy related initiatives.	There should be a clear requirement for senior clinicians to collaboratively participate in clinical governance activities.	S.	

11. Canberra Health Services and Calvary Public Canb Hospital should assess the appropriateness of the Choosing Wisely initiative as a mechanism for improving safety and quality of care, developing improved clinical engagement and greater involvement in clinical governance. 12. That Canberra Health Services adopt the Services sevolution of clinically qualified Services across each clinical Division with Business Manager support and earned autonomy in financial and personnel management. 13. That an executive leadership and mentoring program be introduced across the ACT Public. Health System specifically designed to develop current and future leaders. This program should include both current and emerging leaders. 14. The three arms of the ACT Public Health System Should review their HR staffing numbers and confidence in current HR procedures, and the future needs for HR, as proposed in this Review. 15. The recruitment processes in the ACT Public Health System should follow principles outlined in the Enterprise Agreements, Public Sector Management Act 1994 and relevant standards and procedures. 16. The range of training programs for staff offered All	Canberra Health Service and Calvary Hospital Canberra Health Services All	Implement and monitor Conduct pilot Rollout full recommendations Planning Implementation Conduct initial review Implement changes Evaluate Evaluate Continually monitor/evaluate changes as required Continually monitor/evaluate recruitment activity Conduct training program review	5 Worths 22 Worths 9 Worths 6 Worths 9 Worths
Contract Con		Implement changes	É Montos:

Recommendation	Implementation lead/s	Actions	2019 2021
17. Should the recommendations of this Review be accepted, a public commitment should be jointly made by the Ministers for Health and Wellbeing, and Mental Health, the Director-General Health Directorate, the CEO Canberra Health Services, the General Manager Calvary Public Hospital, Senior Executives across ACT Public Health System and key representative organisations to collectively implement the recommendations of this Review to ensure ongoing cultural improvement across the ACT Public Health System.	Ministers and Executive	Deliver public commitment	
18. A 'Cultural Review Oversight Group' should be established to oversight the implementation of the Review's recommendations. The Group should be chaired by the Minister for Health and Wellbeing, and include the Minister for Mental Health, the Director-General Health Directorate, the CEO Canberra Health Services, the General Manager Calvary Public Hospital, Senior Executives across ACT Public Health System, the Executive Director	Minister and Health Directorate	Commence Group activities Quarterly Group Meetings	žuožvo
Health Care Consumers Association of the ACT, President of the AMA (ACT), Branch Secretary ANMF (ACT), and Deputy National President CPSU.			
15. Inat the "Cultural Review Oversight Group" auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT Public Health System.	Cultural Review Oversight Group	Annual review;	
20. As a result of this Review, the 'Cultural Review Oversight Group' should engage with staff in prioritising the development of a change management and communications strategy, which clearly articulates to staff, patients/clients and the community the nature of the issues to be addressed and the mechanisms for doing it.	Cultural Review Oversight Group	With staff, collaboratively develop a change management and communication strategy	12 Worlth's

From:

Grant, Christina (Health)

Sent:

Wednesday, 27 February 2019 4:25 PM

To:

Stevenson, Nicole (Health);

Subject:

RE: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

Good afternoon,

Just a quick reminder that comments on the Implementation Timeline are due tomorrow.

Please let me know if you have any questions.

Regards,

Christina

From: Grant, Christina (Health)

Sent: Thursday, 21 February 2019 10:55 AM

To: DGACTHealth < DGACTHealth@act.gov.au>; CEOHealth < CEOHealth@act.gov.au>; Dykgraaf, Mark (Health)

<Mark.Dykgraaf@act.gov.au>

Cc: Dal Molin, Vanessa (Health) <Vanessa.DalMolin@act.gov.au>; Stevenson, Nicole (Health)

<Nicole.Stevenson@act.gov.au>;

Subject: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

Good morning,

Please find attached the draft implementation timeline for inclusion in the Final Report as discussed with the Review Panel on 5 February 2019.

We have endeavoured to incorporate your input from that meeting and would welcome any further comments or suggestions you may have by COB 28 February 2019.

Please let me know fi you have any questions.

Regards

From:

Grant, Christina (Health)

Sent:

Thursday, 28 February 2019 12:08 PM

To:

Stevenson, Nicole (Health)

Cc:

CEOHealth

Subject:

Re: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

Thanks very much Nicole.

Christina

Sent from my iPhone

On 28 Feb 2019, at 11:23 am, Stevenson, Nicole (Health) < Nicole.Stevenson@act.gov.au > wrote:

UNCLASSIFIED

Hi Christina

This has been reviewed and there is no further input from CHS.

Cheers

Nic

From: Grant, Christina (Health)

Sent: Thursday, 21 February 2019 10:55 AM

To: DGACTHealth < DGACTHealth@act.gov.au >; CEOHealth < CEOHealth@act.gov.au >; Dykgraaf,

Mark (Health) < Mark. Dykgraaf@act.gov.au >

Cc: Dal Molin, Vanessa (Health) < Vanessa. Dal Molin@act.gov.au >; Stevenson, Nicole (Health)

<Nicole.Stevenson@act.gov.au>

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Please let me know fi you have any questions.

Regards

From:

Grant, Christina (Health)

Sent:

Thursday, 28 February 2019 3:46 PM

To:

Dal Molin, Vanessa (Health)

Cc: Subject: Stevenson, Nicole (Health); RE: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

Thanks very much Vanessa

Appreciate you coming back to me.

Christina

From: Dal Molin, Vanessa (Health)

Sent: Thursday, 28 February 2019 3:38 PM

To: Grant, Christina (Health) < Christina. Grant@act.gov.au>

Cc: Stevenson, Nicole (Health) < Nicole.Stevenson@act.gov.au>;

Subject: RE: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

UNCLASSIFIED

Hi Christina,

No comment from ACT Health. DG was comfortable with what was proposed in the timeline, noting it is consistent with discussions undertaken with DG, CEO, Calvary and the Panel.

Many thanks

Vanessa

Vanessa Dal Molin | Executive Branch Manager

Office of the Director General, ACT Health

Ph: (02) 5124 9401 | M 0413 993 282 | Email: vanessa.dalmolin@act.gov.au

health.act.gov.au

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From: Grant, Christina (Health)

Sent: Wednesday, 27 February 2019 4:25 PM

To: Stevenson, Nicole (Health) < Nicole. Stevenson@act.gov.au >

Dal Molin, Vanessa (Health) <<u>Vanessa.DalMolin@act.gov.au</u>>

Subject: RE: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

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Please let me know if you have any questions.

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Sent: Thursday, 21 February 2019 10:55 AM

To: DGACTHealth < DGACTHealth@act.gov.au >; CEOHealth < CEOHealth@act.gov.au >; Dykgraaf, Mark (Health)

<Mark.Dykgraaf@act.gov.au>

Cc: Dal Molin, Vanessa (Health) < Vanessa. Dal Molin@act.gov.au>: Stevenson. Nicole (Health)

< Nicole. Stevenson@act.gov.au>;

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Please let me know fi you have any questions.

Regards

From:

Grant, Christina (Health)

Sent:

Thursday, 28 February 2019 4:14 PM

To: Cc: Stevenson, Nicole (Health) WorkplaceCultureReview

Subject:

2 questions from the Panel [SEC=UNCLASSIFIED]

Hi Nicole,

I have two questions from the panel that I am hoping you might be able to help me with or point me to the right person. Unfortunately as we are finalising the report I really do need a quick answer if possible:

- Can you please confirm if Midwives are engaged under a Registered Nurse contract/agreement?
- Is it possible to find out where the Maternity Services Review is up to?

Thanks very much, Christina

Christina Grant | Director

Phone: 02 5124 9436 Email: christina.grant@act.gov.au

Office of the Review | Independent Review into the Workplace Culture within ACT Public Health Services

2 Bowes St, Philip, ACT 2602 | GPO Box 825, Canberra, ACT 2601

www.health.act.gov.au/Culture-Review

From:

Grant, Christina (Health)

Sent:

Friday, 1 March 2019 9:47 AM

To:

Dal Molin, Vanessa (Health); Stevenson, Nicole (Health)

Subject:

FW: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

FYI

From: Mark Dykgraaf

Sent: Friday, 1 March 2019 8:57 AM

To: Grant, Christina (Health) < Christina. Grant@act.gov.au>

Cc:

Subject: FW: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

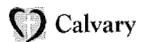
Hi Christina,

Thank you for the opportunity to comment on the proposed timelines for the implementation of the recommendations of the Culture Review. The timelines seem reasonable and we have nothing further to add at this time,

Warm regards,

Mark

Mark Dykgraaf General Manager



Public Hospital Bruce P: 02 6201 6101

F:l

From: Grant, Christina (Health) < Christina. Grant@act.gov.au>

Sent: Wednesday, 27 February 2019 4:25 PM

To: Stevenson, Nicole < Nicole.Stevenson@act.gov.au >;

Dal

Molin, Vanessa < Vanessa. Dal Molin@act.gov.au >

Subject: RE: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

Good afternoon,

Just a quick reminder that comments on the Implementation Timeline are due tomorrow.

Please let me know if you have any questions.

Regards, Christina

From: Grant, Christina (Health)

Sent: Thursday, 21 February 2019 10:55 AM

To: DGACTHealth < DGACTHealth@act.gov.au >; CEOHealth < CEOHealth@act.gov.au >; Dykgraaf, Mark (Health)

<Mark.Dykgraaf@act.gov.au>

Cc: Dal Molin, Vanessa (Health) < Vanessa. DalMolin@act.gov.au >; Stevenson, Nicole (Health)

< Nicole. Stevenson@act.gov.au>;

Subject: Implementation Timeline - Draft V3.pdf [SEC=UNCLASSIFIED]

Good morning,

Please find attached the draft implementation timeline for inclusion in the Final Report as discussed with the Review Panel on 5 February 2019.

We have endeavoured to incorporate your input from that meeting and would welcome any further comments or suggestions you may have by COB 28 February 2019.

Please let me know fi you have any questions.

Regards

Christina

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Continuing the Mission of the Sisters of the Little Company of Mary

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From:

Grant, Christina (Health)

Sent: To: Friday, 1 March 2019 6:56 PM Stevenson, Nicole (Health)

Subject:

Re: 2 guestions from the Panel [SEC=UNCLASSIFIED]

Thanks Nicole! Appreciate you getting back so quickly. Christina

Sent from my iPhone

On 1 Mar 2019, at 4:30 pm, Stevenson, Nicole (Health) < Nicole.Stevenson@act.gov.au > wrote:

UNCLASSIFIED

Hi Christina

Apologies for the delay in responding. See my responses below.

Cheers

Nic

From: Grant, Christina (Health)

Sent: Thursday, 28 February 2019 4:14 PM

To: Stevenson, Nicole (Health) < <u>Nicole.Stevenson@act.gov.au</u>> **Cc:** WorkplaceCultureReview < <u>WorkplaceCultureReview@act.gov.au</u>>

Subject: 2 questions from the Panel [SEC=UNCLASSIFIED]

Hi Nicole,

I have two questions from the panel that I am hoping you might be able to help me with or point me to the right person. Unfortunately as we are finalising the report I really do need a quick answer if possible:

- Can you please confirm if Midwives are engaged under a Registered Nurse contract/agreement? Yes, they are engaged in the same was as nurses.
- Is it possible to find out where the Maternity Services Review is up to? This is being managed through the Health, Ageing and Community Services Standing Committee in the Legislative Assembly and CHS has no involvement in timing. You can contact the Committee Secretary, Mrs Josephine Moa on 6205 0136.

Thanks very much, Christina

Christina Grant | Director

Phone: 02 5124 9436 Email: christina.grant@act.gov.au

Office of the Review | Independent Review into the Workplace Culture within ACT Public Health

Services

2 Bowes St, Philip, ACT 2602 | GPO Box 825, Canberra, ACT 2601

www.health.act.gov.au/Culture-Review

From:

Hammat, Janine (Health)

Sent:

Tuesday, 12 March 2019 7:52 AM

To:

McDonald, Bernadette (Health)

Cc: Subject: CEOHealth

Attachments:

Tracked Changes - Final Independent Review Ind Review - Interim compared with final.pdf

UNCLASSIFIED For-Official-Use-Only

Hi Bern,

I converted the interim report and the final report to word docs and then did a document compare so I could see what they had changed between the versions. The document was very large when I did this so I had to convert it back to a pdf. I have attached it in case you would also like to see the changes.

The most significant change is the addition of the indicative timeline tables in section 10. Other changes include more regarding NGO's, another para re VMO's, more on clinical leadership – in particular a mention of consulting with them re "divisional directors".

FYI – all of the graphs and graphics are <u>unchanged</u> but they didn't fare well with the tracked changes.

Regards,

Ianine

Janine Hammat

Executive Group Manager People and Culture

Canberra Health Services

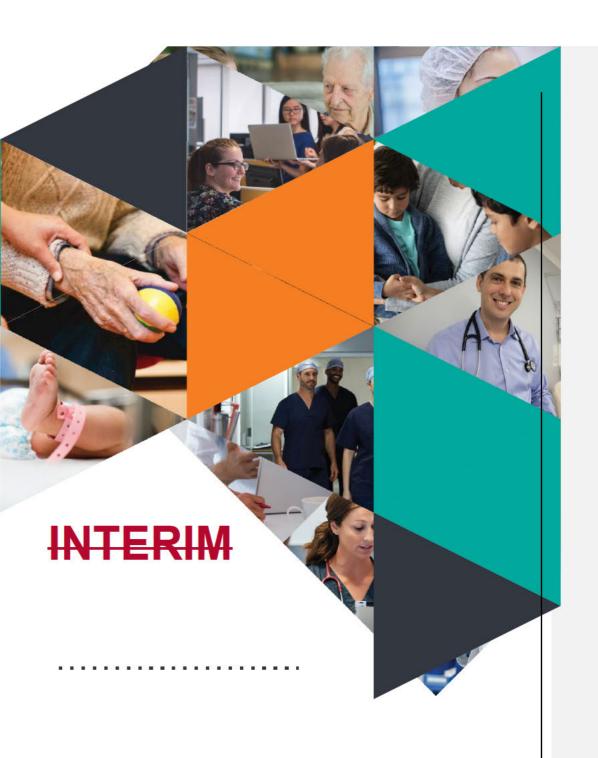
Phone: 02 5124 9631 | Email: janine.hammat@act.gov.au Level 1 Building 23, Canberra Hospital PO Box 11, WODEN ACT 2606

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Canberra Health Services

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FINAL REPORT

Independent Review into the Workplace -Culture within ACT Public Health Services

January

March 2019

31 January

5 March 2019

Ms Meegan Fitzharris MLA
Minister for Health and Wellbeing
ACT Legislative Assembly
_London Circuit—
CANBERRA ACT 2601

Dear Minister

On 10 September 2018, you announced the Independent Review into the Workplace Culture within ACT Public Health Services-(the Review). Thank you for the opportunity to conduct this Review

WeHaving presented the Interim Report on 31 January 2019, we are now pleased to present this Interimthe Final Report, which.

<u>This report</u> sets out the <u>initialReview</u> findings and <u>a range of</u> recommendations for your consideration that we believe, if adopted, will effect positive change to the workplace culture across the ACT Public Health System. <u>We are submitting this Final Report earlier than anticipated, given the general endorsement of the Interim Report recommendations by both your Government and major health organisations and the uniform desire to move rapidly to implementation. An indicative Implementation Timeline has been included in Section 10 of this report which was developed in consultation with ACT Health Senior Executives.</u>

We wish to thank the extensive number of individuals and organisations who have participated tethisin each stage of the Review. Their engagement, experiences and ideasfeedback have been integral to the findings and recommendations contained in this report. Nevertheless swith the Interim Report, the Reviewers accept full responsibility for the views expressed in this final version.

You asked the Reviewers to examine and report on the workplace culture of public health care services in the ACT and provide advice on any systemic and institutional issues.

_To establish a basis for our findings and recommendations we have taken into account:

- close to 400 submissions received from individuals and organisations
- insights from a range of workshops, round table discussions and meetings
- a survey of staff across the ACT Public Health System, and
- relevant literature research and previous reports and reviews-, and
- consultation with relevant parties on the Interim Report findings and recommendations.

The Reviewers will continue to consulthave consulted with key stakeholders to explore in greater depth some—issues not fully addressed in the Interim Report and this Interimhas resulted in some adjustments in the Final Report.—Similarly, we will ensure—the recommendations are have now been fully considered and to ensure they align with work already underway to improve the workplace culture prior to our final report to you within ACT Public Health Services.

Yours sincerely

Mick Reid <u>AM</u> Chair Fiona Brew Member David Watters AM OBE

Member

Julian / Om

July

Exercise Summary

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Exitentsive

In September 2018, the ACT Minister for Health and Wellbeing, Meegan Fitzharris MLA issued a statement on workplace culture which committed the ACT Government to an independent review of the culture within the public health services.

This report—is the Final Report of the Independent Review into Workplace Culture within ACT Public Health Services and follows the Interim Report, with a final report due before the end of March released in February 2019.

_The purpose of this report is to present <u>initial high levelthe Review's</u> findings and arrange of recommendations <u>designed</u> to support improvements to the workplace culture across the ACT Public Health System.

Terms of Reference

The Review operated in accordance with the following Terms of Reference:

- a) Examine and report on the workplace culture of public health care services in the ACT and provide advice on any systemic and institutional issues. This examination should take into account any examples of best practice workplace culture and professional conduct in the delivery of public health care in the ACT, nationally and internationally.
- b) Examine any claims made in relation to inappropriate conduct and behaviours related to the delivery of public health care services in the ACT, and provide advice on:
 - best practice responses to such complaints;
 - ii. whether referral of such complaints should be made to any other authority; and
 - iii. what support services should be provided to complainants.
- c) Examine and report on the existing workforce policies -and -complaints- management practices to ensure their relevance and appropriateness in achieving satisfactory outcomes for all parties.
- d) Provide findings and recommendations for:
 - i. further improving workforce culture across the ACT public health system; and
 - additional support systems required for staff and management engaged in the delivery of public health services in the ACT, including processes, training and professional development.

<u>Methodology</u>

The Review specifically excluded investigation of individual allegations of inappropriate workplace behaviour and bullying and harassment. Where clusters of complaints were received, the senior executive Senior Executive of the relevant arm of the ACT Public Health System was advised. The confidentiality

of submissions was maintained in these referrals. Similarly, where the Reviewers were particularly concerned during interviews about the wellbeing of an individual, with the agreement of that individual, again, a senior executive was notified the Senior Executive was notified. or a referral was made to the ACT Public Sector Standards Commissioner.

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Independent Review into the Wo kplace Cultu e within ACT Public Health

Exactibine Summary

Despite the scepticism expressed by some that this Review would <u>not</u> achieve any more than previous attempts to improve the workplace culture, the overwhelming response to the call for submissions revealed a deep desire from staff and the community for change. Close to 400 submissions were received from staff, former staff, family members of patients, consumers, members of the public, Non-Government Organisations (NGOs), health care groups and unions.

To capture the broad views of staff across the ACT Public Health System, an online survey was conducted, which also had a high participation rate of 1953 responses (constituting 20% of ACT Public Health System staff) over a period of a week.

The Reviewers complemented these sources of information with numerous individual – interviews and forums with a broad spectrum of groups including medical practitioners, nurses, midwives, allied health workers, support and administrative staff, NGOs, consumers, executives and unions. These conversations enabled the Reviewers to test findings about the problems and issues, discuss areas of best practice and identify practical solutions.

Prior to presenting the results, the Reviewers wish to emphasise the positive and professional approaches they witnessed in many areas of the ACT Public Health System and the dedication of both individuals and groups in the delivery of quality care.

The Reviewers have been cautious to ensure these positive aspects are not lost within the report and instead, present opportunities to build the culture by leveraging off existing strengths.

It should also be emphasised that the ACT Public Health System is not alone in health sector workplace culture issues of inappropriate behaviours, bullying, discrimination and harassment. All other State and Territory health services have identified similar issues in their workplace, as have studies in international health services.

as have studies in international health services.

The Evidence

Turning to the findings, the submissions overwhelmingly highlighted:

- Inappropriate behaviours and bullying and harassment in the workplace
- Inefficient procedures and processes including complaints handling
- inadequate training in dealing with inappropriate workplace practices
- inability to make timely decisions
- poor leadership and management at many levels throughout the ACT Public Health—System, and
 System, and
- inefficient and inappropriate Human Resource (HR) practices, including recruitment.

The results from the survey similarly pointed to a number of concerning trends with 6061% of respondents having witnessed bullying over the past twelve months and 35% having experienced bullying themselves. Most of the bullying was staff-on-staff.

Of great concern was that 12% –of staff indicated they had been subjected to physical harm, sexual harassment or abuse at work. Of these staff, 46% indicated it was by someone they worked with and 37% was by a member of the public.

Almost three in four who experienced bullying or were subjected to harm did not submit a formal complaint, and worryingly, only 22% of staff had confidence in the way grievances were resolved once they were identified and reported.

The survey results were similar across all three arms of the ACT Public Health System (iei.e. Canberra Health Services, Calvary Public Hospital and the Health Directorate) and were worse than comparable data for NSW Health.

The information gathered from submissions, individual and group interviews and the staff survey reveal a worrying and pervasive poor culture across the ACT Public Health System. There are pockets of high performance where staff are proud of the quality of their work and were keen to demonstrate it to the Reviewers. By contrast, there were areas where a very poor to demonstrate it to the Reviewers. By contrast, there were areas where a very poor-culture had persisted over many years, and where bullying and other poor performance had not been addressed.

Pride in working for the ACT Public Health System is low, bullying is common and confidence in how the system resolves grievances is extremely low. These issues have been identified in previous reviews⁽³⁾ and audits-(4).

A point regularly raised in submissions was that whilst the contribution of poor leadership over the past few years has led to this unhealthy workplace culture, it was also generally acknowledged that this poor culture had been present for many years.

Cautious optimism was expressed by many regarding the new leadership in the Health Directorate, Canberra Health Services and Calvary Public Hospital. However, it was acknowledged by all that establishing a great health service was a long-term proposition.

Going Forward

The Reviewers believe the starting point for the ambition to create a happier and healthier health service requires a concerted effort by all parties and partners to ensure the vision and values of the ACT Public Health System are lived values, embraced throughout the system, integrated with strategy and constantly reflected in leadership. There is little doubt the vast majority of staff provide high quality health care and strive for excellence. Less embedded are the values of collaboration, integrity and respect.

A program based on the Vanderbilt University Medical Center (United States) <u>early intervention program⁽³⁰⁾</u> is proposed for adoption as a matter of priority throughout Calvary Public Hospital, Canberra Health Services and the Health Directorate.

The program is designed to build a culture of safety and quality in the workplace by training and thus empowering staff to better support each other and raise concerns early. All evaluations of that program demonstrate its effectiveness.

Programs adopting Vanderbilt principles are being implemented at present in an expanding number of health service organisations across Australia. These include the St Vincent's Health Australia Ethos Program, and the Cognitive Institute Speaking Up for Safety and Promoting Professional Accountability programs. The Reviewers believe implementation of such a program would greatly benefit the ACT Public Health System in addressing issues related to poor behaviour, bullying and harassment.

Developing, valuing and sustaining strong partnerships and relationships is an important mechanism to strengthen the culture within the ACT Public Health System. Internally, strengthened relationships are needed between Clinical Divisions in Canberra Health Services, between the acute and community health sectors, and between Canberra Health Services and Calvary Public Hospital.

Externally, improved relationships with NGOs, universities, and other health sectors such as NSW Health are needed. Such improved relationships will not only contribute to improved coordinated care and enable a better research and learning system—but, importantly—they will help strengthen culture by breaking down the relative isolation of the ACT Public Health System.

Commendable work is progressing in some of these areas with internal and external relationship building underway. Examples externally include the recent research summit with the university sector and, internally, the realignment and improved cohesiveness of the elinical divisional structures (Inical Divisional Structures) in Canberra Health Services.

A necessary prerequisite to good clinical governance in any health system is clinical engagement. A number of very dedicated clinicians, including medical clinicians have fully engaged with this Review, even though some expressed reservations regarding the Review's impact.

However, it was apparent that, unlike nurses, <u>midwives</u> and allied health workers, the significant majority of the medical workforce did not engage. This was indicative to the Reviewers that such disengagement was symptomatic of their general disengagement from the management of ACT public hospitals and health services.

Clinicians who are disengaged usually continue to provide high quality care to their — individual patients which is why thethese hospitals in the ACT still achieve good clinical outcomes.

_However, such disengagement means that the health system does not benefit from the-knowledge and input of individual clinicians who provide little consistent input to opportunities to improve the quality of care across the system. <u>Disengaged clinicians are often cynical</u>, <u>distrustful of the system</u>,

In such a disengaged system, clinicians—continue to carry out their duties, putting their patients——first, as is appropriate. Despite the positive feedback-they receive from their patients and—recognising at an individual patient level-the outcomes—they achieve, disengaged—clinicians—are often cynical, distrustful-of the system,—lack pride in their organisation, and are unhappy in the workplace. A critical success factor to improving the ACT Public Health System workplace culture——is to enhance clinical, in particular medical, engagement within the health system.

The onus to engage should be equally recognised by both individual clinicians and the system in which they work. Enhanced clinical engagement contributing to improved clinical governance is proposed. It is also proposed that, in line with many other health services across Australia, the divisional structure in Canberra Health Services should progressively adopt Clinical Divisional Directors with Business Manager support.

Submissions from both individuals and organisations to the Review highlighted the inadequacy of the HR practices across all levels of the ACT Public Health System, particularly around—

HR systems and the local implementation of policies and procedures. Consistently raised themes include, inappropriate recruitment practices, lack of "customer" customer focus by HR staff, opaque,

_often heavy-handed processes of complaints handling, a perception of insufficient and uncoordinated training programs and general inefficiencies and duplication of HR processes and practices. A number of recommendations follow, which addresstarget these issues.

At the time of preparing this Interim Report, a number of initiatives were underway designed to improve staff welfare. For example, the Ministers for Health and Wellbeing and Mental Health in mid-December 2018 announced the Nurses and Midwives: Towards a Safer Culture - the First Step - Strategy; to support the fundamental rights of nurses and midwives to be safe and protected in the workplace.

Similarly, the new CEO of Canberra Health Services advised the Reviewers of strategies she is implementing in such areas as:

- reducing occupational violence
- establishing an employee advocate role, and
- facilitating targeted workshops for teams and departments with recognised disharmony and poor culture.

All these initiatives are strongly supported by the Reviewers. However, it needs to be emphasised that the level of dissatisfaction and distrust is high and effecting the necessary improvements will be a long process that will require sustained attention.

The Reviewers acknowledge the challenges in resetting the culture of a complex, – multifaceted system like the ACT. Writing this report is the easy phase. For this Review to fully realise its intent and deliver the desired outcomes there will need to be a focus on developing a sustained, transparent and measurable approach for monitoring implementation.

An Implementation GommitteeGroup is proposed, chaired by the Minister for Health and Wellbeing including as members; the Minister for Mental Health, the Director-General (ACT-Health), Directorate the CEO (Canberra Health Services), the General Manager (Calvary Public Hospital), Health Care Gonsumers (Consumers Association (HCCA) of the ACT, relevant unions, Australian Medical Association (AMA), Australian Nursing and Midwifery Foundation (ANMF) and relevant Colleges, the Community and Public Sector Union (CPSU).

The Implementation CommitteeGroup should auspice an independent annual external review, with similar methodology to this Review, which measures the extent of success of the implementation of the recommendations and the consequent impact on cultural change within the

implementation of the recommendations and the consequent impact on cultural change within the ACT Public Health System.

Specific recommendations are as follows:

Recommendation 1: That the three arms of the ACT Public Health System should commence - a comprehensive process to re-engage with staff in ensuring the vision and values are lived, embraced at all levels, integrated with strategy and constantly reflected in leadership. To achieve this the Health Directorate should take the lead in providing the necessary tools and guidelines and coordinate the implementation by Canberra Health Services, Calvary Public Hospital and the Health Directorate.

Recommendation 2: That the Health Directorate, in conjunction with Canberra Health GerviceServices and Calvary Public Hospital in conjunction with the Health Directorate develop an appropriate suite of measures that:

- reflect on elements of a great health service both culture and strategy
- monitor patient/client perspectives of outcomes/experience_and
- engage clinicians in their development, and
- measure and monitor progress in clinical engagement.

Recommendation 3: That a program designed to promote a healthier culture to reduce inappropriate workplace behaviour and bullying and harassment be implemented across the ACT Public Health System. The model adopted should be based on the Vanderbilt University-Medical Centre's Patient Advocacy Reporting System (PARS) and Go worker-Observation Reporting System (CORS).

Medical Center Patient Advocacy Reporting System (PARS) and Co-worker Observation Reporting System (CORS). **Recommendation 4:** The Health Directorate convene a summit of senior clinicians and administrators atof both Canberra Health Services and Calvary Public Hospital to map a plan of improved clinical services coordination and collaboration.

Recommendation 5: The CEO of Canberra Health Services should review mechanisms to better integrate clinical streams of the community health services within the Clinical Divisional Structures.

Recommendation 6: That the Health Directorate re-establish open lines of communication with the NGO sector and other external stakeholders. <u>The proposal by the Alcohol, Tobacco and Other Drug Association (ATODA) and the Mental Health Community Coalition ACT (MHCC) to establish a peak NGO Leadership Group to facilitate this new partnership is supported.</u>

Recommendation 7: The initiatives already underway to develop a valued and more coordinated research strategy in partnership with the academic sector and others <u>isare</u> strongly supported. <u>This provides These provides</u> a mechanism to <u>address culture</u>, encourage professional development <u>and address culture</u>, education, training, research and other strategic issues.

Recommendation 8: That discussions occur between ACT and NSW with a view to developing a Memorandum of Understanding (MoU) for improved collaboration between the two health services systems for joint Ministerial consideration.

Recommendation 9: Clinical engagement throughout the ACT Public Health System, particularly by the medical profession, needs to be significantly improved. Agreed measures of monitoring such improvement needs to be developed through consensus by both clinicians — and executives. Such measures should include participation in safety, quality and improvement meetings, reviews and other <u>strategy and policy related</u> initiatives.

Recommendation 10: There should be a clear requirement for senior clinicians to collaboratively participate in clinical governance activities.

Recommendation 11: Canberra Health Services and Calvary Public Hospital should assess the appropriateness of the Choosing Wisely initiative as a mechanism for improving safety and quality of care, developing improved clinical engagement and greater involvement in clinical governance.

Recommendation 12: That Canberra Health Services adopt the progressive evolution of clinically qualified Divisional Directors across each <u>clinicalClinical</u> Division with Business Manager support and earned autonomy in financial and personnel management.

Recommendation 13: That an executive leadership and mentoring program be introduced across the ACT Public Health System specifically designed to develop current and future Clinical Directors and executive—leaders. This program should include both current and emerging leaders.

Recommendation 14: The three arms of the ACT Public Health System should review their HR staffing numbers and functions in light of the concerns staff have expressed regarding timeliness and confidence in current HR procedures, and the future needs for HR, as proposed in this Review.

Recommendation 15: The recruitment processes in the ACT Public Health System should follow principles outlined in the Enterprise Agreements, *Public Sector Management Act 1994* and relevant standards and procedures.

Recommendation 16: The range of training programs for staff offered by the ACT Public-Health System should be reviewed with respect to their purpose, target audience, curriculum, training styles and outcomes so that they address the issues raised in this Review.

Recommendation 17: Should the recommendations of this Review be accepted,—
a public commitment should be jointly made by the Ministers for Health and Wellbeing,—
and Mental Health, the Director-General (ACT Health), Directorate, the CEO (Canberra Health
Services), the General Manager (Calvary Public Hospital), Senior Executives across
ACT Public Health System and key representative organisations to collectively implement
the recommendations of this Review to ensure ongoing cultural improvement across the ACT
Public Health System.

Recommendation 18: A 'Cultural Review Oversight Committee'Group' should be established to oversight the implementation of the Review's recommendations. The CommitteeGroup should be chaired by the Minister for Health and Wellbeing, and include the Minister for Mental Health, the Director-General (ACT Health), Directorate, the CEO (Canberra Health Services), the General Manager (Calvary Public Hospital), Senior Executives across the ACT Public Health System, the Executive Director Health Care Consumers Association of the ACT, relevant unions, President of the AMA, (ACT). Branch Secretary ANMF (ACT), and relevant Colleges Regional Secretary CPSU.

Recommendation 19: That the 'Cultural Review Oversight Committee'Group' auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT Public Health System.

Recommendation 20: As a result of this Review, the -'Cultural -Review -Oversight - Committee'Group' should prioritiseengage with staff in the development of a change management and communications strategy, which clearly articulates to staff, patients/clients and the community the nature of the issues to be addressed and the mechanisms for doing it. to be addressed and the mechanisms for doing it.

1. Introduction

Purpose

This InterimFinal Report presentsets out the initialReview's findings and a range of recommendations which are designed to support improvements to improve the workplace culture across the ACT Public Health System.

Broad The Review's Interim Report was released on 1 February 2019, and the recommendations contained within it received in principle support from the Government. The Interim Report also received positive feedback from internal and external parties during consultation—has underpinned the process for Where appropriate, comments and feedback provided during consultation have been incorporated in this Final Report. An indicative timeline covering implementation of all of the Review and will ensure the final-recommendations over the next three years has been included in Section 10 of this report-provides a comprehensive plan for change that can be readily implemented, monitored and measured. This timeline was developed in consultation with ACT Health Senior Executives.

Terms of Reference

In September 2018, the ACT Minister for Health and Wellbeing, Meegan Fitzharris MLA issued a statement on workplace culture which committed the ACT Government to an independent-review of the culture within the public health services. This report is the Interim Report, with a final report due before the end of March 2019. Details of the Members of the Review Panel are included at Appendix A.

The Review operated in accordance with the following terms of reference:

- a) Examine and report on the workplace culture of public health care services in the ACT and provide advice on any systemic and institutional issues. This examination should take into account any examples of best practice workplace culture and professional conduct in the delivery of public health care in the ACT, nationally and internationally.
- b) Examine any claims made in relation to inappropriate conduct and behaviours related to the delivery of public health care services in the ACT, and provide advice on:
 - i. best practice responses to such complaints;
 - ii. whether referral of such complaints should be made to any other authority; and
 - iii. what support services should be provided to complainants.
- Examine and report on the existing workforce policies –and –complaints– management practices to ensure their relevance and appropriateness in achieving satisfactory outcomes for all parties.
- d) Provide findings and recommendations for:
 - i. further improving workforce culture across the ACT public health system; and
 - additional support systems required for staff and management engaged in the delivery of public health services in the ACT, including processes, training and professional development.

Independent Review into the Workplace Culture within ACT Public Health

The Terms of Reference specifically indicated that the Review will consider earlier reports and reviews which have been undertaken in relation to workplace culture within the ACT Public Health System, including:

- The 2015 KPMG Report into the Review of the Clinical Training Culture: The Canberra Hospital and Health Services. (439).
- The 2018 ACT Auditor-General Report on ACT Health's Management of Allegations of—
 - Misconduct and Complaints About Inappropriate Workplace Behaviour⁽⁴⁾, and
- The 2018 Report of the Australian Council on Healthcare Standards (ACHS) National Safety and Quality Health Service (NSQHS) Standards Survey of ACT Health—(69).

An overview of the findings of these reports is included at Appendix B.

It should be emphasised that the Review excluded investigation of individual allegations of inappropriate workplace behaviour and bullying and harassment. How such cases were handled as they arose is described in the-following-section_2.

Scope

The scope of the Review encompassed the ACT Public Health System comprising services delivered by:

- Canberra Health Services
- ACT Health Directorate, and
- Calvary Public Hospital.

Canberra Health Services incorporates a number of functions, including:

- the Canberra Hospital
- University of Canberra Hospital Specialist Centre for Rehabilitation, Recovery and Research
- three Walk-In Centres for treatment of minor illness and injury
- six Community Health Centres, and
- a range of community-based health services including early childhood services, youth and women's health, dental health, mental health and alcohol and drug services.

The Office of the Review

The ACT Government provided secretariat staff drawn from across the ACT and Commonwealth Public Service to operate the Office of the Review. These staff provided secretariat services and supported the day-to-day administrative and operational functions of the Review.

The Office staff implemented submission and survey arrangements, scheduled and facilitated meetings, forums and teleconferences, analysed submissions and assisted with the provision of documents and information as requested by the Reviewers. Office staff are bound by their obligations and duties as public servants in the way they treated confidential information provided to the Review.

The contribution of the Office staff in skilfully preparing the groundwork for the preparation of this Interim- Report is gratefully acknowledged by the Reviewers.

Context

It should be noted that this Review was undertaken at the time of considerable restructuring of the ACT Public Health System. The previous single Health Directorate was split into two

agencies in October 2018 - the ACT Health Directorate and Canberra Health Services. The Health Directorate is now largely focused on policy and strategy matters, and Canberra Health Services on providing health care. New Senior Executives (a Director-General and Chief-Executive OfficerCEO) have been appointed to run these agencies. Similarly, a new General Manager was appointed to Calvary Public Hospital in December 2018.

Early indications are that the new Senior Executives, in recognising the extent of the cultural dysfunctionality they have inherited, are actively engaged in establishing improved workplace environments. The recommendations of this Review are designed to assist them in this regard.

Interstate and International Context

It is important to note that the ACT Public Health System is not alone in the workplace culture issues identified in this report.Report. Bullying, discrimination, harassment and sexual harassment are —all- prevalent in health care settings throughout Australia and internationally. —For example, this—is evidenced by the findings of a 2016 survey of trainees and fellows of the College of Intensive Care Medicine of Australia and New Zealand, which found that 32% of those surveyed had experienced bullying, 12% discrimination and 3% sexual harassment. The Royal Australasian College of Surgeons found in a survey of members throughout Australia in 2015 that 49% of members had experienced discrimination, bullying, harassment or sexual harassment. This figure rose to 63% when surveying trainees. This affected all health jurisdictions and all clinical specialties. (1991). Similar rates of bullying among nurses have been reported in the United

Professional organisations—and, national and international health services are now focussing increased attention—on understanding and addressinghow to address inappropriate workplace behaviours.

Definitions

States and United Kingdom-((9))

The following outlines the key workplace culture related definitions used by the Reviewers in conducting the Review and writing this report.

Culture

The culture within a workplace is made up of the values and behaviours –that– people –in– the workplace share and demonstrate, including their shared attitudes and beliefs. Workplace culture –has been described as "the way things are done around here". here "there" within a health service

this culture impacts on how effectively staff are able to work and the wayhow well patients arecared for-(11+). Research shows that poor workplace culture can impact negatively on patient care -and health outcomes-(12+).

Misconduct/Wrongdoing

Misconduct/wrongdoing is unacceptable or improper behaviour, especially by an employee or professional person and/or the mismanagement or culpable neglect of duties.

Bullying

Workplace bullying is repeated, and unreasonable behaviour directed towards a worker or a group of workers that creates a risk to health and safety-4(137). Bullying can be intentional or unintentional, overt or covert, active or passive and can involve other staff members, supervisors, senior officers, contractors and/or subordinates.

Bullying behaviours include actions such as shouting and non-action such as purposely not passing on information necessary for doing a job-(4149). Bullying should not be confused with legitimate feedback (including negative comments) given to staff on their work performance, or other legitimate management decisions and actions undertaken in a reasonable and respectful way-(4139).

Harassment

Harassment is unwanted, unwelcome or uninvited behaviour that makes a person feel humiliated, intimidated or offended. Harassment may include telling insulting jokes about gender, race or disability, sending explicit or sexually suggestive emails, displaying racially offensive material or asking intrusive questions about someone's personal life. Unlike bullying, harassment may involve a single incident.

Sexual Harassment

Sexual harassment is any unwanted or unwelcome sexual behaviour where a reasonable person would have anticipated the possibility that the person harassed would feel offended,—humiliated or intimidated—(1339)__ It—obviously has nothing to do with mutual attraction or consensual behaviour.

Discrimination

Discrimination occurs when a person or group is treated less favourably than others due to a particular characteristic such as their background or personal characteristics including:

- race, including colour, national or ethnic origin or immigrant status
- sex, pregnancy or marital status and breastfeeding, and
- age, disability, or sexual orientation, gender identity and intersex status.

Duty of Care

Employers have a duty of care under the *Work Health and Safety Act 2011* (WHS Act) $^{(17)}$ to ensure the health, safety and welfare of their employees. This includes identifying bullying and harassment and taking steps to eliminate and prevent it. The WHS Act also requires employees to take reasonable care for their own health and safety as well as for the health and safety of others who may be affected by their acts in the workplace.

2. Methodology

2.

Introduction

A combination of methods was adopted to assess existing workplace culture. The Review sought submissions, held a series of workshops and forums and conducted a wide range of

_one-on-one meetings. Submissions were received from, and interviews and workshops held with, current and former staff (administrative, medical, nursing, midwives, allied health workers, executive and support services), members of the public, non-government organisations (NGOs), unions, health professional bodies and other interested parties. The insight and in depth understanding

health professional bodies and other interested parties. The insight and in-depth understanding gained through these qualitative measures was complemented by data gathered via an all staff workplace culture 'pulsesurvey'.

It would have been beneficial to analyse HR data, such as unscheduled leave and staff turnover—but to support the methods applied by this Review. Unfortunately this data was not madereadily available in time for the preparation of this Interim Report.

Submissions

To ensure consumers, staff and interested parties were aware of the Review, the opening of submissions was advertised in local magazines and newspapers (including digital) on seven occasions during the submission period. Approximately six-hundred600 posters were displayed in public and restricted areas of ACT Health buildings (Health Directorate, Canberra Hospital, University of Ganbe-a-hospital, Calva-y Public Hospital and Go unity Health Cent es).

<u>Canberra Hospital. Calvary Public Hospital and Community Health Centres).</u> Information about the Review was published on the ACT Health internet and intranet.

_These activities were supported by advertising on digital billboards across ACT Health sites and screen savers on the ACT Government network.

Emails were sent to all current staff (including those on leave), staff that had left the ACT Public Health System within the last two years and interested parties advising of the submission process. Reminders were sent advising that submissions would soon close. Many NGOs and other external organisations independently informed their membership of the Review.

Consumers were well represented in the submissions lodged either individually or through an NGO. The concerns and opportunities raised in those submissions is included in the analysis below.

In some instances, Reviewers contacted individuals to discuss their submission. This only occurred where the person lodging -the -submission -agreed -to -being -contacted. -At -times - the- concerns raised in those submissions, with the agreement of the individual, were referred to an appropriate authority for further action or investigation.

In analysing the submissions During analysis, it became apparent that a number of submissions, repeatedly citing bullying and inappropriate behaviours were clustered in a few sections of the ACT Public Health System. As previously mentioned, it was outside the scope of this Review to investigate such allegations. Nevertheless, where these clusters were identified, the relevant Senior Executive was advised.

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Nevertheless, where clusters of information about inappropriatebehaviour were received, the senior executive of the relevant arm of the ACT Public Health System was advised.

The confidentiality of submissions was maintained in these referrals. Similarly, where

Consideration was given by the Reviewers to identify these clusters in this Report. On balance, it was thought this would focus attention on these areas to the detriment of recognising the pervasive nature of poor workplace behaviours throughout the ACT Public Health System. One of the tasks of the 'Cultural Review Oversight Group' proposed in Section 10, should be to monitor ongoing improvements in these areas. Where Reviewers were particularly concerned during interviews about the wellbeing of an individual, with the agreement of that individual, again the relevant senior executive was notified Senior Executive was notified and/or the option was given to the individual to refer their issue to the ACT Public Sector Standards Commissioner.

Meetings and Interviews

Over the past few months, the Reviewers conducted fifty-fivenine (59) in-person meetings and nineteen (19) phone meetings for individuals and groups. These meetings were at the request of individuals or instigated by Review members-the Reviewers. Many of these meetings constituted verbal submissions

providing insight into the workplace culture through experiences—and examples, and suggestions on how culture might be improved. Individual conversations also took place with consumers and former patients, ensuring their experiences and ideas were heard and included in the findings of this Review.

In addition to these meetings, the Reviewers conducted twenty-seventhirty-nine (39) workshops with groups including nurses, midwives, allied health workers, medical practitioners, support and administrative staff, NGOs, Community Health personnel, ACT Public Health System Executives-

and unions to share information about the Review, discuss areas of best practice, and seek input for change. These workshops were held both prior to the release of the Interim Report and subsequently to assist in the preparation of this Final Report.

These meetings ensured the Review took into account a broad set of perceptions and ideas,—thus complementing the information provided in submissions. They provided opportunities for establishing common ground through questioning, discussion and information sharing, in particular they enabled conversations about what was working well, what was not, and ways to improve the current workplace culture.

"I think that this Review is a really valuable process for the organisation to go through because there is a lot of potential for ACT Health to learn from the mistakes that have been made and move towards being a world class health service. I think it needs to start with strong leaders who can build trust in the organisation, give us a shared purpose and goal, demonstrate that everyone is accountable for patient safety,..." and encourage real collaboration between the areas of the hospital and with our colleagues in other jurisdictions. Significant system and infrastructure changes are needed to enable this.."

- Quote from submission

Staff Survey

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An all staff 'pulse survey' was conducted to enable the Reviewers to create a snapshot of the current workplace culture –and set a benchmark for tracking workplace culture –improvements.—The survey replicated a subset of questions used in a 2018 NSW Government People Matter Survey(19) to facilitate some comparisons with NSW Health. The survey was sent to all ACT Public Health System staff. The Review sought permission from the NSW Public Service Commission both to reuse their questions and to compare the ACT Public Health System results against publicly available NSW Health outcomes.

Overall Assessment

There was a degree of scepticism by some staff that this Review would result in any meaningful change in the workplace culture of the ACT Public Health System. The Reviewers were forewarned by a number of external organisations, including the Health Complaints Commissioner, that trust and confidence in the Review process may be low. Such scepticism is understandable; however, others were more positive and the large number of submissions, pleasing response to the survey and willing engagement of staff, unions, professional groups and NGOs in forums to discuss possible changes evidences this.

"Talking to my ex-colleagues, I have asked a number of them if they wish to make a submission to the Review. They all replied "no" as they believe that nothing will come of it. I want the Review team to prove them wrong, just this one time so we can improve the health of all Canberra residents."

- Quote from submission

Independent Review into the Workplace Culture within ACT Public Health

3. The Evidence

2 The Evidence

Submissions

A high number of formal submissions were provided to the Review. In total there were

 $_391$ submissions of which 353 were–from-individuals–and-a–further-thirty-eight $(\underline{38})$ from—

organisations. The submissions came from a broad spectrum of staff, former staff, members of the public, patients -from Canberra Health Services and Calvary Public Hospital, NGOs, health care groups and unions.

_Each submission was analysed for workplace culture related information (both positive and negative) using a consistent set of criteria. A number of common themes were identified as described in the following tables. It should be noted that virtually all submissions addressed more than one theme.

Table 1: Top themes from individual submissions

Non-supportive manager / leadership	Ĭ	n	d
Ineffi cient procedures / processes / complaints	e	0	u
management Bullying not addressed	а	t	n
Mistrust / dishonest	d	a	r
behaviour Lack of	e	d	е
opportunities Favouritism	r.	d	a
Inappropriate Recruitment	S	r	s
Poor skills development / insuffi	h	e	0
cient training Hardworking and	i.	s	n
dedicated staff	P	s	a
Supportive team	В	е	b
	u	d	Ī
Table 2: Top themes from organisation submissions	I	R	е
Ineffi cient procedures / processes / complaints	ī	e	b
management Bureaucratic / process driven	У	р	e
Inappropriate Recruitment	ī	e	h
Non-supportive manager / leadership	n	a	a
Poor skills development / insuffi cient	g	t	V
training Micro-managing / poor 24 Interim	/	е	i

our Hardworking and dedicated staff Supportive 211
team 204 | 148|
432 | 126|
449 | 1
403 | 1
59 | 1

Commented [HJ(1]: unchanged

Independent Review into the Workplace Culture within ACT Public Health

Submission Analysis Most of the submissions, both from individuals and organisations, cited issues such as:
"I raised numerous complaints with HR, management and the director which were never actioned."
"The management and human resource policies and decisions need to provide for the philosophy of <u>"</u> how can we genuinely assist the worker in this matter."
"Middle management keeps ACT Health afloat as all leaders tend to be in acting positions — leading back to a lack of decision making, lack of leadership, lack of knowledge and lack of management skills."
- Quotes from submissions
A much smaller number of submissions pointed to positive themes, such as supportive leadership and cohesive team work. These submissions tended to relate to specific entities within the ACT Public Health System.
leadership and cohesive team work. These submissions tended to relate to specific entities within the
leadership and cohesive team work. These submissions tended to relate to specific entities within the
leadership and cohesive team work. These submissions tended to relate to specific entities within the
leadership and cohesive team work. These submissions tended to relate to specific entities within the ACT Public Health System. "There are some excellent examples of positive culture [redacted] have put a lot of time into developing a positive culture, supporting new graduates and building clinical
leadership and cohesive team work. These submissions tended to relate to specific entities within the ACT Public Health System. "There are some excellent examples of positive culture [redacted] have put a lot of time into developing a positive culture, supporting new graduates and building clinical leadership skills in their managers." "My current program is supportive, often acknowledging my achievements and encourages learning and both professional and personal growth. I feel appreciated every day and look forward to coming to work. I no longer hesitate in asking for support and age is not the defining factor of experience and knowledge."

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Staff Survey

As mentioned, as part of this Review an online survey of the ACT Public Health System was offered to staff at:

- Canberra Health Services
- ACT Health Directorate, and
- Calvary Public Hospital

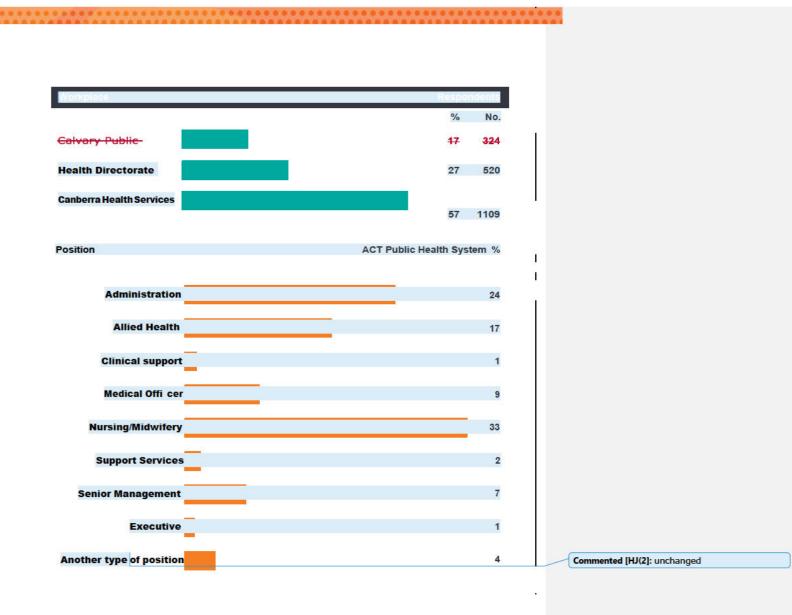
The questions mirrored some of the questions included in the 2018 NSW Government's –People Matter Survey— $\frac{(19)}{1}$. The online survey remained open for eight days and 1953 responses were received (which constitutes 20% of the workforce of the ACT Public Health System). The key findings are described below, and full details are at Appendix D.

There was a fairly equal response rate from each of the three services reflecting their workforce. Similarly, the response rate was fairly evenly distributed across occupational categories and is demonstrated in the following tables.

The survey focused on the past twelve months, and hence, reflected some leadership turbulence.

_Overwhelmingly 88% of staff perceive they understand what is required of them in their—role. More than 68% feel a sense of accomplishment from doing their job, and more than 64% are motivated to contribute more than is required of them. These results would suggest that ACT Public Health System staff are motivated and care about achieving good patient care outcomes.

There was not a lot of difference between the findings for each of the three arms of the ACT Public Health System. The issues identified were common to all.



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2 Prefer not to say

18 | Final Report | Independent Review into the Wo kplace Cultu e within ACT Public Health

27



Prefer not to say

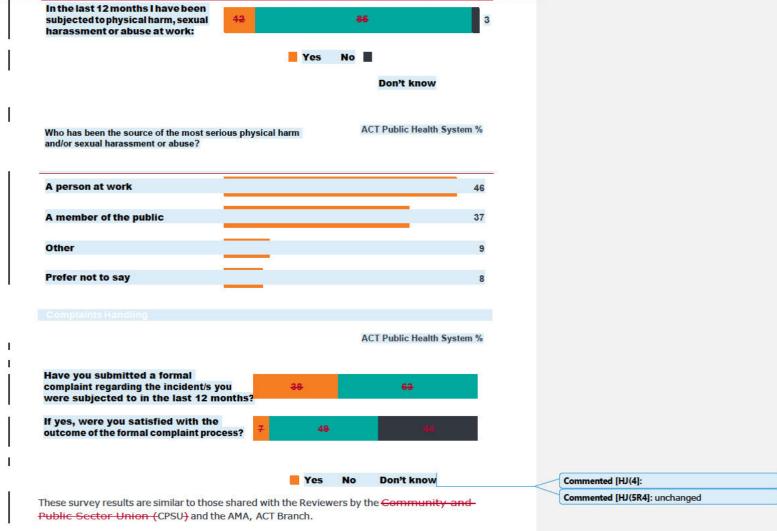
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Independent Review into the Workplace Culture within ACT Public Health Services | 19

Unaccentable Conduct

ACT Public Health System %



CPSU Survey

The CPSU represents a large number of public sector employees including ACT Public Health System staff. As part of their submission to the Review, they reported on their own 2018 survey of 745 of their members where over half (54%) of ACT Public Health System respondents did not feel adequately trained and supported in their day—to—day work. Two thirds (68%) disagreed or strongly disagreed with the statement that staff are treated fairly and with respect.

20 | EntairReport

Bullying and harassment was identified by respondents of the CPSU survey as being one of the major contributors to the poor wellbeing and workplace culture within the ACT Public Health System. Three quarters (75%) of respondents reported they had been bullied in the workplace and four in five (81%) reported they had witnessed bullying in their workplace. These figures are higher than those reported in the Review survey.

AMA (ACT) Hospital Health Check Survey Summary

Similarly, the AMA in their submission, presented data from a 2018 survey of doctors in training at Canberra Hospital whereby:

- ◆42% have experienced bullying and harassment
- 4-39% have witnessed a colleague being bullied or harassed
- 68% feared negative consequences of reporting inappropriate workplace behaviours
- ●58% rated staff morale as fair, while 39% rated it poor or very poor, and
- 54% rated the workplace culture as fair, while 29% rated it poor, or very poor.

Comparing ACT with NSW

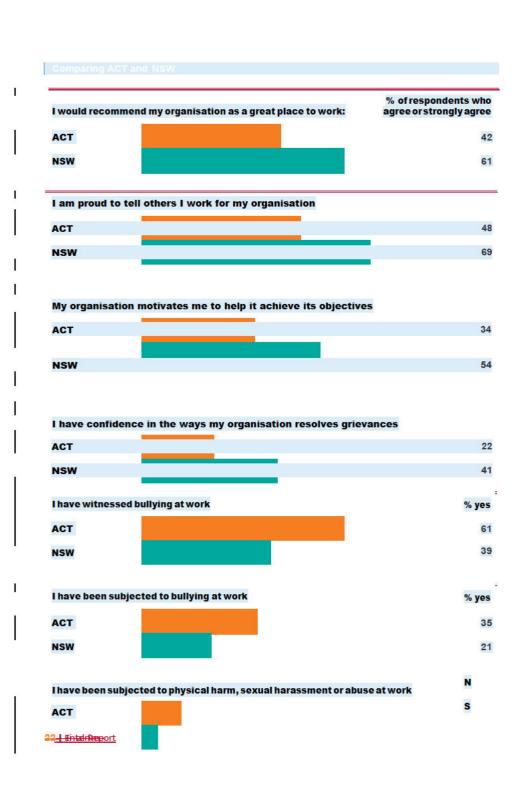
As mentioned previously, the questions in the 'pulse survey' mirrored those in the 2018 NSW Governments 'People Matter Survey-Survey'(19). Drawing comparisons between the two results should be treated with some caution, as, although the questions were the same, the response rate and the methodology for undertaking the respective surveys varied. Nevertheless, notwithstanding this caveat, a comparison of the two-surveys revealed significant variation between the two jurisdictions.

Workplace Culture

Generally, by comparison to the average for NSW Health, staff in the ACT Public Health System have:

- less pride in the organisation
- witnessed or experienced bullying in the workplace at higher levels
- ◆ been subject to physical harm or sexual harassment at higher levels, and
- ess confidence in how the organisation resolves complaints and grievances.

Strong links have been drawn between poor workplace culture and reduced quality of health care⁽²⁰⁾ resulting in a higher likelihood that patient safety concerns may go unaddressed⁽²¹⁾. For this reason, it is important that workplace cultures in health settings support staff to ask questions and seek assistance from a senior staff member. A number of patient submissions highlighted they are very much aware of altercations and perceived bullying of staff-on-staff, and were concerned about the welfare of the bullied staff member and the impact on the quality of care beingdelivered.



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Conclusion

The information gathered from submissions, individual and group interviews and the staff survey reveal a worrying and pervasive poor culture across the ACT Public Health System. There are pockets of high performance where staff are proud of the quality of their work and were keen to demonstrate it to the Reviewers.

By contrast, there were areas where a very poor culture had persisted over many years, and where bullying and other poor performance had not been addressed. It is <u>very</u> concerning that over 60% of staff <u>thatwho</u> have experienced bullying, harassment or unacceptable behaviour did not report it.

It should be emphasised that medical, nursing, midwifery and allied health students were not well represented in both submissions or the staff survey. Nevertheless, the Reviewers recognised that as students are particularly vulnerable to inappropriate workplace behaviours, some may not have come forward for fear of impacting their future career prospects.

Pride in working for the ACT Public Health System is low, bullying is common and confidence in how the organisation resolves grievances is extremely low.

Whilst the contribution of poor leadership within the ACT Public Health System over the past few years was regularly raised in submissions, it was also generally acknowledged that the poor culture had been a feature of the ACT Public Health System over a number of years. In certain areas of the three health services, this poor workplace behaviour has reportedly been exacerbated by staff shortages and/or workload demand.

Cautious optimism was expressed by many regarding the new leadership in the Health Directorate, Canberra Health Services and Calvary Public Hospital. However, it was acknowledged by all that establishing a great health service was a long-term proposition.

The remainder of this report Report suggests mechanisms for how this may be achieved.

"What is clear is that the issue needs to be addressed. There is a growing body of evidence that there is a direct link between poor communication, bullying and poor patient outcomes. I would urge all those involved in this Review to recognise the ultimate aim of the whole process. That is, of course, high quality health care, with the best possible outcomes for those that have put their trust in us to care for them."

— Quote "When my family and I complained to the hospital and then to the ACT Health Commissioner, the hospital and nursing staff at [redacted] informed my daughter and I on three separate occasions that the reason no registered medical officer could

attend my mother that weekend was due to 'the culture' of not calling medical staff on the weekend due to the fear of a backlash. In other words, the culture of bullying and harassment of staff. As you are aware, the hospital has done nothing to change this culture despite our many pleas and requests both in person and writing."

<u>– Quotes</u> from submissions

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Elements of a Great Health Service

What constitutes a great health service and how is it achieved?

Culture

It is increasingly recognised across both the public and private sectors that the combined impacts of culture and strategy are the primary levers for organisational effectiveness. (129)(22). It is common for organisations to have detailed plans for strategy development and implementation. Less common is an understanding of the power of culture, which is often becomes of secondary importance

_and <u>is</u> not integrated with strategy. The Reviewers believe this is an accurate description of the ACT Public Health System.

Ideally senior leadership of an organisation constantly expresses and lives their stated values—thus promoting the desired culture daily. These values need to underpin strategy documents and operational plans. Similarly, job descriptions for recruitment of senior personnel, and their Performance Development reviews need to pay far greater attention to the candidates understanding and acceptance of the organisational values.

Culture is the tacit social order of an organisation, which shapes behaviours and defines what is encouraged, discouraged, accepted, or rejected within a group. Such cultural norms, both good and bad, build over many years and are durable.

Effective workplace cultures⁽²⁰⁾ are person-centred, learning-focused and evidence-based, adaptive to changing healthcare requirements and supported by staff who take responsibility for delivering quality outcomes.

In such organisations, staff hold a shared understanding of what they need to achieve individually and collectively. Innovation and creativity are encouraged and supported and appropriate change is driven at all levels of the organisation.

The formal governance arrangements in high performing health services enable continual evaluation of systems and processes, taking on board feedback from staff, patients and stakeholders at regular intervals. Shared governance is in place to ensure evidence from a variety of sources is considered when making decisions.

High performing health services are happy places to work and make for safer patient care and improved staff wellbeing. They display the following traits:

- they deliver outcomes that matter to patients
- everyone is treated with respect and staff trust each other
- <u>◆</u>there is confidence in leadership
- staff are proud of the service they provide and the place they work, and
- when problems occur, multiple stakeholders work together to identify issues and drive quality improvement.

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The evidence presented in the previous Section 3 of this Interim Report reveals public health services that require significant attention towards rebuilding, achieving, and sustaining a healthy culture. This finding aligns with those included in the previous KPMG⁽³⁾ and the ACT Auditor-Generals of the previous KPMG⁽³⁾ are ports of the previous KPMG⁽³⁾.

Values

How the values of an organisation are understood and adopted broadly by the entire workforce, is a key mechanism to cultural strengthening.

It is worth examining the values of the ACT Public Health System and the degree to which behaviours reflect those values.

The values of the pre-existing ACT Health(2423) state the following aspirations:

Improving the quality of healthcare across the ACT is a key priority for ACT-Health, as we aim to be the safest healthcare system in Australia, delivering-high-quality, person-centred care that is effective and efficient. We often seepeople in our community at their most vulnerable. The way we interact with them is extremely important and directly influences their experience of our care.

Care

Go the extra distance in delivering services to our patients, clients and consumers. Be diligent, compassionate and conscientious in providing a safe-and supportive environment for everyone. Be sensitive in managing information and ensuring an individual's privacy.

Be attentive to the needs of others when listening and responding to feedback from staff, clinicians and consumers.

Excellence

Be prepared for change and strive for continuous learning and quality improvements. Acknowledge and reward innovation in practice and outcomes. Develop and contribute to an environment where everymember of the team is the right person for their job and is empowered to perform to the highest possible standard.

Collaboration

Actively communicate to achieve the best results by giving time, attention and effort to others. Respect and acknowledge everyone's input, skills and experience-by working together and contributing to solutions. Share knowledge and resources willingly with your colleagues.

Integrity

Be open, honest and trustworthy when communicating with others and ensure correct information is provided in a timely way. Be accountable, reflective and open to feedback. Be true to yourself, your profession, consumers, colleagues and the government.

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More broadly, the values and signature behaviours espoused by the ACT Public Service(2324) across all agencies are enshrined in the Public Sector Management Standards and describe a system that:

In demonstrating respect

We take pride in our work

We value the contribution of others

We relate to colleagues and clients in a fair, decent and professional manner

In demonstrating integrity

We do what we say we'll do, and respond appropriately when the unexpected occurs We take responsibility and are accountable for our decisions and actions

We engage genuinely with the community, managing the resourcesentrusted to us honestly and responsibly

In demonstrating collaboration

We work openly and share information to reach shared goals

We take on board other views when solving problems and welcome feedback on how we can do things better

In demonstrating innovation

We look for ways to continuously improve ourservices and skills We are open to change and newideas from all sources

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The Calvary Mission and Values align to the Little Company of Mary and are as follows:

Our Values are visible in how we act and treat each other. We are stewards of the rich heritage of care and compassion of the Little Company of Mary. We are guided by these values.

Hospitality

Demonstrates our response to the desire to be welcomed to feel wantedand to belong. It is our responsibility to extend hospitality to all who comeinto contact with our Services by promoting connectedness, listening and responding openly.

Healing

Demonstrates our desire to respond to the whole person by caring for theirspiritual, psychological and physical wellbeing. It is our responsibility tovalue and consider the whole person, and to promote healing throughreconnecting, reconciling and building relationships.

Stewardship

Recognises that as individuals and as a community, all we have has been given to us as—a gift. It is our responsibility to manage these precious resources effectively now and for the future. We are responsible for striving for excellence, developing personal talents, material possessions, our environment, and handing on the tradition of the Sisters of the Little Company of Mary.

Respect

Recognises the value and dignity of every person who is associated with our Services. It is our responsibility to care for all with whom we come intocontact with justice and compassion, no matter the circumstances, and we are prepared to stand up for what we believe and challenge behaviour that is contrary to our values.

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Some observations on these three value statements are warranted-:

 Whilst Calvary Public Hospital is one of the three arms of the ACT Public Health-System,

the engagement with the Health Directorate is by way of a Contract for Servicethe Calvary Network Agreement fundamentally expressed in price/volume terms. and Performance Plan which were agreed with the Little Company of Mary Health Care. It is appropriate, in these circumstances, that the values of Calvary Public Hospital should reflect those of the Little Company of Mary Health Care as specified in the Calvary Network Agreement (see clause 5.3), and not be conflated with ACT Health values. What would be appropriate in future iterations of the contract, however, is to collectively agree and incorporate other aspects in the Service Agreement, which reflect how the needed cultural changes and

the Performance Plan, which reflect how the needed cultural changes and other areas of collaboration are being initiated and implemented monitored.

- The- Health Directorate should adopt the values of the ACT Public Service rather than the values—for ACT Health, which are much more <u>health</u> service specific. It is understood the -adoption of- these values is supported by the Director-General.
- The <u>existing_ACT Health</u> <u>valuesValues</u> align with the service specific values of Canberra Health—Services care,

excellence, collaborationCare, Excellence, Collaboration and integrityIntegrity. It is understood the CEO for Canberra Health Services is commencing discussions with staff regarding the appropriateness of these values given the new organisational arrangements. Such a process is fully endorsed by the Reviewers.

new organisational arrangements. Such a p scoop is fully ende sed by the Reviews so

- The organisational arrangements whereby the unified ACT Public Sector Agency reports to asingle Head of Service appropriately reflects the relative smallness of ACT compared to other jurisdictions. What is important in such an arrangement is that the Minister for Health and Wellbeing remains fully engaged with the Head of Service in head of agency appointments, contract development and performance monitoring. There is an important role for the Minister in contributing to workplace culture and such involvement enables this to occur.
- There is little doubt that the values of care and excellence (ACT Health) and healing (Calvary Public Hospital) are shared broadly across the ACT Public Health System. As a norm,

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the vast majority of staff provide high quality care and strive for excellence. As the data in the As the evidence in Section 3 indicated, the values of Collaboration, Integrity and Respect are less embedded.

preceding Section indicated, less embedded are the values of collaboration, integrity and respect.

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It is clear that there is a discrepancy between the stated and lived values of each of the three arms of the ACT Public Health System. Addressing this difference will be the key mechanism to establishing a great health service.

"The organisation does not live by its values and the strength of good leadership is not felt."

"I feel that the core values of 'Care and Excellence' are severely compromised by the push for statistics - the need to show increased numbers of referrals and discharges and shorter treatment times. This leads to changes in practices to improve numbers, but which are not necessarily beneficial to clients."

"When you are overworked and under-resourced your ability to CARE is less, the commitment to EXCELLENCE wanes to the point of doing just enough and your ability to COLLABORATE and act with INTEGRITY at all times is seriously restricted by the need to #_just get stuff done."

"ACT Health does not only need values, it needs to relearn ethical conduct."

——Quotes —from submissions

Focused attention on the organisational values is required. (24)(26). The organisational strategy and desired leadership traits across the three arms of the ACT Public Health System should be much more embedded in the stated values. Monitoring the broader adoption of values should be reflected through a clear set of Key Performance Indicators (KPIs). The Health Directorate, in addition to ensuring attention to its own staff, should have a role in facilitating this process across the ACT Public Health System.

Recommendation 1

That the three arms of the ACT Public Health System should-commence a comprehensive process to re-engage with staff in-ensuring the vision and values—are lived, embraced at all levels, integrated with strategy and constantly reflected in leadership. To achieve this the Health Directorate should take the lead in providing the necessary tools and guidelines and coordinate the implementation by Canhagas Health Services. Calvary Public Hespital

Measuring Organisational Effectiveness

As emphasised earlier in this Section, organisational effectiveness is the combined impact of culture and strategy. Appropriate measurement and monitoring of performance is a necessary element of demonstrating ongoing and durable changes in the culture of the ACT Public Health System, and hence, building a great health service.

It became clear during discussions with management and clinicians that, not unlike many other health services in Australia, such performance monitoring/measurement which reflected the organisational values and strategic goals was not in place.

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"Collecting data, analysis, developing plans and goals and measuring outcomes against the achievement of goals is fundamental to cultural change. Collecting good, meaningful data is necessary to understanding what problems exist.— Change in that data over time can then be used to identify recurring issues or trends, make improvements to systems and processes and allow services to improve their reputation."

"A process to support the implementation, review and monitoring of [anti-bullying and harassment] policy. Systems must be in place to determine the extent of bullying and harassment behaviours in an organisation or workplace and to understand the perspective and effect on those who have been harassed."

"We have consistently raised issues with the lack of both planning to evaluate, and the actual evaluation of, policies (including workforce and health service delivery policies) after implementation."

"Set people up with tools for success. Each unit needs a common reporting line to ensure proper procedures are being followed."

- Quotes from submissions

Some of the features cited in the current process for performance monitoring included:

- A compliance approach rather than using performance data for continual system improvement. The way data is fed back to clinicians to enable individual and collective performance improvement is critical.
- A misplaced emphasis on a limited number of measures. Whilst National Emergency Access Targets (NEAT) and National Elective Surgery Targets (NEST) are important access indicators, they need to be balanced against other performance indicators, particularly those that measure outcomes that matter to patients and communities.
 outcomes that matter to patients and communities.
- Inadequate engagement of clinicians in developing the appropriate performance measures and monitoring the extent of ongoing engagement.
- ■Inadequate attention on measures of staff wellbeing and their professional development.
- The desire of patients for best outcomes and optimal experience when receiving care should be essential elements of performance measuring and monitoring. A focus on things that can't be easily measured (care, compassion, comfort and help) is important in addition to quality and timeliness of clinical interventions.

A number of these features were cited in organisational submissions including the AMA.

Recommendation 2

That the Health Directorate, in conjunction with Canberra Health-Service and Calvary Public Hospital develop an appropriate suite of measures that:

▲ reflect on elements of a great health service - both culture and strategy

- ▲ monitor patient/client perspectives of outcomes/experience
- engage clinicians in their development, and
- -measure and monitor progress in clinical engagement.

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- reflect on elements of a great health service both culture and strategy
- monitor patient/client perspectives of outcomes/experience, and
- engage clinicians in their development.

5. Addressing Bullying and Harassment

Obligations and Reality

There are a number of relevant ACT and Commonwealth pieces of legislation that directly deal with the obligations of employers to ensure a healthy and safe workforce. Key amongst these— is the WHS Act⁽¹⁷⁾ which deals with bullying and harassment through an employer requirement to take all reasonably practicable steps to manage health and safety risk in their workplaces.

As submissions to the Review indicated, it is not enough that the ACT Public Health System take 'reasonable steps' to prevent the conduct. Instead, it must take 'all reasonable steps' to have a competent defence against allegations the workplace is unsafe, which requires at least.

- having a plan to identify and address unacceptable behaviour
- Learning to recognise through training what is and what is not acceptable behaviour and what behaviour is acceptable or valued (including likely consequences for wrong behaviour)
- having a bullying prevention policy and procedures to address bullying in the workplace, and
- having processes for managing complaints (both informal and investigative) that are procedurally fair, transparent, timely and allow for external, impartial providers of mediation/investigation.

Similarly, the <u>then</u> ACT Public Service Commissioner for Public Administration issued a document in 2010 titled: *Preventing work bullying guidelines – Guide to prevention and management of work bullying* (2010 Guidelines). (2010 The introduction to this document succinctly states:

"The ACT Public Service (ACTPS) aims to create a positive work environment that is free from work bullying, harassment and all forms of discrimination. Respectful and <u>courteous</u> behaviour is essential to creating great ACTPS workplaces which are productive and effective.

Every ACTPS worker has the right to work in an environment that is free from work bullying, discrimination and harassment and to be treated with dignity and respect Organisations that value and promote dignity and respect are likely to have reduced occurrences of inappropriate behaviour. Chief Executives, executives, managers, employees and all workers of the ACTPS have a responsibility to ensure that the working environment is safe and equitable by preventing conduct that constitutes work bullying, discrimination or harassment."

The *Public Sector Management Act 1994* (PSM Act) establishes the core values and behaviours expected of all workers. As stated in the PSM Act, workplace bullying is not tolerated and is a breach of the ACTPS code of ethics.

There appears to be a clear disconnect between the obligations of employers described in the

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WHS Act, the aspirations of the ACTPS Work Bullying Guidelines and the reported evidence of workplace bullying and harassment presented in Section 3 of this Interim Report.

It is apparent that the 2010 Guidelines are not delivering on $\frac{\text{this strategytheir stated aims}}{\text{ACT Public-}}$ in the

Health System. While broader than the scope of this Review, it would be appropriate for the ACTPS to review the content, agency adoption and implementation of the 2010 Guidelines.

"In my years as a registered nurse, employed in both public and private hospitals across the UK and Australia, the workplace culture within the [redacted] is the worst by far that I have seen."

"The treatment of staff in [redacted], is appalling. I have worked in [redacted] for nearly [xx] years and have never witnessed such a disgraceful approach to work ethics. There has been a number of staff leave the area due to the stress of how they were treated. At ACT Health, we feel there is nowhere to go, no one who will listen, no one who will stand up for us, that shows that Health support the bullying of managers."

"I have been subjected to bullying and witnessed bullying in [redacted] for many years now. I have reported through every means available to me but not one of the following means of reporting has ever been followed through. No outcome has ever come of me making any reports. I believe ACT Health only has these programs to be able to tick the box to say that we have all these programs and no one really cares about what is reported."

"I consider myself to be highly professional, competent and trustworthy. Until recently, I have felt very well supported by those in leadership roles, and I in turn have actively supported them (both past and present leaders) to achieve their vision(s) to improve health care within the ACT. Unfortunately, I now find myself in the position where I am seriously considering progressing a bullying and harassment claim. A disappointing outcome, and one that makes me seriously question my desire to continue to be associated with people whose values appear to be so different to mine."

"The endless emotional abuse and mind games by management has resulted in many staff members feeling like the only way anything will change is if they find work elsewhere. Staff members, including myself, have voiced concerns to other members within the branch over the culture within the unit and the way that people are being treated, however feel that nothing has been done to change the behaviour. Many feel that making a formal complaint would only make matters worse, for fear of later being the target of poorer treatment. I, and others, have been keeping documentation of incidents of poor treatment or those that do not align with the ACT Government's Preventing Work Bullying Guidelines."

"There is ZERO consequence for the bully or even at the least feedback about how their behaviour may be contributing. There is no such thing as mediation. So the person who suffers the most is the person who has been bullied. They suffer more if they report it, because it usually changes their workplace, which is a big upheaval. But the biggest psychological insult is that they are invalidated."

- Quotes from submissions

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