

Agenda

3.15pm – 5.15pm 19 November 2019

Level 5 Conference Room, ACT Health Directorate, 6 Bowes St, Woden.

	Sponsor
Item 1 Welcome and apologies	
1.1 Introductions	Chair
Item 2 Minutes of the previous meeting	
2.1 Minutes from 4 September 2019	Chair
2.2 Actions Arising - for discussion	Chair
Item 3	
3.1 Presentation: Update from ANU	D-G, ACTHD
Item 4 Updates	
4.1 Member Updates - verbal	All members
Item 5 Decision and discussion items	
5.1 Referrals from Panel - Report from ACTHD and Calvary	D-G, ACTHD CEO, Calvary
5.2 ACT Health Clinical Advisory Committee	D-G, ACTHD
5.3 Measures of Success	Chair
5.4 Annual Review - Terms of Reference	Chair
5.5 NGO Engagement	D-G, ACTHD
5.6 Culture Review Implementation Program Risk	D-G, ACTHD
5.7 Culture Review Implementation Program Plan	D-G, ACTHD
5.8 Implementation of Recommendations and Project Plan	Chair
5.9 Culture Review Implementation Communications and Engagement Strategy	Chair
Item 6 Information items	
6.1 Clinical Leadership Forum Communique	Chair
Item 7 Other Business	
7.1 Oversight Group Communique	Chair

Next meeting:

21 January 2020, 10.00am-12.00pm, Canberra Health Services, Building 24, Meeting Room 01

Upcoming meetings:

- | | | |
|-------------------|-----------------|--------------------------|
| • 21 January 2020 | 10.00am-12.00pm | Canberra Health Services |
| • 17 March 2020 | 10.00am-12.00pm | Calvary Hospital |
| • 19 May 2020 | 10.00am-12.00pm | ACT Health Directorate |
| • 21 July 2020 | 10.00am-12.00pm | Canberra Health Services |

Minutes

4 September 2019

10:00am – 12:00pm

Gang Gang Room, Level 1, ACT Legislative Assembly Building

Members:

- Ms Rachel Stephen-Smith MLA, Minister for Health (Chair)
- Mr Shane Rattenbury MLA, Minister for Mental Health (Deputy Chair)
- Mr Michael De'Ath, Director-General, ACT Health Directorate
- Ms Bernadette McDonald, Chief Executive Officer, Canberra Health Services
- Ms Barbara Reid, ACT Regional Chief Executive Officer, Calvary, ACT
- Ms Madeline Northam, Regional Secretary, Community and Public Sector Union
- Mr Matthew Daniel, Branch Secretary, Australian Nursing and Midwifery Federation, ACT
- Dr Antonio Di Dio, President, Australian Medical Association, ACT
- Ms Darlene Cox, Executive Director, Health Care Consumers Association, ACT
- Dr Richard Singer, President, Australian Salaried Medical Officers' Federation, ACT
- Dr Peter Hughes AOM, President, Visiting Medical Officers Association, ACT
- Professor Russell Gruen, Dean, College of Health and Medicine, Australian National University
- Professor Michelle Lincoln, Executive Dean of Health, Faculty of Health, University of Canberra

Staff present:

- Ms Jodie Junk-Gibson, Executive Branch Manager, Culture Review Implementation Branch, Office of the Director-General, ACT Health Directorate (Adviser)
- Ms Catherine Corver, Communications Manager, Culture Review Implementation Branch, Office of the Director-General, ACT Health Directorate (Secretariat)
- Ms Melissa James, Chief of Staff, Office of Minister Rachel Stephen-Smith MLA
- Mr Ash van Dijk, Senior Adviser, Office of Minister Rachel Stephen-Smith MLA
- Ms Sandra Cappuccio, Mental Health Advisor, Office of Minister Shane Rattenbury MLA

Item 1 Welcome

The Chair formally opened the meeting, welcomed members and noted her appreciation for everyone taking time out of their busy schedules to commit to the work of the Oversight Group.

The Chair noted that as it was her first meeting, she was privileged, as Minister for Health to work in partnership with Minister Rattenbury and with all members to lead this important work to improve the workplace culture across the ACT public health system.

She reminded members that the role of the Group is to provide high-level governance of the implementation of the twenty recommendations of the *Final Report - Independent Review into the Workplace Culture within ACT Public Health Services* (the Review).

She confirmed that the meeting had a full agenda, including a presentation at Agenda Item 3, from Associate Professor Alessandra Capezio and Dr Sally Curtis from the Australian National University (ANU) Research School of Management, College of Business and Economics. The presentation would talk to the development of a Culture Change Framework to support and inform the initiatives to improve the workplace culture in the ACT public health system. She affirmed that the work the ANU will be undertaking will highlight short and medium-term tasks as part of the more longer-term tasks that are happening across the system.

The Chair confirmed that the Chief Executive Officer of Canberra Health Services, Ms Bernadette McDonald will present at Agenda Item 5.3 to update the group on the work they have been progressing on their referrals.

Finally, she noted that at the end of the meeting, there will be a signing of a certificate that publicly commits each member in supporting the drive for positive culture change across the ACT public health system. She invited all members to remain for that signing and to be present for a photo to be taken to mark the occasion.

The Chair asked if any member had any actual or perceived conflicts of interest to declare. Noting no comments, she opened the meeting.

Item 2 Minutes of the previous meeting**2.1 Approval of minutes**

The Chair noted the Minutes from the meeting of 11 June 2019 and confirmed with Ms Madeline Northam that her previous changes had been incorporated. The Chair noted that an amendment to Richard Singer's position was made to reflect his title of 'President of ASMOF-ACT.' Richard confirmed the updated minutes were correct. The minutes were seconded by Professor Russell Gruen and endorsed by the group.

2.2 Actions arising

The Chair noted that most Action Items had been completed. Members agreed. The Chair reaffirmed that the Oversight Group meetings would now occur every two months. She raised the idea of having the meeting location rotate across the three arms of the system. All members agreed. It was agreed by Director-General, ACT Health Directorate, Mr Michael De'Ath to host the November meeting, with the Secretariat organising a schedule of meeting locations for future meetings.

Item 3 3.1 Presentation from ANU Research School of Management: The application of organisational behaviour in support of improving the Workplace Culture in the ACT public health system – Associate Professor Alessandra Capezio and Dr Sally Curtis.

Mr De’Ath welcomed and introduced Alessandra and Sally and confirmed that the ACT public health system had entered into a partnership agreement with the ANU.

The presenters noted the following points of the partnership:

- The partnership is a pioneering opportunity for the ACT public health system to bring best practice evidence-based methodology into healthcare, across the system in the areas of organisational behaviour, workforce and leadership.
- Definition of ‘evidence-based’ practice in organisational behaviour is the conscientious (effort), explicit (transparent) and judicious (critical of quality) use of evidence from multiple sources to increase the likelihood of a favourable outcome – (Briner, Denyer and Rousseau, 2009:19).
- Objectives of the work will be to identify interventions most likely to work, overcome solutioneering and decision biases, and avoid management quick fixes and fads.
- Evidence-based methodology will help to clearly state what the issues are and what the root causes are before the solutions can be identified and applied.
- It was acknowledged that there was a need to apply this approach to the people aspects of our business across all three arms of the system.
- Important to recognise that system-wide change is needed, coupled with balancing the needs and implementation requirements of each individual arm.
- The approach is a five phased evidence-based methodology for the ACT public health system which is deliberate and well-planned. This agreement focuses on the first two phases: 1: Problem Clarification and 2: Development of the Change Framework.
- Phase 1 – September and October 2019 – Problem clarification stage, reviewing and identifying symptoms, i.e. why is bullying and inappropriate behaviour happening? And then what are the root causes of this behaviour, knowing that many factors could be contributing to it. Focus group and individual interviews will be conducted during this phase to clarify the issues and causes and priority change areas.
- Phase 2 – January to May 2020 – draft rapid evidence-based framework provided to leaders of the ACT public health system in late January, followed by additional consultations to finalise framework by late May, supported by scientific literature and evidence. Similar work has been successfully applied to the National Health Service in the United Kingdom.
- Learned lessons – successful organisational change occurs only when problems and root causes are understood from the start; goals are attractive and focused on shared interests of employees and business objectives; staff are empowered to change and know what accepted behaviours are; and, change is clearly communicated and articulated over short, medium and long-term time frames.

Key themes of discussion post-presentation:

- General acknowledgement that the partnership with the ANU was an innovative idea; commending the ACT public health system for accessing a service from the ANU with relevant expertise and well-grounded in academic and experiential principles.

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- It was agreed that due to the diversity of the workforce that it was crucial that simple, plain English definitions of what evidence-based methodology meant and the benefits to people were clearly and unambiguously explained.
 - All members anticipated that this project of work would lead to positive, sustainable change, with people feeling the change.
 - It was noted that this project was future-focused and solution oriented.

ACTION:

The Secretariat will provide:

- **Members with information about the approach to selecting interviewees and conducting interviews and focus groups.**
- **Summary information of the work with the ANU and its objectives will be produced by the Secretariat and provided to Oversight Group members to send out to their members.**

Item 4 Member Updates

4.1 Australian Medical Association (AMA)

Dr Antonio Di Dio acknowledged that currently industrial relations matters have led to an increase in mental health pressures upon his members. He noted that members have equal levels of both cynicism and optimism for positive culture change across the ACT public health system.

4.1 a. University of Canberra (UC)

Professor Michelle Lincoln noted that she has been having regular conversations with Jodie Junk-Gibson, Executive Branch Manager, Culture Review Implementation, about how best to access students' voices in the space of the ACT public health system. She was keen to look at ideas to support students effectively.

4.1 b. Health Care Consumers Association (HCCA)

Ms Darlene Cox emphasised that her association was always focused on ensuring that the ACT public health system ensured high quality safety and care for the community. She noted that most people in the community do have a positive experience in the ACT public health system and was keen to work with the Oversight Group to shape positive narratives around care and ensure that they are effectively communicated out to the community.

4.1 c. Community and Public Sector Union (CPSU)

Ms Madeline Northam expressed her members' appreciation and thanks to the Minister for her recent meetings with staff across the system. She affirmed that because of her visits, members are feeling heard.

She confirmed that previous recruitment processes within Canberra Health Services (CHS) were not merit based for tenures between three to six months. She was pleased to report that since she raised this issue the People and Culture area of CHS have collaborated extensively with her organisation to rewrite the process, and they are pleased with progress with this task.

4.1 d. Australian Salaried Medical Officers' Federation (ASMOF-ACT)

Dr Richard Singer confirmed that, since the last Oversight Group meeting, a regular meeting with the People and Culture area of CHS has been established. So far one meeting has been held and he is pleased with the engagement.

4.1 e. Australian Nursing and Midwifery Federation (ANMF)

Mr Matthew Daniel noted that his members are starting to see a marked difference in the way staff are speaking to each other. He has also established a regular meeting with the People and Culture area of CHS and is pleased with engagement and discussions.

4.1 f. Visiting Medical Officers Association (VMOA)

Dr Peter Hughes noted some trust issues and noted recent media articles in the Canberra Times concerning culture issues. He confirmed that he had forwarded contact details of the Health Services Commissioner, Karen Toohey, to his members. Discussion confirmed that there were also several other options available to assist members that may be experiencing difficulties, these included the Employee Assistance Program, human resource areas of each organisation and the Employee Advocate.

4.1 g. College of Health and Medicine ANU

Professor Russell Gruen confirmed that the ANU were committed to a growth in health and medicine. They are investing strongly, with a recent strategy and business case being sent to the Chancellor, which was subsequently endorsed. He was keen to update the Oversight Group on progress with these activities, noting that there may be opportunities to collaborate on certain tasks.

4.1 h. Minister for Mental Health

Minister Shane Rattenbury noted that training issues were identified as a gap that contributed to a recent assault at the correctional facility Alexander Maconochie Centre. In citing this gap, he confirmed that focusing on resourcing to ensure system-wide capacity is critical and that there are opportunities for the ACT public health system to learn from this incident.

4.1 i. Calvary Public Hospital, Bruce (CPHB)

Ms Barbara Reid, Regional Chief Executive Officer, Calvary ACT, provided the following updates:

- A draft positioning paper in progress on Workplace Positive Culture to frame the rollout of cultural change and leadership development programs. This will also now be aligned to the new culture survey process.
- Rollout has commenced of the updated performance and development planning process and the values-based capability framework.
- Work continues in referral areas comprising several different activities, including facilitated conversations, group and individual meetings and misconduct processes.

4.1 j. Canberra Health Services (CHS)

Ms Bernadette McDonald, Chief Executive Officer, Canberra Health Services (CHS), provided a comprehensive presentation outlining her organisation's significant effort in the following areas:

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- [REDACTED]
 - People and Culture Business Partners are supporting and assisting with planning for culture change to be progressively implemented across CHS;
 - Using a practical management approach – planning, reviewing resources/staffing structure, confirming and setting expectations;
 - Phased approach to effect positive, sustainable change;
 - Many issues identified, with some themes emerging;
 - Work is taking time and begins with listening;
 - Focus is not only about solving problems but building a strong and positive workplace culture;
 - Completed Culture Initiatives include:
 - Finalisation and implementation of the CHS Vision;
 - Finalisation and implementation of the CHS Values;
 - Implementation of Culture Survey Champions;
 - Updated organisational structure;
 - Commencement of Employee Advocate;
 - Agreed methodology for dealing with cultural ‘referrals’;
 - Monthly reports on Preliminary Assessments and investigations submitted to Health Services Executive Committee;
 - Executive Development session;
 - Monthly Senior Managers forum – to update on topical information and ensure cascading of messages down to their teams.
 - In progress Culture Initiatives include:
 - Workplace Culture Survey due for release in November 2019;
 - Ongoing monitoring of People and Culture staffing structure;
 - Occupational Violence Strategy – draft version, feedback being considered;
 - Training programs under review
 - Reviewing the Clinical Director role – expectation and capability development across the organisation;
 - Psychological support for staff after critical incidents – procedure in development;
 - Choosing Wisely Program is being assessed
 - Review of governance processes;
 - Further Executive development sessions;
 - Development of a definition of ‘positive workplace in CHS.’

4.1 k. ACT Health Directorate (ACTHD)

Mr De’Ath, noted key progress points as:

- People Strategy Work Program – a work plan has been developed and agreed at the Corporate Services, Governance and Finance Committee;
 - ACT Health Directorate Climate Survey – planning is underway with an anticipated release in October;
 - Respect, Equity, Diversity Contact Officer (REDCO) – program of activity being refreshed. A service provider has been engaged to conduct a development workshop for REDCO officers. The Employee Advocate has been invited to participate in the first network meeting;
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- Inclusion – the Directorate is committed to developing a framework with initial planning underway;
 - Staff Performance Development Plans – are under review to incorporate new values;
 - Work Health and Safety – development of the WHS Management System is underway with an initial plan agreed at the Corporate Services, Governance and Finance Committee;
 - Review Recommendation 1 – Values Refresh Project – a draft Implementation Plan has been circulated to the Directorate Leadership Committee and executive staff for comment. An ACT Health Directorate Director-General video message has been produced, that will launch the values across the Directorate. A Values Working Group consisting of Culture Champions is also supporting this project.
 - Review Recommendation 3 – Positive Culture Uplift Program – the Directorate received a proposal from a service provider to produce a cultural uplift program for all Directorate staff. An initial meeting with the provider and Senior Director People Strategy has happened with ongoing evaluation to occur.
 - Review Recommendation 15 – Recruitment – the Directorate has completed its transition from the Taleo system to the whole of government recruitment process. Workplace Research and Associates have been selected to review existing selection documentation, conduct recruitment and selection training during August and September. It will incorporate unconscious bias training and managing conflict of interest education. A new recruitment guideline has been drafted. Finally, a People Strategy representative is on the ACT Public Service Recruitment Working Group, created to improve, contemporise and standardise recruitment processes across directorates.
 - Review Recommendation 6 – Non-Government Organisation (NGO) Forum – Discussions and planning for the initial NGO Leadership Forum in October is well advanced. Considerable collaboration has occurred between the ACT Health Directorate and several NGOs to progress this task.

Minister for Health

The Chair thanked everyone for their updates and noted the value of Ms McDonald's comprehensive update. She requested that similar updates be provided by the ACT Health Directorate and Calvary at future meetings.

ACTION:

It was confirmed that ACTHD and CPHB would provide a comprehensive update at the November 2019 meeting. The Secretariat will provide a schedule of these updates for future meetings.

Item 5 Decision and discussion items

5.1 Referrals from Panel

This was incorporated into the Organisation updates above.

5.2 Measures of success

The Chair noted that no feedback was provided by members to this agenda item and proposed, that this task would be progressed out-of-session in a more structured way.

The Chair asked that Ms Junk-Gibson and Ash van Dijk meet to develop a draft approach to the measures of success for further review by Oversight Group members before next meeting.

ACTION:

Secretariat to meet with Ash van Dijk to develop a draft approach to measures of success and provide to members out-of-session to enable discussion of agreed measures at November 2019 meeting.

5.3 Culture Review Implementation Communications Strategy

The Chair asked for comments on the draft strategy.

Ms Cox commented that she liked the 'Communications Principles' section and wished to make the first principle stronger by including the word 'sustain' – 'We will build and **sustain** relationships.'

Members agreed with this comment.

The Chair noted that the Clinical Leadership Forum is also looking at engagement and noted that it will be important for this strategy to align with this forum. She also noted that the strategy needs to clearly articulate how the system will communicate work that's underway across the system to the community.

The Chair asked for members to provide feedback on the strategy to Ms Junk-Gibson and for the updated strategy to be placed on the November meeting agenda.

ACTION:

Members to provide feedback on the Culture Review Implementation Communications Strategy to Ms Junk-Gibson.

Updated Culture Review Implementation Communications Strategy to be provided at November 2019 meeting.

5.4 Implementation of Recommendations

The Chair asked Mr De'Ath to speak to this item.

Mr De'Ath asked members to note the progress of the implementation of the recommendations and feedback on the project planning document.

Mr Daniel asked how success would be incorporated into the document. Mr De'Ath confirmed that this will be added to the document.

Ms Cox noted the significant improvement to how this task has been structured, noting the effectiveness of the format of the document.

The Chair asked that members provide additional feedback on this document to the Secretariat.

ACTION:

Additional feedback on the project planning document to be provided by Oversight Group members to the Secretariat.

Success measures will be factored into the project planning document.

5.4 a. Oversight Group to arrange independent and external review of the implementation of the recommendations of the Review over three years

The Chair raised an additional item to the agenda concerning the requirement of the Oversight Group to appoint an independent external entity to conduct three annual reviews of the recommendations of the Review and impact on cultural change within the ACT public health system.

The Chair noted that she had been in contact with Mr Mick Reid, the lead author and Independent Panel Chair of the *Final Report - Independent Review into the Workplace Culture within ACT Public Health Services*, to discuss his expectations and this recommendation and how the first annual review would be coordinated.

The Chair confirmed with members that these evaluations would not be a repeat of the Review, rather it would involve a mix of interviews with identified stakeholders and desktop evaluation methods to assess the effectiveness of work undertaken in implementing the recommendations of the Review.

It was agreed that a draft Terms of Reference document would be prepared and provided at the next meeting.

ACTION:

Draft Terms of Reference for the independent and external review of the recommendations of the Review to be provided at next meeting.

5.5 Stakeholder Engagement - Colleges

The Chair asked Mr De'Ath to speak to this agenda item.

Mr De'Ath noted that the Chief Medical Officer had progressed contact with medical colleges to identify the establishment of a Medical Colleges Forum.

The Chair noted that the focus of the forum should be on delivering quality healthcare to patients, not culture. However, it would also form part of the feedback loop for oversight of Culture Review Implementation. Members agreed.

Mr De'Ath noted that timing for when feedback from this forum would be provided to the Oversight Group may need to be refined from the initial expectation of two weeks prior. Further discussions will be held with Executives to refine this forum.

Mr De'Ath also confirmed that a Terms of Reference document would be produced to govern the forum.

ACTION:

Secretariat will confirm the decision to establish a Medical Colleges Forum with the Chief Medical Officer, who would be the Secretariat for this forum.

Item 6 Information Items

6.1 Culture Review Implementation Steering Group Terms of Reference

The Chair asked Mr De'Ath to speak to this agenda item.

Mr De'Ath confirmed that the Culture Review Implementation Steering Group (the Steering Group) meets monthly and has met on four occasions, with the next meeting occurring on Friday 6 September 2019.

Mr De'Ath noted that the focus of the Steering Group was on the implementation of the recommendations of the Review across the three arms of the ACT public health system. He cited the following key achievements of the Steering Group:

- Pursuing and securing the partnership with the ANU School of Research in the development of the Culture Framework;
- Project planning, including strategic planning;
- Establishing governance across the three organisations, associated with direction, facilitation and overseeing implementation of the recommendations;
- Budget confirmation.

6.2 Clinical Leadership Forum Communique

The Chair noted that the inaugural meeting of the Clinical Leadership Forum (CLF) occurred on 24 July 2019. She confirmed that the forum is a good opportunity to engage with clinicians within the ACT public health system on matters directly impacting clinicians and an effective channel to enable feedback. It was also an important avenue that the Oversight Group will be able to engage with to facilitate positive culture change.

There was a request from the Oversight Group as to whether junior doctors could be represented on this forum.

Ms Lincoln asked how the sourcing of members was conducted and it was agreed that the initial expressions of interest would be reviewed prior to seeking further advice about the process.

Ms Reid asked if a senior clinician from Calvary could be invited to be a member of the forum.

The Minister confirmed that she will take advice on all the membership queries raised, although acknowledged that there was a need to be mindful of the size of the CLF to ensure its effectiveness.

Other Business

7.1 Oversight Group Communique

The Chair sought feedback to the Communique.

Ms McDonald asked that the 'Implementation of Recommendations' section be further strengthened by the addition of more information on key achievements discussed.

Members requested that because there was less discussion in the 'Stakeholder engagement – Colleges' that this section should be reduced.

ACTION:

All updates would be included, and the revised Communique would be approved accordingly and provided to the Minister before uploading to the ACT Health website.

8.1 Oversight Group Members Signing Public Commitment

Members signed the public commitment and a photograph was taken with the Chair.

ACTION:

Approved Communique and photo of signing will be uploaded to the ACT Health website.

Next Meeting: Tuesday, 19 November 2019

3:15pm – 5:15pm

ACT Health Directorate (Host)

Conference Room, Level 5, 6 Bowes Street, Woden.

Action Items

Meeting Date	Agenda Item	Action Required	Responsible Officer	Due Date	Status
04/09/2019	3.1	The Secretariat to provide members with summary information of the work with the ANU and its objectives so that that Oversight Group members can send out to their members.	Secretariat	19 November 2019	Completed.
	4.1	ACT Health Directorate and Canberra Public Hospital Bruce will provide a comprehensive update at the November 2019 meeting.	Secretariat	19 November 2019	Completed. <i>See Agenda Item 5.1</i>
	5.1	Secretariat to meet with Ash van Dijk to develop a draft approach to measures of success and provide to members out-of-session to enable discussion of agreed measures at November 2019 meeting.	Secretariat	October 2019	Completed. <i>See Agenda Item 5.3</i>
	5.3	Members to provide feedback on the Culture Review Implementation Communications Strategy to Ms Junk-Gibson.	Members	October 2019	Completed. Feedback incorporated.
	5.3	Updated Culture Review Implementation Communications Strategy to be provided at November 2019 meeting.	Secretariat	19 November 2019	Completed. <i>See Agenda Item 5.9</i>
	5.4	Additional feedback on the project planning document to be provided by Oversight Group members to the Secretariat.	Members	28 October 2019	Completed. No feedback.

Meeting Date	Agenda Item	Action Required	Responsible Officer	Due Date	Status
	5.4	Success measures will be factored into the project planning document.	Secretariat	January 2020	Not completed yet as success measures need to be endorsed. <i>See Agenda Item 5.8</i>
	5.4	Draft Terms of Reference for the independent and external review of the recommendations of the Review to be provided at November meeting.	Secretariat	October 2019	Completed. <i>See Agenda Item 5.4</i>
	5.5	Secretariat has confirmed the establishment of a Medical Colleges Forum with the Chief Medical Officer, who would be the Secretariat for this forum.	Secretariat	20 September 2019	Completed
	7.1	All updates included, revised Communique approved accordingly and provided to the Minister before uploading to the ACT Health website and circulating to members.	Secretariat	20 September 2019	Completed
	8.1	Approved Communique and photo of the member signing of the commitment uploaded to the ACT Health website. Signed commitment certificate sent to all members.	Secretariat	20 September 2019	Completed

Finalised Items (for noting at the next meeting then deletion off the updated action list).

Meeting Paper

Agenda Item:	3.1
Topic:	Presentation: Update from ANU
Meeting Date:	19 November 2019
Action Required:	Noting
Cleared by:	Director-General, ACTHD
Presenters:	Associate Professor Alessandra Capezio and Dr Sally Curtis

Purpose

1. To update the Culture Review Oversight Group (Oversight Group) on the progress in developing the Culture Change Framework by the Australian National University, Research School of Management (ANU-RSM).

Background

2. A number of the recommendations from the *'Final Report - Independent Review into the Workplace Culture within ACT Public Health Services'* are directly linked to organisational behaviour, leadership and workforce. The ANU partnership will focus on developing a Culture Change Framework that seeks to implement those recommendations by providing a strategic framework to guide and inform future cultural change initiatives across the ACT public health system.
3. The partnership with the ANU-RSM was formalised by the Culture Review Implementation Steering Group.
4. The aim of the project is to develop a Culture Change Framework to support and inform the initiatives to improve the workplace culture across the ACT public health system.
5. The presentation by the ANU-RSM will build on the discussion from the initial presentation to the Oversight Group on 4 September 2019.

Issues

6. The first tranche of work being undertaken by the partnership focuses on the development of a Culture Change Framework: an evidenced-based model to inform a positive workplace culture in the ACT public health system. The framework will be researched, developed and evaluated within the ACT, and applied to our own processes to evolve a positive culture.

7. The development of the Culture Change Framework will ensure that:

- the model and required behavioural change is informed by the recommendations from the Review and through consultation with key stakeholders;
- measures will be developed to support the Culture Change Framework and an approach to evaluating the impact of interventions using rigorous methods;
- there is an assessment of available evidence (including literature review and engagement with professionals through facilitated conversations) to understand ACT-specific factors and inform development of individual action plans to address recommendations outlined in the Review to effect sustainable change; and
- a system-wide approach is developed, involving stakeholder engagement, drawing on expertise in the area of organisational behaviour, to support the incremental development of the public health system approach.

Recommendation

That the Oversight Group:

- *Note the presentation provided by the ANU on progress in undertaking the initial data gathering and analysis to create the foundation to inform development of a Culture Change Framework for the ACT public health system.*

Meeting Paper

Agenda Item:	4.1
Topic:	Member Updates
Meeting Date:	19 November 2019
Action Required:	Noting
Cleared by:	Chair
Presenter:	All members

Purpose

1. Members to provide an update to the meeting on progress and issues relevant to their culture review implementation process.

Background / Issues

2. The Director-General, ACT Health Directorate; Chief Executive Officer (CEO), Canberra Health Services, and Regional CEO, Calvary ACT have prepared written updates for the information of the Oversight Group, as previously agreed. A copy of these written updates are provided at Attachment A.

Recommendation

That the Oversight Group:

- *Note the updates provided by members.*

Report

Meeting Date: 19 November 2019

Summary of Activity: *CHS continues to progress work relating to organisational culture. This has been through the finalisation and implementation of the Values and the expected behaviours, and the implementation of the definition of a positive workplace in CHS. Other key initiatives are progressing as outlined below.*

- Progress against recommendations from The Final Report:**
- Initial implementation of the CHS Vision, Role and Values has been completed. This included a workshop with staff, and various communications from the CEO with staff involvement. Executive and staff have been involved in making their pledges in living the CHS Values. As next steps- 1) staff will continue to provide their pledges to the Values; and 2) each of the Values will be featured through a promotional activity on a quarterly basis – the first one being 'Kind'.
 - The definition of a positive workplace in CHS has been finalised (utilising the work completed in identifying the CHS Values) and launched to staff via communication from the CEO. Nominations have been called for the Positive Workplace Working Group, who will support the implementation of the definition into the workplace along with the development of the Positive Workplace Strategy. The first meeting of this Group is scheduled for 18 November 2019 and is being chaired by the CEO.
 - Employee Advocate: Staff across both CHS and ACTHD continue to make use of accessibility to this role. Whilst based at CHS, one day per fortnight is dedicated to being on-site at ACTHD. Procedures and processes continue to be finalised.
 - HR Business Partners: A full complement of Business Partners (4) is now in place. The resourcing for this business model is being reviewed however to ensure appropriate coverage is available to assist with the ongoing focus on cultural change and in continuing to support skill development of managers to intervene earlier if there are issues or disputes within their teams.
 - Manager Workforce Inclusion – CHS has 80 employees identifying as being of Aboriginal or Torres Strait Islander background; and 135 employees identifying as having a disability. A Steering Group was established to lead Aboriginal or Torres Strait Islander background
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initiatives - including workforce and service initiatives. This Group held its first meeting on 4 September 2019. An Aboriginal or Torres Strait Islander staff network has also been established, with an opening of the network to be commemorated with a staff event hosted by the CEO CHS on 21 November 2019.

- Director Workforce Planning has identified priority areas for attention. Work has commenced in Pharmacy, Medical Imaging, Midwifery, Anaesthetics, Sleep Scientists and Perfusionists - along with a review of executive administration staff. Attraction materials have been updated and implementation commenced - including advertising key roles through social media. Recommended workforce plans have been implemented for Perfusionists, Pharmacists and Sleep Scientists. Recruitment action plans have been implemented for the Women, Youth and Children Division, Medical Imaging and Anaesthetics. The Workforce Planning team has also commenced proactive engagement with Major Capital Project relating to SPIRE and Centenary Hospital for Women and Children expansion planning.
- Occupational Violence (OV) Strategy – extensive consultation has been conducted on the OV Strategy, Policy and Procedure that were provided by Aspex Consulting. The OV Strategy has been endorsed and is now with Communications team for publishing and release. The OV Policy was endorsed at the October 2019 CHS Policy Committee, with some minor updates to be included. The OV Procedure to be tabled at the CHS Policy Committee in November 2019.
- Manager’s Guidelines for Preliminary Assessments and Investigations are currently being developed.
- Methodology for dealing with cultural “clusters” continues to be implemented. To further develop this process work has commenced on clarifying the three levels of culture diagnostics that may be undertaken – depending on the circumstances at the time; and the level of resourcing required to complete diagnostics.
- Methodology for dealing with individuals who are identified as potentially in need of assessment regarding behaviour or management practices, has been approved and is being implemented.
- Restorative processes continue as identified.
- The Workplace Culture Survey is due for release on 8 November 2019 and will be open until 22 November 2019. Promotional work has commenced in letting staff know that the survey is coming and to encourage participation.
- Consultative Committee / mechanism structure has been agreed and is underway through committee meetings. The first meeting of Union representatives and CHS representatives was convened on 10 October 2019.

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- P&C presentations with executive teams regarding recruitment, consultation and self- insurance have progressed.
 - Psychological support for staff after critical incidents - procedure is currently in development.
 - Senior Managers Forums continue to be held monthly to update all senior managers on topical information and to cascade this information to their units.
 - A further Executive Development session was held on 8 October 2019.
 - Monthly reports on Preliminary Assessments and Investigations are submitted to HSEC.
 - CHS working closely with EBM Culture Review Implementation.

Risks/ Issues: Risk assessment to be conducted.

Recommendation: Note the work being conducted by CHS.

Attachments: *Nil*

Presenter: Janine Hammat

Calvary Public Hospital Bruce Update

Meeting Date:	November 2019
Summary of Activity:	<p>Calvary Public Hospital Bruce will be part of the Calvary Healthcare Ltd pilot of two programmes delivered by the Cognitive Institute under licence from the Vanderbilt University. These programmes, <i>Speaking Up for Safety</i>, and <i>Promoting Professional Accountability</i>, will be progressively rolled out from February 2020. Work has commenced on selecting internal facilitators who will be accredited to deliver the training. The Executive leadership team attended an initial briefing session on 21 October 2019.</p> <p>In response to Recommendation 10; <i>There should be a clear requirement for senior clinicians to collaboratively participate in clinical governance activities</i>; a number of actions are underway:</p> <ul style="list-style-type: none"> • ‘Clinical Service Governance’ / Committees: <ul style="list-style-type: none"> ○ Re-invigoration of the Clinical Governance Committee (change commenced Sep ’19); now the peak committee for clinical services governance, with membership by the senior clinical leaders of the organisation, with core functions including; <ul style="list-style-type: none"> ▪ Oversight clinical services to ensure delivery against legislative, regulatory and industry Standards ▪ Monitor safety and quality of clinical practice, drive and influence quality improvement, monitor and make recommendations re clinical service performance and unwarranted clinical variation <p>Redesigned Clinical Review Committee to better align to clinical review outcomes with quality improvement strategies. Membership improved to strengthen links with Clinical Governance Committee and impact operational outcomes. (Change commenced Oct ’19).</p> <p>These clinical governance structures and activities provide forums / opportunities for senior clinicians to influence and impact clinical services delivery.</p> <p>A number of other activities are underway. More details can be found in the attached progress report against the recommendations.</p>
Risk/Issues:	The implementation timeline for the next employee engagement survey will be delayed as the Calvary Healthcare national survey will not

be undertaken until the first half of 2020, likely May. A shorter pulse survey is currently under development.

Recommendation: That the Culture Review Oversight Group note this report.

Report

ACT Health Directorate Progress Report

Meeting Date: 19 November 2019

Summary of Activity: **Recommendation 1:** Values Champion Masterclasses commenced in October 2019.

Recommendation 2: Climate Survey opened on 8 November 2019.

Recommendation 6: The first Non-Government Organisation (NGO) Leadership Group meeting was held on 23 October 2019.

Recommendation 8: A Senior Officials Working Group has been established to progress Cross Border negotiations.

Progress against recommendations from The Final Report: **Recommendation 1:** Refreshed ACTHD Value were launched on 1 October 2019. Values Champion Masterclasses commenced in October 2019, with subsequent classes to be held in November 2019, March 2020 and May 2020. New values-based performance and development plans are available for staff in Capabiliti.

Recommendation 2: ACTHD Workplace Climate Survey opened on 8 November 2019, with the survey closing on 22 November 2019.

Recommendation 3: Culture Uplift Program commenced with an executive briefing on 24 October. Two programs for staff – *Being a Conscious Leader* and *Conscious Interactions* commence in November. A suite of support measures, including targeted work with complex teams, and mentoring for leaders is also part of this suite.

Recommendation 4: Preliminary discussion has occurred with clinical leads of Canberra Health Services and Calvary Public Hospital Bruce in relation to convening a summit of senior clinicians and administrators in 2020. Further consultation will be needed across the system to plan such a summit to ensure it is productive, value adding and will engage participants.

Recommendation 6: The establishment of an NGO Leadership Group has been completed with the first meeting held on 23 October 2019.

Recommendation 7: The Research Working Group and the Workforce Education and Training Working Group are in the process of being

established. The Working Groups will drive initiatives and provide expert advice to the ACT Health and Wellbeing Partnership Board.

Recommendation 8: The Cross Border Senior Officials Working Group has been established with two meetings held on 16 September 2019 and 22 October 2019.

Recommendation 13: Initial discussions to inform concept development related to leadership and mentoring are underway from a system-wide perspective. These elements will be incorporated into the Culture Change Framework scheduled for completion by 14 February 2020.

Recommendation 14: The Culture Review Implementation Branch has commenced procurement activities following endorsement of the Human Resources Function Review Proposal at the 6 September 2019 Steering Group. Procurement evaluation is scheduled for the week commencing 18 November.

Recommendation 15: The ACT Health Directorate has transitioned to Whole of Government recruitment processes. Draft revised recruitment guidelines for the Directorate were presented to the Corporate and Governance group on 18 November 2019. Compliance and assurance processes are being reviewed; and training programs for selection panel chairs commencing in November 2019.

Recommendation 16: A review of all mandatory training is underway. The purpose of the review is to assess currency of information, update expectations for staff within and to establish requirements and timeframes to finalise this work.

Risks/ Issues: **Recommendation 4:** Preliminary discussions to convene a summit of senior clinicians and administrators have been held with ongoing consultation required to ensure effective clinician engagement across the health system. It is proposed to hold the summit in mid-2020.

Recommendation: **Noting**

Attachments: Nil

Presenter: Michael De'Ath, Director-General, ACT Health Directorate

Meeting Paper

Agenda Item:	5.1
Topic:	Referrals from Panel – Report from ACT Health Directorate and Calvary Public Hospital Bruce
Meeting Date:	19 November 2019
Action Required:	Discussion
Cleared by:	Director-General, ACT Health Directorate and Regional CEO, Calvary ACT
Presenter:	Director-General, ACT Health Directorate and Regional CEO, Calvary ACT

Purpose

1. That members note the presentations from the Director-General, ACT Health Directorate (ACTHD) and the Regional Chief Executive Officer (CEO), Calvary ACT (CH), that provide an update on the management of referrals from the Panel conducting the Independent Review in the two organisations.

Background

2. The Culture Review Oversight Group (Oversight Group) is briefed at every meeting by the Leadership Team on progress made in each area referred by the Panel.
3. At the Oversight Group meeting on 4 September 2019, the Chief Executive Officer, Canberra Health Services presented the organisation's progress in managing the referrals and proactively investing in broader workplace environments.
4. It was agreed at that meeting that a presentation would be provided by ACTHD and Calvary Public Hospital Bruce at the 19 November 2019 Oversight Group meeting on their progress in managing referrals from the Panel.

Recommendation

That the Oversight Group:

- *note the information about progress made in addressing the referrals from the Panel provided by the Director-General, ACT Health Directorate and the Regional Chief Executive Office, Calvary Hospital.*

Meeting Paper

Agenda Item:	5.2
Topic:	ACT Health Clinical Advisory Committee
Meeting Date:	19 November 2019
Action Required:	Noting
Cleared by:	Chair
Presenter:	Director-General, ACT Health Directorate

Purpose

1. To provide the Culture Review Oversight Group (Oversight Group) with an update on the ACT Health Clinical Advisory Committee (Professional Colleges).

Background

2. The purpose of the ACT Health Clinical Advisory Committee (Professional Colleges) is to provide members with an opportunity to consider workforce culture and other systemic and institutional issues from the perspective of the Professional Colleges.
3. Following release of the *Final Report - Independent Review into Workplace Culture within ACT Public Health Services*, the then Minister for Health and Wellbeing sought advice on how the professional colleges could contribute to the work of the Oversight Group and other ACT Health Directorate (ACTHD) committees more generally.
4. The ACTHD sought advice from several medical colleges on their preferred method of engagement with the Oversight Group and their participation more broadly. Most colleges indicated their willingness to participate in a forum with agenda and meeting papers available in advance to allow college representatives an opportunity to canvass their opinion with members to form a position before the forum.

Issues

5. The first meeting of the ACT Health Clinical Advisory Committee (Professional Colleges) was held on Tuesday, 5 November 2019.
6. The proposed membership of the ACT Health Clinical Advisory Committee (Professional Colleges) is as follows:
 - Representatives of Professional Colleges in the ACT;
 - Chief Medical Officer, ACT Health Directorate;
 - Chief Nursing and Midwifery Officer, ACT Health Directorate; and
 - Chief Psychiatrist, ACT Health Directorate

7. The agenda for the inaugural meeting includes:

- A welcome address from the Minister for Health;
- The Cultural Review Oversight Group (presentation by Jodie Junk-Gibson, Executive Branch Manager, Culture Review Implementation Branch);
- Discussion of the draft Terms of Reference for the ACT Health Clinical Advisory Committee (Professional Colleges);
- Establishing standing agenda items; and
- Other business

Recommendation

That the Oversight Group:

- *Note the progress in establishing the ACT Health Clinical Advisory Committee.*

Meeting Paper

Agenda Item:	5.3
Topic:	Measures of Success
Meeting Date:	19 November 2019
Action Required:	Decision
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

Purpose

1. To propose the 'Culture Review Oversight Group - Measures of Success' to support the delivery of the 20 recommendations of the *Final Report – Independent Review into the Workplace Culture within ACT Public Health Services* (Final Report).

Background

2. At the Culture Review Oversight Group (Oversight Group) meeting on 11 June 2019, the former Minister for Health and Wellbeing, Meegan Fitzharris, raised the following questions for consideration by the members:
 - How will the Oversight Group measure success?
 - What are the milestones?
 - How will the Oversight Group report on the measures?
3. It was agreed that members would consider the questions and forward feedback to the Secretariat for discussion at the September meeting. No feedback was received by the Secretariat prior to 4 September and a meeting paper was presented outlining points for consideration.
4. On 4 September, the Chair proposed that an out-of-session paper be circulated to members for consideration and feedback, with the opportunity to meet and discuss further.
5. There was opportunity for the Oversight Group members to provide feedback through an out-of-session paper by 14 October 2019, and/or attend an optional session to discuss the measures further held on 16 October 2019. Feedback received has been incorporated.

Issues

6. There is acknowledgement that for successful culture reform to occur, there is a requirement for people to understand and be aware of the rationale for change, and that behaviour change of the workforce, through adoption of new processes and initiatives, takes time.

7. Expectation management of stakeholders and the broader ACT community is an identified risk due to the diverse range of stakeholders and expectations associated with the idea of 'culture change within the ACT public health system'.
8. The culture review implementation program of work is presently in the project initiation and planning stage. Project deliverables and milestones are being negotiated and will be incorporated into formal project schedules and budgets.
9. The success of the Oversight Group is linked to the success of the culture review implementation reform program, and that the success of one will directly impact the other. However, it is noted that these two elements will require specific monitoring and evaluation.
10. Therefore, the proposed Oversight Group measures of success will monitor and evaluate both the effectiveness of the Oversight Group and of the culture review implementation process by reviewing performance against the:
 - Terms of Reference of the Oversight Group; and
 - Performance metrics and reporting framework for the Culture Review Implementation program.

Oversight Group Terms of Reference (ToR)

11. The Oversight Group ToR at [Attachment A](#) serves as an anchor regarding the identification of measures of success. In particular, the ToR clearly articulates the Oversight Group's:
 - Role;
 - Values and Behaviours;
 - Functions; and
 - Reporting mechanisms.
12. The ToR outlines the purpose and intent of the Oversight Group. The role of the Oversight Group is to oversee the implementation of the recommendations of the Final Report. The Oversight Group represents the opportunity to oversee the efforts to improve the future culture of the ACT Public Health Services.
13. Through the current ToR, there is opportunity to, at least annually, reflect on the purpose and intent of the Oversight Group.
14. The Annual Review mechanism articulated in the ToR, which will occur in March 2020, serves as one opportunity to reflect on the purpose of the Oversight Group and to gauge how well it fulfils the purpose for which it was established.

Monitoring and Reporting on the Outcomes of the Culture Review Implementation

15. The success (or outcomes) of the culture review implementation program following the Independent Review, is integral to the success of culture reform across the ACT public health system. Assessment of the outcomes of the culture review implementation will occur through a robust project management approach and identified measures.
16. The initial phase of complex program planning involves the development of effective documentation and process tools to serve as the framework to successfully project plan,

implement and measure effectiveness. Phase one of assessment of success is ensuring that the process tools are developed, in place and regularly reviewed. These tools include the:

- Overarching Program Planning documentation;
- Project Implementation Planning documentation;
- Control and management of budget;
- Management of the program Risk Register;
- Tracking and reporting against the phases in the Communications and Engagement Strategy; and
- Management of work priorities and indicators across the ACT public health system, informed by the Culture Change Framework.

17. The secondary phase involves the development of lead indicators that will be measured and monitored over time, capturing impact and change. It is worth noting that in parallel to the Culture Change Framework, a system-wide status model is under development to assess and measure key indicators. This will initially capture data to ensure that effectiveness and change can be monitored against metrics including:

- Staff turnover and separation/exit rates;
- Leave data;
- Workers compensation, non-compensation rates and return to work rates;
- Use of the Employee Assistance Program;
- Injury management reporting;
- The number of reports of bullying, harassment and discrimination;
- The number of referrals for preliminary assessments and alternate actions;
- The total number of complaints that progress for an assessment of misconduct;
- Percentage of complaint referrals that are considered through alternate options;
- Retention rate;
- Number of applications for advertised temporary and permanent vacancies;
- Percentage of contractors used;
- Promotion rate and higher duties rate;
- Percentage of staff who know the organisational values and agree that they are being enacted in the workplace;
- Increased engagement of the workforce overtime in responding to staff climate surveys;
- Percentage of staff accessing professional development annually;
- Patient satisfaction;

- Training and professional development accessed by workforce; and
 - Percentage of senior clinicians participating in clinical governance.
18. It is planned that the draft system-wide status model will be developed by February 2020, with many of the datasets outlined above being baselined through the development of the Culture Change Framework by the Australian National University, Research School of Management (ANU-RSM).
19. Further, the maturity of the system-wide status model will be linked to the roll-out and implementation of the ACT digital strategy. Discussion and planning is underway presently to establish project planning of data availability and accessibility over the coming three years and is being factored into the datasets to measure effective system-wide culture/climate.
20. There is a third phase of information that can be considered in the assessment of the success of culture implementation, however, it will be longer-term in nature. These include:
- Benefit realisation; and
 - Reporting on return on investment in evolving a positive culture across the ACT public health system.

Evaluation

21. Evaluation of the success of the Oversight Group will be undertaken annually with the review of the ToR and assessment of the roles, values and behaviours, functions and reporting mechanisms as outlined in the Oversight Group ToR.
22. The process indicators identified through the establishment of the program documentation will be reviewed and monitored through the Oversight Group. All program documentation developed has and will continue to be presented to the Oversight Group for initial feedback, with progress and updates provided at regular intervals.
23. A baseline of system-wide lead indicators is currently being developed and analysed through ANU-RSM and will form part of the Culture Change Framework. The baseline will be established by February 2020.
24. Climate surveys are being undertaken by ACT Health Directorate and Canberra Health Services throughout November 2019. This will also provide a baseline on workforce engagement.
25. The maturity of the lead indicator data is being progressed through the development of a system-wide status model, which will provide an evidence-informed model to provide information on system-wide levers that can be proactively managed.

Reporting

26. Reporting opportunities include:
- Bi-monthly Oversight Group meetings for process data;
 - Bi-annual reporting to the ACT Legislative Assembly; and
 - Independent Annual Review of progress.

Recommendation

That the Oversight Group:

- *Note that the Oversight Group will measure success through reviewing the functions and role of the Oversight Group and assess alignment;*
- *Note that the Oversight Group measure success through reviewing the Culture Review Implementation program documentation to ensure that there is progress and achievement against the recommendations and that baseline measurements are developed and agreed;*
- *Note that the Oversight Group measure success through evolving and maturing the system-wide status indicators to review against the baseline measures to assess the extent of change;*
- *Note that the Oversight Group adopt the identified timeframes and milestones as identified in the project planning documentation, which is reflective of milestones outlined in the Final Report;*
- *Note that the Oversight Group will report on the measures through the bimonthly Oversight Group meetings, biannual updates and through the annual reviews;*
- *Agree that the identified measures of success, including metrics and reporting mechanisms are incorporated into the Culture Change Framework to further accurately create and assess milestones that support organisational behaviour, workforce and leadership aspects from the recommendations; and*
- *Note the opportunity to monitor the trajectory of success through the identified reporting mechanisms.*

Role	<p>The role of the Culture Review Oversight Group (Oversight Group) is to oversight the implementation of the recommendations of the Final Report of the Review into the Workplace Culture in ACT Public Health Services (the Review) (March 2019).</p>
Values and Behaviours	<p>Participation and engagement in the Committee will reflect organisational values and the commitment to collaborate within strong governance frameworks. Members will display signature behaviours such as:</p> <ul style="list-style-type: none"> • Accountable, transparent, decision-making; • Genuine and respectful engagement with colleagues within the Directorates, across the ACT Public Service and the Health System and with community members; • Open sharing of information to improve the delivery of services, to enable good governance, quality and accurate reporting and the development of evidence-based policies and programs; • Innovative improvement of systems and services to achieve safe and effective person and family-centred care; and • Confidentiality of the process.
Membership	<ul style="list-style-type: none"> ○ Minister for Health and Wellbeing (Chair) ○ Minister for Mental Health (Deputy Chair) ○ Director-General, Health Directorate ○ Chief Executive Officer, Canberra Health Services ○ Regional Chief Executive Officer, Calvary ACT ○ Regional Secretary, CPSU ○ Branch Secretary, ANMF ACT ○ President, AMA ACT ○ Executive Officer, Health Care Consumers Association (ACT) ○ President, ASMOF ACT ○ President, VMOA ACT ○ Dean, College of Health and Medicine ANU ○ Executive Dean, Faculty of Health, University of Canberra ○ Executive Branch Manager, Culture Review Implementation Team [ex-officio] <p>The Oversight Group may also invite other individuals or representatives of organisations from time to time with the agreement of the Chair where special expertise or experience is required to assist the Group in its work.</p> <p>Members will be asked to declare any actual, potential, or perceived conflicts of interest, at each meeting.</p> <p>There will be no sitting fees provided for meetings; however, travel or out of pocket costs will be reimbursed for attendance at meetings for stakeholder</p>

	members and any subject matter experts requested to attend with the agreement of the Chair. Receipts should be submitted to the Secretariat.
Secretariat	Secretariat Support will be provided from the Culture Review Implementation Team within the Office of the Director- General.
Meeting Frequency	<p>Meetings are to be held quarterly, or as required by the Chair.</p> <p>The Ministers or the ACT Public Health Leadership team (DG HD, CEO CHS or Regional CEO Calvary) may also seek the Oversight Group’s advice on an ‘out-of-session basis’. The Secretariat will circulate comments to members and provide a summary at the subsequent meeting.</p>
Quorum	At least 50% +1 of members in attendance shall be deemed to be a quorum. With the Chair and the ACT Public Health Leadership team as mandatory attendees.
Absences from Meetings and Proxy Attendance	<p>All Members are strongly encouraged to prioritise meetings.</p> <p>The Oversight Group will have a general policy of no proxies, however the Chair may consider appointing an official proxy for a member if that member believes they will not be able to attend quarterly meetings. Members should submit the name and position of their proposed official proxy for approval to the Chair.</p> <p>If a member requires a leave of absence and they do not have an official proxy, they are to formally write to the Chair at least three weeks before the quarterly meeting outlining the reasons for non-attendance and may request a proxy attend in their place. The request for a proxy will be considered on a case-by-case basis.</p> <p>If a member or their proxy has not attended two meetings in a row, then they shall forfeit their membership and the Chair will appoint another member.</p>
Functions	<p>The Oversight Group will:</p> <ul style="list-style-type: none"> • Review progress and updates on the Implementation Plan with a particular focus on assessment of actions and progress against goals; • Auspice 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; and • Guide action under the Implementation Plan, including addressing issues of policy and strategy that impact on the delivery of the Implementation Plan.
Reporting Mechanisms	<p>The Oversight Group is the peak governance committee for the Culture Review Implementation. The Oversight Group receives information, regular reports and issues for escalation from members, through the Secretariat.</p> <p>The Culture Review Implementation Steering Group (CRISG) reports to the Culture Review Oversight Group. The Oversight Group will provide a meeting update to Government through the Chair. Following Government consideration, the Oversight Group will issue a communique.</p>

Meetings and Agenda Requests	<p>Meeting papers and the Agenda will be cleared by the Chair and circulated one week in advance of meetings.</p> <p>Meeting papers will be considered in-confidence by all members. Any other material that is made available to Oversight Group members which is by its nature confidential, marked as confidential or that the member ought to know is confidential, will be kept secret and confidential and not disclosed to anyone outside the Oversight Group.</p> <p>Requests for agenda items and papers should be submitted to the Secretariat at least two weeks prior to the meeting.</p> <p>Papers will be distributed to members electronically five working days prior to the meeting taking place.</p>
Standing Agenda Items	A summary of standing agenda items is at Attachment A.
Minutes	The Secretariat will prepare minutes of each meeting, and record actions items. Minutes and action items will be distributed within two weeks of the meeting taking place.
TOR Review Frequency	<p>The Terms of Reference will be reviewed annually, or as required to ensure alignment with governance arrangements.</p> <p>The next review is due by June 2020.</p>
TOR Approval	<p>Meegan Fitzharris, MLA</p> <p>Minister for Health and Wellbeing</p> <p>11 June 2019</p>

Meeting Paper

Agenda Item:	5.4
Topic:	Annual Review - Terms of Reference
Meeting Date:	19 November 2019
Action Required:	Decision
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

Purpose

1. That the Culture Review Oversight Group (Oversight Group) review and endorse the draft Terms of Reference (ToR) for the annual review in order to implement Recommendation 19 of the *Final Report – Independent Review into the Workplace Culture within ACT Public Health Services* (the Review).

Background

2. The draft ToR for the annual review has been developed in response to Recommendation 19 of the Review which stated “That the ‘Culture 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”.
3. At the Oversight Group meeting on 4 September, the Minister for Health proposed that the inaugural annual review be conducted in March 2020.

Issues

4. The draft ToR for the annual review is provided at Attachment A.

Recommendation

That the Oversight Group:

- endorse the Terms of Reference for the annual review.

IN-CONFIDENCE

Culture Review Implementation: Inaugural Annual Review Terms of Reference

Purpose

1. To outline the scope and terms of reference of the inaugural annual review of the Culture Review Implementation program in support of achieving the 20 recommendations as outlined in the Final Report – Independent Review into the Workplace Culture within ACT Public Health Services (the Final Report).

Background

2. On 10 September 2018, the former Minister for Health and Wellbeing announced the establishment of an Independent Review into the Workplace Culture within ACT Public Health Services.
3. The Final Report was released by the former Minister for Health and Wellbeing on 7 March 2019.
4. The former Minister for Health and Wellbeing; Minister for Mental Health; Director-General, ACT Health Directorate; Chief Executive Officer, Canberra Health Services; and Regional Chief Executive Officer, Calvary Hospital jointly and publicly committed to implement the 20 recommendations in the Final Report. This was further supported by a Public Commitment Statement released on 4 September 2019 by leaders of the organisations represented on the Culture Review Oversight Group (Oversight Group).
5. The Oversight Group is commissioning an annual review of the culture review implementation process and progress, in line with Recommendation 19, in the Final Report which states:

‘That the ‘Culture 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 Services’.

6. The annual review process is an important independent assessment of the culture review implementation process and its progress in implementing the 20 recommendations in the Final Report. It represents an important learning opportunity and transparent accountability mechanism.

Scope

7. The scope and focus of this inaugural annual review will be to examine, and make findings and recommendations in relation to the following:

- a. The extent of the progress made with the culture review implementation process against the original plans outlined in the Final Report;
- b. The impact on the workforce culture of the changes introduced to date, noting that this is phase 1 – initiation and planning of the culture review implementation process; and
- c. The effectiveness of the initiation and planning phase of the culture review process undertaken, including:
 - i. What has worked well and has there been any early impact?
 - ii. What has not worked well and why, and has there been any impact? What may therefore need to change or be improved?
 - iii. What has been learned so far and how can these insights and experiences be leveraged to improve the process and outcomes/impact of the culture review implementation process?

Methodology

- 8. The annual review process will draw upon information from a range of sources across the three arms of the ACT public health system, to strengthen its analysis and avoid duplication of effort.
- 9. It is proposed that the annual review include:
 - a. A desktop review of key documentation produced as part of the culture review implementation process across the three organisations. This will include:
 - i. public statements, documentation from the governance and stakeholder engagement bodies (i.e. the Culture Review Oversight Group, Culture Review Implementation Steering Group, Clinical Leadership Forum, and Health and Wellbeing Partnership Board) as well as from the leadership and staff within each of the three public health organisations;
 - ii. information generated by key initiatives occurring under the banner of the culture review implementation process (e.g. the ANU partnership to develop a Culture Change Framework, and the HR Functions Review); and
 - iii. access to staff climate surveys.
 - b. One-on-one interviews with a cross-section of key stakeholders:
 - i. Minister for Health;
 - ii. Minister for Mental Health;
 - iii. Director-General, ACT Health Directorate;
 - iv. Chief Executive Officer, Canberra Health Services;
 - v. Regional Chief Executive Officer, Calvary ACT;

- vi. select members of the Culture Review Oversight Group and Culture Review Implementation Steering Group; and
 - vii. other nominated key stakeholders;
10. Development of a draft Annual Review Report containing findings and initial recommendations for discussion with key leaders; and
 11. Finalisation and submission of an Annual Review Report by 30 April 2020.

Structure, Process and Timing

12. The Reviewer will commence work on this review in March 2020 and will provide an Annual Review Report to the Minister for Health and the Minister for Mental Health by 30 April 2020.
13. The Minister for Health will table the Annual Review Report in the ACT Legislative Assembly at the earliest opportunity, and thereafter publicly release the Report.
14. The Reviewer will determine if some material needs to be anonymised to protect individuals from harm, to the extent that it contains personal information or material provided in confidence.
15. The Oversight Group will ensure that the management response to the Annual Review Report guides the next phase of the culture review implementation process and associated initiatives.

Meeting Paper

Agenda Item:	5.5
Topic:	Non-Government Organisation Engagement
Meeting Date:	19 November 2019
Action Required:	Noting
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Director-General, ACT Health Directorate

Purpose

1. To provide an update on the progress of the ACT Health Directorate (ACTHD) to address Recommendation 6 of the *Final Report of the Independent Review into Workplace Culture within the ACT Public Health Services* (Final Report).

Background

2. ACTHD currently funds non-government organisations (NGOs) to deliver a range of health, advocacy and sector development services. The annual investment in these services is in the order of \$67 million in 2019-20.
3. Given the essential and significant role that NGOs play in our health system, effectively engaging with them in policy development and health service planning through co-design and consultation makes good sense and will assist to ensure our health services meet the needs of our community.
4. Chapter 6 of the Final Report considers the partnerships and relationships that health organisations in the ACT need to foster in order to provide high quality Territory-wide health care services. It has a strong focus on rebuilding relationships with NGOs.
5. Recommendation 6 of the Final Report highlights the requirement for NGO re-engagement, noting;

'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.'

Issues

NGO Leadership Group

6. In response to the recommendation, ACTHD has established an NGO Leadership Group. Membership includes representation from Canberra Health Services (CHS), ACTHD Divisions and NGO peak organisations. The inaugural meeting was held on Wednesday, 23 October 2019.
7. The main focus of the first meeting was to discuss and agree on the draft Terms of Reference including values and behaviours, and set out milestones to inform the first year workplan. Initial ideas for the workplan ranged from ways to reset the conversation and the culture to practical ways to work together using the expertise of all.
8. The NGO Leadership Group will meet monthly initially.

Recommendation

That the Steering Group:

- *Note the information*

Meeting Paper

Agenda Item:	5.6
Topic:	Culture Review Implementation Program Risk
Meeting Date:	19 November 2019
Action Required:	Discussion
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

Purpose

1. To provide the Culture Review Oversight Group (Oversight Group) with an update of key program risks identified for the Culture Review Implementation.

Background

2. The Program Risk Register identifies the key risks associated with the culture review implementation.

Issues

3. There are 34 program risks identified in the Program Risk Register. An Executive Overview of the key risks, their current levels and controls are listed in priority order in Attachment A.
4. It is proposed to include Risk management as a standing Oversight Group agenda item to enable oversight of the risks on the register and discussion of emerging or escalating risks.
5. The register is intended to be a living document that will be reviewed and updated as required.

Recommendation

That the Oversight Group:

- *Note the key program risks identified for the Culture Review Implementation.*

Attachment A – Executive Overview of the Culture Implementation Program Risk Register as at 22 October 2019

Risk Rating	Risk	Source	Impact	Controls (best of)
High	<u>Ref 4:</u> <i>Failure in Stakeholder relationships</i>	<ul style="list-style-type: none"> Poor stakeholder engagement and consultation; Lack of collaboration; Interdependencies, risks and issues across system not recognised/mapped; Reactive management of stakeholder issues; Interest in performance of ACT public health system; ACT election in 2020; Communications ineffective; Leakage of information or data breach; Accessibility to sensitive information through FOI Act. 	<ul style="list-style-type: none"> Reduced information sharing; System-wide interdependencies, issues and risk not managed; Reduced capacity to deliver the recommendations of the Review and interventions to improve workplace culture across the system; Impact to reputation of ACT public health system; Negative media coverage; Political criticism; Staff criticism; Impact to staff morale; Further embedding of poor workplace culture; Decreased buy-in/disengagement resulting in poor support of Culture Review Implementation; Failure to attract and retain a capable workforce. 	<ul style="list-style-type: none"> Governance includes Culture Review Implementation Steering Group (Steering Group) and Culture Review Oversight Group (Oversight Group); Membership of Oversight Group includes key external stakeholders; Regular meetings scheduled by Culture Review Implementation (CRI) Branch with key internal and external stakeholders to report progress of implementation and seek feedback/collaboration where appropriate; Culture Review Implementation Communication and Engagement Strategy has been drafted in consultation with key stakeholders across system; Implementation plan and progress reported at each meeting of Steering Group and Oversight Group.
High	<u>Ref 13:</u> <i>Stakeholders not supportive of a system-wide, strategic approach to culture change within ACT public health system.</i>	<ul style="list-style-type: none"> Siloed approach to addressing the recommendations of the Review; Implementation of 'quick fixes' that do not embed/sustain positive workplace culture; Governance and reporting structures within organisations; Activities undertaken by organisations do not align with strategic direction endorsed by Steering Group. 	<ul style="list-style-type: none"> Organisation's divergent approaches and initiatives do not align with the system-wide strategy resulting in: <ul style="list-style-type: none"> - duplication of effort; - budget overspend; - dependencies, - risk and issues not identified and managed across system; and - benefits not realised. 	<ul style="list-style-type: none"> Steering Group guides the strategic direction for the Culture Review Implementation; Budget spend on implementation activities to be endorsed by the Steering Group with consideration of strategy and linkages to recommendations and Culture Change Framework.

Risk Rating	Risk	Source	Impact	Controls (best of)
High	<u>Ref 15:</u> <i>Information about Culture Review Implementation activities not shared CRI Branch.</i>	<ul style="list-style-type: none"> Stakeholder relationships; Willingness of organisations to share information about local activities and progress; Stakeholder representation on local governance committees; Reporting mechanisms between local and System-wide governance committees; Approach to sharing information is not coordinated; Complex governance processes within organisations lead to delays in information being provided to report to Steering Group/Oversight Group. 	<ul style="list-style-type: none"> Inconsistent/incomplete reporting to the CRI Branch may result in inaccurate or incomplete reporting to the Steering Group, Oversight Group and Bi-annual Updates and performance reviews; Dependencies, risks, issues and benefits are not identified or managed strategically resulting in program goals/objectives not being met; Organisation's approaches and initiatives do not align with system-wide strategy or set priorities; Potential impact to program schedule and budget due to duplication of effort across System; Misalignment between local and strategic communications and change management activities resulting in stakeholder confusion. 	<ul style="list-style-type: none"> CRI Branch established to coordinate Culture Review Implementation across ACT public health system; Governance process has been endorsed by the Steering Group, including organisational responsibilities for requesting funding, reporting expenditure and project progress and participation in project health checks; Delivery leads nominated within each organisation to coordinate reporting and internal approvals for implementation progress reports; Organisation's to provide bi-monthly status reports to the CRI Branch for collation; CRI Branch provides Culture Review Implementation Risk Register to Steering Group and Oversight Group at each meeting. CRI Branch provides the Culture Review Implementation Progress Report to the Oversight Group (bi-monthly).
High	<u>Ref 16:</u> <i>Complex governance structures across System result in reporting of culture change being fragmented, unclear or delayed.</i>	<ul style="list-style-type: none"> System-wide governance; Multiple delivery leads within each organisation without single coordination point; Membership on local governance committees and reporting mechanisms to and from the Steering Group; Delays due to internal approval processes/governance committee meetings not aligning with reporting deadlines. 	<ul style="list-style-type: none"> Inconsistent/incomplete reporting to the CRI Branch resulting in inaccurate or incomplete reporting to the Steering Group, Oversight Group, Biannual Updates and Performance Reviews; Delays in identifying and managing dependencies, risks, issues and benefits result in strategic objectives/goals not being met. 	<ul style="list-style-type: none"> Organisations have been provided with a critical date calendar and reporting template; Delivery leads have been identified to coordinate organisational reporting and internal approvals; Organisations to provide status reports to Culture Review Implementation Branch bi-monthly with reports collated by CRI Branch into system-wide report for Steering Group and Oversight Group; Regular meetings facilitated by CRI Branch with organisation delivery lead to share information; Risk, issues, dependencies and benefits realisation to be managed on a central SharePoint site, monitored by CRI Branch Project Manager and reported to Steering Group and Oversight Group at each meeting.
High	<u>Ref 18:</u> <i>Inconsistent approaches to delivering interventions for positive workforce culture across the System.</i>	<ul style="list-style-type: none"> Agreement of Steering Group for a coordinated strategic approach; Support across the Health System for the implementation approach; Siloed/divergent approaches to delivering interventions within organisations and across System; Individual services may undertake projects or initiate interventions independently of the Culture Review Implementation without adequate analysis of system-wide inter-dependencies and risk; Implementation planning; Resource availability and capability; Roles and responsibilities definition; Program/Project management. 	<ul style="list-style-type: none"> Interventions do not achieve the expected benefit across system. Potential impact to program schedule and budget due to duplication of effort/uncoordinated effort across System; Benefits are not consistently realised across the System. 	<ul style="list-style-type: none"> Steering Group established to direct the strategic approach, set key priorities and monitor the progress of the implementation. Culture Change Framework will inform the change priorities and pilot intervention design; Steering Group to endorse change priorities and pilot implementation sites and implementation approach; Resourcing requirements for delivering interventions to be reviewed by the Steering Group and funded under the CRI budget, where appropriate; Reporting mechanisms to be established to and from local governance committees to ensure alignment to the endorsed strategic direction and oversight for the implementation.

Risk Rating	Risk	Source	Impact	Controls (best of)
High	<u>Ref 19:</u> <i>Resources Failure</i>	<ul style="list-style-type: none"> Lack of skill/subject matter expertise/capability available within System to support Culture Review Implementation activities; Budget constraints prevent sourcing suitable resources; Inadequate resourcing; Capability deficits; Business as usual (BAU) responsibilities. 	<ul style="list-style-type: none"> Interventions not delivered within some areas or do not achieve the expected benefit; Inconsistent improvement of workforce culture across the System. 	<ul style="list-style-type: none"> Steering Group has endorsed Budget Governance process which allows organisations to submit requests for funding to the Steering Group for dedicated resources; Steering Group to review resourcing requests with consideration of duplication of effort across the System and potential for consolidation/collaboration to provide value for money; Organisations to report risks and issues related to resourcing deficits to the CRI Branch Project Manager for recording on the Program Risk Register and escalation, as necessary.
High	<u>Ref 21:</u> <i>Insufficient strategic planning for Culture Review Implementation by each arm.</i>	<ul style="list-style-type: none"> Agreement by Steering Group for a coordinated strategic approach to delivering Culture Review Implementation; Support across the Health System for the endorsed implementation approach; Undertaking projects or initiate interventions independently of the Culture Review Implementation without adequate analysis of System-wide strategy, inter-dependencies and risk; Complex local governance structures and reporting structures between Steering Group and local working groups; Representation on local governance groups; Information sharing; Resource availability/capability within organisations for strategic planning. 	<ul style="list-style-type: none"> Impact to program budget, schedule and benefits realisation due to siloed/localised approach; Strategic objectives and goals are not met; Reputational damage. 	<ul style="list-style-type: none"> Governance structure established with clear roles and responsibilities and reporting mechanisms; Strategic direction to be informed by Culture Change Framework; Strategic direction to be endorsed by Steering Group and Oversight Group; Organisations report to the Steering and Oversight Groups bi-monthly through the combined Implementation Progress Update and Program Risk Register.
High	<u>Ref 22:</u> <i>'Quick fix' solutions implemented to meet the Recommendations of the report do not lead to sustained workforce culture change.</i>	<ul style="list-style-type: none"> Political/internal pressures to address the recommendations of the report; Inadequate problem definition and/or understanding of root cause; Inadequate understanding and definition of inter-related issues and/or dependencies; Localised/siloed approaches to delivering interventions. 	<ul style="list-style-type: none"> Interventions do not address root cause of issue and do not affect real or sustained change. 	<ul style="list-style-type: none"> Contract with ANU Research School of Management to develop an evidence-based Culture Change Framework, intervention design and evaluation methodology; Steering Group will consider the alignment of all implementation activities to the Change Framework, key priorities, recommendations of the Final Report and the overall system-wide strategy; Steering Group and Oversight Group will monitor actions through the Implementation of Recommendations Progress Update Report.
High	<u>Ref 26:</u> <i>Capability deficits across the health system for addressing organisational behaviour, workforce and leadership issues.</i>	<ul style="list-style-type: none"> Staff do not have the required training, skills or experience to undertake a strategic, evidence-based approach to addressing the issues. 	<ul style="list-style-type: none"> Actions undertaken across the System do not lead to sustained change; Siloed approach to addressing issues limits opportunity for system-wide change; Negative perception of Health System due to inability to implement and measure sustained change; Continued reporting of poor workforce culture within the ACT Health System. 	<ul style="list-style-type: none"> HR Function Review procurement activity has been endorsed by Steering Group. Procurement for consultancy to provide the service is underway; The Culture Change Framework will further support identifications of capabilities required across the system to support sustainable culture change.
High	<u>Ref 32:</u> <i>Information accessed through FOI requests results in damage to individual, group or organisation.</i>	<ul style="list-style-type: none"> Release of sensitive information under FOI request. 	<ul style="list-style-type: none"> Damage to image/reputation of individuals, group or organisation; Damage to staff morale; Political/media criticism. 	<ul style="list-style-type: none"> Risk assessment to be undertaken by FOI team prior to information being released. Agreed Strategic Communications and Engagement Strategy, supported by phased action plan to engage with our workforce in a consistent way.

Risk Rating	Risk	Source	Impact	Controls (best of)
High	<u>Ref 33</u> <i>Failure in Strategic Direction</i>	<ul style="list-style-type: none"> Strategic planning and governance; Insufficient information provided to Steering Group to inform discussion/decisions; Quality of papers and project documentation; Insufficient time allowed for robust discussion during Steering Group meetings; Engagement of Steering Group members; Difference of opinions. 	<ul style="list-style-type: none"> Strategic direction is not agreed and endorsed; Potential impact to budget, schedule and benefits realisation; Inability to implement and measure sustained change. 	<ul style="list-style-type: none"> Sufficient information provided to the Steering Group members to inform discussion and decision making; Timely distribution of information; Consideration of issues out of session; Clear, concise and timely meeting papers with recommendations for consideration.
High	<u>Ref 35</u> <i>Organisations do not provide project documentation to the CRI Branch.</i>	<ul style="list-style-type: none"> Resourcing within organisations; Project Management capabilities within organisations; Cooperation of organisations; Program management; Governance and reporting structures. 	<ul style="list-style-type: none"> Unable to track progress, deliverables and benefits realisation for Culture Review Implementation; Unable to report progress of implementation; Risks and issues not identified; Benefits not realised. 	<ul style="list-style-type: none"> Culture Review Implementation Governance and Budget Governance processes endorsed by Steering Group.
High	<u>Ref 36</u> <i>Different assessment of priorities between organisation and system-wide governance groups.</i>	<ul style="list-style-type: none"> System-wide governance; Organisational governance structures and reporting mechanisms; TORs for working groups including membership and roles and responsibilities; Strategic direction and approach not communicated; Diverse stakeholder groups; Stakeholder interests; Lack of support for endorsed activities/approaches. 	<ul style="list-style-type: none"> Divergent/siloed approach to delivering change; Increase in cost and implementation timelines; Organisation/system do not realise benefits; Unable to measure and evaluate change. 	<ul style="list-style-type: none"> Steering Group endorses implementation strategy and determines priorities.
High	<u>Ref 35:</u> <i>Project quality and assurance.</i>	<ul style="list-style-type: none"> Resourcing capacity and capability within organisations to undertake project management; Organisations do not provide project deliverables, documentation or expenditure reports to CRI Branch as specified in endorsed Governance Process; Organisations do not participate in project health checks, as specified in endorsed Governance Process; Governance and reporting structures; Program management and coordination within CRI Branch. 	<ul style="list-style-type: none"> Unable to track progress, deliverables and benefits realisation for Culture Review Implementation; Unable to monitor or report progress of implementation; Early detection of project issues; Project/Program risks and issues not identified; Dependencies not identified; Benefits not realised; Stakeholder criticism of management of program. 	<ul style="list-style-type: none"> Culture Review Implementation Governance and Budget Governance processes endorsed by Steering Group which include reporting responsibilities and quality assurance for Culture Review Implementation projects and expenditure. Project Manager, CRI Branch, to assist organisations where required to ensure projects are documented and quality assurance is applied to CRI projects, as specified in endorsed Governance paper.

Meeting Paper

Agenda Item:	5.7
Topic:	Culture Review Implementation Program Plan
Meeting Date:	19 November 2019
Action Required:	Discussion
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

Purpose

1. To seek feedback from the Culture Review Oversight Group (Oversight Group) on the draft Culture Review Implementation Program Plan 2019-2022 (Program Plan).

Background

2. The aim of the Program Plan is to provide an overarching strategic framework for the Culture Review Implementation program.
3. The draft Program Plan 2019-2022 on-a-page at [Attachment A](#) provides an overview of the four program domains and implementation plan for each domain.
4. Feedback on the Program Plan is invited from the Oversight Group members. Members are encouraged to provide ongoing feedback to the Secretariat as the Program Plan evolves.
5. Agenda Item 5.8, Implementation of Recommendations and Project Plan, nests beneath the Program Plan.

Issues

6. The Program Plan 2019-2022 outlines how health services across the ACT public health system and the community will work together to lay the groundwork for the future. With a strong focus on organisational behaviour, workforce and leadership change and building a solid evidence-base, this Program Plan will put in place strategic projects and actions which will provide the foundations to drive long-term results while also implementing priority actions in the short-term.
7. The Program Plan is intended to be a living document that will be developed in phases. The first phase of the Program Plan (July 2019 to June 2020) will build the foundation for future years.
8. Strategies in Phase One will include:
 - Partnering with stakeholders across the ACT health sector in all levels of planning, delivery and evaluation;

- Ensuring that an evidence-based methodology is applied to intervention design and evaluation;
 - Identifying, mapping and responding to core issues, recognising idiosyncrasies of the ACT Public Health Service and adapting interventions for each individual organisation as required;
 - Defining the capabilities that are required to flexibly respond to the identified issues and increase workforce capability where required; and
 - Investing in capability development of the workforce to support organisational behaviour, workforce and leadership change.
9. Over time the Program Plan will be revised to reflect:
- New challenges and priorities;
 - Emerging evidence and opportunities; and
 - Complementary strategic interventions and responses on workplace culture across the ACT public health system.

Recommendation

That the Oversight Group:

- *Note the Program Plan for the Culture Review Implementation.*

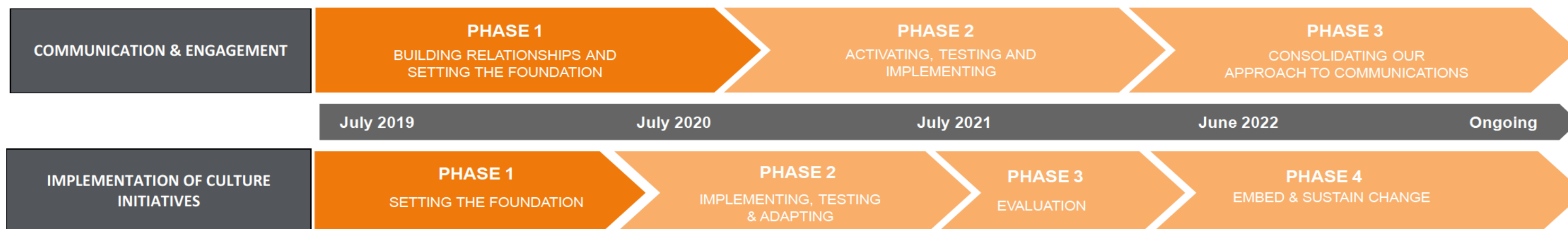
Culture Review Implementation Program Plan 2019-2022

DRAFT OCTOBER 2019

VISION

> Invest in a values-based public health system to achieve enduring and sustainable positive workplaces

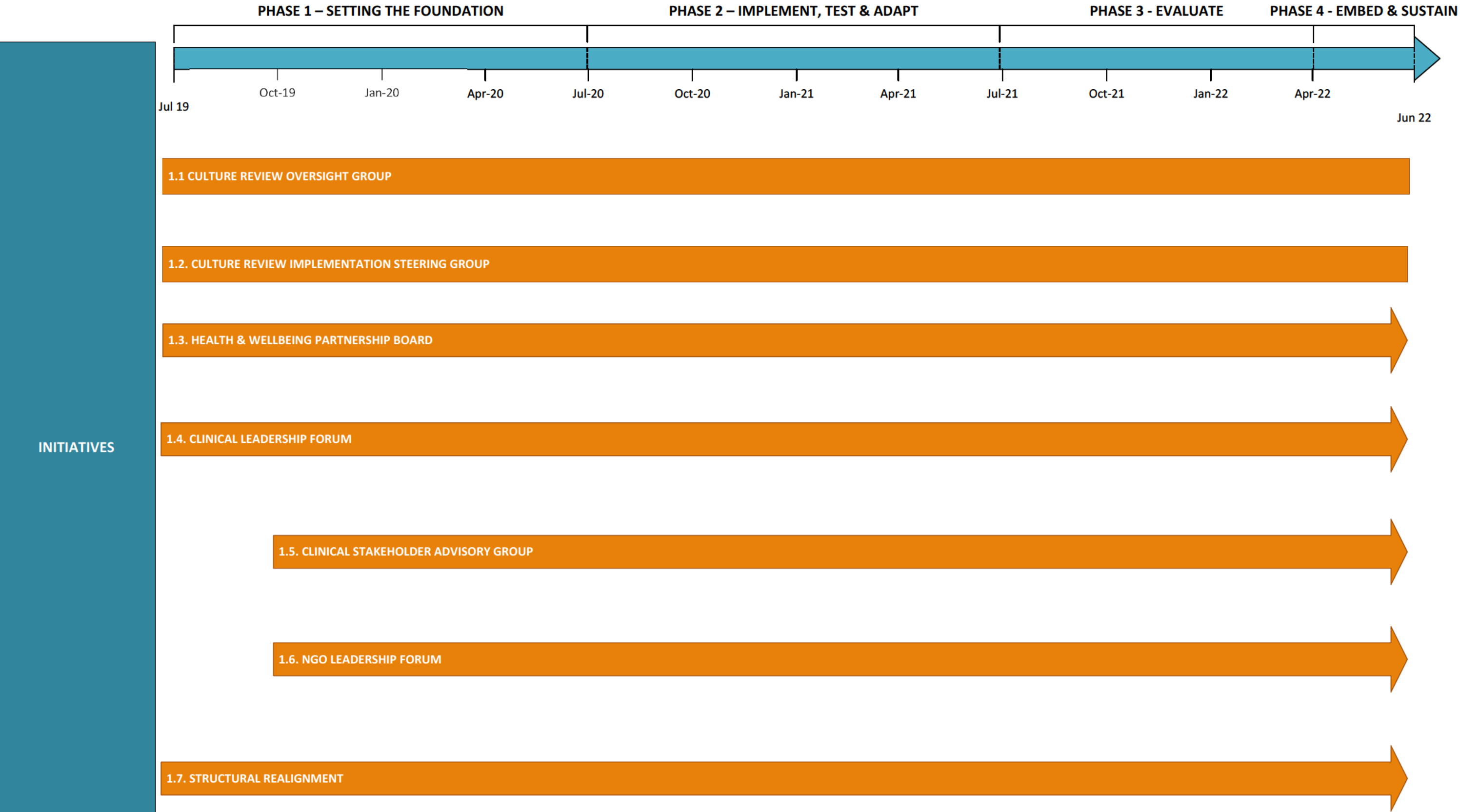
THEMES	GOVERNANCE & OVERSIGHT	ORGANISATIONAL BEHAVIOUR, WORKFORCE & LEADERSHIP	EDUCATION & RESEARCH	CLINICAL ENGAGEMENT
RECOMMENDATIONS	5, 8, 10, 12, 17, 18, 19	1, 2, 3, 6, 8, 9, 10, 11, 13, 14, 15, 16, 17, 18, 19, 20	7, 16	2, 4, 5, 6, 9, 12, 20
GOAL	> Assess, review and establish good governance and oversight structures to ensure transparency and accountability across the System	> Invest in our people and processes to build safe and positive workplaces across the System	> Through strong collaboration, partnership and engagement we will develop and shape a learning mindset across the System	> Encourage and embed a two-way discourse with our clinicians to evolve our System
KEY INITIATIVES (PHASE 1)	<ul style="list-style-type: none"> Establish Culture Review Oversight Group. Establish Culture Review Implementation Steering Group. Establish Health & Wellbeing Partnership Board. Establish Clinical Leadership Forum. Establish Clinical Stakeholder Advisory Group. Establish NGO Leadership Forum. Structural alignment across ACT public health system. 	<ul style="list-style-type: none"> Embed values, vision and expected behaviours across system. Partner with the Australian National University Research School of Management (ANU-RSM) to develop a Health Sector Culture Change Framework. ANU-RSM to undertake Rapid Evidence Assessment (REA) to identify best evidence on elements required to promote healthier workplaces. System-wide Human Resources (HR) function review. Respect, Equity and Diversity (RED) Working Group established to map, review and assess key elements in the application of the RED Framework across the system. Align to with work underway on <i>Towards a Safer Culture Strategy and Occupational Violence Strategy's (CHS and CPHB)</i> to create positive workplaces across the system. Develop a suite of system-wide climate indicators and metrics. 	<ul style="list-style-type: none"> Concept design for innovative approaches to the conduct and delivery of health and medical research in the ACT. Research Working Group and Workforce Education and Training Working Group to drive initiatives. Conduct Health Summit with senior clinicians and senior administrators at CHS and CPHB to ascertain how to map a plan for improved service coordination and collaboration. Develop partnerships with tertiary sector to identify new opportunities to enhance curriculum development of allied health, nursing, midwifery and medicine. Identify new opportunities to develop future leaders of the health sector. Establish partnership with ANU-RSM to develop, implement and evaluate the Health Sector Culture Change Framework through evidence-based methodology. 	<ul style="list-style-type: none"> Establish ACT Clinical Leadership Forum. Engagement with Clinical Committees. Engagement with Colleges and other key stakeholder organisations. Develop measures to monitor clinical engagement across the ACT public health system.



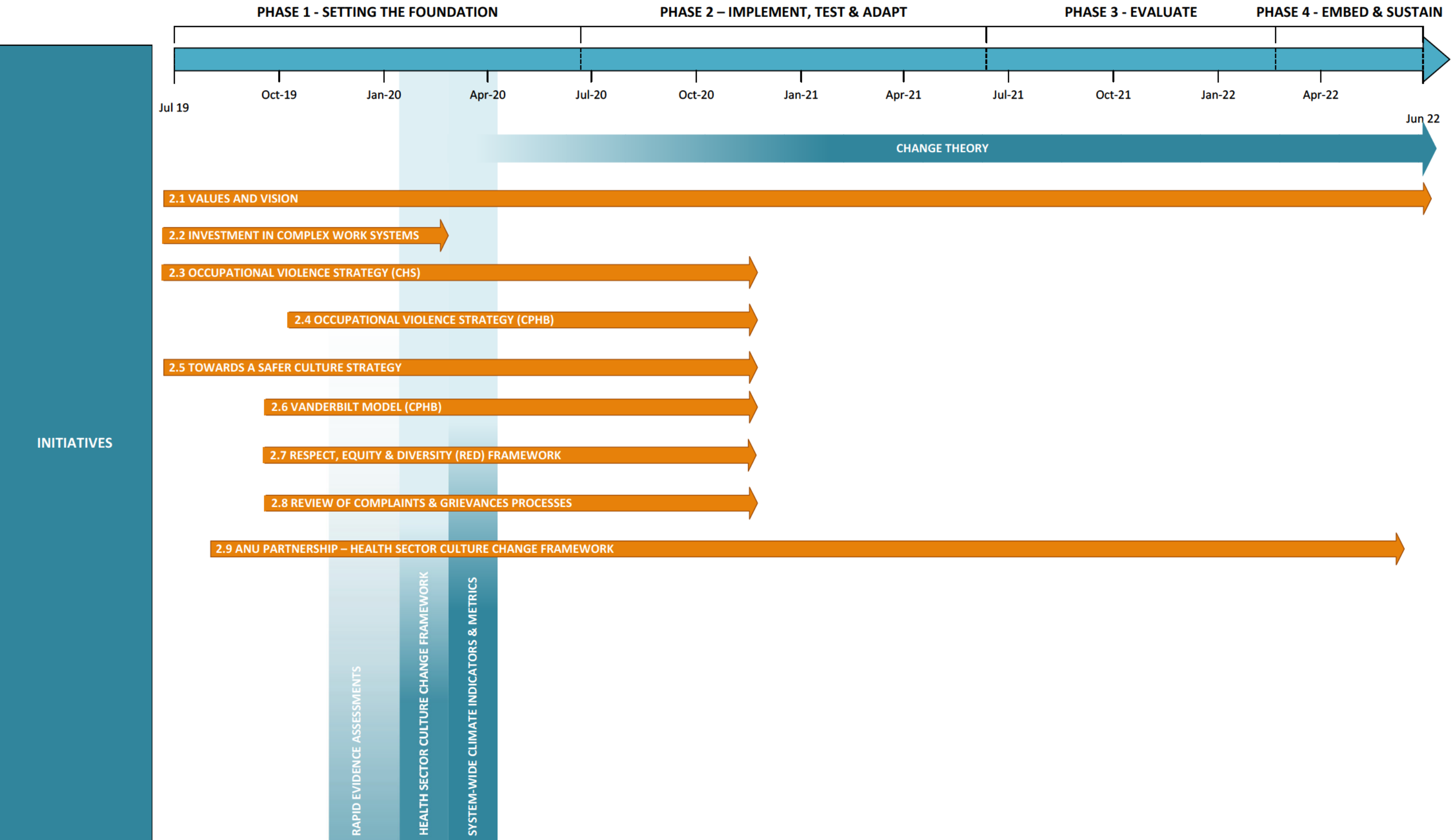
Culture Review Implementation Program Plan 2019-2022

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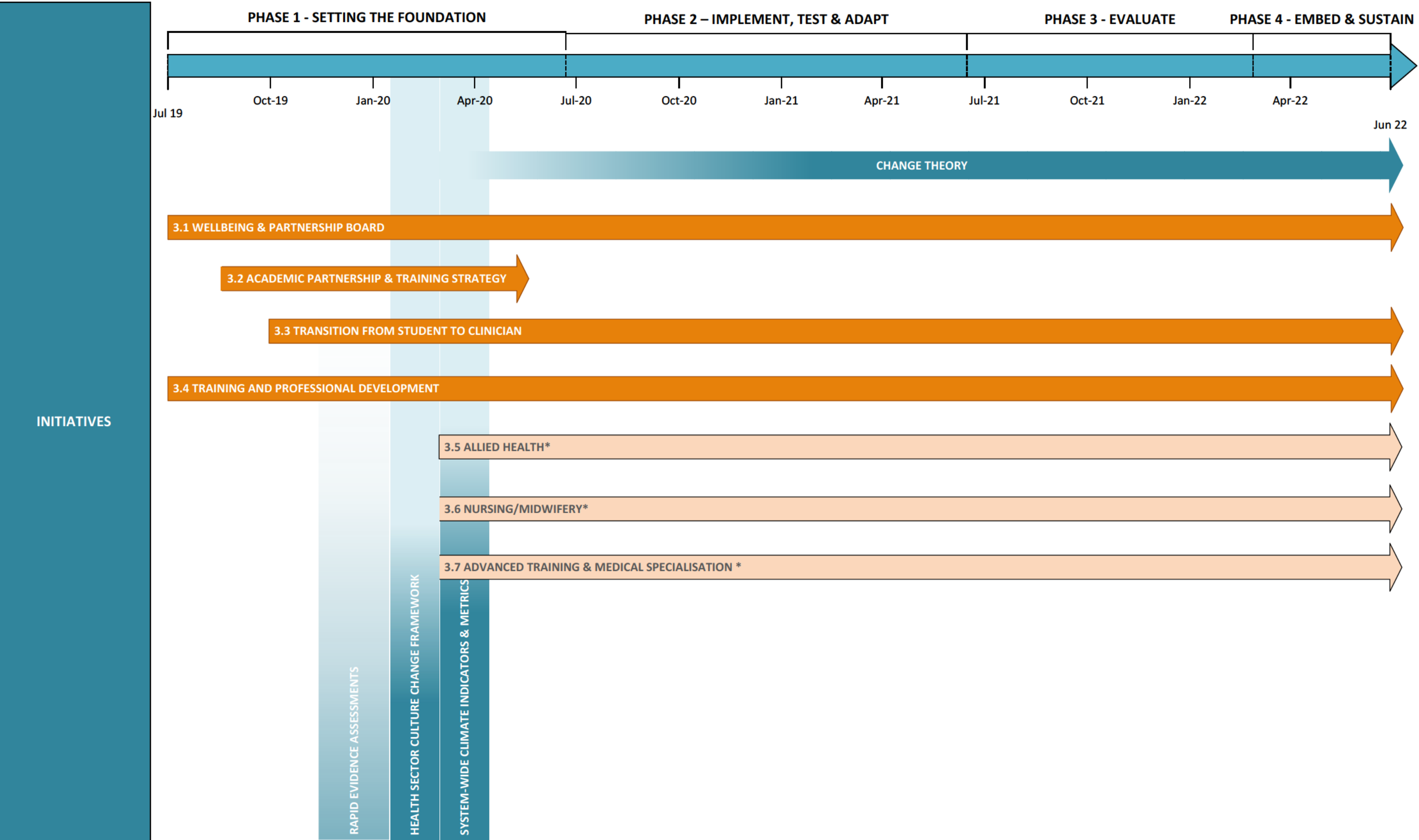
1. GOVERNANCE & OVERSIGHT



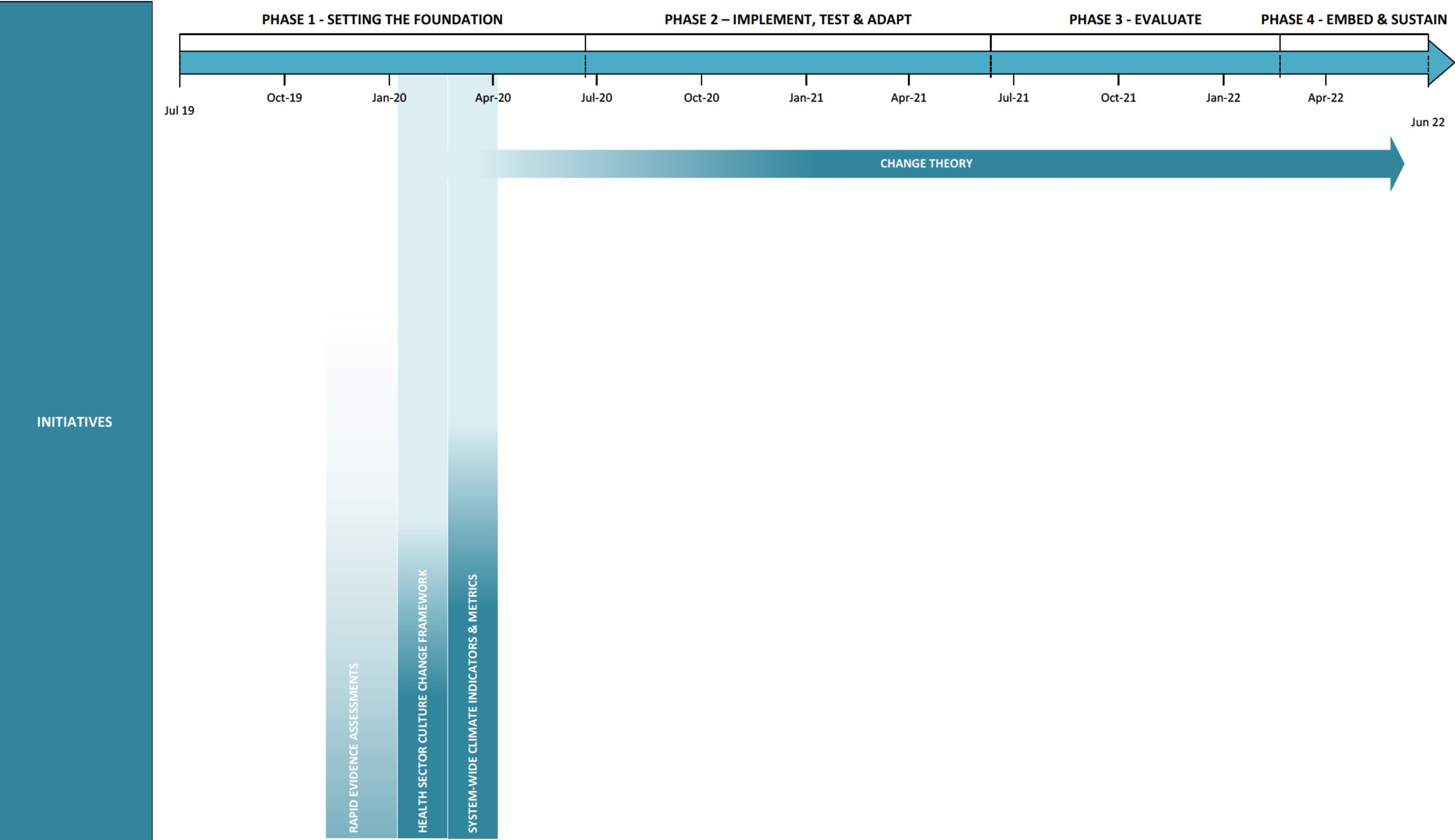
2. ORGANISATIONAL BEHAVIOUR, WORKFORCE & LEADERSHIP



3. EDUCATION & RESEARCH



4. CLINICAL ENGAGEMENT



Meeting Paper

Agenda Item:	5.8
Topic:	Implementation of Recommendations and Project Plan
Meeting Date:	19 November 2019
Action Required:	Noting
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

Purpose

1. To note the progress made in implementing the recommendations of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services (the Review)*.

Background

2. This is a standing agenda item to provide an ongoing status update on the progress of work being undertaken to implement the Review recommendations.
3. Project planning documentation to support the mapping and reporting of progress made in addressing the recommendations was tabled at the Culture Review Oversight Group (Oversight Group) meeting on 4 September 2019.
4. Feedback on the implementation planning documentation was invited from the Oversight Group members. To date there has been no feedback received, however members are encouraged to provide feedback to the Secretariat as the planning documentation evolves.

Issues

5. The Implementation of Recommendation Status Update at Attachment A provides information on system-wide and organisation specific activities against each of the recommendations in the Review. It includes a timeline for each activity, identifies where there is variance from the implementation timeline in the Review and indicates achievement of actions.
6. Formatting changes have been incorporated into the attached project planning document to improve readability and tracking of actions.
7. Significant progress has been made by each organisation in completing actions across a range of recommendations.
8. Recommendations that have largely been finalised are: Recommendation 18 (Commissioning of the Culture Review Oversight Group) and Recommendation 17 (Public Commitment).

9. There are no recommendations that are of concern. All implementation plans are on track.

Recommendation

That the Oversight Group:

- *Note the progress made in implementing the recommendations.*
- *Provide feedback on the Project Planning documentation to the Secretariat.*

	IMPLEMENTATION SCHEDULE
KEY:	CURRENT STATUS
	ACHIEVED

[illegible]

[illegible]

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
	Government Response (May 2019) Commencement of the development of the suite of measures will occur from July 2019 and it is anticipated that this will take at least six months to finalise phase one. The development and maturity of the measures will be iterative and ongoing to reflect the contemporary culture of the ACT public health system.		A2.2: Implement and monitor suite of measures	Not yet commenced.					A2.2										NOT YET COMMENCED
		ACT Health Directorate (Director, People and Strategy)	A2.3: Conduct 2019 staff survey (evaluate)	<ul style="list-style-type: none">ACTHD Climate Survey is due for release to ACTHD staff on 8 November 2019, closing 22 November 2019. Responses will be analysed and an action plan developed.				A2.3										IN PROGRESS	
			A2.4: Conduct 2022 staff survey (evaluate)	Not yet commenced.													A2.4	NOT YET COMMENCED	
		Canberra Health Services (Executive Group Manager, People and Culture)	A2.3: Conduct 2019 staff survey (evaluate)	<ul style="list-style-type: none">The Culture Workplace Survey is due for release to CHS staff on 8 November 2019, closing 22 November 2019. Responses will be analysed and an action plan developed.				A2.3										IN PROGRESS	
			A2.4: Conduct 2022 staff survey (evaluate)	Not yet commenced.													A2.4	NOT YET COMMENCED	
		Calvary Public Hospital Bruce (Chief Human Resource Officer, Regional CEO, General Manager)	A2.1: Commence developing suite of measures	<ul style="list-style-type: none">Strategic indicators and KPI's included in the Calvary performance plan.Forms available for patients/families to provide feedback.CPHB are currently undertaking a review of committee structures and governance to ensure appropriate monitoring and response to issues raised through the processes - ensure timely notification and response by Executive to emerging trends and issues.Further discussion to link in with system-wide measures as appropriate.				A2.1										IN PROGRESS	
			A2.2: Implement and monitor suite of measures	Not yet commenced.				A2.2										NOT YET COMMENCED	

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
			A2.3: Conduct 2019 staff survey (evaluate)	<ul style="list-style-type: none">Clinical engagement and culture will be monitored via staff survey to be conducted May 2020.Pulse survey design underway.			<div></div>	<div>A2.3</div>											IN PROGRESS
			A2.4: Conduct 2022 staff survey (evaluate)	Not yet commenced.													<div>A2.4</div>		NOT YET COMMENCED
3	<p>Recommendation 3 of the Final Report, March 2019</p> <p>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 Center Patient Advocacy Reporting System (PARS) and Co-worker Observation Reporting System (CORS).</p> <p>Government Response (May 2019)</p> <p>The planning, procurement and foundational work for implementation of a program to promote a healthier culture will commence in July 2019.</p> <p>This will be a program based on the Vanderbilt system and the implementation model will be required to be consistent across the three arms of the ACT public health system.</p>	<p>System-wide</p> <p>(Executive Branch Manager, Culture Review Implementation Branch</p> <p>ACT Health Directorate</p> <p>(Executive Group Manager, Corporate and Governance Division)</p>	A3.1: Planning, procurement and foundation work	<ul style="list-style-type: none">ACT public health system Culture Change Framework currently being developed in partnership with ANU-RSM will review and assess Vanderbilt and like programs.Phase 1 of research project commenced September 2019.Culture Change Framework to be completed February 2020.Rapid Evidence Assessment (REA) to be undertaken by ANU-RSM to identify best evidence on elements required to promote healthier workplaces.REA specific to Vanderbilt and associated models to be undertaken by ANU-RSM.Respect, Equity and Diversity (RED) Working Group established. The purpose is to map, review and assess key elements in the application of the RED Framework across the system.			<div></div>	<div>A3.1</div>											IN PROGRESS
			A3.1: Planning, procurement and foundation work	<ul style="list-style-type: none">Methodology for assessing and managing culture clusters and strategic management approach is underway to support promotion of positive workplace.Alignment with work underway in Towards a Safer Culture to align with positive workplaces across the system.ACTHD is working closely with the ANU-RSM team in their development of the Culture Change Framework.	<div></div>		<div></div>	<div>A3.1</div>											IN PROGRESS
			A3.2: Implementation	Not yet commenced.						<div></div>	<div>A3.2</div>								NOT YET COMMENCED

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
			A3.3: Program delivery	Not yet commenced.											A3.3				NOT YET COMMENCED
		Canberra Health Services Executive Group Manager, People and Culture)	A3.1: Planning, procurement and foundation work	<ul style="list-style-type: none"> Employee Advocate commenced 1 July 2019 – Staff from both CHS and ACTHD continue to make contact with the role. Procedures and processes are being worked on. HR Business Partners (BP) commenced early June 2019. An additional Business partner to commence shortly as part of model and will assist with coverage in supporting culture change and skill development for managers to intervene early if there are issues/disputes. Draft Occupational Violence Strategy, policy and procedure have been through consultation with CHS staff, union representatives, consumer and carer representatives and Worksafe ACT. Strategy is being prepared for publication. Methodology for dealing with cultural 'clusters' is implemented, and culture diagnostics continue to be undertaken as identified. Methodology for working with individuals who are identified as potentially in need of assessment regarding behaviour or management practice is currently in draft. Psychological support for staff after critical incidents – procedure is currently under development. CHS is working closely with the ANU-RSM team in their development of the Culture Change Framework. 			A3.1												IN PROGRESS
			A3.2: Implementation	Not yet commenced							A3.2								NOT YET COMMENCED
			A3.3: Program delivery	Not yet commenced											A3.3				NOT YET COMMENCED

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
		Calvary Public Hospital Bruce (Chief Human Resource Officer, Regional CEO, General Manager)	A3.1: Planning, procurement and foundation work	<ul style="list-style-type: none"> Work health and safety and prevention of bullying, harassment and discrimination policies and procedures have been reviewed and updated. This has been broadly communicated to staff. Established Respect Equity and Diversity Contact Officer network. Introduced a new module within the Riskman incident management system to report staff-to-staff behavioural incidents. CPHB is now a Calvary Healthcare pilot site for the rollout of two programs by the Cognitive Institute that are based on the Vanderbilt Model. These programs are Speaking Up for Safety and Promoting Professional Accountability. CPHB is working closely with the ANU-RSM team in their development of the Culture Change Framework. 															COMPLETE
			A3.2: Implementation	<ul style="list-style-type: none"> Implementation of Cognitive Institute Programs scheduled from October 2019 to December 2020. 															PLANNING
			A3.3: Program delivery	Not yet commenced															NOT YET COMMENCED
4	Recommendation 4 of the Final Report, March 2019 The ACT Health Directorate convene a summit of senior clinicians and administrators of both Canberra Health Services and Calvary Public Hospital to map a plan of improved clinical services coordination and collaboration. Government Response (May 2019) The Health Summit of senior clinicians and administrators from across the ACT public health system is planned for the second half of 2019.	ACT Health Directorate (Chief Medical Officer, Office of Professional Leadership and Education)	A4.1: Plan and conduct first summit	<ul style="list-style-type: none"> The CMO is consulting with senior clinicians and will also consult with senior administrators to ascertain how to best engage with senior clinicians and administrators to map a plan for improved service coordination and collaboration. Some work is occurring to improve Territory-wide service coordination and collaboration in relation to clinical registries and clinical networks. Over the coming months, it is anticipated there will be further consultation in the GP Forum (planned in October 2019), at strategic planning and infrastructure planning forums (ongoing), Health Executive Round Table (planned for November 2019) and other leadership forums. Preliminary discussion has occurred with clinical leads of Canberra Health Services and Calvary Public Hospital Bruce about holding a forum in early 2020. Further consultation will be needed with clinicians and administrators across the system to plan such a summit to ensure it is productive, value adding and will engage participants. 															IN PROGRESS DELAY TO SCHEDULE

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
5	Recommendation 5 of the Final Report, March 2019 The CEO of Canberra Health Services should review mechanisms to better integrate clinical streams of the community health services within the Clinical Divisional Structures. Government Response (May 2019) This work has commenced to better integrate the clinical streams of the community health services. This is reflected in the new organisational structure of Canberra Health Services.	Canberra Health Services (Executive Branch Manager, People and Culture)	A5.1: Review mechanisms and integrate Community Health Services	<ul style="list-style-type: none">• New organisational structure at Canberra Health Services has reflected alignment and integration.• Organisational structure continues to be monitored to ensure best alignment.• CEO Canberra Health Services continues with staff engagement through various site visits, regular communication and face to face opportunities.• Clinical Service plans are being developed and will provide strategic direction in relation to clinical workstreams.	A5.1														COMPLETE
			ACHIEVED																
			A5.2: Evaluate	<ul style="list-style-type: none">• Evaluation scheduled for April 2020	A5.2														NOT YET COMMENCED
6	Recommendation 6 of the Final Report, March 2019 That the ACT Health Directorate re-establish open lines of communication with the NGO sector and other external stakeholders. Government Response (May 2019) The ACT Health Directorate has commenced the re-establishment of open lines of communication with the NGO sector with a view to establishing an NGO Leadership Group by October 2019.	ACT Health Directorate (Executive Group Manager, Health System Planning and Evaluation)	A6.1: Commence re-opening of communication lines	<ul style="list-style-type: none">• Communication has recommenced and further opportunities are currently being explored.• A paper was considered by the ACTHD Directorate Leadership Committee in June 2019 outlining NGO re-engagement opportunities.• This will continue to evolve and develop further.	A6.1														COMPLETE
			ACHIEVED																
			A6.2: Establish NGO Leadership Group	<ul style="list-style-type: none">• ACT Health Directorate Leadership Committee, Mental Health Community Coalition (ACT) and Alcohol Tobacco and Other Drug Association (ACT) endorsed a draft Terms of Reference to progress to the Group for consideration in September.• A meeting date for the first meeting of the NGO Leadership Group has been organised for 23 October 2019.	A6.2														COMPLETE
			ACHIEVED																
			A6.3: Evaluate	Not yet commenced	A6.3														NOT YET COMMENCED
7	Recommendation 7 of the Final Report, March 2019 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 encourage professional development and address culture, education, training, research and other strategic issues. Government Response (May 2019) The ACT Health Directorate is building on work commenced with the inaugural ACT Health Summit: ‘Research, Teaching and Training’, held on 13 November 2018 which included the development of relationships within the academia sector. An academic partnership and training strategy is being developed. The Culture Review Oversight Group membership was extended to include the Deans of the Faculties of Health at ANU and UC (see response to recommendation 18).	ACT Health Directorate (Deputy Director-General, Health Systems Policy and Research)	A7.1: Review existing arrangements (develop relationships, define positions)	<ul style="list-style-type: none">• ACT Health and Wellbeing Partnership Board second meeting was on 21 June 2019 with governance and operational structures discussed and agreed.	A7.1														COMPLETE
			ACHIEVED																
			A7.2: Produce academic partnership and training strategy	<ul style="list-style-type: none">• The ACT Health and Wellbeing Partnership Board third meeting was held on 9 September 2019 with discussion held about the progress of innovative approaches to the conduct and delivery of health and medical research in the ACT, and effectively utilising the Research Working Group and the Workforce Education and Training Working Group to drive initiatives and provide expert advice to the Partnership Board.	A7.2														IN PROGRESS

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REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
	and Regional CEO Calvary ACT by October 2019.		A11.2: Implement and monitor	Not yet commenced					A11.2										NOT YET COMMENCED
		Calvary Public Hospital Bruce (Chief Human Resource Officer, Regional CEO, General Manager)	A11.1: Assess Program	• Options are being explored within broader business strategy.		A11.1												PLANNING	
			A11.2: Implement and monitor	Not yet commenced						A11.2									
12	Recommendation 12 of the Final Report, March 2019 That Canberra Health Services adopt the progressive evolution of clinically qualified Divisional Directors across each Clinical Division with Business Manager support and earned autonomy in financial and personnel management. Government Response (May 2019) The restructure of Canberra Health Services Divisions is complete. The progressive evolution of clinically qualified Divisional Directors across each Clinical Division with Business Manager support and earned autonomy in financial and personnel management will be piloted from May 2019.	Canberra Health Services (Executive Group Manager, People and Culture)	A12.1: Conduct pilot	• Reviewing the clinical director role, expectations and capability development, across the organisation, including reviewing role descriptions. • The HR Business Partner Model continues to support the approach to promoting a positive workplace culture.		A12.1												IN PROGRESS	
			A12.2: Rollout full recommendations	Not yet commenced					A12.2										NOT YET COMMENCED
13	Recommendation 13 of the Final Report, March 2019 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. Government Response (May 2019) The early planning for an executive leadership and mentoring program is underway.	System-wide (Executive Branch Manager, Culture Review Implementation Branch)	A13.1: Planning	• Initial discussions to inform concept development underway. This will be informed by the Culture Change Framework, scheduled for completion end January 2020. • The Culture Review Implementation Steering Group has agreed to further discussion on developing a system-wide approach after receiving recommendations from the Australian National University, Research School of Management team.		A13.1												IN PROGRESS	
			A13.2: Implementation	Not yet commenced					A13.2										NOT YET COMMENCED

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
14	Recommendation 14 of the Final Report, March 2019 The three arms of the ACT public health system should review their HR staffing numbers and functions in response to the concerns staff have expressed regarding timeliness and confidence in current HR procedures, and the future needs for HR, as proposed in this Review. Government Response (May 2019) The initial review began with the transition to three organisations within the ACT public health system. Now that transition has settled, the HR resourcing and functions will be reassessed in line with this recommendation. Implementation of any findings will take place in the later part of 2019.	System-wide (Executive Branch Manager, Culture Review Implementation Branch)	A14.1: Conduct initial review	<ul style="list-style-type: none">• System-wide HR Function Review Proposal was endorsed by Steering Group (6 September 2019).• Procurement activities underway.	A14.1													IN PROGRESS	
			A14.2: Implement changes	Not yet commenced	A14.2												NOT YET COMMENCED		
			A14.3: Evaluate	Not yet commenced							A14.3						NOT YET COMMENCED		
		Canberra Health Services (Executive Group Manager, People and Culture)	A14.1: Conduct initial review	<ul style="list-style-type: none">• The Director Positive Workplace Strategy, Employee Advocate, Manager Workforce Inclusion, Director Workforce Planning and HR Business Partners (BPs) have all commenced.• The Business Partnership model has been well accepted in CHS, with one further role to commence shortly.• The organisational structure continues to be monitored.	A14.1												IN PROGRESS		
			A14.2: Implement changes	Not yet commenced	A14.2												NOT YET COMMENCED		
			A14.3: Evaluate	Not yet commenced							A14.3						NOT YET COMMENCED		
	Calvary Public Hospital Bruce (Chief Human Resource Officer)	A14.1: Conduct initial review	<ul style="list-style-type: none">• A business case has been submitted for temporary resourcing to support positive workforce focus.	A14.1												IN PROGRESS			
		A14.2: Implement changes	Not yet commenced	A14.2												NOT YET COMMENCED			
		A14.3: Evaluate	Not yet commenced							A14.3						NOT YET COMMENCED			

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REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
17	<p>Recommendation 17 of the Final Report, March 2019</p> <p>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 and key representative organisations to collectively implement the recommendations of this Review to ensure ongoing cultural improvement across the ACT public health system.</p> <p>Government Response (May 2019)</p> <p>Once the Government Response has been tabled in the ACT Legislative Assembly, the very same week the commitment of the ACT Government and senior leadership team of the ACT public health system to the implementation of the recommendations of the Review will be reaffirmed to staff and the community.</p>	Minister and Executive	A17.1: Deliver public commitment	<ul style="list-style-type: none">Public commitment made by Ministers and Health Leaders on 16 May 2019.At the September meeting, the Oversight Group pledged their commitment in supporting and driving a positive workforce culture across the ACT public health system.		<div>A17.1</div> <div>ACHEIVED</div>													COMPLETE
18	<p>Recommendation 18 of the Final Report, March 2019</p> <p>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 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, President of the AMA (ACT), Branch Secretary ANMF (ACT), and Regional Secretary CPSU.</p> <p>Government Response (May 2019)</p> <p>Agreed (with additions to the membership of the Culture Review Oversight Group). The Culture Review Oversight Group has been established and the inaugural meeting was held on 28 March 2019. Members include the: Minister for Health and Wellbeing (Chair), Minister for Mental Health (Deputy Chair), Director-General Health Directorate, Chief Executive Officer Canberra Health Services, Regional Chief Executive Officer Calvary ACT, Regional Secretary CPSU, Branch Secretary ANMF ACT, President AMA ACT, Executive Officer Health Care Consumers Association (ACT), Executive Branch Manager Culture Review Implementation Team [ex-officio]. At its first meeting, the Group agreed to extend its membership to include: President ASMOF, President VMOA ACT, Dean College of Health and Medicine ANU, and Executive Dean Faculty of Health University of Canberra.</p>	Minister and ACT Health Directorate	A18.1: Commence group activities	<ul style="list-style-type: none">The inaugural meeting of the Culture Review Oversight Group was held on 28 March 2019.	<div>A18.1</div> <div>ACHIEVED</div>													COMPLETE	
			A18.2: Quarterly group meetings	The Oversight Group continues to meet bi-monthly.		<div>A18.2</div>												IN PROGRESS	

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS	2019				2020				2021				2022		STATUS
					Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	
			A18.3: Evaluation of Oversight Group Measures of Success	Existing tools and measures that may assess the success of the Oversight Group include: <ul style="list-style-type: none"> Overarching Program Planning documentation; Project Implementation Planning documentation; Control and management of budget; Management of the program Risk Register; Tracking and reporting against the phases in the Communications and Engagement Strategy; Benefits realisation; Management of work priorities and indicators across the ACT public health system, informed by the Culture Change Framework; and Reporting on return on investment in evolving a positive culture across the ACT public health system. 															IN PROGRESS
19	Recommendation 19 of the Final Report, March 2019 That 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. Government Response (May 2019) The Culture Review Oversight Group will auspice the next independent review commencing around November 2019.	ACT Health Directorate (Executive Branch Manager, Culture Review Implementation Branch)	A19.1: Commence Annual Review (2020)	<ul style="list-style-type: none"> Annual Review scheduled to commence March 2020. Planning underway 					A19.1										IN PROGRESS
			A19.2: Release Annual Review (2020)	<ul style="list-style-type: none"> Annual Review scheduled to be released April 2020. 						A19.2									NOT YET COMMENCED
			A19.3: Commence Annual Review (2021)	<ul style="list-style-type: none"> Annual Review scheduled to commence March 2021. 									A19.3						NOT YET COMMENCED
			A19.4: Release Annual Review (2021)	<ul style="list-style-type: none"> Annual Review scheduled to be released April 2021. 										A19.4					NOT YET COMMENCED
			A19.5: Commence Annual Review (2022)	<ul style="list-style-type: none"> Annual Review scheduled to commence March 2022. 													A19.5		NOT YET COMMENCED
			A19.6: Release Annual Review (2022)	<ul style="list-style-type: none"> Annual Review scheduled to be released April 2022. 														A19.6	NOT YET COMMENCED

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Meeting Paper

Agenda Item:	5.9
Topic:	Culture Review Implementation Communications and Engagement Strategy
Meeting Date:	19 November 2019
Action Required:	Noting
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

Purpose

1. To provide the Culture Review Oversight Group (Oversight Group) with the updated Culture Review Implementation Communications and Engagement Strategy (Communications Strategy) at Attachment A.

Background

2. At the Oversight Group meeting on 4 September, feedback on the draft Communications Strategy was provided by members, and this feedback has now been incorporated into the updated Communications Strategy.
3. The Chair requested that the updated Communications Strategy be provided to members and discussed at the Oversight Group meeting on 19 November 2019.

Issues

4. In September 2019, the ACT Government established a Communications and Engagement Peer Advice Panel, implemented by the Chief Minister Treasury and Economic Development Directorate (CMTEDD). Its aim is to provide advice to Directorates in the planning and execution of communications and engagement strategies to ensure that messaging aligns and is complementary to other activities happening across the ACT public service.
5. The Communications Strategy was tabled and discussed at the Communications and Engagement Peer Advice Panel (Panel) on Tuesday 15 October 2019.
6. Feedback from the Panel was positive. Key discussion points included:
 - the need for defined mechanisms to support strong two-way communication and feedback from staff;

- the importance of timing and nuancing of messaging for the three public health organisations to ensure alignment and coordination; and
 - targeting of specific messaging to middle managers with emphasis on the need for them to keep their staff informed and aware of messages.
7. It was confirmed with the Panel that the Communications Strategy addressed most of their comments and it was anticipated that the Culture Change Framework would also address these aspects, with the Communications Strategy being adjusted accordingly.
 8. The Panel observed that the Communications Strategy was necessarily focussed internally, but also acknowledged that it included an external focus to ensure the community retains confidence in the health system.
 9. The Panel did not indicate the need for any resubmission or changes to the Communications Strategy.
 10. The Culture Review Implementation Communications and Engagement Strategy plan-on-a-page at Attachment B will be made publicly available on the ACT Health web page following endorsement of the Communication Strategy by the Culture Review Implementation Steering Group.

Recommendation

That the Oversight Group:

- *Note the updated Culture Review Implementation Communications and Engagement Strategy; and*
- *Note the Culture Review Implementation Communications and Engagement Strategy plan on a page.*

Culture Review Implementation Communications and Engagement Strategy 2019-2022

DRAFT 1 October 2019

Purpose

The purpose of the Culture Review Implementation Communications and Engagement Strategy (the Strategy) is to support the culture change required across the ACT public health system to achieve a positive workplace. This Strategy outlines the timely and interactive internal and external communications which will create an understanding and commitment to culture change.

The aim of this Strategy is to ensure all staff and stakeholders across the ACT public health system (the system) are appropriately engaged and informed of progress with implementing the twenty recommendations from the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services*. The Strategy will guide our work to communicate progress made in evolving and driving positive workplace practices and mindsets.

Link to Government priorities

Improving the workforce culture and staff engagement within our healthcare system directly links to the 'Future proofing our health system' strategic priority within the *ACT Budget 2019-20, Building for the future*.

Background

The ACT Government invests significantly in the delivery of public health services to ensure safe, high quality healthcare for the ACT community and surrounding regions. A positive workplace culture is crucial to ensure our system can deliver a high level of care to the community and is regarded as an employer of choice for all current and prospective employees.

Improving workplace culture and staff engagement within the health system has been a significant area of priority for the Government in the delivery of public healthcare to the ACT community.

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

The Review was tasked with exploring the workplace culture of public health services in the ACT, including Calvary Public Hospital Bruce (CPHB), ACT Health Directorate (ACTHD) and Canberra Health Services (CHS). It considered what was working well, including examples of best practice workplace culture; ideas

to improve workplace culture; workplace policies, including complaints/management processes; and claims made in relation to inappropriate conduct and behaviours.

The Final Report was released by the former Minister for Health and Wellbeing on 7 March 2019. The Government committed to implement all twenty recommendations on 16 May 2019. Recommendation 20 notes that *'as a result of this Review, the 'Cultural Review Oversight Group' should engage 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 mechanism for doing it'*.

The Government has established a governance framework to ensure that implementation of the recommendations would be efficiently and effectively delivered, not just over the next three years, but embedded into best practice and continuous improvement throughout the system for many years to come.

Implementation of recommendations is being led by the ACTHD as the public health system steward. The Culture Review Implementation Branch was created in the Office of the Director-General, ACTHD, to lead the implementation and delivery of the Review recommendations across the system.

A range of governance measures have been implemented to support the delivery and oversight of the significant work underway across the system. These include:

- Culture Review Oversight Group (Oversight Group) – established to oversee the implementation of all recommendations from the Review.
- Culture Review Implementation Steering Group (Steering Group) – established to implement the recommendations from the Review.
- Clinical Leadership Forum – established to provide independent and expert advice to the Minister for Health, and the Minister for Mental Health.
- ACT Health and Wellbeing Partnership Board (the Partnership Board) – established to provide a forum to discuss and agree on shared priorities affecting health and medical research that will improve the health of Canberra and drive a new vision for our health system.
- NGO Leadership Group – established to provide a forum for proactive and ongoing engagement between non-government organisations and the ACT public health system. The inaugural meeting is scheduled in October 2019.

All of the above forums are considered to be communication channels and provide valuable mechanisms for testing and feedback of communications initiatives.

Context

The Independent Review was conducted during a time of considerable restructuring of the system. Seven months prior to the announcement of the Independent Review, in March 2018, the former Minister for Health and Wellbeing and the Minister for Mental Health jointly announced that ACT Health would separate into two distinct organisations from 1 October 2018.

CHS focuses on the delivery of healthcare services; whilst the ACTHD, in its role as steward of the health system, focuses on strategic policy for the system, Territory-wide planning, research and population health.

During the last 12 months, executive leadership changes have occurred across the three arms of the health system with the appointment of the Director-General of ACTHD, the Chief Executive Officer for CHS, and the Regional Chief Executive Officer at CPHB.

Based on this change, communication is integral to the engagement and ongoing support of our workforce in understanding the context of change and to identify the vision of our system in evolving a positive culture in our organisations.

There have been commitments made to staff and stakeholders (by Government and Executives) that there will be effective communication mechanisms put in place to continue the progress that has been made across the system to improve culture.

Maintaining the confidence in the ACT public health system is a critical component to this Strategy.

Other related deliverables

The Culture Review Implementation Branch is undertaking other pieces of work that will be delivered alongside this Strategy. This work will contribute to overall culture change and support the outcomes identified in the Review.

This work includes the Human Resources Functions Review of existing processes and tools which will ultimately support managers to be effective leaders and communicators.

The Branch is also working with the Research School of Management at the Australian National University (ANU), who will develop a Culture Change Framework (the Framework) to guide each arm of the health system to develop and implement its own strategies to build a positive workplace culture.

The Framework will be based on workforce data, focus groups and literature reviews. It will clarify priorities and solutions, include recommendations for developing valid and reliable metrics and baseline measures, and identify the key factors that will support enduring and sustainable culture change. We will track progress against the Framework and use the baseline measures to benchmark, monitor and evaluate our communication objectives.

Communication objectives

The objectives of this Strategy are to:

- Raise awareness and understanding of the scope of the program of culture work being undertaken across the system, and the progress of work underway in each organisation, amongst staff.
- Align key messages about the review across the three arms of the system to ensure consistency.

- Engage and build relationships with stakeholders to ensure planned communication activities meet expectations. This will be mapped and evaluated over time in a Communication Feedback Matrix (example at Attachment A).
- Build trust with our workforce, stakeholders and the ACT community.
- Provide channels for two-way feedback.
- Increase understanding of the vision and direction of the changes being implemented across the ACT public health system by our internal and external stakeholders, including citizens of the ACT community.

The communication objectives will be measured through the mechanisms specified in *Measures of success*.

Phased communication approach

A phased approach to communications will be implemented from September 2019 to July 2022.

Phase One—Building relationships and setting the foundation

July 2019 to July 2020

In Phase One communication and engagement will be primarily, although not exclusively, focused on our workforce. We will build relationships across the system to ensure we understand our target audiences, stakeholders and channel preferences.

Phase One is about awareness raising, engagement and messaging the rationale and benefits of a positive workforce supported through culture change. We will be listening, understanding and messaging the anticipated change, how this will impact people, the progress, accomplishments and results. We will explore ways to invite feedback and encourage active employee engagement to ensure our workforce understands what our vision for positive culture is across the system.

In Phase One we will also establish the Culture Change Framework with the ANU. The Framework will clarify priorities and solutions, include recommendations for developing valid and reliable metrics and baseline measures from which we will evaluate our communication objectives.

Phase Two—Activating, testing and implementing

July 2020 to July 2021

During Phase Two, messages and narratives will be refined. We will communicate initiatives that have been implemented and recognise and promote positive case studies and success of culture change taking place within the system to both internal and external audiences.

For our workforce, we will let them know how they can continue to be involved in initiatives and ongoing conversations about meaningful change, progress and lessons being learnt.

Through the development of the Culture Change Framework and working with ANU and communication teams across the three arms of the health system, we will agree benchmarks and measures from which we can assess the effectiveness of our communication and engagement. We

will track and report on progress over time, build trust through transparent and consistent reporting, and evolve our approach when needed.

Phase Three— Consolidating our approach to communications

July 2021 to June 2022

In Phase Three we will evaluate our communication methods to align with contemporary practices to support the evolving positive culture.

It will be based upon outcomes from the two earlier phases and is also reliant on on-going evaluation. We will increase publicity of stories of positive culture behaviours that are becoming the norm across the system.

Information obtained from each phase, including from our formal evaluation methods, and feedback from our stakeholders and audiences, will shape each subsequent phase and evolve communications across the system—ensuring we reach the right people at the right time through the right channel.

The Culture Review Implementation Branch will be responsible for developing materials based on feedback, data and details from agreed initiatives, and authorisation from stakeholders.

The distribution of messaging via specific channels will be the responsibility of each arm of the system—specifically the communications, governance, and human resources teams who have direct links to the workforce.

The responsibilities and accountabilities of each team is outlined in **Attachment B**.

The Culture Review Implementation Branch will build and maintain an intranet page that will be accessible by all three arms of the system. It will be the repository of our reports and plans, and it will confirm how the branch is facilitating the implementation of the twenty Review recommendations across the system. It will include a timeline of Review milestones and achievements, details of the governance that supports the program (separate intranet section that this site will link to), and the program's core objectives. It will share examples of where good workforce behaviours are being effectively demonstrated and lived. It will also be the place where people can provide feedback, suggest and recommend ideas, read relevant links to articles about culture, workforce and workplace behaviours, and provide other resources and support mechanisms that our workforce can access.

Messages will continue to be refined and implemented after the Culture Review Implementation Branch ceases to exist (post-2022). It is anticipated that by 2022, most of the messaging and improved cultural norms will be embedded across the system.

Communication principles

We have identified principles which will guide the way we work and communicate:

- **We will build and sustain relationships** – we will take the time to build, nurture and sustain relationships with our audiences and stakeholders to encourage trust in sharing views and facilitate agreed behaviours and messages to our workforce. We will focus on continuous

information sharing and reinforcement with a view to reducing resistance, fears, uncertainty and inaccuracies.

- **We will consult early and often** –we will ask questions early and often to ensure we craft messages in the right channels at the right time to ensure desired and measurable outcomes can be achieved. This information will be strengthened and informed through the data that is captured.
- **We will plan our communications** – we will ensure that all communication materials are assessed, approved, distributed and evaluated in a considered way. Materials will be clear, direct and enable two-way engagement, with refinements made according to feedback received to ensure that the best outcomes are achieved at every step.
- **We will take responsibility for how we approach and distribute communications** – we will collaborate respectfully with each arm of the health system, ensuring that needs are met in alignment with the Culture Change Framework, respective governance models and other relevant practices and procedures across the system. Our communications will be relevant, open and honest, always reflecting the position and direction accurately.
- **We will model behaviours consistent with what is endorsed and expected across the system** – these behaviours will align with the values of each arm of the public health system and everyone will clearly understand the expected behaviours and how they need to practice these in the workplace. This will be promoted through our communications and modelled by our senior leaders. Everyone will know how to ‘walk the talk’ because it will be embedded in everything we do.

These principles align with the values of each arm of the health system:

- CHS: Reliable, Progressive, Respectful and Kind
- CPHB: Hospitality, Healing, Stewardship and Respect
- ACTHD: Respect, Integrity, Collaboration and Innovation

Target audiences

Primary

Our primary audience is the workforce of the health system – approximately 10,000 staff (Canberra Health Services, Calvary Public Hospital Bruce and ACT Health Directorate).

Most of the workforce are in the areas of healthcare service delivery – nursing, midwifery, medical, allied health, and administrative and services areas.

Secondary

Members of the ACT community.

Stakeholders

Through their own activities, stakeholders will shape the communications environment. They will also monitor our communication activities closely, and at times will be directly impacted by it. Stakeholders are also likely to be a critical channel to communicate with our internal and external audiences. Our stakeholders include:

- President of the Australian Medical Association, ACT.
- Executive Director, Health Care Consumers Association, ACT.
- Dean, College of Health and Medicine, Australian National University.
- Executive Dean, Faculty of Health, University of Canberra.
- Workforce representatives (unions):
 - Community and Public Sector Union (CPSU)
 - Australian Nursing and Midwifery Federation, ACT
 - Australian Salaried Medical Officers Federation, ACT
 - Visiting Medical Officers Association, ACT.
- Non-Government organisations – secretariat responsibility, currently managed by Health System Planning and Evaluation, ACTHD.

Key messages

Primary messages

Our key messages to our internal and external audiences will be iterative and will adapt and change over the phases, and this Strategy will be updated accordingly.

Internal messages

- You, our public health system workforce, are our most valuable asset and are integral in delivering healthcare to the members of the ACT community and surrounding regions.
- You deserve to feel safe, supported, valued and engaged every day.
- We are committed to ensuring that specifically identified workplace practices and processes are enhanced in a timely manner.
- We acknowledge that our culture needs improvement and we are working in a methodical, careful and deliberate manner to improve processes and procedures to meet everyone's needs.
- Changes to our processes and procedures will take time—this is deliberate as we need to ensure that the right changes happen at the right time.

External messages

- The ACT Government invests significantly in the delivery of public health services to ensure safe, high quality care for the ACT community and the surrounding regions.
- A positive workplace culture is crucial to ensure that we continue to deliver a high level of care for the community.
- We are taking the Review findings seriously and we are focused on ensuring the most appropriate changes are implemented in a considered way.
- We want the ACT public health system to be an employer of choice.
- We want the ACT public health system to deliver the best health care service in the country.

Secondary messages

Internal messages

- We will implement improvements that are evidence-based and fit-for-purpose.
- We will collaborate and consult internally and externally to ensure improvements can be implemented effectively across the system.
- In partnership with the ANU, we are developing a system-wide Culture Change Framework that is based on evidence.
- We acknowledge that our cultural norms and behaviours across the system need to be agreed, endorsed and demonstrated by our leaders and the entire workforce.
- We will communicate these norms and expectations and enforce them through everything we do.
- We are all responsible and accountable for the behaviours we demonstrate.
- Everyone has a part to play in improving our culture.
- Our values and vision underpin everything we do.
- Our workforce must exemplify and demonstrate these values in our work every day.

External messages

- Our values and vision underpin the health care services you receive from the ACT public health system.
- The workplace culture improvements we implement will be evidence-based and fit-for-purpose.
- We are all responsible and accountable for the behaviours we demonstrate.
- Everyone has a part to play in improving our culture.

Communication channels

Communication channels will be aligned with each organisation's internal communications strategies and targeted to specific audiences (for example, operational staff will receive messages in different formats from administrative staff).

The Culture Change Framework developed with the ANU will provide guidance on the development and dissemination of communication. This may lead to a review of existing internal communication channels and ways to improve or enhance internal communication. Budget will be allocated to this work accordingly.

In the immediate term, the following communication channels will be used to communicate and engage with audiences.

Internal

- A presence on the intranet and internet for each organisation
- Articles included in staff newsletters or email messages
- Change and Communication Champions, or similar
- Presentations and lunchtime info sessions – e.g. Share and Solve sessions; presentations from specific leaders or people who have led change management strategies successfully in similar organisations
- Pop-up information sessions
- Team meetings
- Focus groups
- Discussion boards
- Events
- Word of mouth
- Digital signage – monitors
- Brochures, banners and posters – as appropriate.

External

- Articles to note achievements of culture change initiatives being implemented across the public health service (for example, in Our Canberra)
- Ministerial events
- Good news stories promoted via the website and via social media platforms, as appropriate (Facebook, YouTube and Twitter).

Budget

The budget allocated to communications deliverables is \$100, 000 for each of the three years (2019/2020, 2020/2021 and 2021/2022).

There has been one full-time equivalent communications staff member designated to facilitating communications.

Risk management

The following risks and potential mitigation strategies have been identified that may impact on the delivery of communications and ultimately the communications objectives:

Risk	Management strategies
Poor communication governance across the system and within each arm of the system.	Culture Review Implementation Branch to liaise with communication teams across the three arms to confirm linkages and how to work with them to distribute relevant culture messages via these groups.
Insufficient clarity of objectives, alignment and membership of boards, committees and forums across the system.	Culture Review Implementation Branch to liaise with secretariats of these forums to confirm applicability of engagement and how messaging will be distributed to them.
Sustained audience, stakeholder and political criticism of negative workforce culture across the system.	The Strategy and Action Plans will be endorsed by the Oversight Group, Steering Group and senior executives of all three arms of the system to respond to concerns. Culture Review Implementation Branch will liaise with the Ministerial Advisory Group to ensure the Ministers are briefed, as required, on workforce culture issues and the progress of implementation activities. Timing and delivery of messages both internally and externally will be considered and agreed by the Steering Group and the Oversight Group in relation to political sensitivities.
Workforce do not know what the correct 'behaviours' are. They may experience stress because they are unsure and don't know what is expected.	Behaviours will be agreed/endorsed by the Steering Group and senior executives across the public health system. Where appropriate, these behaviours will be tailored for each arm of the system and training will be provided. These behaviours and supportive resources available for our staff, will be aligned with our values across the public health system and will be communicated to the workforce through appropriate channels.
Perception of insufficient progress in implementing the recommendations of the Review.	Communications will be transparent and regular to keep our workforce and stakeholders aware of progress of recommendations.
Potential for inconsistent application of approaches to deliver agreed interventions for positive workplace culture across the system.	Oversight Group and Steering Group to endorse and support approach for intervention prior to dissemination. Culture Review Implementation Branch to identify areas of different approaches and communicate any issues, potential risks and solutions to the Oversight Group and Steering Group for their ultimate decision on approach before delivery of messages.

Risk	Management strategies
Inability to include culture-related questions in, or access final data from, staff climate surveys being independently devised and distributed by each of the three arms of the system from late-2019.	Culture Review Implementation Branch to liaise with Human Resource (HR) teams across the three arms and propose additional or modified questions which include culture references, to ensure consistent information is obtained, with future messaging aligning and improving workforce sentiment.
Communications may not meet needs of all groups across the system.	Culture Review Implementation Branch will work closely with communications teams across the three arms to ensure a multi-pronged approach to delivering communications deployed, evaluated and modified consistently.
Messages may not be cascaded down to staff below the leadership/senior executive management levels.	Culture Review Implementation Branch will work closely with communications teams across the three arms to ensure audiences and stakeholders are correctly identified and that messages are provided using a range of channels to ensure messages reach intended recipients.

NB: These are expanded upon in the Culture Review Implementation Risk Register.

Measures of success

We will know that we have achieved our communication objectives when:

- A positive workplace is front of mind for our workforce
- The ACT community has a more positive perception and appreciation of the health services they access and receive. We will know this from positive feedback received from patients
- The tone and frequency of media coverage will be more positive
- Values-based behaviours are consistently demonstrated in the workplace.

Benchmarks and evaluation methods will be assessed and confirmed in Phase One and through the Culture Change Framework. The chosen tools will be used on a regular basis throughout the three phases of the Strategy, to provide details of how well the communication activities are being received by our audiences and stakeholders and how behaviour change is occurring.

Measures will include:

- Online analytics
- Staff surveys
- Formal and informal measures of behavioural change (mapped against Culture Change Framework)

- Data from Respect, Equity and Diversity Contact Officers (REDCO)
- Data on preliminary assessments and misconduct matters.

DRAFT

Attachment A: Example Communication Feedback Matrix

Feedback Mechanism	Timing	Purpose	Responsibility	Measure
Online change Readiness surveys/ questionnaires	As needed	Informal mechanism to determine if communication activities are effective and to assess the level of understanding/ awareness of an issue.		X% acknowledged that they heard of, understood and agreed that the particular communication/ message was effective.
Focus groups	6 monthly	To confirm if stakeholder needs have been met and identify new needs and issues.		X% acknowledged that they heard of, understood and agreed that the particular communication/ message was effective.
Team meetings	Monthly	To solicit feedback about communications effectiveness.		X% acknowledged that they heard of, understood and agreed that the particular communication/ message was effective.
Electronic (anonymous) Feedback/ Suggestion Box	Daily	To seek feedback about communications effectiveness.		X% acknowledged that they heard of, understood and agreed that the particular communication/ message was effective.

Attachment B: Communication Responsible, Accountable, Consulted, Informed (RACI) table

	Responsible	Accountable	Consulted	Informed
Culture Review Implementation Branch	Developing content Managing communication strategy and development	Measuring success of communication Measuring success of culture change		
ACT Health Directorate Communication and Engagement Branch	Advising on most effective communication channels to reach own staff	Distributing messages to own staff	Provide input into communication strategy and evaluation metrics	Informed about progress to meet objectives
Canberra Health Services Communication and Engagement Team	Advising on most effective communication channels to reach own staff	Distributing messages to own staff	Provide input into communication strategy and evaluation metrics	Informed about progress to meet objectives
Calvary Communication Manager	Advising on most effective communication channels to reach own staff	Distributing messages to own staff	Provide input into communication strategy and evaluation metrics	Informed about progress to meet objectives

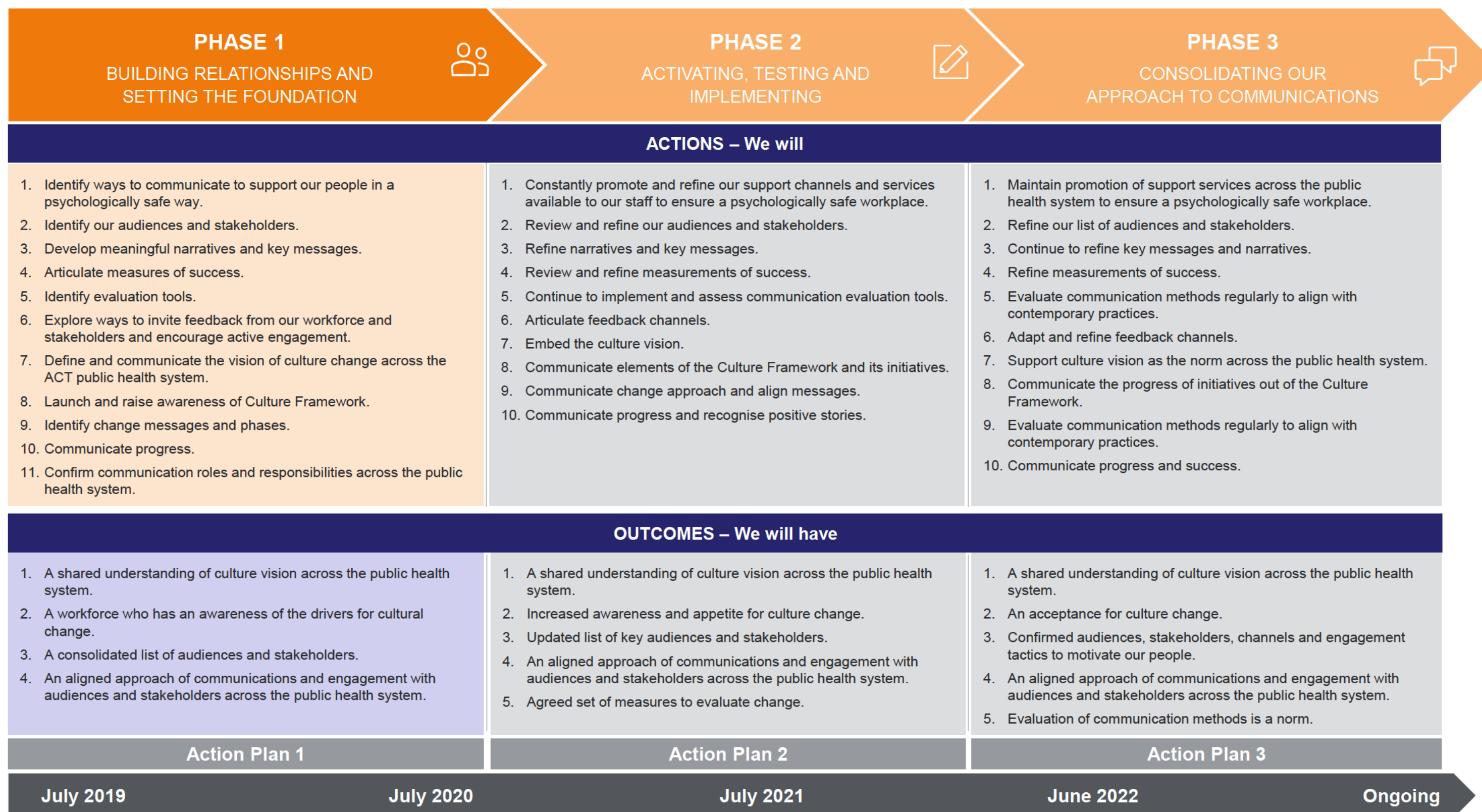
Culture Review Implementation Communications and Engagement Strategy 2019–2022

DRAFT 19 AUGUST 2019*

PURPOSE

> Engage and guide our workforce** on a journey of meaningful change to improve our culture

> Our workforce** feel safe, supported, valued and are engaged



*V1 19 Aug 2019

**Workforce includes all staff employed in the ACT public health system.

Meeting Paper

Agenda Item:	6.1
Topic:	Clinical Leadership Forum Communique
Meeting Date:	19 November 2019
Action Required:	Noting
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

Purpose

1. That members note the Communique from the second Clinical Leadership Forum meeting held on 26 September 2019.

Background

2. The Clinical Leadership Forum is responsible for providing independent and expert clinical advice to the Ministers, with the aim of contributing to the continuous improvement of a high performing health system that keeps people well, provides the best care when required and provides an industry-leading workplace
3. The Clinical Leadership Forum is informed and guided by the recommendations of the *Final Report – Independent Review into the Workplace Culture within ACT Public Health Services* (the Review).
4. The Communique at Attachment A outlines continuous health system improvement opportunities identified by members at the meeting on 26 September 2019.

Recommendation

That the Oversight Group:

- *Note the Clinical Leadership Forum Communique.*

Communique

Thursday 26 September 2019

The Clinical Leadership Forum (the Forum) met on Thursday 26 September 2019.

The Forum discussed a number of key opportunities for continuous improvement of ACT's health system. Opportunities identified by members included:

- **Enhancing the workplace and patient experience** through developing emerging clinical leaders, developing incentives for clinicians including awards for clinical excellence, establishing a Canberra Health Services medical staff council and undertaking a number of Territory-wide projects in relation to clinical pathways and optimising end of life care.
- **Road blocks in and out of hospital** including hospital avoidance, access to mental health staff, centralised outpatient staff, discharge planning, affordability of prescriptions of medications following discharge and community visits on discharge from hospital.
- **Communication networks and mechanisms for communication** across the health system.
- **The role of doctors** in relation to medical governance and leadership within hospitals and medical engagement.
- **Transition of care** and refining to improve the interface between primary care and acute care hospitals.
- **Roles and responsibilities of health care disciplines** noting the changing nature of each discipline's scope of practice.

Key action items considered by the Forum included:

- **Convening a workshop with clinicians** to discuss ideas for health system improvement, clinician engagement and leadership development.
- **Finalising a Communication Plan** for the Clinical Leadership Forum.

The Forum meets bi-monthly with the next meeting is scheduled for 26 November 2019.

Contact: clinicalleadershipforum@act.gov.au

For more information visit <https://www.health.act.gov.au/health-professionals/clinical-leadership-forum>

DRAFT Communique of meeting on 19 November 2019

The fourth meeting of the Cultural Review Oversight Group (the Oversight Group) was held on Tuesday, 19 November 2019.

The meeting was Chaired by Rachel Stephen-Smith MLA, Minister for Health.

Significant items discussed by the Oversight Group today included:

ACT Public Health System Culture Change Framework

The Oversight Group had a further presentation from the research team from the Australian National University, Research School of Management to update the committee on the progress made in gathering data to inform the development of a Culture Change Framework for the ACT public health system. The Culture Change Framework, to be delivered in the first quarter of 2020, will be an evidence-based model to inform a positive workplace culture in the ACT public health system. The framework is being researched, developed and evaluated within the ACT, and applied to our own processes to evolve a positive culture.

The ANU team shared their initial observations drawn from information gathered to date from targeted interviews with staff and key stakeholders from across the ACT public health system.

Culture Review Implementation Communications and Engagement Strategy

The updated Communications and Engagement Strategy was tabled.

It was noted that the Communications and Engagement Strategy was discussed at the ACT Whole of Government Communications and Engagement Peer Advice Panel on 15 October 2019. Feedback from the Panel was positive, noting that the Strategy was necessarily focussed internally however it included an external focus to ensure the community retains confidence in the health system.

Implementation of Recommendations

An update of the progress in implementing the recommendations from the Review was provided.

It was noted that there are a range of important projects being undertaken across the ACT Health Directorate, Calvary Public Hospital Bruce and Canberra Health Services to embed a positive workplace culture. Ms Barb Reid, Regional Chief Executive Officer, Calvary ACT and Mr Michael De'Ath, Director-General ACT Health Directorate, provided a comprehensive briefing on the significant work in progress to improve and evolve a positive workplace culture in the organisations that they lead.

Stakeholder Engagement – Colleges

An update was provided on the establishment of the ACT Health Clinical Advisory Committee (Professional Colleges). This new forum provides members from the professional colleges with an opportunity to consider workforce culture and other systemic and institutional issues from their unique perspective. The new Committee will provide advice to the Oversight Group for consideration. Engagement with allied health professions will be undertaken through a separate forum to better facilitate the broader range and larger number of profession specific groups in this workforce.

The first meeting of the ACT Health Clinical Advisory Committee (Professional Colleges) was held on 5 November 2019.

Non-Government Organisation Engagement

ACT Health Directorate has established an NGO Leadership Group. Membership includes representation from Canberra Health Services (CHS), ACTHD Divisions and NGO peak organisations. The inaugural meeting of the NGO Leadership Group took place on 23 October 2019 and will be held monthly initially. This acknowledges the essential and significant role that NGO's play in our health system, and the need to effectively engage in policy development and health service planning. This serves as a significant first step in rebuilding relationships between the ACT public health system and NGO's and supports recommendation six of The Review reinforcing regular engagement with NGO's.

Annual Review

The Oversight Group approved the Terms of Reference for an annual review to be conducted in the first quarter of 2020 to review the progress and early impact of implementing the 20 recommendations from the *'Final Report-Independent Review into the Workplace Culture within ACT Public Health Services'* (the Review). The annual review was recommended by the Independent Review and the Oversight Group has committed to conducting an annual review for the next three years. It is acknowledged that the annual review is an important learning and accountability initiative. Recommendations from the annual review will inform the next phase of work across the ACT public health system to foster a positive workplace culture and ensure that the commitment to implement the 20 recommendations is being fulfilled.

Meeting schedule

The Culture Review Oversight Group meets bi-monthly, and its next meeting is scheduled for 21 January 2020, 10:00 am – 12: 00 pm.

Media contacts:

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Canberra Health Services: M 0466 948 935 E chsmedia@act.gov.au

Calvary Public Hospital Bruce: M 0432 130 693 E calvary@calvary-act.com.au

Minister Stephen-Smith Media contact:

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