



ACT
Government
Health

Ref FOI18-31

[REDACTED]
[REDACTED]

Dear [REDACTED]

Freedom of Information (FOI) Request

I refer to your application received by ACT Health on 16 May 2018 in which you sought access to information under the *Freedom of Information Act 2016* (the Act).

In your application you have requested:

“documents related to a meeting between Minister Fitzharris and the Health Services Union on 27 March 2018”.

I am an Information Officer appointed by the Director-General under section 18 of the Act to deal with access applications made under Part 5 of the Act.

ACT Health is required to provide a decision on your access application by 15 June 2018.

Decision on access

I can inform you that in response to your request, 3 documents have been identified by ACT Health within the scope of your request. I have decided that 1 document is to be partially released in accordance with the provisions under the Act, Sch 2.2 (a)(ii), as the information is personal information about an individual. The partial release of this document is outlined in the Schedule document attached. The remainder of the documents are released in full.

Charges

Processing charges are not applicable for this request because as less than 50 pages of documentation is being provided.

Online publishing – disclosure log

I have determined, in line with the public interest test that the disclosure of information is in the public interest, and will be publically available on the ACT Health disclosure log.

Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health disclosure log, or a longer period allowed by the Ombudsman.

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

The ACT Ombudsman
GPO Box 442
CANBERRA ACT 2601

Via email: actfoi@ombudsman.gov.au

ACT Civil and Administrative Tribunal (ACAT) review

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

Further information may be obtained from the ACAT at:

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

Should you have any queries in relation to your request, please do not hesitate to contact the FOI Coordinator on 6205 1340 or email HealthFOI@act.gov.au.

Yours sincerely



Karen Doran
Acting Deputy Director-General
Corporate

14 June 2018

FREEDOM OF INFORMATION REQUEST SCHEDULE

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

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

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

NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	File No
[REDACTED]	Documents regarding a meeting between Minister Fitzharris and Health Services Union 27 March 2018.	FOI18/31

Ref No	No of Folios	Description	Date	Status	Reason for non-release or deferral	Open Access release status
1	1-6	Ministerial Brief – Meeting with Health Services Union	26/03/2018	Partial Release	Personal Information	Yes
2	7-8	Dot points for Meeting with the Health Services Union	26/03/2018	Full Release		Yes
3	9-10	Letter from the Health Services Union	16/03/2018	Full Release		Yes

Health Directorate

UNCLASSIFIED

To: Minister for Health and Wellbeing

Date: 22 March 2018

From: Karen Doran, Acting Director-General

Subject: Meeting with the Health Services Union

Critical Date: 27 March 2018

Critical Reason: Meeting is scheduled for 1.00pm on this day.

Tracking No.: MIN18/414

26 MAR 2018

- DG .../.../...
- DDG .../.../...

Purpose

To provide you with information for your meeting with the Health Services Union (HSU) at 1.00pm on Tuesday, 27 March 2018.

Recommendations

That you:

1. Note the information contained in this brief; and

Noted / Please Discuss

2. Note that UnionsACT have written to you separately regarding the support services at University of Canberra Hospital, and a draft response is currently being prepared for your consideration.

Noted / Please Discuss

Meegan Fitzharris MLA *[Signature]* 27/3/2018

Minister's Office Feedback

UNCLASSIFIED

Background

1. The HSU have indicated that they would like to meet with you to discuss two issues:
 - i. the ward services staff room at Canberra Hospital:
 - On 20 February 2018, the HSU issued a media release raising concerns over the relocation of the wards services staff room, stating that it did not have access to basic amenities such as running water, that there was an asbestos exposure risk and that staff had not been adequately consulted on the move.
 - ii. the provision of support services at the University of Canberra Hospital (UCH):
 - Several unions, including the United Voice Union, Australian Salaried Medical Officers Federation (ASMOF), HSU and UnionsACT have expressed concerns around the subcontracting of support services at UCH.
 - A key issue that the unions are concerned about is the lack of consultation in the context of the Secure Local Jobs package.

Issues

Wards services staff room at Canberra Hospital:

2. In late 2017, the Upgrading and Maintaining ACT Health Assets (UMAHA) project team identified that there would be an impact to the existing wards services staff room as a result of cable reticulation works as part of the Electrical Main Switchboard (EMSB) upgrades. The project team subsequently submitted a 'Disturbance or Interference with Services, Safety or Traffic' (DISST) form for consideration through the usual processes.
3. On 7 November 2017, the UMAHA project team held a meeting and arranged a site walk with the Director of Nursing (DON) for Clinical Support Services (CSS), to discuss the works submitted via the DISST process. The meeting was focused on the impact on wards services, including the required relocation, as a result of the EMSB works.
4. The anticipated commencement of works at this stage was for 16 November 2017 however, due to issues in identifying a suitable alternative accommodation space for the nutrition room, the works were delayed. The attachment to the DISST form, indicated that the wards services staff room would be fully relocated as part of Stage 1 works until 'at least June 2018' with provision for lockers in the old uniform room.
5. Several meetings took place over the period November 2017 to January 2018 in relation to the relocation, with the relocation taking place on 9 February 2018.
6. The staff room was moved from one side of the corridor to the other. Staff amenities i.e. change rooms and bathrooms are located separately to the new staff room, and this was the case for the previous room. The previous room did however include a sink and running water. The new room provided does not have access to running water, however a watercooler and alcohol hand rub dispensers have been provided in lieu of running water. The food services tearoom is also directly across the corridor where staff can wash their utensils.

7. Staff reported to the HSU that they were asked to relocate the personal belongings of other staff members from their old locker to the new lockers as part of the relocation. This was never a directive by management, nor endorsed. The wards person who made contact with staff regarding the collection of their belongings did not have the authority to make this decision.
8. With regards to the asbestos exposure, an inspection by ACT Health's third party experts on 22 January 2018, and has been rated as "Normal" with the likelihood of "no exposure to airborne asbestos under normal building use". As required by legislation, visual inspections are undertaken by third party experts to determine the current condition, risk rating and associated mitigation if required.
9. It was originally understood that the relocation would only be temporary however, since this time the UMAHA project team have identified that the works will require the permanent use of half of the room.
10. The Strategic Accommodation team are subsequently working with the DON CSS and the Wards Services Manager to identify a more suitable permanent space for the wards services staff room. A room has been identified and proposed which includes a kitchen area and a space for lockers. Bathroom facilities are located in close proximity to the room. The room also has access to an outdoor courtyard.
11. Consultation is currently occurring with staff on the suitability of the room and it is understood that [REDACTED] of HSU has viewed the proposed space and is, overall, happy with the room noting some cosmetic changes may need to be made.
12. A further update will be provided to you following the outcome of these consultations.
13. Separately, the HSU have indicated to your office that they are concerned on behalf of the wards persons, and the personal wellbeing of one wards person in particular. ACT Health has made several attempts to make contact with the HSU to obtain further specifics on the situation however have not yet received a response from the HSU.

Support Services at the University of Canberra Hospital:

14. In October 2015, ACT Health commenced public consultation on the UCH (formerly UCPH) Model of Service Delivery (MOSD) along with the Rehabilitation, Aged and Community Care (RACC) UCH Model of Care (MOC). Both the MOSD and MOC were developed in consultation with User Groups and external stakeholders.
15. The UCH MOSD describes the agreed approach to provision of:
 - i. facility wide management (for example, after hours management);
 - ii. clinical services (for example, after hours medical cover); and
 - iii. procedures (for example, emergency code response).
16. Consultation letters were sent to over 55 key stakeholders, including several unions:
 - Australian Medical Association ACT;
 - Australian Nursing and Midwifery Federation;
 - ASMOF;
 - Australian Education Union;
 - Australian Workers Union;
 - Community and Public Sector Union;
 - HSU;

- Media, Entertainment and Arts Alliance;
 - National Union of Workers;
 - Professionals Australia;
 - Transport Workers Union of Australia; and
 - United Services Union.
17. The consultation was also advertised through the Time to Talk Website, ACT Health's website, ACT Government Media Release, Social Media channels and internal ACT Health staff communications.
18. The consultation letters included the following text:
"The UCPH Model of Service Delivery document outlines the clinical and non-clinical support services to support the models of care being delivered. These questions have been developed to assist you in framing your responses.
- i. Do you think the UCPH Model of Service Delivery adequately describes the clinical and non-clinical support services to support the models of care (for Mental Health, and Rehabilitation, Aged Community Care) to be delivered at UCPH?
 - ii. What, if any, aspects of the UCPH Model of Service Delivery would you modify?
 - iii. Do you have any questions or comments relating to the UCPH Model of Service Delivery?"
19. The MOSD document was provided as an attachment to the letters, and also made publically available on the ACT Health website. It should be noted that this section of the website is still live and the MOSD is still publically available.
20. The MOSD mentions under items, such as cleaning and linen services, that these will be provided by an external contractor. For example, under cleaning, the document states:
"A coordinated facility wide cleaning service will be provided. This will include cleaning of equipment and furniture that are part of the facility. Cleaning services will be provided by an external contractor, and will adhere to the appropriate cleaning standards. Detail regarding this service is to be developed with respect to the chosen Design Construct Maintain (DCM) contracting model (refer to DCM below)."
21. The description of food services does not specify whether these services will be provided internally or externally. However, the DCM clause specifies that services may be altered from what is described within the document:
"The procurement of UCPH will be undertaken utilising a DCM contracting model. This will involve entering into an arrangement for the design and construction of the facility as well as provision of certain longer-term facilities management services (for example this may include building maintenance, utilities management, grounds and gardens and pest control) and soft services (for example this may include cleaning and patient portering).
The delivery of services such as a linen service, property maintenance, medical supplies and other back of house services may be modified from what is described in this document, as the model will be based upon the requirements of the DCM Contractor (to be appointed at a later stage)."

22. Soft FM services at UCH are part of the Facility Maintenance (FM) contract that is outsourced to an external service provider. The contract outlines extensive requirements on Industrial Relations, including:
 - i. Employees must be paid wages at rates and employed under conditions of employment not less favourable than those required by any Prescribed Legislation which applies to the FM Contractor.
 - ii. The FM Contractor must ensure all agreements with its Subcontractors contain provisions:
 - a) Requiring Subcontractors to comply with all Employee and Industrial Relations Obligations applicable to the Subcontractor and its employees; and
 - b) Imposing obligations on the Subcontractor in the same form as those set out in this clause and imposed on the FM Contractor.
23. ACT Health has been working closely with unions to work through issues that they have raised in relation to the contracting of soft FM services at UCH. Key concerns continue to be perceived lack of consultation regarding the tender process for the Facilities Management contract for UCH, including lack of clarity regarding the 'maintenance' component of the contract.
24. ACT Health have agreed to weekly, two hour meetings, with the next meeting occurring 28 March 2018. One hour of the meeting is dedicated to the FM issues, and the other to more general UCH activities.
25. Compass-Medirest commenced recruitment of staff on weekend of 24-25 March 2018. This will enable them to recruit and employ staff six week prior to go live as agreed so as to be able to transition in the contract, be trained and participate in the testing exercises.
26. ACT Health has received a copy of the Services Subcontract with Compass for cleaning, food, material distribution, distributions and patient support at UCH. Once ACT Health has received the other subcontracts, all will be provided to the unions.
27. ACT Health will propose to set up a forum to further discuss and work through the issues raised by UnionsACT in their letter of 16 March 2018 ([Attachment A](#)). A response to this letter is currently being prepared for your consideration.
28. Dot points for your meeting with the HSU are at [Attachment B](#).

Financial Implications

29. Not applicable.

Consultation

Internal

30. ACT Health's Business Support Services Health Infrastructure Services, UCH Operational Commissioning team and People and Culture Branch are working through these issues.

Cross Directorate

31. ACT Health is meeting with the Director of Public Sector Workplace Relations (CMTEDD) and the ACT Government Solicitor's Office, on 26 February 2018, to work through an approach to the issues raised by unions.

External

- 32. The next meeting between ACT Health and the unions is scheduled for Wednesday, 28 March 2018.

Benefits/Sensitivities

- 33. The Unions perceive the contracting out of services was contrary to ACT Labor Party policy, and indicated that they are in dispute over the awarding of the contract without consultation.
- 34. The Secure Local Jobs Package, in its current form, was not in existence when the DCM model for UCH was agreed and consulted on.

Media Implications

- 35. *The Canberra Times* have recently reported on this issue. ACT Health provided responses to the media enquiry which were also provided to your office.

Signatory Name: Karen Doran Phone: 52248
Action Officer: Sallyanne Pini Phone: 54689

Attachments

Attachment	Title
Attachment A	Letter to Minister Fitzharris from UnionsACT of 16 March 2018
Attachment B	Dot points for meeting with the HSU

Meeting with the Health Services Union – Tuesday, 27 March 2018

Wards Services Staff Room at Canberra Hospital

- In late 2017, the Upgrading and Maintaining ACT Health Assets (UMAHA) project team identified that there would be an impact to the existing wards services staff room as a result of cable reticulation works as part of the Electrical Main Switchboard (EMSB) upgrades.
- As a result, the project team progressed the usual 'Disturbance or Interference with Services, Safety or Traffic' (DISST) process.
- The project team met with the Director of Nursing (DON) for Clinical Support Services (CSS), to discuss the required works. The meeting was focused on the impact on wards services, including the required relocation, as a result of the EMSB works. The DON signed off on the DISST request.
- Several meetings took place over the period November 2017 to January 2018 in relation to the relocation, with the relocation taking place on 9 February 2018.
- The staff room was relocated from a room on one side of the corridor to a room on the other side of the corridor.
- Staff amenities i.e. change rooms and bathrooms are located separately to the new staff room, and this was the case for the previous room.
- The previous room did however include a sink and running water. The new room provided does not have access to running water, however a watercooler and alcohol hand rub dispensers have been provided in lieu of running water.
- The food services tearoom is also directly across the corridor where staff can wash their utensils.
- Staff reported to the HSU that they were asked to relocate the personal belongings of other staff members from their old locker to the new lockers as part of the relocation. This was never a directive by management, nor endorsed. The wards person who made contact with staff regarding the collection of their belongings did not have the authority to make this decision.
- With regards to the asbestos exposure, an inspection by ACT Health's third party experts on 22 January 2018, and has been rated as "Normal" with the likelihood of "no exposure to airborne asbestos under normal building use".
- As required by legislation, visual inspections are undertaken by third party experts to determine the current condition, risk rating and associated mitigation if required.
- It was originally understood that the relocation would only be temporary however, since this time the UMAHA project team have identified that the works will require the permanent use of half of the room.
- The Strategic Accommodation team are subsequently working with the DON CSS and the Wards Services Manager to identify a more suitable permanent space for the wards services staff room.
- A room has been identified and proposed which includes a kitchen area and a space for lockers. Bathroom facilities are located in close proximity to the room. The room also has access to an outdoor courtyard.
- Consultation is currently occurring with staff on the suitability of the room and it is understood that HSU has viewed the proposed space and is, overall, happy with the room noting some cosmetic changes may need to be made.

University of Canberra Hospital – Subcontracting of Support Services

- ACT Health undertook consultation on the proposed Model of Service Delivery (MSOD) at UCH in late 2015.
- Several unions, including the HSU, were sent information on the consultation process and a copy of the MOSD.
- The MOSD outlined that services, such as cleaning, would be contracted to an external provider.
- The MOSD further stated that the delivery of services such as a linen service, property maintenance, medical supplies and other back of house services may be modified from what is described in this document, as the model will be based upon the requirements of the successful Head Contractor.
- Soft FM services at UCH are part of the Facility Maintenance (FM) contract that is outsourced to an external service provider.
- The FM contract outlines extensive requirements on Industrial Relations, which can be applied to subcontractors, including:
 - i. Employees must be paid wages at rates and employed under conditions of employment not less favourable than those required by any Prescribed Legislation which applies to the FM Contractor.
 - ii. The FM Contractor must ensure all agreements with its Subcontractors contain provisions:
 - a) Requiring Subcontractors to comply with all Employee and Industrial Relations Obligations applicable to the Subcontractor and its employees; and
 - b) Imposing obligations on the Subcontractor in the same form as those set out in this clause and imposed on the FM Contractor.
- ACT Health will provide the subcontracts to the unions for review once they have all been received.
- To date, ACT Health has received a copy of the Services Subcontract with Compass for cleaning, food, material distribution, distributions and patient support at UCH.
- ACT Health will establish a regular forum for meeting with the unions to work through any issues they have raised, particularly in relation to those issues in the letter form UnionsACT.
- ACT Health's next meeting with unions is being held on 28 March 2018. One hour of the meeting is dedicated to the FM issues, and the other to more general UCH activities.

16 March 2018

Ms Meegan Fitzharris
Minister for Health
ACT Legislative Assembly
London Circuit, Canberra City
Via email - fitzharris@act.gov.au

Dear Minister Fitzharris *Meegan*

University of Canberra Hospital

I write on behalf of a number of ACT health unions. Thank you for meeting with a delegation from ACT health unions and UnionsACT regarding urgent matters involving contracting of services and employment at the new University of Canberra Hospital.

Our strong view is that ACT Health has not consulted with health unions.

The longstanding position of ACT health unions is that public health services should be directly delivered by employees of ACT Health. It is ACT Government's policy is to prefer direct employment, and to promote secure, high-paid jobs.

I understand that ASMOF has previously provided a number of questions to ACT Health regarding the status of employees and contracts at the University of Canberra Hospital. We require that ACT Health answer those questions as a matter of urgency.

I also understand that the head contract has been awarded to BGIS, and that as principal contractor, BGIS has already awarded contracts for some services.

UnionsACT is seeking the following commitments:

Firstly, that the ACT Government commit to returning the outsourced services to direct public sector employment at the conclusion of each contract period.

Secondly, in relation to the head contract with BGIS:

1. That the principal facilities management contract be amended to include a requirement that BGIS develop a Labour Relations, Training and Workforce Equity plan, with approval required by the ACT Government. The plan should be included as an amendment to the contract. This would align the BGIS contract with the requirements contemplated by the Local Secure Jobs Code
2. That the ACT Government ensure that contractors engaged by BGIS are prohibited from subcontracting;
3. An ongoing compulsory tripartite consultative forum with health union representatives, ACT Government and BGIS senior managers is formed, and meets quarterly for the duration of the facilities management contract (the Light Rail model);
4. That ACT Health will be an 'active client', with regular meetings between the combined health unions group and the Hospital's senior contract managers (the ACT Housing TFM model);

5. That the ACT Health executives responsible for commissioning the hospital demonstrate how the contract and subcontracts will comply with ACT Government policy regarding:
 - a. Continuity of employment for employees of subcontractors at the time of contract change (transmission of business);
 - b. Freedom of association requirements, including union inductions, paid delegates leave, and non-interference with workers participation in their union;
 - c. How permanent full-time employment is being maximised through the contract;
 - d. The process by which ACT Health will actively monitor contractor and subcontractor performance and compliance with legal and contractual obligations. This includes clearly detailing a dispute resolution process related to BGIS and subcontractors;
 - e. Ensuring the highest standards of workplace safety for employees of subcontractors;
6. That ACT Health demonstrate or require BGIS to demonstrate how there is sufficient funding in the contract and subcontracts to cover labour costs associated with collective bargaining outcomes, such as:
 - a. wages and conditions that are no less than the equivalent ACTPS classification
 - b. receive real wage increases that meet or exceed inflation;
 - c. provide funding to employ sufficient labour to undertake the work.

Thirdly, that ACT Health confirm its commitment to negotiating collectively with all relevant health unions.

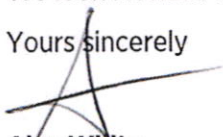
Unions recommend that a senior project officer or special advisor be appointed to coordinate ACT Health's response to the matters raised in this letter. This would assist in building the essential element of good will.

We wish to also confirm our shared commitment to ensuring that the University of Canberra Hospital is a first-class facility, that can serve Canberra's community and patients. We are committed to ensuring a positive outcome for our members and future employees at the University of Canberra Hospital, as well as patients.

I understand that you may also be contacted by specific unions on matters of direct relevance to their members.

We look forward to your response.

Yours sincerely



Alex White
Secretary
UnionsACT