

Background—what’s happening?

So that the organisational structure supports operational effectiveness, efficient decision making, accountability and reflects CHS’ business priorities, a realignment of functions has been proposed. It is anticipated this realignment will also provide stability and certainty for staff and better position the organisation to be able to respond to the challenges and opportunities now and in the future like population growth, an ageing population, higher incidence of chronic disease and rising healthcare costs for the territory’s health care system.

The process has two phases. Phase one is about settling the executive structure in the corporate area. Several corporate executive contracts are due to expire in the coming months. To fill these positions, a formal recruitment process will take place.

Phase two focuses on the clinical space, which will be about making sure reporting lines at the senior level allow similar work functions to be grouped together—so that the CHS structure make sense in terms of how the health service works now and how it needs to work in the future. For the majority of staff, the realignment will not result in significant changes to work arrangements—business units, roles, positions and work locations will remain the same, however some reporting lines will change. Where positions are impacted, affected staff will be redeployed to similar functions/roles. As part of the realignment, the names of some units and/or divisions will also change. There will be no non-executive job losses as a result of this realignment.

Details of the proposed changes are outlined in the *Proposed CHS Restructure Consultation Paper*.

To ensure staff are aware of the proposed realignment including the rationale, consultation process, and implementation timeframes and that the process does not cause undue stress or anxiety, timely and relevant communication to staff will be critical. Staff will want to know:

- what is being proposed and why
- what will change and what the likely impact (if any) will be for their work and work area
- what impact (if any) the realignment will have on service delivery/access to services
- how they will be consulted and what opportunities they will have to provide feedback
- how feedback will be used, and
- details about next steps including the implementation approach and timeframes.

This document outlines the communication tactics that will be implemented to support the consultation process and (if it proceeds) the implementation of a proposed new organisational structure. The tactics outlined in this plan are designed to raise staff awareness of the

organisational realignment process and how it will affect them. The plan excludes stakeholder engagement/communication with external parties including unions and peak bodies as this will be managed by People and Culture.

What we will communicate

Communication activities will focus on raising staff awareness about the executive recruitment process, the proposed changes and the consultation process (including how they can provide feedback, the outcome of the process and next steps).

Key messages are as follows.

- The Executive Directors and I are taking steps to settle our organisational structure. Several corporate executive contracts are due to expire in the coming months. To fill these positions, a formal recruitment process will take place. The positions will be advertised in the coming weeks.
- We will also be looking at our clinical structure and how we can make sure reporting lines at the senior level allow similar work functions to be grouped together—so that our structure makes sense in terms of how we work now and how we need to work in the future.
- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making, and
 - provides certainty and stability for all staff.
- We aren't looking to make extensive changes to the structure as part of this review. The review is about making sure our structure supports improved working relationships and that we are doing things in the simplest but most effective way possible to deliver quality healthcare.
- This process is not on the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with 'fresh eyes'.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and re-evaluated as part of consolidating CHS' organisational structure.

- No permanent employees will lose their jobs as a result of these processes.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- For more information about the proposed structure, or to provide feedback visit the 'CHS restructure' intranet page.
- The feedback you provide will inform the development and implementation of a final structure.

Who we will communicate with and how we will reach them

Phase one: recruitment of corporate executive positions

Tactic	Audience	Description	Responsibility	Timing
CEO message	All staff	A message from the CEO giving a brief overview of the restructure and announcing that a recruitment process to fill executive contract positions will start shortly.	Communication and Government Relations to draft and provide to People and Culture and office of the CEO to review and approve.	30 November 2018

Phase two: formal consultation process

The tactics listed below are listed in the order in which they will be implemented.

Tactic	Audience	Description	Responsibility	Timing
Staff forums	All staff	<p>Bernadette and Janine to brief all CHS staff on the proposed realignment in a series of open staff forums.</p> <p>Proposed locations include:</p> <ul style="list-style-type: none"> • Canberra Hospital (two sessions, one in the day and one at night) • University of Canberra Hospital (one session) <p>Belconnen/Phillip Health Centre (one session)</p>	<p>Communication and Government Relations to prepare and distribute Eventbrite invitation and coordinate event logistics.</p> <p>People and Culture to prepare presentation with support from Communication and Government Relations as required.</p>	TBC
CEO message	All staff	<p>A message from Bernadette to all staff reiterating information provided in the initial staff forums. The focus of the message will be on outlining the reasons for the proposed change, directing staff to the</p>	<p>Communication and Government Relations to draft and provide to People and Culture and office of the CEO to review and approve.</p>	TBC



		<p>information available on the intranet and encouraging them to provide feedback via the established feedback loops. If necessary a reminder message will also be issued, two days out from the end of the consultation period.</p> <p>A second message will be issued at the end of the consultation period. This message will thank staff for their contribution, direct them to a summary of the feedback received and outline next steps in terms of consultation with staff and the realignment.</p>		
Dedicated email address for feedback to go live	All staff	The dedicated email address for people to submit feedback to will go live	People and Culture to liaise with DDG clinical to establish channel and arrangements for monitoring.	TBC
Intranet page with frequently asked questions	All staff	Intranet page to be developed. The page will summarise the key proposed changes. It will	Communication and Government Relations to draft content. People and Culture and Office of the CEO to review and approve.	TBC



		<p>include frequently asked questions, a proposed implementation timeline and organisational structure and links to feedback channels e.g. the dedicated email address.</p> <p>The page will go live during the first staff forum. It will be updated regularly in response to feedback from staff/requests for more information.</p> <p>A link will also be included on the front page of the intranet.</p>	
Cascade briefing pack	Managers	<p>Talking points for managers to assist them in their discussions with staff, along with a diagram/infographic (or some other pictorial representation of the proposed changes)</p>	<p>Communication and Government Relations to draft talking points. People and Culture and Office of the CEO to review and approve content.</p> <p>Office of the CEO to distribute the briefing pack to EA/Eos of executive directors and other managers as appropriate.</p>
			TBC



Media holding statement	Media	Holding statement to be prepared in the event the announcement of the proposed realignment generates media interest.	Communication and Government Relations to prepare statement. People and Culture/CEO to review and approve.	TBC
Summary of feedback	All staff	At the end of the consultation period, feedback will be collated and grouped into themes. Information about the key themes will be published on the intranet, and also provided to managers to cascade to their staff.	People and Culture to collate feedback and theme. Communication and Government Relations to publish on the intranet and prepare information for managers.	TBC
CEO message	All staff	Message announcing the outcome of the consultation period.	Communication and Government Relations to draft content. People and Culture and Office of the CEO to review and approve.	TBC

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Community, Aged Care and Rehabilitation (CACR)

- **Functions staying with CACR**

The following functions will continue to report to CACR

Client Support Services

CACR Allied Health and Operations

Rehabilitation Medicine

Geriatric Medicine

Community Care

CACR Nursing, including University of Canberra Hospital (UCH) After Hours Hospital Management

- **Functions moving to CACR**

The following functions are proposed to report to the Executive Director CACR:

Community Health Centre Management	from	Cancer and Ambulatory Support (formerly Cancer, Ambulatory and Community Health Support)
------------------------------------	------	--

Walk-in Centres	from	Cancer and Ambulatory Support (formerly Cancer, Ambulatory and Community Health Support)
-----------------	------	--

Dental Health Program	from	Surgery
-----------------------	------	---------

- **Functions moving from CACR**

The following function that previously reported to the Executive Director CACR is proposed to report to another division after implementation.

UCH BGIS Contract Management	to	Infrastructure Management and Maintenance
------------------------------	----	---

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Cancer and Ambulatory Support (CAS)

- Cancer, Ambulatory and Community Health Support is proposed to be renamed to Cancer and Ambulatory Services (CAS)
- **Functions staying with CAS**

The following functions will continue to report to CAS:

Ambulatory Care Support (formerly Ambulatory Care), including:

Central Health Intake

Central Outpatients

Transcription

Strategic Support

Immunology

Medical Oncology

Radiation Oncology

Hematology

Palliative Care

BreastScreen ACT

Cancer Support Services

- **Functions moving to CAS**

The following function is proposed to report to the Executive Director CAS:

Medical Physics and Radiation Engineering from Clinical Support Services



- **Functions moving from CAS**

The following functions that previously reported to the Executive Director CAS are proposed to report to Community, Aged Care and Rehabilitation after implementation due to the natural fit of these areas within community care.

Community Health Centres	to	Community, Aged Care and Rehabilitation
Walk-in Centres	to	Community, Aged Care and Rehabilitation

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
- or*
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
- The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.

It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Clinical Operations

- Under proposed changes, all functions currently reporting to the Chief of Clinical Operations will report to the Chief Operating Officer (COO).
- This change will mean there is no need for the division of Clinical Operations.
- It is proposed that the role of Chief of Clinical Operations (CCO) will be disestablished.

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Clinical Support Services

- Under the proposed changes, all functions currently under Clinical Support Services will be realigned to other divisions.
- This change will mean that there is no need for the division of Clinical Support Services to exist in its current form.
- It is proposed that functions will report to the following divisions after implementation:

Pharmacy	to	Executive Director, Medical Services
Medical Physics and Radiation	to	Cancer and Ambulatory Services
Director of Nursing	to	Executive Director, Nursing and Midwifery
Revenue and Financial Support Unit	to	Finance and Business Intelligence
Health Information Services (formerly Clinical Records)	to	Finance and Business Intelligence
Canberra Hospital After Hours Hospital Management	to	Chief Operation Officer
Health Care Technology Management (formerly Biomedical Engineering)	to	Executive Director, Medical Services
Logistic Support Services	to	Infrastructure Management and Maintenance

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
- The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Executive Level

- The Deputy Director General, Clinical will be called the Chief Operating Officer (COO). This role will focus on the clinical operations of Canberra Health Services.
- All functions currently reporting to the Chief of Clinical Operations will report directly to the COO.
- It is proposed that the Chief of Clinical Operations will be disestablished.

Changes for Chief Operating Officer (COO)

- It is proposed that the Deputy Director General, Clinical will be called the Chief Operating Officer (COO).
- This role will focus on the clinical operations of the service, enabling more of a focus on patient flow across CHS.
- It is proposed that the following functions will report to the EDNM:

Territory Wide Surgical Services	from	Clinical Operations
Patient Flow and the Transit Lounge	from	Clinical Operations
Canberra Hospital After Hours Hospital Management	from	Clinical Operations
Business Continuity		
Emergency Management		
Cross Boarder Relations		
All Clinical Divisions (other than those reporting to the Executive Director of Medical Services)		

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or

- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
- The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.



What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Director, Allied Health

- It is proposed that the Director, Allied Health (DAH) role will report directly to the Chief Executive Officer, CHS.
- This role will:
 - provide high level leadership, strategic direction and advocacy in the management of allied health services across CHS
 - maintain professional responsibilities for health professional staff and related matters
 - lead the development of integrated approaches to service delivery through a multidisciplinary approach across the continuum of care for CHS.

- **Functions staying with DAH**

The following functions will continue to report to DAH:

Allied Health Education

IPL Educator

Allied Health Assistant Coordinator

Administration Support

- **Functions moving to DAH**

The following function is proposed to report to the DAH:

Acute Allied Health Services (formerly Acute Support Services). Including:	from	Division of Medicine
--	------	----------------------

- Aboriginal Liaison
 - Exercise Physiology
 - Occupational Therapy
 - Psychology
 - Speech Pathology
 - Audiology
 - Nutrition
 - Physiotherapy
 - Social Work
-

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Executive Director Medical Services

- It is proposed that the Director Medical Services (DSM) role will become the Executive Director, Medical Services (EDMS).
- This role will:
 - provide high level leadership, strategic direction and advocacy in the medical services across CHS
 - maintain professional responsibility for medical staff and related matters.
- It is proposed that this role will take on operational responsibility for Pathology, Medical Imaging, Pharmacy and Biomedical Engineering (Health Care Technology Management) as well as current functions reporting to the DMS.
- The realignment of these functions to the EDMS will enhance clinical oversight of these areas.
- EDMS will report directly to the Chief Executive Officer (CEO).
- **Functions staying with EDMS**

The following functions will continue to report to EDMS:

GP & Primary Health

JMO/MOSCETU

Library

- **Functions moving to EDMS**

The following functions are proposed to report to the EDMS:

Pathology Department	from	DDG Clinical
Medical Imaging Department	from	DDG Clinical
Pharmacy	from	Clinical Support Services
Health Care Technology Management (formerly Biomedical Engineering)	from	Clinical Support Services

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.



What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Executive Director Nursing and Midwifery

- The Director of Nursing and Midwifery (DNM) role will become the Executive Director, Nursing and Midwifery (EDNM).
- This role will:
 - provide high-level leadership, strategic direction and advocacy in nursing services across CHS
 - maintain professional responsibilities for nursing staff and related matters
- The role will report directly to the Chief Executive Officer (CEO).

Functions moving to the EDNM

It is proposed that the following functions will report to the EDNM:

Nursing Clinical Support, including:	From	Clinical Support Services
<ul style="list-style-type: none"> • E-Rostering • Infection Prevention and Control • Nursing Support Services including: <ul style="list-style-type: none"> ○ IV Infusion Pump Educator ○ Tissue Viability Unit ○ Spiritual Support Services ○ N&M Resource Office 		
Nursing Administration, including:	From	Clinical Support Services
<ul style="list-style-type: none"> • Grad Nurse Holding Pool • Casual AIN 		
Ward Support Services, including:	From	Clinical Support Services
<ul style="list-style-type: none"> • Canberra Hospital Ward Clerks including PLAT • Hospital Assistants • Wardspersons • Central Equipment and Courier Services 		

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
- The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) organisational structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with 'fresh eyes'.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.



What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Operational Performance

- Operational Performance to be renamed Finance and Business Intelligence (FBI)
- **Functions staying with FBI (formerly Operational Performance)**

The following functions will continue to report to FBI:

Data and Reporting

Finance and Procurement

- **Functions moving to FBI**

The following function that previously reported to another division is proposed to report to the Chief Financial Officer

Health Information Services
(formerly Clinical Records)

From

Clinical Support Services

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
or
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
- The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with 'fresh eyes'.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Infrastructure Management and Maintenance (IMM)

- Health Infrastructure Services will now be called Infrastructure Management and Maintenance Division (IMM).
- It is proposed that IMM acquire several functions that formally sat with Clinical Support Services.

- **Functions staying with IMM**

The following functions will continue to report to IMM:

Facilities Maintenance and Management

Operations Support

Project Delivery Tier 2 & 3

Accommodation and Leasing

Fleet

Client Services, Security & Emergency

Mailroom Services

Main TCH Reception

TCH Switchboard

Telephony Account/Mobile

Arts Curator

Volunteer Management

- **Functions moving to IMM**

The following functions are proposed to report to the Executive Director IMM, from other divisions

Logistics Support Services, including:	From	Clinical Support Services
<ul style="list-style-type: none"> • Food Services • Supply • Domestic and Environmental Services • Sterilising Services 		
University of Canberra Hospital BGIS Contract Support	From	Community, Aged Care and Rehabilitation

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
- or*
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.

The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.

What are the changes?

All staff

- For most staff we do not expect there to be any significant changes beyond those to reporting lines.
- Some staff may be specifically impacted and, where possible, they have already been informed.
- Several corporate executive contracts are due to expire in the coming months. A formal recruitment process has started to fill these positions.

Medicine

- **Functions staying with Medicine**

The following functions will continue to report to Medicine:

Clinical

Gastroenterology & Hepatology

Infectious Disease

Chronic Disease

Clinical Forensic Medicine

Respiratory & Sleep Medicine

Canberra Clinical Genomics Service

ACT Diabetes Service

Dermatology

General Medicine

Cardiology

Endocrinology

Neurology

Canberra Sexual Health Clinic

Rheumatology

Renal

Medicine Operations

- **Functions moving from Medicine**

The following function that previously reported to the Executive Director Medicine is proposed to report to another division after implementation:

Acute Allied Health Support Services (formerly Acute Support Services). Including:	To	Director of Allied Health
<ul style="list-style-type: none"> • Aboriginal Liaison • Exercise Physiology • Occupational Therapy • Psychology • Speech Pathology • Audiology • Nutrition • Physiotherapy • Social Work 		

What do staff need to do?

- Attend the staff forum held on Tuesday 11 December at 11.30am in the Canberra Hospital auditorium.
- or*
- Attend the forum at University of Canberra Hospital on Thursday 13 December at 9.00am in Group Meeting Rooms 1 & 2, Level 1, Clinical Education and Research Centre.
- Take a look at the proposed structure, which will be sent out via email and will be available on the intranet after 12 noon today.
- Provide your feedback to HRconsultation@act.gov.au or complete the online survey using the link provided in the email and on the Intranet.
- Submissions close Friday 11 January 2019.
- All feedback will be treated in confidence.
- The feedback you provide will inform the development and implementation of the final structure.

Next steps

- Consultation ends Friday 11 January 2019.
- We will consider all feedback and make any necessary changes to the proposed structure.
- Depending on the feedback received and any required changes, we will then implement the proposed changes or, if required, ask staff for additional feedback.
- It is envisaged that the proposed new structure will be implemented on Friday 1 March 2019.

Canberra Health Services (CHS) proposed structure

What do staff need to know?

- The CEO and Executive Directors are taking steps to settle our organisational structure.
- We are proposing some changes to our structure and would like staff (your) feedback.
- There will be **no** non-executive job losses under the proposed structure.
- The majority of business units, roles and positions will remain the same with the only changes to reporting lines and divisions.
- While we don't anticipate this process will result in significant changes for most staff—all staff will be consulted.
- You can submit feedback via email or by completing an online survey—you will receive details on how to do this via email later this morning or by visiting HealthHub (the intranet) and searching for CHS Organisational Structure.
- Submissions close 11 January 2019.

Why are the changes taking place?

- It's important our structure:
 - reflects our business priorities
 - supports improved working relationships
 - supports more effective, efficient decision making
 - provides certainty and stability for all staff.
- The new structure will:
 - give greater clarification of roles, functions and relationships across CHS
 - allow for a more streamlined delivery of quality public health services
 - ensure that similar functions and functions that work together closely are aligned under the same reporting lines
 - reduce duplication and improve accountability for operational service delivery, quality and standards management.
- This process is not the same scale as the CHHS re-structure proposed last year. The CEO and Executive Directors have looked at things with fresh eyes.
- Your feedback from the CHHS restructure proposed last year and the mid-year Transition process have been reviewed and considered as part of consolidating CHS's organisational structure.