

Our reference: **ACTHDFOI23-24.18**

[REDACTED]

Dear [REDACTED]

DECISION ON YOUR ACCESS APPLICATION

I refer to your application under section 30 of the *Freedom of Information Act 2016* (FOI Act), received by the ACT Health Directorate (ACTHD) on **Wednesday 18 October 2023**.

This application requested access to:

'A copy of the following ministerial briefs with the reference numbers outlined (excluding all attachments to the brief);

- MIN23/599
- MIN2023/00368
- GBC23/428
- MIN23/603
- GBC23/511
- GBC23/180
- MIN2023/00565'

I am an Information Officer appointed by the Director-General the ACTHD under section 18 of the FOI Act to deal with access applications made under Part 5 of the Act. ACTHD was required to provide a decision on your access application by **Wednesday 29 November 2023**.

I have identified seven documents holding the information within scope of your access application. These are outlined in the schedule of documents included at [Attachment A](#) to this decision letter.

Decisions on access

I have decided to:

- grant full access to one document; and
- grant partial access to six documents.

My access decisions are detailed further in the following statement of reasons and the documents released to you are provided as [Attachment B](#) to this letter.

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

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

Full Access

I have decided to grant full access to the document at reference 1.

Partial Access

I have decided to grant partial access to the documents at references 2-7.

The document at reference 3 is partially comprised of information that would reveal deliberations of Cabinet and is therefore taken to be contrary to the public interest to release, under Schedule 1.6 (1) Cabinet Information (d) the disclosure of which would reveal any deliberation of Cabinet.

Redactions have been made to the document at reference 4, that is partially comprised of information classified as information subject to legal professional privilege information, and under Schedule 1.2, it is taken to be contrary to the public interest to release. Schedule 1.2 information that would be privileged from production or admission into evidence in a legal proceeding on the ground of legal professional privilege.

Public Interest Factors Favouring Disclosure

The following factors were considered relevant in favour of the disclosure of the documents:

- Schedule 2, 2.1(a)(i) promote open discussion of public affairs and enhance the government's accountability; and
- Schedule 2, 2.1(a)(ii) contribute to positive and informed debate on important issues or matters of public interest.

Public Interest Factors Favouring Non-Disclosure

The following factors were considered relevant in favour of the non-disclosure of the documents:

- Schedule 2, 2.2 (a)(ii) prejudice the protection of an individual's right to privacy or any other right under the Human Rights Act 2004; and
- Schedule 2, 2.2(a)(xiii) prejudice the competitive commercial activities of an agency.

In undertaking the public interest test set out in section 17 of the Act, on balance, I determine the information identified is contrary to the public interest and I have decided to not disclose this information. As specified against each document in the schedule, the disclosure of personal information would not provide any government information pertinent to your request. The release of an agency's competitive commercial activities would have the detrimental effect of reducing the competitive ability of non-government organisations. Therefore, I have determined the information identified is contrary to the public interest and would not advantage the public in disclosing this information.

Charges

Processing charges are not applicable to this request.

Disclosure Log

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

<https://www.health.act.gov.au/about-our-health-system/freedom-information/disclosure-log>.

Ombudsman review

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

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

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

Further assistance

Should you have any queries in relation to your request, please do not hesitate to contact the FOI Coordinator on (02) 5124 9831 or email HealthFOI@act.gov.au.

Yours sincerely,



Catherine Ellis
Senior Director
Ministerial and Government Services
ACT Health Directorate

29 November 2023

FREEDOM OF INFORMATION SCHEDULE OF DOCUMENTS

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>

APPLICANT NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	FILE NUMBER
	<p><i>Copy of the following ministerial briefs with the reference numbers outlined (excluding all attachments to the brief);</i></p> <ul style="list-style-type: none"> - MIN23/599 - MIN2023/00366 - GBC23/428 - MIN23/603 - GBC23/511 - GBC23/180 - MIN2023/00565 	ACTHDFOI23-24.18

Ref Number	Page Number	Description	Date	Status Decision	Factor	Open Access release status
1.	1 - 4	MIN23/599 - Consultation outcomes report – Designing ACT health services for a growing population	July 2023	Full Release		YES
2.	5 - 9	MIN2023/00366 - Meeting with the Health Minister and the Australian Nursing and	July 2023	Partial Release	Schedule 2, 2.2(a)(ii) - Privacy	YES

		Midwifery Federation (ANMF) – Thursday 13 July 2023 from 9.30-10.30am				
3.	10 - 13	GBC23/428 - Ministerial Statement - Health Infrastructure Update	August 2023	Partial Release	Schedule 1.6 - Cabinet Information Schedule 2, 2.2(a)(ii) - Privacy	YES
4.	14 - 17	MIN23/603 - Northside Hospital transition – Update on redundancies through Calvary Health Care ACT as a result of transition	July 2023	Partial Release	Schedule 1.2 - Legal Professional Privilege Schedule 2, 2.2(a)(ii) - Privacy Schedule 2, 2.2(a)(xiii) Business Affairs	YES
5.	18 - 23	GBC23/511 - Minister for Health attendance at the public hearing for the Senate Legal and Constitutional Affairs Legislation Committee Inquiry on the Australian Capital Territory (Self-Government) Amendment Bill 2023 (the Inquiry)	August 2023	Partial Release	Schedule 2, 2.2(a)(ii) - Privacy	YES
6.	24 - 26	GBC23/180 - Exposure Draft Cabinet Submission CAB23/552 - ACT Government Submission to the Senate Inquiry into the provision of and access to dental services in Australia	August 2023	Partial Release	Schedule 2, 2.2(a)(ii) - Privacy	YES
7.	27 - 30	MIN2023/00565 - Meeting to discuss current midwifery initiatives to support midwives and midwifery led care in the ACT.	August 2023	Partial Release	Schedule 2, 2.2(a)(ii) - Privacy	YES
Total Number of Documents						
7						



ACT Health Directorate

To:	Minister for Health	Tracking No.: MIN23/599
CC:	Catherine Rule, Director General, ACT Health Directorate Dave Peffer, Chief Executive Officer, Canberra Health Services	
From:	Liz Lopa, A/g Deputy Director General, Infrastructure and Engagement, ACT Health Directorate	
Subject:	<i>Consultation outcomes report – Designing ACT health services for a growing population</i>	
Critical Date:	28/07/2023	
Critical Reason:	To share the <i>Consultation outcomes report</i> with the community and stakeholders	

Recommendations

That you:

1. Note the information contained in this brief and attachments; and

Noted / Please Discuss

2. Agree to publish the *Designing ACT health services for a growing population - Consultation outcomes report (Attachment A)* on YourSay.

Agreed / Not Agreed / Please Discuss

Rachel Stephen-Smith MLA /...../.....

Minister’s Office Feedback

Background

1. A phased community engagement program (*Designing ACT health services for a growing population*) was developed to explore the community's views about the ACT's health care system. The program aimed to inform several projects being delivered to improve health services and address growing demand in the Territory. They included:
 - Northside Clinical Services Plan;
 - Northside Hospital Project; and
 - Integrated Care Program.
2. Following your approval for this phased approach on 14 June 2022, the *Designing ACT health services for a growing population* engagement program ran between August and December 2022.
3. Following your approval on 4 May 2023 Phases 1 and 2 listening reports were made public via the *Designing ACT health services for a growing population*, YourSay page on 8 May 2023.
4. The *Consultation outcomes report* now seeks to close the loop with the community and provide outcomes of engagement across all streams and phases.

Issues

5. The *Consultation outcomes report* is designed to summarise engagement activities across all phases of the *Designing ACT health services for a growing population* engagement program.
6. This report is intended to identify consistent public feedback regarding the ACT's health care system. It also outlines how community engagement was conducted, including the governance structure, promotional mechanisms, participation, and the overarching outcomes across all consultation activities.
7. The information in this report should be considered an overview document, with more in-depth analysis provided in Phase 1 and 2 listening reports.
8. Some of the key and consistent findings outlined in this report include:
 - The community would like better access to paediatric, maternity, and mental health care services.
 - The cost, lack of, and difficulty accessing bulk billing services was identified as a barrier to accessing affordable health care.
 - There is a requirement for services which offer greater individual choice and which better support diverse consumers and their needs.

- There is a need for better virtual health options, which are available within health service facilities.
 - There is a need for more health services within the community to reduce Emergency Department presentations and wait times.
 - The community and stakeholders would like to see more support for health care workers; through training, increased resourcing, and attraction and retention incentives.
 - Having a more integrated health care system, which sees better linkages and communication amongst services, providers, and facilities, would help to improve the consumer experience and quality of care received.
9. To date, the results of the *Designing ACT health services for a growing population*, engagement activities has achieved the following outcomes:
- Eight consumer principles were developed by the Integrated Care Community Panel and presented to Canberra Health Services for consideration. As such, Canberra Health Services have identified appropriate actions to address some of these expectations.
 - Community and stakeholder feedback was used to inform an endorsed business case for funding decisions regarding the new northside hospital; it will also be used for future planning purposes.
10. Upon your agreement, this report will be made available to the community through the *Designing ACT health services for a growing population* YourSay web page.

Financial implications

11. Not applicable.

Consultation

Internal

12. The *Consultation outcomes report* has been prepared in consultation with Canberra Health Services.

Work Health and Safety

13. Not applicable.

Benefits/sensitivities

14. Not applicable.

Communications, media and engagement implications

15. Consultation with community, stakeholders and hospital team members will continue later this year as part of the detailed infrastructure planning for the building of the new northside hospital.
16. Proactive media opportunities will be sought in conjunction with your office as the project continues.

Signatory Name:	Liz Lopa	Phone:	(02) 5124 9805
Action Officer:	Sally-Anne Clark	Phone:	(02) 6207 0825

Attachments

Attachment	Title
Attachment A	<i>Designing ACT health services for a growing population - Consultation outcomes report (July 2023)</i>



ACT Health Directorate

To: Minister for Health

Tracking No.: MIN2023/00366

From: Anthony Dombkins, Chief Nurse and Midwifery Officer

Subject: Meeting with the Health Minister and the Australian Nursing and Midwifery Federation (ANMF) – Thursday 13 July 2023 from 9.30-10.30am

Critical Date: 11/07/2021

Critical Reason: You are meeting with Matthew Daniel, Secretary, ANMF ACT Branch on Thursday 13 July 2023

Recommendations

That you:

Note the information contained in this brief.

Noted / Please Discuss

Choose an item. MLA/...../.....

Minister’s Office Feedback

Background

1. A meeting has been scheduled with Matthew Daniel, Secretary, Australian Nursing and Midwifery Federation (ANMF) ACT Branch on 13 July 2023. There is no formal agenda for the meeting, however the main topics for discussion will be Ratios and the Nursing and Midwifery Enterprise Agreement.

Issues

Nurse/Midwife (N&M) to Patient Ratios

Phase One

2. Ratio compliance and reporting remains the main issues for Phase One Clinical Units at the health services.
3. The public reporting platform for N&M ratios required under the current Nursing and Midwifery Enterprise Agreement (NMEA) went live on 14 June 2023.
4. An evaluation of Phase One has commenced with the Final Report expected by October 2023.

Phase Two

5. The Enterprise Agreement negotiations remain ongoing.
6. Feedback on the Health Services Models of Care (MoC) and Service Profiles (SP) from the ANMF ACT Branch had a revised due date of 7 July 2023. A response was received the night of 10 July 2023.
7. The Technical Reference Group (TRG) had intended to reconvene on 10 July. Due to late arrival of ANMF feedback this is being rescheduled and feedback being . . . Further discussion was scheduled for 10 July 2023, but could not occur as the information was not received from AMNF prior to the scheduled meeting. reviewed by the Ratios Implementation Team.
8. The Ratios Implementation Team have completed work on a draft Project Management Plan and a draft Change Management Plan for Phase Two N&M Ratio implementation. These documents will be finalised once Phase Two N&M Ratios are confirmed as an outcome of ACT Nursing and Midwifery Enterprise Bargaining.

NMEA

9. The Enterprise Agreement negotiations remain ongoing. A meeting was held on the 4 July 2023, with a number of actions awaiting feedback from stakeholders.

Nurse Practitioner Professional Practice Project (NP-PP)

10. The ACT OCNMO will progress the implementation of the NP-PP: Final Report which has been Ministerially endorsed. Recommendations will be executed in the context of other strategic policy, strategy and plans related to the nursing workforce

including the ACT Health Services Plan 2022-2030, ACT Health Workforce Strategy 2023-2032, and the Framework for Change: ACT Mental Health Workforce Strategy.

11. The ACT CNMO is an active participant at the National Nurse Practitioner Strategic Plan Forum, and the ACT NP body of work will link in with this group as discussions on implementation, monitoring and evaluation occur.
12. The ACT OCNMO is considering engaging an external NP consultant to provide expertise and advice on NP strategic actions. This will include development of NP education, research, outcome measure monitoring and reporting, communication and engagement, tools, resources, and legislative changes.
13. The ACT OCNMO will work closely with the ACT Health sector and professional bodies to progress recommendations.

Northside Hospital

14. The *Health Infrastructure Enabling Act 2023* was enacted on 2 June 2023. The enables the ACT Government to acquire the land on which the former Calvary Public Hospital Bruce operated, and transition services and employment to Canberra Health Services from 3 July 2023.
15. In the lead up to passage of the Act and subsequent acquisition day on 3 July 2023, Transition Team held weekly briefings for industrial partners during the transition period.
16. The ANMF has been invited to attend all briefings for industrial partners to date.
17. On Wednesday 26 June 2023, it was announced that, by mutual agreement between the ACT Government and Calvary, Clare Holland House would also transition to Canberra Health Services on 3 July 2023.
18. At the 4 July 2023 meeting with unions and professional associations, it was agreed to complete the weekly transition meetings and move to engagement through normal stakeholder engagement mechanisms.
19. The ANMF is encouraged to raise any workforce matters relating to North Canberra Hospital and Clare Holland House through established mechanisms with Canberra Health Services.

Privately Practising Midwives

20. The ACT Government continues to work with the Commonwealth Government to progress opportunities for privately practising midwives and eligibility for insurance to work to full scope of practice.

Canberra Maternity Options Service (CMOS)

21. CMOS was evaluated in 2022 and the recommendations from the report were provided to the health services. Canberra Health Services (CHS) took carriage of the

evaluation outcomes and proposed changes. CHS have transitioned the revised CMOS model.

Nurses and Midwives: Towards a Safer Culture (TASC)

22. All new TASC team Project Officers (2 x RN3.1 and 2 x RN2.3) will be onboarded by 24 July 2023 and aligned with both health services, with three Project Officers at each site.
23. The new ASO6 TASC Communication role FTE for 1 year has progressed with onboarding planned for 10 July 2023.
24. The fully staffed TASC team of seven will support the implementation of the TASC 'Next Steps' Strategy informed by the Evaluation recommendations and the commitments outlined in the Embedding a Positive Safety Culture Business Case 2022/23FY.
25. The NM TASC 'Next Steps' Project Management Plan draft has been finalised and is currently for review and endorsement by the Steering Committee.
26. A planning day with key stakeholders is scheduled for 28 July 2023 to establish an implementation plan for embedding the 'Next Steps' strategy in the ACT Health Services.
27. The team is finalising the Safewards Model of Care Readiness Checklist and will work directly with each health service to identify the 12 wards that will embed Safewards as part of the NM TASC 'Next Steps' strategy.

Clinical Supervision

28. A tentative date for launching the Clinical Supervision Framework for ACT Nurses and midwives has been reserved for 7 September 2023. Once confirmed, a formal launch by the ACT Minister for Health will be arranged.
29. CS training continues with 119 interdisciplinary staff trained and a further 60 interdisciplinary staff to be fully trained by the end of 2023.
30. Co-development/train the trainer groups are planned for February 2024 to strengthen the sustainability of CS into the TASC 'Next Steps' Strategy and beyond.
31. The team continue to engage and motivate staff through forums, symposiums, staff feedback forums, ward meetings, and newsletters.
32. Funding for Clinical Supervision training ceases in 2024.

Financial Implications

33. Not applicable

Consultation

Internal

34. Northside Hospital Project Team

Cross Directorate

35. Not applicable

External

36. Not applicable

Work Health and Safety

37. Not applicable

Benefits/Sensitivities

38. There has been delayed communication to address ANMF concerns regarding Continuity of Care from a letter from Matthew Daniel on 28 March 2023.

39. Ongoing negotiation of the NMEA

40. Ratios Implementation across Phase 1 areas

41. The Nursing and Midwifery professions are facing unprecedented challenges across Australia and internationally around the recruitment and retention of suitably qualified staff.

Communications, media and engagement implications

42. Not applicable

Signatory Name: Anthony Dombkins, Chief Nurse and Midwifery Officer Phone: [REDACTED]

Action Officer: Chanel Connor, Midwifery Advisor Phone: [REDACTED]



ACT Health Directorate

To: Minister for Health

Tracking No.: GBC23/428

From: Liz Lopa, A/g Deputy Director-General, Infrastructure and Engagement

CC: Catherine Rule, A/g Director-General, ACT Health Directorate
 Jacinta George, Executive Group Manager, Health System Planning and Evaluation
 Dave Peffer, Chief Executive Officer, Canberra Health Services
 Colm Mooney, Executive Group Manager, Canberra Health Services
 Karen Doran, A/g Chiefs Projects Officer, Major Projects Officer

Subject: Ministerial Statement - Health Infrastructure Update

Critical Date: 07/08/2023

Critical Reason: The package is due to be lodged with the Cabinet Office on this date.

Recommendation

That you sign the Assembly Business Paper ([Attachment 1](#)) for lodgement with Cabinet Office.

Signed / Not Signed / Please Discuss

Rachel Stephen-Smith MLA/...../.....

Minister's Office Feedback

Background

1. The Health Infrastructure Plan was issued by yourself and the Chief Minister on 4 July 2023. The Plan outlines how the government is preparing for the delivery of new and improved health infrastructure across the city for the next five years and beyond. Through the delivery of projects outlined in the infrastructure plan, Canberrans will have access to new and upgraded infrastructure that prioritises community-focused care, improves patient outcomes and encourages greater alignment of health service delivery across the ACT.

Issues

2. You have requested that a Ministerial Statement be prepared for presentation in the ACT Legislative Assembly to provide an update on health infrastructure projects.
3. An Assembly Business Paper has been prepared for your approval and lodgement at Attachment 1.
4. The ABP pack includes:
 - a. Ministerial Statement (Attachment A)
 - b. ACT Infrastructure Plan – Health Update (Attachment B)
 - c. Table of Comments (Attachment C)
 - d. Open Access Decision Summary (Attachment D)
 - e. Wellbeing Impact Assessment (Attachment E).
5. The Ministerial Statement (Attachment A) is an opportunity for you to update the Assembly on health infrastructure priorities now and into the longer term. The Ministerial Statement draws on the material in the ACT Infrastructure Plan Update Health.
6. The Statement is scheduled for Cabinet consideration on 15 August 2023 and is currently scheduled for presentation in the ACT Legislative Assembly during the 29 – 31 August 2023 sitting week.

Financial Implications

7. Nil.

Consultation

Internal

8. The ACT Health Directorate (ACTHD) Health System Planning and Evaluation Division, Digital Services Solution Division, and Strategic Finance branch provided input into the Infrastructure Plan Update.
9. The ACTHD northside hospital transition team has provided input into the Ministerial Statement.

Cross Directorate

10. The Chief Minister, Treasury and Economic Development Directorate (CMTEDD), Environment Planning and Sustainable Development Directorate (EPSDD), Major Projects Canberra (MPC) and Canberra Health Services (CHS) all reviewed and provided input into the ACT Infrastructure Plan Update for the health sector.

External

11. The Health Care Consumers Association (HCCA) will co-chair a newly established Territory-wide Health Infrastructure Consumer Reference Group (CRG).
12. The CRG will provide advice to government on matters, including but not limited to, design, accessibility, safety, and amenities on new and redeveloped infrastructure projects. They will work collaboratively with existing clinical, consumer and community groups to bring the best outcomes to the Territory.
13. The first meeting of the new CRG is expected before the end of the year.
14. HCCA were not involved in the development of the ACT Infrastructure Plan Update.

Work Health and Safety

15. Nil.

Benefits/Sensitivities

16. [REDACTED]
17. The Ministerial Statement provides an opportunity to highlight the positive impact the delivery of health infrastructure has on clinical care across all ACT public health services.
18. The Ministerial Statement provides an opportunity to highlight the importance of investing in our health infrastructure to support the growing and ageing population.
19. ACT Health is actively working to align infrastructure and service delivery across the Canberra Hospital campus and the new northside hospital.

Communications, media and engagement implications

20. Communications teams across government including from ACTHD, CHS, MPC and CMTEDD all provided input about the ACT Infrastructure Plan Update Health.
21. ACTHD's communications and engagement team will continue working with communications teams across government to ensure a consistent approach to infrastructure related communications and engagement.

CABINET

Signatory Name: Liz Lopa, A/g Deputy Director-General, Phone: [REDACTED]
Infrastructure and Engagement

Action Officer: Daniel Landon, A/g Executive Branch Phone: [REDACTED]
Manager

Attachments

Attachment	Title
Attachment 1	Assembly Business Paper
Attachment A	Ministerial Statement
Attachment B	ACT Infrastructure Plan – Health Update
Attachment C	Table of Comments
Attachment D	Wellbeing Impact Assessment
Attachment E	Open Access Decision Summary



ACT Health Directorate / Canberra Health Services

To: Minister for Health Tracking No.: MIN23/603

From: Kath Wakefield, A/g Deputy Director General, Northside Transition Team

CC: Dave Peffer, Chief Executive Officer, Canberra Health Services
 Liz Lopa, Deputy Director General, ACT Health Directorate
 Russell Noud, Executive Group Manager, Chief Minister, Treasury and Economic Development Directorate

Subject: Northside Hospital transition – Update on redundancies through Calvary Health Care ACT as a result of transition

Critical Date: 21/07/2023

Critical Reason: As requested by your Office

Recommendation

That you note the information contained in this brief.

Noted / Please Discuss

Rachel Stephen-Smith MLA /...../.....

Minister’s Office Feedback

Background

1. The *Health Infrastructure Enabling Act 2023* provided for the safe and orderly transition of the operation of the public hospital to the Territory, including transition of employment of public hospital employees. It was not an opportunity for voluntary redundancies.
2. In accordance with the *Health Infrastructure Enabling Regulation 2023* (the Regulation), all Calvary Public Hospital employees, who meet the criteria set out in s 5(1) of the Regulation, are eligible for an offer of employment which recognises all entitlements and prior service for all purposes.
3. While the issue of redundancies was a matter for Calvary, the transition team has provided information and support to ensure staff awareness of options. This has included a fact sheet (Attachment A) and support from the hotline, kiosk and case managers.

Issues

4. As of 18 July 2023, there are 50 employees being considered by Calvary for redundancy with 44 redundancy offers made and 6 pending approvals.
5. The below table shows status of offers at 18 July by head count, noting that over 70 per cent of those who have accepted a redundancy are employed on a part-time basis.

	Accepted	Seconded (accepted or pending)	Pending	TOTAL
Midwives				
RNs (all levels)				
Admin/Support				
Medical				
Allied Health				
EN				
SUB TOTAL	24	8	12	44
\$	\$ 2,914,780	\$ 780,448*	\$ 1,837,915*	\$5,533,143*
* Note - these amounts are pending final calculations and will be higher grossed up for tax and super.				

6. The transition team continues to work with Calvary to settle outstanding outcomes which is expected to be resolved in the coming weeks (by 1 September 2023 at the latest).
7. Compensation claims may be made by Calvary for payment of redundancies. The Territory will assess each claim and determine payment under s 24 of the Regulation which is to “assist to mitigate the impacts of the acquisition” on Calvary.

8. [REDACTED]
9. There are a small number of employees who are considering redeployment options available in the ACT Public Service (ACTPS) where redeployment is not available in Calvary, and where they do not wish to transition to Canberra Health Services (CHS).
10. To assist Calvary in managing their obligations to employees considering redundancy or redeployment, the Territory has agreed to compensate Calvary for the salary of these employees while they are jointly case managed by Calvary and the transition team.
11. Processes have been agreed with Calvary and North Canberra Hospital (NCH) to ensure appropriate payment of these salaries to prevent duplication across pay roll systems.
12. An emerging issue has been raised with CHS and unions from staff who have accepted the offer to transition to CHS but now wish to have a redundancy.
13. The transition was intended to retain the whole workforce. Positions are not considered to be redundant and have transitioned to CHS to continue NCH operations and service delivery. Further consideration of redundancies would likely result in workforce shortages and significant costs to the Territory.

Consultation

Internal

14. NCH executive are managing impacts on the workforce and services to ensure service continuity and safe staffing. NCH line managers are involved to support staff wellbeing.

Cross Directorate

15. The Chief Minister, Treasury and Economic Development Directorate has worked closely with the transition team to enable the transition of the workforce to CHS and explore redeployment options for individuals who have chosen not to transition.

External

16. Union and professional associations met weekly from 23 May to 4 July 2023 to discuss transition, including staff transition to CHS, redeployment and Calvary redundancy offers.
17. The ACT Solicitor General and northside project legal advisors have provided legal counsel throughout the transition project and specific advice regarding redundancy.

Work Health and Safety

18. Uncertainty about employment has a potential impact on staff health and wellbeing. The transition team is providing dedicated case management support for staff considering redundancy or redeployment, which includes working with NCH managers to check-in on individuals to ensure they are informed and able to access counselling support if needed.

Benefits/Sensitivities

19. Potential misconception that staff are not being employed by CHS and made redundant.
20. Staff may be upset that they have transitioned to CHS when others have received a redundancy from Calvary. While this may be difficult for staff, the intention was to transition employees and continue operations and service delivery at the hospital.

Communications, media and engagement implications

21. Potential media interest in Calvary redundancies and impact on the workforce. The risk to staff and clinical care is being managed by NCH with CHS support more broadly.

Signatory Name: Katherine Wakefield

Phone:



Action Officer: Amanda Bell

Phone:

**Attachments**

Attachment	Title
Attachment A	Transition Fact Sheet – Redundancy

ACT Health Directorate

To: Minister for Health Tracking No.: GBC23/511

CC: Rebecca Cross, Director-General, ACT Health Directorate
Dave Peffer, Chief Executive Officer, Canberra Health Services
Peter Garrison, Solicitor-General, ACT Government Solicitors Office

From: Liz Lopa, Deputy Director-General, Infrastructure and Engagement

Subject: Minister for Health attendance at the public hearing for the Senate Legal and Constitutional Affairs Legislation Committee Inquiry on the Australian Capital Territory (Self-Government) Amendment Bill 2023 (the Inquiry)

Critical Date: 04/09/2023

Critical Reason: To provide with you information ahead of your attendance at the Inquiry's public hearing on 4 September 2023.

Recommendations

That you note the information in this brief.

Noted / Please Discuss

Rachel Stephen-Smith MLA /...../.....

Minister's Office Feedback

Background

1. The Health Infrastructure Enabling Bill 2023 (the Bill) was introduced in the Legislative Assembly of the ACT on 11 May 2023.

2. The Bill was passed 31 May 2023, and became law on 2 June 2023. The *Health Infrastructure Enabling Act 2023* (the Act) enables the Territory to acquire the public hospital land for the construction of the new public hospital and terminate the Calvary Network Agreement. Canberra Health Services (CHS) became the operator of North Canberra Hospital (NCH) (formerly Calvary Public Hospital Bruce (CPHB)) on 3 July 2023.
3. The validity of the Act was subject to matters before the Supreme Court by a legal challenge from Calvary Healthcare ACT (Calvary). The Territory agreed not to exercise Sections 11 and 12 of the Act during the court proceedings.
4. On Friday 9 June 2023, claims submitted by Calvary were dismissed before the Supreme Court. Calvary subsequently withdrew their claims regarding the *Health Infrastructure Enabling Regulation 2023*.
5. There has been a high level of interest in the ACT Government's decision to introduce, pass and proceed with the acquisition of CPHB under the Act. The ACT Government introduced a motion in the Legislative Assembly to not conduct an inquiry into the Bill prior to passage of the legislation, this was supported. This does not preclude Assembly from holding an inquiry at a later date.
6. The short timeframe in which the Bill was introduced, debated and passed was required to enable a quick period of transition to minimise the impact on staff, consumers and services, whereas a drawn-out transition period would likely have lead to confusion, uncertainty and impacted the wellbeing of staff.

Issues

7. On 19 June 2023, Senator the Hon Matthew Canavan (Queensland) introduced a private Senator's Bill - *the Australian Capital Territory (Self-Government) Amendment Bill 2023* (the Bill).
8. This Bill proposes to amend the *Australian Capital Territory (Self-Government) Act 1988* (the Act), by adding to it a section that would state "The Government of the Territory must conduct an inquiry into the *Health Infrastructure Enabling Act 2023* (ACT) (the Enabling Act), reporting before 30 June 2024."
9. The Bill was referred to the Senate Legal and Constitutional Affairs Legislation Committee for inquiry and report initially by 9 August 2023.
10. On 8 August 2023, a Senate motion was passed to grant the Committee inquiry a one-month extension to examine the Bill and its submissions. The motion allowed time to hold at least one public hearing and calling of witnesses before the Committee, along with a new date set for the Committee to deliver its findings on 6 September 2023.

11. A public hearing is scheduled for the evening of 4 September 2023. Your office has advised that you are attending as a witness for the ACT Government, along with Dave Peffer, Chief Executive Officer, Canberra Health Services and Peter Garrisson, Solicitor-General, ACT Government Solicitors Office.
12. It is understood that the only other witnesses being invited to attend the hearing are representatives from Calvary Health Care ACT, and the Catholic Archdiocese of Canberra and Goulburn. Senator David Pocock was unsuccessful in his motion to expand the witness list.

Submissions summary

13. Submissions to the Senate Legal and Constitutional Affairs Committee were open until 17 July 2023. Submissions included 76 written submissions and 6,880 form letters.
14. The written submissions included:
 - a. 7 submissions against the Bill;
 - b. 68 submissions supporting the Bill; and
 - c. 1 confidential submission.
15. A summary of the 76 written submissions is provided at Attachment A.
16. In the submissions supporting the Bill, the themes included:
 - a. The ACT Government's takeover was sudden, unprecedented, undemocratic, and violates human rights;
 - b. There was no opportunity for community to voice concerns and there was no ACT Legislative Inquiry;
 - c. It is an attack on Christian values and the Catholic Church approach to matters of life including abortion, other Christian institutions are now worried they are next;
 - d. Some submissions called for Royal Commission because "they are not confident that the ACT Government can carry out a balanced and proper review".
17. When asked if the Committee would consider just written submissions or will they also consider the form letters, the Committee responded saying "... the Committee is not curtailed in terms of the information that it may consider during the conduct of its inquiry, provided that the information is relevant to the terms of the inquiry".
18. The Transition Team have confirmed with the Committee that there are no formal terms of reference for the Inquiry.
19. On 7 July 2023, the Catholic Archdiocese of Canberra and Goulburn made a submission to the Inquiry, which they support the passage of the bill (see Attachment B).

SENSITIVE

20. On 20 July 2023, the ACT Government made a submission to the Inquiry which states that the Bill is an inappropriate and unnecessary attempt to intervene in self-government (see [Attachment C](#)). The ACT Government submission highlights that the Bill disregards established self-government mechanisms for deliberation, accountability, transparency and debate that operate as intended when considering, scrutinising and passing legislation. On these terms, the Bill undermines the principles of responsible government.
21. The ACT Government submission outlines in detail, the processes which were undertaken regarding the introduction, scrutiny and passage of the Act.
22. The ACT Government requests the Committee to recommend that the Self-Government Amendment Bill not be passed.
23. Calvary Health Care ACT made a submission to the Inquiry, which they support the passage of the bill (see [Attachment D](#)).

Supporting materials

24. To support your attendance at the public hearing on 4 September 2023, the following materials are provided:
 - a. Talking points regarding the timeline of negotiations and government consideration ahead of introduction of the *Health Infrastructure Enabling Act 2023*, pre and post transition activities, and Clare Holland House ([Attachment E](#));
 - b. Copy of the Debate Speech prepared for Assembly proceedings on 31 May 2023 ([Attachment F](#));
 - c. Copy of the Chief Ministers Debate Speech for Assembly proceedings on 31 May 2023 ([Attachment G](#));
 - d. Talking points about work CHS is now doing post-acquisition to bring the services together including staff consultation, support for the workforce through this process and what is possible to bring together in terms of key performance indicators (as requested by your office) ([Attachment H](#)).
 - e. A copy of your Ministerial Statement given in the Assembly on 27 June 2023 ([Attachment I](#))

Financial Implications

25. Not applicable.

ConsultationInternal

26. Consultation on the briefing package was undertaken amongst the Transition Team within ACTHD.

Cross Directorate

27. Consultation on the briefing package was undertaken amongst the Transition Team members from CHS.
28. The ACT Government Submission to the Inquiry was prepared by Chief Minister, Treasury and Economic Development Directorate.

External

29. ACTHD continues to receive advice from external consultants supporting the northside hospital project, however no external consultation has been undertaken in the preparation of this briefing package.

Work Health and Safety

30. Nil.

Benefits/Sensitivities

31. The introduction and subsequent passage of the Bill has generated a high level of scrutiny and interest in the public domain. The court proceedings and outcome relating to the Act have also generated a high level of interest in the public domain.
32. Senator Canavan's Bill is a result of the interest resulting from the acquisition of CPHB, particularly from residents of Queensland.

Communications, media and engagement implications

33. Significant media and public interest have surrounded the introduction and passage of the Bill and is expected to continue throughout the transition.
34. A dedicated communications and media team was established to support the communication, stakeholder and media needs of the Project and as transition progresses and occurs.
35. Media interest in the public hearing is expected. The Transition team media and communications team will be available to assist in any reactive media management if required.

Signatory Name: Liz Lopa, DDG Infrastructure and
Engagement ACTHD

Phone:



Action Officer: Alice West / Lachlan Roberts

Phone:

MS Teams

Attachments

Attachment	Title
Attachment A	Summary of 76 written submissions
Attachment B	Submission – Catholic Archdiocese for Canberra and Goulburn

SENSITIVE

Attachment C	Submission – ACT Government
Attachment D	Submission – Calvary Health Care ACT
Attachment E	Talking Points
Attachment F	Copy of Debate Speech – Minister for Health
Attachment G	Copy of Debate Speech – Chief Minister
Attachment H	Summary – Pre acquisition activities
Attachment I	Copy of 27 June 2023 Ministerial Statement on Transition

ACT Health Directorate

To:	Minister for Health	Tracking No.: GBC23/180
CC:	Dave Pepper, Chief Executive Officer Canberra Health Services	
From:	Rebecca Cross, Director-General	
Subject:	Exposure Draft Cabinet Submission CAB23/552 - ACT Government Submission to the Senate Inquiry into the provision of and access to dental services in Australia	
Critical Date:	30/08/2023	
Critical Reason:	The Cabinet Submission is due to be lodged with Cabinet Office by this date ahead of exposure circulation.	

Recommendation

That you agree to the Cabinet Submission at Attachment 1 being lodged with Cabinet Office for exposure circulation.

Agreed / Not Agreed / Please Discuss

Rachel Stephen-Smith MLA/...../.....

Minister's Office Feedback

Background

1. On 8 March 2023, the Australian Senate resolved that the Select Committee Inquiry into the Provision of and Access to Dental Services in Australia (the Inquiry) be established.
2. In late March 2023, the ACT Government received an invitation to make a submission to the Inquiry (Attachment 2).
3. On 28 April 2023, due to the tight timelines provided by the Select Committee, the Chief Minister agreed to the ACT Government Submission being submitted to the Select Committee with a copy to be provided to Cabinet at a later date (Attachment 3).

Issues

4. The draft Cabinet Submission (Attachment 1), along with the ACT Government Submission, is scheduled for Cabinet consideration on 27 September 2023. Exposure circulation is due on 30 August 2023.

Financial Implications

5. Not applicable. The Cabinet Submission does not have financial or budget impacts and does not seek Cabinet's agreement to provide appropriation and/or to reduce forecast revenue.

ConsultationInternal

6. Nil.

Cross Directorate

7. Oral Health Services, Canberra Health Services was consulted in the development of the ACT Government Submission to the Inquiry.

External

8. Not applicable.

Work Health and Safety

9. Not applicable.

Benefits/Sensitivities

10. Recommendations from the Inquiry may influence the future provision of dental services in the ACT.

CABINET

Communications, media and engagement implications

11. The ACT Government's submission is published on the Select Committee's website ([Submissions – Parliament of Australia \(aph.gov.au\)](https://aph.gov.au)) and is publicly available, however no media is anticipated.
12. The Select Committee released its interim report on 20 June 2023, and is available here - [Interim report – Parliament of Australia \(aph.gov.au\)](https://aph.gov.au).

Signatory Name: Rebecca Cross, Director-General Phone: 5124 9400

Action Officer: Maria Travers, Executive Branch Manager, Phone: XXXXXXXXXX
Health Policy & Strategy Branch

Attachments

Attachment	Title
Attachment 1	Cabinet Submission
Attachment 2	Invitation from the Secretary of the Select Committee into the Provision of and Access to Dental Services in Australia
Attachment 3	Correspondence from the Chief Minister
Attachment 4	Terms of Reference the Senate Inquiry - Dental Services
Attachment A	Table of comments
Attachment B	Open Access Assessment: Cabinet Decision and Wellbeing Impact Assessment summary
Attachment C	Wellbeing Impact Assessment
Attachment D	ACT Government Submission - Access to Dental Services

Choose a Directorate:**To:** Minister for Health

Tracking No.: MIN2023/00565

CC: Rebecca Cross, Director General, ACT Health Directorate**From:** Robyn Hudson, Deputy-Director General, ACT Health Directorate**Subject:** Meeting to discuss current midwifery initiatives to support midwives and midwifery led care in the ACT.**Critical Date:** 31/08/2023**Critical Reason:** The meeting is scheduled for this date**Recommendations**

That you:

1. Note that Sarah Stewart, a/g Chief Nursing and Midwifery Officer, will be the ACT Health Directorate executive attending this meeting; and

Noted / Please Discuss

2. Note the information contained in this brief.

Noted / Please Discuss

Rachel Stephen-Smith MLA/...../.....

Minister's Office Feedback

Background

1. Dr Alison Teate is the ACT branch chair of the Australian College of Midwives. You have a meeting with Alison to discuss current midwifery initiatives that support midwives and midwifery led care in the ACT. There is no formal agenda for the meeting.

Issues

2. Maternity in Focus; is a consolidated action and implementation plan that addresses national and local strategies, in addition to recommendations from the Inquiry. It is a holistic approach that will address organisational, operational and cultural factors of maternity system reform. These related aspects of care involve the consumer experience, best practice maternity care, clinical governance and data, and workforce support and planning. The 58 Actions within the implementation strategy have been reorganised utilising a collaborative methodology into nine outcomes-focused collaborative communities of practice for collaborative implementation across the whole of the ACT maternity system - public and private, inpatient and in community.
3. Phase Two of Mandated Minimum Nurse/Midwife-to-Patient Ratios; maternity services have been earmarked as specialty area to be included in the implementation of ratios, with detailed discussion on how babies will be counted as a patient in totality. Negotiations are currently taking place to finalise this work within the Nurse and Midwife Enterprise Agreement.
4. Safer Baby Bundle; there is great engagement with health services and key stakeholders to implement the national initiative Safer Baby Bundle to reduce late pregnancy stillbirth. Synergy and University of Canberra created a third trimester ultrasound 6-week course for maternity professionals, which trained 20 midwives in common third trimester ultrasound examinations. The aim of this was to decrease wait times for women who present with concerns such as decreased foetal movements. The midwives are still completing competencies so it will be a while before we can report on outcomes of this initiative.
5. Privately practising midwives; the ACT government continues to work with the Commonwealth to progress insurance for privately practising midwives to work at full scope of practice in the home birth setting. The exemption for insurance has been extended again until 30 June 2025. Canberra Health Services (CHS) continues to work on the access agreement at the health service that will allow local privately practising midwives to have admitting rights at the hospitals.
6. Endorsed Midwives in the public health setting; the Office of the Chief Nursing and Midwifery Officer (OCNMO) continues to work with the health services to support the advancement of midwifery prescribing. A meeting is to be held with OCNMO, CHS and North Canberra Hospital (NCH) to progress this work.

7. Midwife led continuity of care; the ACT government has made a commitment to increase access to midwifery – led continuity of care for Canberra women and birthing families to fifty percent by 2028. A motion was passed in the legislative Assembly on 7 February 2023 to review the 50 per cent access to midwife - led care and increase this target to 75 percent by 2032. This commitment will be supported within the Maternity in Focus ten-year plan.
8. Home birth model of care in the ACT; CHS is working to finalise recommendations of the *Evaluation of the Publicly Funded Homebirth Trial in the Australian Capital Territory* March 2020, which would expand the service to the women of the ACT. The ACT Insurance Agency (ACTIA) have confirmed cover for both proposed extensions which includes extending catchment area for homebirth and hospital from 15 minutes to 30 minutes and the inclusion of primiparous women to the homebirth service.
9. Stand alone Birth Centre for the ACT; motion passed in the Assembly 7 February 2023 to move forward with planning for new Birth Centre for the ACT. Expanding access for women to access this model of care. Early stage planning is occurring in regards to this.
10. Midwifery Workforce in the ACT; aware of the current challenge of maternity workforce recruitment and retention. OCNMO are facilitating a workforce roundtable on Thursday 7 September 2023 with the Australian Nursing and Midwifery Federation (ANMF), CHS and NCH to discuss and plan a way forward which the Minister for Health will attend.

Financial Implications

11. Not applicable.

Consultation

Internal

12. Information was received from offices within the Office of the Chief Nursing and Midwifery Officer.

Cross Directorate

13. Not applicable.

External

14. Not applicable.

Work Health and Safety

15. Not applicable.

Benefits/Sensitivities

16. Ongoing negotiation of the Nursing and Midwifery Enterprise Agreement (NMEA).

17. The Nursing and Midwifery professions are facing unprecedented challenges across Australia and internationally around the recruitment and retention of suitably qualified staff.

Communications, media and engagement implications

18. Not applicable

Signatory Name: Robyn Hudson, Deputy-Director General Phone:

Action Officer: Sarah Stewart, A/g Chief Nursing and Midwifery Officer Phone: [REDACTED]