



Ref FOI18-66

Dear [REDACTED]

Freedom of Information Request – FOI18-66

I refer to your application received by ACT Health on 6 August 2018 in which you sought access to information under the *Freedom of Information Act 2016* (the FOI Act).

In your application you have requested:

“...briefing material sent to the Minister for Health and Minister for Mental Health related to the restructure of ACT Health between March 23 2018 and August 1 2018.”

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

ACT Health was required to provide a decision on your access application by 3 September 2018.

Decision on access

I can inform you that in response to your request, seven documents have been identified by ACT Health within the scope of your request. I have decided that six documents are to be partially released as these documents contain some information outside the scope of the request.

The remaining document is released in full.

The release of the documents is outlined in the Schedule of documents attached.

Charges

Processing charges are not applicable to this request.

Online publishing – disclosure log

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 Your personal contact details will not be published.

Ombudsman review

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

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

The ACT Ombudsman
GPO Box 442
CANBERRA ACT 2601

Via email: ACTFOI@ombudsman.gov.au.

ACT Civil and Administrative Tribunal (ACAT) review

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

Further information may be obtained from the ACAT at:

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

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

Yours sincerely



Naveen Wijemanne
A/g Senior Manager
Ministerial & Government Services

3 September 2018

FREEDOM OF INFORMATION REQUEST SCHEDULE

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

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

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

NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	File No
[REDACTED]	Briefing material sent to the Minister for Health and Minister for Mental Health related to the restructure of ACT Health between March 23 2018 and August 1 2018	FOI18/66

Ref No	No of Folios	Description	Date	Status	Reason for non-release or deferral	Open Access release status
1	1 - 9	Ministerial Brief to Minister for Health and Wellbeing with attachments A-C	31 July 2018	Full release		Yes
2	10-13	Question Time Brief – ACT Health Organisational Reform – Minister for Mental Health (GBC18/220)	4 April 2018	Partial release	Document contains information outside the scope of request	Yes
3	14-18	Question Time Brief – ACT Health Organisational Reform – Minister for Mental Health (GBC18/221)	4 April 2018	Partial release	Document contains information outside the scope of request	Yes

4	19-23	Question Time Brief – ACT Health Organisational Update – Minister for Health & Wellbeing (GBC18/279)	7 May 2018	Partial release	Document contains information outside the scope of request	Yes
5	24-28	Question Time Brief – ACT Health Organisational Update – Minister for Mental Health (GBC18/280)	7 May 2018	Partial release	Document contains information outside the scope of request	Yes
6	29-33	Question Time Brief – ACT Health Organisational Update – Minister for Mental Health (GBC18/334)	4 June 2018	Partial release	Document contains information outside the scope of request	Yes
7	34-38	Question Time Brief – ACT Health Organisational Update – Minister for Health and Wellbeing (GBC18/353)	4 June 2018	Partial release	Document contains information outside the scope of request	Yes
Total No of Docs						
7						



MINISTERIAL BRIEF

Health Directorate

SENSITIVE

To: Minister for Health and Wellbeing

Tracking No.: MIN18/1165
25 JUL 2018

CC: Minister for Mental Health

From: Michael De'Ath, Director-General, ACT Health

Subject: ACT Health Transition Program

Critical Date: Not applicable

Critical Reason: Not applicable

Recommendations

That you:

- 1. Note the information contained in this brief and attachments; and **Noted / Please Discuss**
- 2. Agree to progress a copy to the Minister for Mental Health. **Agreed / Not agreed / Please Discuss**

Meegan Fitzharris MLA *[Signature]* 31.7.18

Minister's Office Feedback

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Background

1. Following the 23 March 2018 announcement made by the Minister for Health and Wellbeing to separate ACT Health into two distinct organisations, a Transition Office has been established. The Transition Office will facilitate the program of work to create two health organisations: one organisation with a focus on operational health services, and another with a focus on territory-wide strategic policy and planning functions. The proposed date for implementation of the two new organisations is 1 October 2018.
2. The initial focus for the transition is on the corporate, or enabling functions of ACT Health. This will ensure that the organisations are appropriately resourced to perform their specified functions. Further changes to the structure of the operational health service organisation will commence once a new Chief Executive Officer has been appointed.
3. A steering committee formed by ACT Health executive leaders has been established to guide the progress of the transition and to ensure effective decision making and governance. The Transition Office will report to this steering committee on progress, issues and risks, and will seek advice on key organisational design matters.
4. In addition to the steering committee, working groups are being formed utilising the subject matter expertise within the organisation to develop and progress detailed action plans to ensure the transition will be conducted in a timely manner. The working groups are particularly focused on the core enabling functions which includes finance, human resources, ICT, policy and logistics.
5. Due to the complexity of ACT Health, the Transition Program is being designed as an organisational change program rather than a straightforward Machinery of Government change, and as such, many opportunities for staff engagement and consultation are factored into the plan. This will serve to increase understanding of the changes being sought, will minimise disruption to the workforce through clarity of understanding and will improve change readiness. A copy of the high level program and change plan is at **Attachment A** and **Attachment B**. Note these plans will continue to be refined as the program progresses.
6. A series of workshops has commenced with ACT Health senior leadership to ensure strategic alignment with the vision and objectives of the change, to create a 'guiding coalition' of change leaders, and to seek their engagement and input into the organisation design. A draft set of design principles (**Attachment C**) have been developed to guide the development of the organisation structures, and feedback is currently being received following the executive workshop.
7. The Transition Office will provide you with a fortnightly program status update. Detailed briefings will be provided on matters requiring decision as necessary.

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Issues

8. Transparent and accountable decision making will be key to the success of the transition program. There are a number of critical decisions required to ensure an effective transition process. These include:
 - a. the process for reassignment, or appointment, of staff to positions across the two organisations; and
 - b. decisions regarding the establishment of financial arrangements.
9. The outcomes of these decisions will have an impact on timeframes and resources required to process transition activities. Further information regarding the recommended options will be provided in the next briefing.

Financial Implications

10. The separation of ACT Health into two new organisations will be managed within the current funding envelope.

ConsultationInternal

11. The Transition Program plan has been developed in consultation with Executive Directors of Finance, Human Resources, ICT and Policy. Additional input has been provided by the Program Office, Communications and Health Services Planning.
12. All ACT Health related Enterprise Agreements require the Head of Service and the Directorate to consult with staff about organisational changes.
13. The Interim Director-General, ACT Health, has provided, and will continue to provide, regular updates to staff on the transition via staff bulletins, face-to-face forums and a dedicated intranet page.
14. More detailed consultations around the structure of the two organisations will be conducted through the Transition Office in the coming weeks. This will include focus groups for business areas that are most likely to be affected by the separation. Additional materials to inform and support staff with the transition process including any appointment processes will also be developed.
15. The Transition Office is working with People and Culture to ensure regular engagement with unions and staff associations, including through attendance at Joint Consultative Committee meetings.
16. Mr Robert Griew, Principal of Nous Group, has prepared an interim report for the Head of Service on best practice governance, roles, functions and relationships for the two organisations. This work has been primarily focused on the lines of accountability for the Director-General of Health and Chief Executive Officer (CEO) of Canberra Hospital and Health Services (CHHS) to Ministers and to each other.
17. Mr Griew, supported by the Transition Office, has completed a series of consultations with ACT Health staff and external stakeholders, to refine, test and improve the views proposed in the interim report. The final report is due at the end of July. This will inform the development of the Administrative Arrangements and aspects of the executive structure.

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Cross Directorate

18. No cross directorate consultation has been undertaken as yet.

External

19. In addition to consultation with ACT Health staff, Mr Griew and the Transition Office have met with key academic partners, non-government organisations, medical associations, unions, professional associations and the specialist medical colleges, regarding the governance processes for the new organisations.

Work Health and Safety

20. A people support and culture program is being developed to support staff through the transition process. This will include change management and resilience strategies. Further details of this program will be provided once finalised.

Benefits/Sensitivities

21. Anxiety surrounding the reassignment and appointment processes is likely to be high, particularly for staff whose units may be reallocated across the two organisations, are in non-ongoing positions, are on temporary transfer, or occupy positions with higher duty allowance. Mitigation strategies for these groups will be developed once the structure has been finalised and the impact for different groups and individuals can be assessed.
22. Some ACT Health staff currently have access to Eligible Public Hospital and Ambulance (EPHA) salary packaging benefits under the *Fringe Benefits Tax Assessment Act 1986* (the Act). The separation of ACT Health into two organisations from October 2018 will establish a new context in which the application of the ATO interpretation of the Act will need to be considered. Work is currently underway to determine the number and nature of this impact on staff. There is potential for this to become a considerable issue for placement of staff within the new organisations, as some staff are likely to lose access to these benefits.
23. Current staff have also recently been advised that all permanent recruitment and non-ongoing recruitment past 30 November 2018, on the corporate side of the organisation only, now requires approval from the Transition Team before proceeding. This is creating some uncertainty for individuals and Executive Directors, but is considered a necessary measure to ensure that only essential functions are being filled and sufficient and appropriate roles will be available for all existing permanent staff under the new arrangements.
24. Developing a robust process for staff allocation will enable the transition to occur more smoothly, will minimise disruption and ensure procedural fairness. Once a process is agreed, this will be communicated to staff and their representatives to provide clarity, manage expectations and enable staff to adequately prepare.

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Communications, media and engagement implications

25. The organisational separation will attract media attention. A communication strategy is being developed with assistance from the Communications Unit and further proactive communications and media content will be developed as required.

Signatory Name:	Michael De'Ath	Phone:	6205 0823
	Director General, ACT Health		
Action Officer:	Catherina O'Leary	Phone:	6207 5391
	Director, Transition Office		

Attachments

Attachment	Title
Attachment A	Program Management Plan and Key Milestones
Attachment B	Change Plan on a Page
Attachment C	Draft design principles

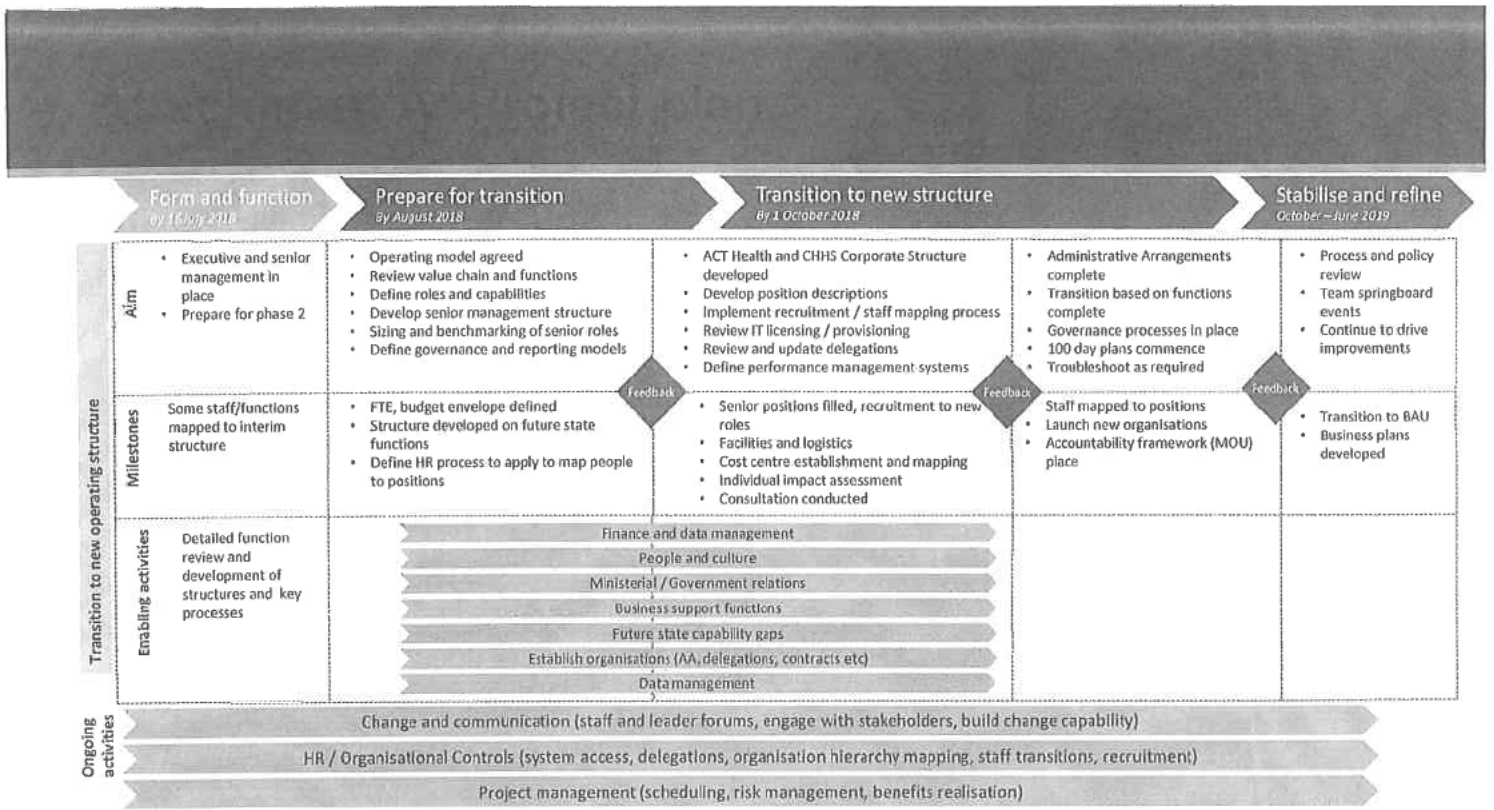
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ATTACHMENT A: Key Milestones



TRANSITION

		2018			
KEY ACTIVITIES		JULY	AUGUST	SEPTEMBER	OCTOBER
FOUNDATION	Form and Function structure Implemented	16/07			
	Nous Group Report finalised	20/07			
	Transition Governance Group Established – First Meeting	25/07			
	Target Operating Model completed and endorsed				
	• Research Business Model Options completed		06/08		
	MOU Complete				
	• Executive agreement on framework		06/08		
	• Draft MOU completed		09/08		
	Package and present to Minister for Health and Wellbeing and Head of Service				
	• Administrative arrangements		10/08		
	• MOU		10/08		
	• Recruitment approach		10/08		
	• Governance framework		10/08		
	Agreement from Minister for Health and Wellbeing		13/08		
	Agreement from Chief Minister on Administrative Arrangements		17/08		
STRUCTURE & FUNCTION	Macro Organisational Structure				
	• Draft revised structure completed		17/08		
	• Staff consultation commence		17/08		
	• Staff consultation completed			31/08	
	Micro Organisational Structure				
	• Draft revised structure completed			03/09	
	• Staff consultation commence			04/09	
	• Staff consultation completed			18/09	
	Finance				
	• Working group established	05/07			
• Cost centres established			21/09		
• System and process changes underway				28/09	
ENABLING FUNCTION	HR				
	• Working Group established	20/06			
	• Position descriptions developed				28/09
	• Appointment process implemented				28/09
	• Ongoing appointment process				ONGOING
	• Organisational structures completed				28/09
	• Delegation Manual completed				28/09
	• System and process changes underway				28/09
	Logistics				
	• Working Group established	20/07			
	• Accommodation Plan (physical movement of staff) completed			14/09	
	• Business support (parking, fleet, security) operational				28/09
	• Systems and process changes underway				28/09
	ICT				
	Working Group established	20/07			
	Systems and process changes underway				28/09
	Data and Reporting				
	• Working Group established	20/07			
	• Systems and process changes underway				28/09
	Policy				
• Working Group established	20/07				
• Systems and process changes underway				28/09	
Culture and Change Management					
• First Leadership Workshop (recurrent every 2 weeks)		14/08			
• Executive Workshop	19/07	18/07			
Communication and Change Management activities				01/10	
Go Live				01/10	
Transition to Business as usual				ONGOING	





ATTACHMENT B: CHANGE PLAN ON A PAGE

TRANSITION

Change Management Plan on a Page

Where we are	<p>Change management is a key requirement to the successful design, establishment and transition of ACT Health to two organisations. Historically, large change initiatives in ACT Health have presented problems due to:</p> <ul style="list-style-type: none"> • Change being driven from the top down with minimal engagement and involvement by staff, middle managers and stakeholders • Previous changes to work practices and systems not fully implemented or followed through due to changed priorities, leading to cynicism about whether this change will be enduring • Changes in executive sponsorship resulting in frequent changes of direction and loss of momentum at critical times. 	Where we want to be	<p>The goals of the Transition Change Management Strategy are to:</p> <ul style="list-style-type: none"> • Engage staff in the design of the two organisations, in particular the core corporate support functions • Minimise disruption to operations through careful planning and communication • Ensure stakeholders are engaged in key decisions relating to the transition. <p>Key principles applied in the development of this strategy include:</p> <ul style="list-style-type: none"> • Reflecting an understanding of the magnitude of change required (roles, people and processes impacted) • Reflecting an understanding of the ability of individuals to comprehend and adopt the changes required.
Strategy and approach			
Case for change	<ul style="list-style-type: none"> • Create a compelling vision and case for change through consultation with stakeholders and identify benefits to staff, community and service providers. • Visible executive sponsorship of the need to need to change. 	Stakeholder engagement	<ul style="list-style-type: none"> • Develop a stakeholder engagement strategy that builds on existing relationships and engagement mechanisms • Create opportunities for stakeholders to provide feedback and input into design of core functions and processes. • Keep stakeholders informed of program progress.
Communication	<ul style="list-style-type: none"> • Develop a communication strategy that applies the principles of regular, small communications delivered by the preferred sender. • Communication of key information according to project phase and phase of change acceptance. Ensuring content is relevant for specific audiences and delivered through appropriate existing channels. • Create a sense of 'new beginnings' through positive messaging of change benefits and case study examples. 	Change interventions	<ul style="list-style-type: none"> • Change interventions will be designed and implemented to support staff through the stages of change, and in particular where there are areas that are more highly impacted by changes of structure, process or system. • Change impact analysis will determine specific areas that require additional support to manage the extent of change. • Provide executives and line managers with coaching and support in leading change.

ATTACHMENT C**DRAFT DESIGN PRINCIPLES**

The principles guiding the design of the two ACT Health organisations include:

- There will be an increased focus on person-centred service outcomes.
- The Directorate will be focussed on whole of government health strategy and policy, assets and system performance.
- Canberra Hospital and Health Services (CHHS) will be accountable for operational service delivery, quality and standards management.
- CHHS will be empowered with full responsibility to provide health care service delivery to national benchmarks, with transparency of end-to-end financial and service performance.
- Administrative Arrangements will provide transparency in accountabilities. Single point accountability for outcomes will be established while maintaining shared responsibility for the health system.
- Relationships with service users and service delivery partners will be clearer.
- There will be an increased focus on quality outcomes for all functions. Non-value adding activities will be eliminated where possible.
- Governance frameworks and systems will assure alignment with the approved risk appetite.
- Spans and layers of control will be optimised to be more appropriate for each organisation's size and focus.
- There will be an increased focus and importance placed on the data and information management capability.
- There will be an increased focus in leadership capability, differentiated from technical/clinical expertise.

GBC18/220

Portfolio/s: Mental Health**ISSUE: ACT HEALTH ORGANISATIONAL REFORM****Talking points:**

- This reform will bring ACT Health closer in line with other Australian jurisdictions, which have structurally separated their clinical services delivery from their departments of health.
- This is an essential evolution for our growing population and expanding health system, and will bring greater clarity about the distinct roles and responsibilities of frontline staff and corporate staff.
- Staff who deliver frontline health services to the Canberra community will come under the umbrella of the distinct health delivery organisation.
- There will be a separate organisation responsible for strategic policy and planning which will set the strategic direction for health services in the ACT.
- Both organisations will continue ACT Health's commitment to the health of our community, as well as a commitment to quality, innovation, engagement and accountability.
- The separation will enable a clearer focus on efficiency and effectiveness for clinical operations, and free up capacity within the Health Directorate to undertake core strategy and system management functions.

Impacts for Patients/Consumers

- These proposed changes are primarily administrative in nature at this stage and are being developed with careful consideration to ensure that there will be no negative impacts on the services that we offer.
- The restructure will be fully implemented from 1 October 2018, but the transition will be a seamless one and people visiting one of the three public hospitals, our popular walk in centres or in any way accessing the many community based health services that we offer will not experience any disruption as a result of this announcement.
- The restructure will bring greater efficiencies for clinical and medical staff, and is being designed to improve service delivery and further reinforce the goals of the Territory-wide Health Services framework –person centric and

Cleared as complete and accurate: 04/04/2018
Cleared by: Executive Director Ext: 59010
Information Officer name: Jodie Chamberlain
Contact Officer name: Jodie Chamberlain Ext: 59010
Lead Directorate: Health

community focused care, enhanced preventive health and improved Hospital services.

Impacts for Staff

- An ACT Health Organisational Reform Group, comprising the ACT Health Deputy Directors-General, has been established to guide planning and delivery of the new structure. This group is being supported by a new transition team, which commenced work recently. The team includes representatives from both the clinical and corporate sides of ACT Health. Additional human resources, industrial relations and legal advice will be brought into the team progressively. The team will work out of the Bowes Street building.
- I would like to reassure all ACT Health employees that staff will be kept informed on development of the new structure. This will include regular staff emails, staff forums at Bowes St and Canberra Hospital, monthly Executive Director briefings, and a dedicated transition page on the ACT Health intranet (currently under development). Staff are also encouraged to email healthreferencegroup@act.gov.au with suggestions, questions or concerns.
- No staff losses are anticipated as a direct result of the reform announcement.
- Engagement with external stakeholders and unions will also occur.

Territory-wide Health Services Framework

- The clinical and service planning underway through the Territory-wide Health Services Framework will remain a key priority for government and we will continue to realign the governance of the Canberra Hospital and Health Service (CHHS), establish clinical Centres, which will group clinical services through Centre Service Plans and Specialty Service Plans.
- This is a critical element of the overall Government priority to increase access to specialist health services in the ACT, both in the hospitals and in the community.
- The Territory-wide Health Services Framework aims to ensure ACT Health's delivery of an integrated and whole-of-system service delivery model to provide true person- and family-centred care. This is an exciting opportunity and staff have been strongly encouraged to provide feedback on the proposed grouping of Centres and Service Streams, and in the

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subsequent implementation of these important changes. The work of this ACT Health Organisational Reform Group will consider this already announced reform path and will ensure that the wider organisational reforms being considered are well aligned.

- Due to the proposed timing of the restructure (1 October 2018), it is anticipated that while work continues refining the Centres and Specialty Service Plans, implementation of these Framework items will be phased in from July 2018 to take full advantage of the development of the two new organisations and the recruitment of a new leadership team.

Director-General Position

- I would like to advise that Mr Michael De'Ath commenced on Monday 9 April 2018 as the interim Director-General, ACT Health Directorate while the recruitment process for a new Director-General and new senior executive positions is underway.
- As I noted during my announcement of the reform in March, Ms Nicole Feely, the ACT Health Director-General at the time, has advised the government that she will pursue new opportunities, having successfully led ACT Health over the past three years and positioned the organisation to take this important next step in its transformation.
- I thank Ms Feely for her commitment and focus. She has been instrumental in beginning this reform process within ACT Health, transforming strategy and positioning ACT Health for a sustainable financial future.
- Her strategic insight and operational expertise has skilfully repositioned the Directorate for the transition to a truly person-centred, integrated health service. I thank Nicole and wish her every success.

Key Information

- On 23 March 2018 the ACT Government announced a decision to separate ACT Health into two distinct organisations. From 1 October 2018, the ACT Government will separate operational health services from policy and planning functions.
- There will be one organisation solely responsible for ACT Health's clinical operations. It will focus on the operational delivery of quality health services to our growing community.
- There will be a second organisation responsible for strategic policy and planning. This will set the strategic direction for health services in the ACT.

Background Information – may not be suitable for public disclosure

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QUESTION TIME BRIEF

- Media articles reporting on the restructure, and internal government communications have used the terms “Organisation” “Service” “Agency” and “Directorate” interchangeably, leading to some possible confusion regarding the exact nature and legal status of the two distinct areas.
- Further, media articles and communications have reference to either two new “directors-general”; two new “executive positions”; “the current Director-General position will no longer exist from 1 October 2018”.
- A recent freedom of information request may see the publication of reports prepared for ACT Health and Minister Fitzharris outlining consideration of Directorate governance structures.
- The recent Accreditation Audit highlighted governance across the Directorate as an area for improvement.

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QUESTION TIME BRIEF

GBC18/221

Portfolio/s: Health & Wellbeing**ISSUE: ACT HEALTH ORGANISATIONAL REFORM****Talking points:**

- This reform will bring ACT Health closer in line with other Australian jurisdictions, which have structurally separated their clinical services delivery from their departments of health which have their focus as policy and planning regulatory functions.
- This is an essential evolution for our growing population and expanding health system, and will bring greater clarity about the distinct roles and responsibilities of frontline staff and corporate staff.
- Staff who deliver frontline health services to the Canberra community will come under the umbrella of the distinct health delivery organisation.
- There will be a separate organisation responsible for strategic policy and planning which will set the strategic direction for health services in the ACT.
- Both organisations will continue ACT Health's commitment to the health of our community, as well as a commitment to quality, innovation, engagement and accountability.
- The separation will enable a clearer focus on efficiency and effectiveness for clinical operations, and free up capacity within the Health Directorate to undertake core strategy and system management functions.

Governance and Consultation

- Work is already underway in preparation for the formation of two organisations, which are planned to commence on 1 October 2018. The interim Director General has commenced a body of work to:
 - define the principles that will underpin the establishment of the two organisations,
 - conduct research into options for the relationship between the governance of the new entities,
 - seek professional advice on options, and

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QUESTION TIME BRIEF

- most importantly engage with staff and stakeholders throughout the process to ensure that we arrive at a model that will work on the ground for both staff and ACT Health consumers.
- An ACT Health Organisational Reform Reference Group, comprising the ACT Health Deputy Directors-General, has been established to guide planning and delivery of the new structure. This group is being supported by a new transition team, which commenced work recently. The team includes representatives from both the clinical and corporate sides of ACT Health. Additional human resources, industrial relations and legal advice will be brought into the team progressively. The team will work out of the Bowes Street building.
- The planning process will include seeking recommendations on the relationship between the service delivery organisation and the planning and policy organisation. It is essential that this relationship supports a model providing effective governance, management and accountability.
- The transition process will include consultation with staff, stakeholders and the community. This provides an important opportunity for these groups to contribute their expertise, recommendations and issues for consideration by the Organisational Reform Reference Group.
- Our goal is to enable and encourage staff, stakeholders and the community to invest in ownership of this reform.

Impacts for Patients/Consumers

- These proposed changes are primarily administrative in nature at this stage and are being developed with careful consideration to ensure that there will be no negative impacts on the services that we offer.
- The organisational reform will be fully implemented from 1 October 2018, but the transition will be a seamless one and people visiting one of the three public hospitals, our popular walk in centres or in any way accessing the many community based health services that we offer will not experience any disruption as a result of this announcement.
- The organisational reform will bring greater efficiencies for clinical and medical staff, and is being designed to improve service delivery and further reinforce the goals of the Territory-wide Health Services framework – person centric and community focused care, enhanced preventive health and improved Hospital services.

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Impacts for Staff

- I would like to reassure all ACT Health employees that staff will have the opportunity to be involved in the development of the new structure. Regular staff emails, staff forums at Bowes St and Canberra Hospital, monthly Executive Director briefings, and a dedicated transition page on the ACT Health intranet (launched on 6 April 2018) will keep staff informed.
- Staff are also encouraged to email healthreferencegroup@act.gov.au with suggestions, questions or concerns.
- No staff losses are anticipated as a direct result of the reform announcement.

Territory-wide Health Services Framework

- The clinical and service planning underway through the Territory-wide Health Services Framework will remain a key priority for government and we will continue to realign the governance of Canberra Hospital and Health Service (CHHS), establish clinical Centres, which will group clinical services through Centre Service Plans and Specialty Service Plans.
- This is a critical element of the overall Government priority to increase access to specialist health services in the ACT, both in the hospitals and in the community.
- The Territory-wide Health Services Framework aims to ensure ACT Health's delivery of an integrated and whole-of-system service delivery model to provide true person- and family-centred care. This is an exciting opportunity and staff have been strongly encouraged to provide feedback on the proposed grouping of Centres and Service Streams, and in the subsequent implementation of these important changes. The work of this ACT Health Organisational Reform Group will consider this already announced reform path and will ensure that the wider organisational reforms being considered are well aligned.
- Due to the proposed timing of the organisational reform (1 October 2018), it is anticipated that while work continues refining the Centres and Specialty Service Plans, implementation of these Framework items will be phased in from July 2018 to take full advantage of the development of the two new organisations and the recruitment of a new leadership team.

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Key Information

- On 23 March 2018 the ACT Government announced a decision to separate ACT Health into two distinct organisations. From 1 October 2018, the ACT Government will separate operational health services from policy and planning functions.
- There will be one organisation solely responsible for ACT Health's clinical operations. It will focus on the operational delivery of quality health services to our growing community.
- There will be a second organisation responsible for strategic policy and planning. This will set the strategic direction for health services in the ACT.

Cleared as complete and accurate:	04/04/2018	
Cleared by:	Executive Director	Ext: 59010
Information Officer name:	Jodie Chamberlain	
Contact Officer name:	Jodie Chamberlain	Ext: 59010
Lead Directorate:	Health	

Background Information – may not be suitable for public disclosure

- Media articles reporting on the organisational reform, and internal government communications have used the terms “Organisation” “Service” “Agency” and “Directorate” interchangeably, leading to some possible confusion regarding the exact nature and legal status of the two distinct areas.
- Further, media articles and communications have reference to either two new “directors-general”; two new “executive positions”; “the current Director-General position will no longer exist from 1 October 2018”.
- A recent freedom of information request may see the publication of reports prepared for ACT Health and Minister Fitzharris outlining consideration of Directorate governance structures.
- The recent Accreditation Audit highlighted governance across the Directorate as an area for improvement.

•



Cleared as complete and accurate: 04/04/2018
Cleared by: Executive Director Ext: 59010
Information Officer name: Jodie Chamberlain
Contact Officer name: Jodie Chamberlain Ext: 59010
Lead Directorate: Health

QUESTION TIME BRIEF

GBC18/279

Portfolio/s: Health & Wellbeing**ISSUE: ACT HEALTH ORGANISATIONAL UPDATE****Talking points:**

- The proposal to restructure ACT Health was discussed and developed over a number of months and involved a number of phone and in-person conversations between myself and the Minister for Mental Health. Noting the informal nature of some of these discussions I am unable to provide a specific date for when the matter was first discussed with me.
- The changes to ACT Health I announced in March this year will bring ACT Health closer in line with other Australian jurisdictions, which have structurally separated their clinical services delivery from their departments of health which focus on policy, planning and regulatory functions.
- Other jurisdictions have changed in recent years to a model which separates frontline delivery from policy and planning, and the ACT will look to these examples and develop a model that works for the ACT Health system – now and into the future.
- This is an essential evolution for our growing population and expanding health system, and will bring greater clarity about the distinct roles and responsibilities of frontline staff and corporate staff.
- Staff who deliver frontline health services to the Canberra community will come under the umbrella of the separate health services delivery organisation.
- There will be a second separate organisation responsible for strategic policy and planning which will set the strategic direction for health services in the ACT.
- Both organisations will continue ACT Health's commitment to the health of our community, as well as a commitment to quality, innovation, engagement and accountability.
- The separation will enable a clearer focus on efficiency and effectiveness for clinical operations, and free up capacity within the Health Directorate to undertake core strategy and system management functions.

Cleared as complete and accurate:	07/05/2018	
Cleared by:	Director-General	Ext: 79532
Information Officer name:	Michael De'Ath	
Contact Officer name:	Nicole Kefford	Ext: 59371
Lead Directorate:	Health	

Governance and Consultation

- Work is already underway in preparation for the formation of two organisations, which are planned to commence on 1 October 2018. The interim Director-General has commenced a body of work to:
 - Seek expert independent review of the current organisation's form and function;
 - define the principles that will underpin the establishment of the two organisations;
 - conduct research into options for the relationship between the governance of the new organisations;
 - seek professional and extra-jurisdictional advice on options; and
 - most importantly, engage with staff and stakeholders throughout the process to ensure that we arrive at a model that will work on the ground for both staff and ACT Health consumers.
- The planning process will include developing recommendations on the relationship between the service delivery organisation and the planning and policy organisation. It is essential that this relationship supports a model providing effective governance, management and accountability.
- The transition process will include ongoing engagement with staff, stakeholders and the community. This provides an important opportunity for these groups to contribute their expertise, recommendations and issues for consideration.
- As I explained to ACT Health staff at the two staff forums last week my goal is to enable and encourage staff, stakeholders and the community to invest in this change process.
- I am pleased to say that that process of engagement has started - with my discussions with staff and the many conversations the Interim Director-General and his team are having across all parts of the organisation.

Impacts for Patients/Consumers

- These proposed changes are primarily administrative in nature at this stage and are being developed with careful consideration to ensure that there will be no negative impacts on the services that we offer.

Cleared as complete and accurate:	07/05/2018	
Cleared by:	Director-General	Ext: 79532
Information Officer name:	Michael De'Ath	
Contact Officer name:	Nicole Kefford	Ext: 59371
Lead Directorate:	Health	

QUESTION TIME BRIEF

- The organisational change will be fully implemented from 1 October 2018, and the transition will be a seamless one and people visiting one of the three public hospitals, our popular walk in centres or in any way accessing the many community based health services that we offer will not experience any disruption as a result of this announcement.
- The organisational change will bring greater efficiencies for clinical and medical staff, and is being designed to improve service delivery and further reinforce the goals of the Territory-wide Health Services framework – person centric and community focused care, enhanced preventive health and improved Hospital services.

Impacts for Staff

- I would like to reassure all ACT Health employees that staff will be engaged in relation to the development of the new structure. Regular staff emails, and as I mentioned the staff forums at Bowes Street and Canberra Hospital which have commenced, monthly Executive Director briefings, and a dedicated transition page on the ACT Health intranet (launched on 6 April 2018) will keep staff informed.
- I do not anticipate that there will be any significant changes to staff members below executive levels through this process.
 - Should it be determined that there could potentially be direct changes for other staff, appropriate consultation with those staff and their unions will be undertaken on any proposals before any decisions are made.
 - The Interim Director-General has advised that, if required, any impacted staff will be personally advised prior to any formal release of a document for consultation.
 - Every possible opportunity will be provided to staff and unions to provide feedback on the proposed changes to the organisational reforms.
 - Final decisions on new organisational structures will only be taken once there has been appropriate consultation.
- Staff are also encouraged to email healthreferencegroup@act.gov.au with suggestions, questions or concerns.

Cleared as complete and accurate: 07/05/2018
Cleared by: Director-General Ext: 79532
Information Officer name: Michael De'Ath
Contact Officer name: Nicole Kefford Ext: 59371
Lead Directorate: Health

Territory-wide Health Services Framework

- The clinical and service planning underway through the Territory-wide Health Services Framework will remain a key priority for government and we will continue to realign the governance of Canberra Hospital and Health Service (CHHS).
- This is a critical element of the overall Government priority to increase access to specialist health services in the ACT, both in the hospitals and in the community.
- The Territory-wide Health Services Framework aims to ensure ACT Health's delivery of an integrated and whole-of-system service delivery model to provide true person- and family-centred care. The wider organisational reforms being considered will be well aligned with the Territory-wide Health Services Framework priorities.
- Due to the proposed timing of the organisational change (1 October 2018), it is anticipated that while work continues in refining the Specialty Service Plans and structure of CHHS, implementation of these Framework items will be phased in from late 2018 to take full advantage of the development of the two new organisations and the recruitment of a new leadership team.

Director-General Position

- Mr Michael De'Ath commenced in the role of interim Director-General, ACT Health Directorate on Monday 9 April 2018, while the recruitment process for a new Director-General and new senior executive positions is underway.
- As I noted during my announcement of the reform in March 2018, Ms Nicole Feely, the ACT Health Director-General at the time, has advised the government that she wishes to pursue new opportunities.

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Information Officer name:	Michael De'Ath	
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- The recent Accreditation Audit highlighted governance across the Directorate as an area for improvement.

- [REDACTED]

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Cleared by: Director-General Ext: 79532
Information Officer name: Michael De’Ath
Contact Officer name: Nicole Kefford Ext: 59371
Lead Directorate: Health

QUESTION TIME BRIEF

GBC18/280

Portfolio/s: Mental Health**ISSUE: ACT HEALTH ORGANISATIONAL UPDATE****Talking points:**

- The changes to ACT Health announced by myself and Minister Fitzharris in March this year will bring ACT Health closer in line with other Australian jurisdictions, which have structurally separated their clinical services delivery from their departments of health which have their focus as policy, planning and regulatory functions.
- Other jurisdictions have changed in recent years to a model which separates frontline delivery from policy and planning, and the ACT will look to these examples and develop a model that works for the ACT Health system – now and into the future.
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Cleared by:	Director-General	Ext: 79532
Information Officer name:	Michael De'Ath	
Contact Officer name:	Nicole Kefford	Ext: 59371
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QUESTION TIME BRIEF

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- The planning process will include developing recommendations on the relationship between the service delivery organisation and the planning and policy organisation. It is essential that this relationship supports a model providing effective governance, management and accountability.
- The transition process will include ongoing engagement with staff, stakeholders and the community. This provides an important opportunity for these groups to contribute their expertise, recommendations and issues for consideration.
- As Minister Fitzharris explained to ACT Health staff at the two staff forums last week the goal is to enable and encourage staff, stakeholders and the community to invest in this change process.
- The process of engagement has started with staff forums and the many conversations the Interim Director-General and his team are having across all parts of the organisation.

Impacts for Patients/Consumers

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Information Officer name:	Michael De'Ath	
Contact Officer name:	Nicole Kefford	Ext: 59371
Lead Directorate:	Health	

QUESTION TIME BRIEF

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- I do not anticipate that there will be any significant changes to staff members below executive levels through this process.
 - Should it be determined that there will be impacts on staff members (below executive levels), full and appropriate consultations will ensue.
 - This will involve consultations with unions and staff members impacted.
 - The Interim Director General has advised that, if required, any impacted staff will be personally advised prior to any formal release of a document for consultation.
 - Every possible opportunity will be provided to staff and unions to provide feedback on the proposed changes to the organisational reforms.
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- As I noted during my announcement of the reform in March 2018, Ms Nicole Feely, the ACT Health Director-General at the time, has advised the government that she wishes to pursue new opportunities.

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Information Officer name:	Michael De'Ath	
Contact Officer name:	Nicole Kefford	Ext: 59371
Lead Directorate:	Health	

Key Information

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- [REDACTED]

Cleared as complete and accurate: 07/05/2018
Cleared by: Director-General Ext: 79532
Information Officer name: Michael De'Ath
Contact Officer name: Nicole Kefford Ext: 59371
Lead Directorate: Health

QUESTION TIME BRIEF

GBC18/334

Portfolio/s: Mental Health**ISSUE: ACT HEALTH ORGANISATIONAL UPDATE****Talking points:**

- The proposal to restructure ACT Health was considered over a number of months and involved a range of conversations between myself and the Minister for Health and Wellbeing.
- Noting the informal nature of some of these discussions I am unable to provide a specific date for when the matter was first discussed with me.
- The changes to ACT Health announced in March this year will bring ACT Health closer in line with other Australian jurisdictions, which have structurally separated their clinical services delivery from their departments of health which focus on policy, planning and regulatory functions.
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Cleared as complete and accurate: 04/06/2018
Cleared by: Director-General
Information Officer name: Michael De'Ath
Lead Directorate: Health

Ext: 79532

QUESTION TIME BRIEF

Governance and Consultation

- Work is already underway in preparation for the formation of two organisations, which are planned to commence on 1 October 2018.
- The Interim Director-General has commenced a body of work around planning for and leading the transition process, which includes a review of the current organisation's form and functions.
- In addition, the Head of Service is leading planning work to define the principles that will underpin the establishment of the two new organisations and their governance relationship. This work involves meeting with other jurisdictions to discuss their models in more detail, which will inform our planning.
- More importantly, we are planning a strong staff and stakeholder communications and engagement process, to ensure that we deliver a model that will work on the ground for both staff and ACT Health consumers.
- The planning process will include developing recommendations on the relationship between the service delivery organisation and the planning and policy organisation. It is essential that this relationship supports a model providing effective governance, management and accountability.
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Cleared by: Director-General Ext: 79532
Information Officer name: Michael De'Ath
Lead Directorate: Health

Impacts for Staff

- I would like to reassure all ACT Health employees that staff will be engaged in the development of the new structure.
- We are planning ongoing staff communications, including regular emails, regular staff forums and Executive Director briefings, and a dedicated transition page on the ACT Health intranet (launched on 6 April 2018). These initiatives will be aimed at ensuring that all staff are informed and engaged.
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- This is a critical element of the overall Government priority to increase access to specialist health services in the ACT, both in the hospitals and in the community.
- The Territory-wide Health Services Framework aims to ensure ACT Health's delivery of an integrated and whole-of-system service delivery model to provide true person- and family-centred care. The wider organisational reforms being considered will be well aligned with the Territory-wide Health Services Framework priorities.

Cleared as complete and accurate: 04/06/2018
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Information Officer name: Michael De'Ath
Lead Directorate: Health

QUESTION TIME BRIEF

- Due to the proposed timing of the organisational change (1 October 2018), it is anticipated that while work continues in refining the Specialty Service Plans and structure of CHHS, implementation of these Framework items will be phased in from late 2018 to take full advantage of the development of the two new organisations and the recruitment of a new leadership team.

Director-General Position

- Mr Michael De'Ath commenced in the role of interim Director-General, ACT Health Directorate on Monday 9 April 2018, while the recruitment process for a new Director-General and Chief Executive Officer of Canberra Hospital and Health Services is underway. These positions have been advertised nationally, and close on 24 June 2018.

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Cleared by: Director-General Ext: 79532
Information Officer name: Michael De'Ath
Lead Directorate: Health

QUESTION TIME BRIEF

Key Information

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- The recent Accreditation Audit highlighted governance across the Directorate as an area for improvement.

- 

Cleared as complete and accurate: 04/06/2018
Cleared by: Director-General
Information Officer name: Michael De'Ath
Lead Directorate: Health

Ext: 79532

GBC18/353

Portfolio/s: Health & Wellbeing**ISSUE: ACT HEALTH ORGANISATIONAL UPDATE****Talking points:**

- The proposal to restructure ACT Health was considered over a number of months and involved a range of conversations between myself and the Minister for Mental Health.
- The ACT Health Directorate Executive Leadership Team, the DG/DDG Strategy Group, will be overseeing the organisational restructure. This is the Group previously referred to as the “Organisational Reform Reference Group”.
- I can advise that in late December 2017, I received a report prepared by PwC outlining broadly the organisational and governance structures of Australia’s State and Territory health systems. This report confirmed that the ACT is an outlier in operating a single unified health structure.
- The changes to ACT Health I announced in March this year will bring ACT Health closer in line with other Australian jurisdictions, which have structurally separated their clinical services delivery from their departments of health which focus on policy, planning and regulatory functions.
- The ACT will look at these examples and develop a model that works for the ACT Health system – now and into the future. We will take into account the unique nature of the ACT in developing a model.
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Information Officer name: Michael De’Ath
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Ext: 79532

QUESTION TIME BRIEF

- Both organisations will continue ACT Health's commitment to the health of our community, as well as a commitment to quality, innovation, engagement and accountability.
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QUESTION TIME BRIEF

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