

Our reference: **ACTHDFOI22-23.06**

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[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 ACT Health Directorate (ACTHD) originally on **Tuesday 20 September 2022** and rescoped on **Monday 26 September 2022**.

The rescoped application requested access to:

"I request all documents / correspondence held by the Ministerial & Governance Services (MAGS) and the Local Health Network (LHN) for Question On Notice 833"

I am an Information Officer appointed by the Director-General of ACT Health Directorate (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 **Tuesday 15 November 2022**.

I have identified 48 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 21 documents; and
- grant partial access to 27 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;
- The views of relevant third parties; and
- The *Human Rights Act 2004*.

Full Access

I have decided to grant full access to 21 documents at references 1, 4, 8, 10, 12, 17, 19, 22-23, 26-27, 29, 31, 34-39, 44 and 47.

Partial Access

I have decided to grant partial access to 27 documents at references 2-3, 5-7, 9, 11, 13-16, 18, 20-21, 24-25, 28, 30, 32-33, 40-43, 45-46 and 48. Redactions have been made to information that I consider, on balance, to be contrary to the public interest to disclose under the test set out in section 17 of the Act as the information contained in these folios are partially comprised of personal information.

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;
- Schedule 2, 2.1(a)(ii) contribute to positive and informed debate on important issues or matters of public interest;
- Schedule 2, 2.1(a)(iv) ensure effective oversight of expenditure of public funds; and
- Schedule 2, 2.1(a)(viii) reveal the reason for a government decision and any background or contextual information that informed the decision.

Public Interest Factors Favouring Non-Disclosure

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

- Schedule 2, Schedule 2.2 (a)(ii) prejudice the protection of an individual's right to privacy or any other right under the *Human Rights Act 2004*.

On balance, the factors favouring disclosure are outweighed by the factor favouring non-disclosure as the information would not provide any government information pertinent to your request. The personal information is of both ACT-Government and non-ACT Government employees' contact details and has not been disclosed as this could reasonably be expected to prejudice the protection of the individual's right to privacy. 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



Vivien Bevan
Head of Office
Office of the Director General
ACT Health Directorate

15 November 2022

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
<div style="background-color: black; width: 100px; height: 20px; margin: 0 auto;"></div> MLA	<i>"I request all documents / correspondence held by the Ministerial & Governance Services (MAGS) and the Local Health Network (LHN) for Question On Notice 833"</i>	ACTHDFOI22-23.06

Ref Number	Page Number	Description	Date	Status Decision	Factor	Open Access release status
1.	1 – 2	Email - FW: TASK: GBC22/367: Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	14 June 2022	Full Release		YES
2.	3 – 4	Email - RE: GBCHS22/172 REQUEST FOR INPUT: Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	20 June 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
3.	5 – 9	Email - RE: Advice required - QONs Calvary input	24 June 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
4.	10 – 12	Email - RE: CHS advice re QON 829 and 833 - 10 June 2022	27 June 2022	Full Release	Out of scope	YES

5.	13 – 18	Email - RE: Advice required - QONs Calvary input	27 June 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
6.	19 – 24	Email with attachment - CHS draft response QON 833 - Breakdown of wards	28 June 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
7.	25 – 29	Email - RE: CHS draft response QON 833 - Breakdown of wards	28 June 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
8.	30 – 31	Email - ACT Health 1213 - Requesting Input - Assembly matter - Question on Notice 833 - Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce	28 June 2022	Full Release		YES
9.	32 – 36	Email - Calvary requesting extension - QON 833 - Breakdown of wards	28 June 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
10.	37	Email - Delay on Calvary input - Minister for Health - QON 833 - Breakdown of all wards at Canberra Hospital and Calvary	30 June 2022	Full Release		YES
11.	38	Email - Delay on Calvary Input for QON833	30 June 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
12.	39 – 54	Email and attachment - CHS INPUT - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley	5 July 2022	Full Release		YES
13.	55 – 57	Email - RE: ACT Health - Legislative Assembly Qons - 829, 830, 833 - status update	14 July 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
14.	58 – 62	Email - RE: Calvary requesting extension - QON 833 - Breakdown of wards	14 July 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
15.	63 – 64	Email - RE: ACT Health - Legislative Assembly Qons - 829, 830, 833 - status update	14 July 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
16.	65 – 70	Email - RE: Calvary requesting extension - QON 833 - Breakdown of wards	14 July 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
17.	71	Email - Status of ACTHD QONs 862 & 833	15 July 2022	Full Release	Out of scope	YES
18.	72 – 75	Email - RE: ACT Health 1214 - Requesting Input - Assembly matter - Question on Notice 833 -	25 July 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES

		Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce				
19.	76 – 78	Email - URGENT - Update on QONs 805, 830, 835 & 833	29 July 2022	Full Release	Out of scope	YES
20.	79 – 81	Email - RE: Response QoN 833.docx	4 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
21.	82 – 88	Email - RE: Further questions - inconsistencies in Responses to QoN 805 and QoN 833.docx	10 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
22.	89 – 93	Email - VERY URGENT - Update on QONs 830, 835, 833 & QTON	15 Aug 2022	Full Release	Out of scope	YES
23.	94 – 95	Email - RE: UGENT ADVICE - Status of QON 830 and QON 805	15 Aug 2022	Full Release	Out of scope	YES
24.	96 – 102	Email - RE: ACTHEALTH1214 - Further questions - Response QoN 833.docx	15 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy Out of scope	YES
25.	103 – 104	Email - RE: Calvary reviewed - FW: QON833 All wards	19 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
26.	105 – 106	Email - URGENT UPDATED ACTHD input QON 805	22 Aug 2022	Full Release	Out of scope	YES
27.	107 – 108	Email - RE: URGENT - ACTHD Updates for QONS 805 & 830	22 Aug 2022	Full Release	Out of scope	YES
28.	109 – 113	Email with attachment - RE: Further clarification - RE: QON833	26 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
29.	114 – 116	Email - RE: For URGENT clearance please - QoN 833 - Minister for Health - Ward Breakdowns (A35907053)	26 Aug 2022	Full Release		YES
30.	117 – 118	Email - RE: GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	29 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
31.	119 – 135	Email and attachment - FOR MO: GBC22/367 - Minister for Health - QON 833 - breakdown of	29 Aug 2022	Full Release		YES

		all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley				
32.	136	Email - RE: OVERDUE: GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	29 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
33.	137 – 138	Email – RFA: GBC22/367 - Minister for Health - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	29 Aug 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
34.	139 – 146	Email and attachment - RFA - GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley	31 Aug 2022	Full Release		YES
35.	147 – 160	Email with attachments - RFA - GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	31 Aug 2022	Full Release		YES
36.	161 – 163	Email with attachment - RE: RFA - GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley	31 Aug 2022	Full Release		YES
37.	164 – 165	Email - FW: RFA GBCHS22/172: GOVERNMENT & STAKEHOLDER RELATIONS - Government & Assembly Matters - Minister for Health - Assembly Sitting 7-9 June 2022 - Input to ACTHD - Question on Notice (QoN) 833 - Breakdown of Wards	31 Aug 2022	Full Release		YES

38.	166 – 167	Email - CHS Input: RFA - GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	31 Aug 2022	Full Release		YES
39.	168 – 169	Email - RE: RFA - GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	1 Sep 2022	Full Release		YES
40.	170 – 173	Email - FW: Minister Office request - ACTHEALTH 1214 - Further clarification - RE: QON 833	14 Sep 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
41.	174 – 176	Email - RE: FOLLOW UP: RFA - GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	16 Sep 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
42.	177	Email - RE: QON 833	19 Sep 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
43.	178 – 182	Email - RE: FOR CLEARANCE - GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	19 Sep 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
44.	183 – 188	Email with attachment - Ready to progress: GBC22/367: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – Castley	19 Sep 2022	Full Release		YES

45.	189 – 195	Email with attachment - RE: RFA GBCHS22/172: GOVERNMENT & STAKEHOLDER RELATIONS - Government & Assembly Matters - Minister for Health - Assembly Sitting 7-9 June 2022 - Input to ACTHD - Question on Notice (QoN) 833 - Breakdown of Wards	20 Sep 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
46.	196 – 200	Email with attachment - RE: URGENT: GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital	20 Sep 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
47.	201 – 212	Email with attachment - URGENT FOR MO - GBC22/367 - Minister for Health - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley	20 Sep 2022	Full Release		YES
48.	213	Email - RE: URGENT: GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital	20 Sep 2022	Partial Release	Schedule 2, 2.2 (a)(ii) Privacy	YES
Total Number of Documents						
48						

From: Kelsey, Victoria (Health) on behalf of HSPE
Sent: Tuesday, 14 June 2022 3:42 PM
To: LHN Coord
Subject: FW: TASK : GBC22/367 : Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary ~ Castley.tr5

Importance: High

Categories: Sinead, Response back required

OFFICIAL

Hi team,

Can you please request information from Calvary to answer the following QoN.

MS CASTLEY: To ask the Minister for Health—Can the Minister provide a breakdown of all wards at the

(a) Canberra Hospital and

(b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and

(C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.

Kind regards

Victoria Kelsey | Executive Officer
Health System Planning and Evaluation, ACT Health Directorate
Level 3, 2-6 Bowes Street, Woden ACT
Ph: Via Microsoft Teams | Email: Victoria.Kelsey@act.gov.au
health.act.gov.au



From: Warne, Hayley (Health) <Hayley.Warne@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Friday, 10 June 2022 4:09 PM
To: HSPE <HSPE@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: TASK : GBC22/367 : Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi team,

Please see attached QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital for your response using the template and costing tool provided in the TRIM container GBC22/367.

MS CASTLEY: To ask the Minister for Health—Can the Minister provide a breakdown of all wards at the

(a) Canberra Hospital and

(b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and

(C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.

Please return to MAGS (GovernmentBusinessHealth@act.gov.au) no later than **24 June 2022**.

EGM clearance must be provided upon submission to MAGS and placed in TRIM under container number (signature or email clearance).

If you have any questions please do not hesitate to Government Business.

[I have requested input from CHS.](#)

Kind regards,

Hayley Warne | Coordination Officer

Email: governmentbusinesshealth@act.gov.au

Ministerial and Government Services | Office of the Director-General | ACT Health Directorate

Level 5, 6 Bowes Street Phillip ACT 2606

health.act.gov.au

From: Canberra Health Services Ministerial
Sent: Monday, 20 June 2022 11:24 AM
To: GovernmentBusinessHealth
Subject: RE: GBCHS22/172 REQUEST FOR INPUT : Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Follow Up Flag: Follow up
Flag Status: Flagged

Categories: 02. QoN

OFFICIAL

Hi Haley

Just letting you know that this one may be a day or two late.

Will get it through to you as soon as it has been cleared.

Kind Regards

Kerryn Hunter

Directorate Liaison Officer | Canberra Health Services

Phone: 620 55030 | Mobile: [REDACTED] Email: chsdl@act.gov.au

Office of Rachel Stephen-Smith MLA | Minister for Health | ACT Government

Office of Emma Davidson MLA | Minister for Mental Health and Justice Health | ACT Government

From: Warne, Hayley (Health) <Hayley.Warne@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Friday, 10 June 2022 4:11 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: GBCHS22/172 REQUEST FOR INPUT : Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi team,

Please see attached QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital for your input.

MS CASTLEY: To ask the Minister for Health—Can the Minister provide a breakdown of all wards at the

(a) Canberra Hospital and

(b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and

(C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.

Please return to MAGS (GovernmentBusinessHealth@act.gov.au) no later than **20 June 2022**.

EGM clearance must be provided upon submission to MAGS.

If you have any questions please do not hesitate to Government Business.

Kind regards,

Hayley Warne | Coordination Officer

Email: governmentbusinesshealth@act.gov.au

Ministerial and Government Services | Office of the Director-General | ACT Health Directorate

Level 5, 6 Bowes Street Phillip ACT 2606

health.act.gov.au

From: LHN Coord
Sent: Friday, 24 June 2022 1:37 PM
To: Karri, Prathima (Health)
Cc: LHN Coord
Subject: RE: Advice required - QONs Calvary input

Follow Up Flag: Follow up
Flag Status: Completed

Categories: FYI

OFFICIAL

Hi Prathima,

As discussed Calvary input received.

	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Beds	19	19	19	18	18	18
ALOS	2.29	2.13	2.60	2.46	2.44	2.43
AVG Cost/Day	\$ 1,776	\$ 1,831	\$ 1,784	\$ 2,297	\$ 2,366	

Thanks
 Sinead

From: Karri, Prathima (Health) <Prathima.Karri@act.gov.au>
Sent: Friday, 24 June 2022 12:33 PM
To: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>
Subject: FW: Advice required - QONs Calvary input

OFFICIAL

Hi Sinead,

As discussed, can you please send me the response provided by CPHB.

Regards,
 Prathima,

Prathima Karri | Director, Health System and Services Data
 Data Analytics Branch
 Policy, Partnerships and Programs Division | ACT Health Directorate
 Phone: 02 512 49353 | Email: prathima.karri@act.gov.au



From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>

Sent: Tuesday, 21 June 2022 8:50 AM

To: White, Liam (Health) <Liam.White@act.gov.au>; Crimmins, Lucas (Health) <Lucas.Crimmins@act.gov.au>

Cc: ACTHealthPolicyPartnerships&Programs <ACTHealthPolicyPartnerships-Programs@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>

Subject: RE: Advice required - QONs Calvary input

OFFICIAL

Hi Lucas & Liam,

Out of Scope

We have consolidated a list of all QONs that involve Calvary. Would you mind reviewing questions in red in table below and getting back to us.

TRIM and QON No.	Questions	Lead	Comments
Out of Scope			

Out of Scope

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>21/06/2022 Mags sending to CHS, can DAB provide advice on if they can provide Calvary input?</p> <p>Clarity is required from CHS and DAB on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv)) • Does DAB hold data to answer questions a/b (v) and (xi)
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Out of Scope

Happy to discuss, give me a call.

Many thanks
Sinead

From: Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
 Sent: Monday, 20 June 2022 3:13 PM
 To: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
 Cc: HSPE <HSPE@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
 Subject: RE: Advice required - QOMs

Hi Sallyanne

MAGS will seek advice from CHS on what is requested below however can HSPE please reach out to DAB directly to seek advice.

MAGS does not coordinate/pull together information from internal business units, the expectation is that the lead line area consults internally as required.

Many thanks
Chadia

Chadia Rad | Senior Director, Ministerial and Government Services

Mobile: [REDACTED] Email: Chadia.Rad@act.gov.au

Ministerial and Government Services, Office of the Director-General | ACT Health Directorate

Level 5, 6 Bowes Street Phillip ACT 2606

health.act.gov.au



From: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>

Sent: Monday, 20 June 2022 2:32 PM

To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Cc: HSPE <HSPE@act.gov.au>; LHM Coord <LHMCoord@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>

Subject: FW: Advice required - QONs

OFFICIAL

Hi Kylie

See below our comments on these QONs in relation to clarification/advice required to assist in seeking Calvary responses. Are MAGS able to assist in seeking this information? Happy to discuss.

Thanks
Sallyanne

TRIM and QON No.	Questions	Lead	Comments
Out of Scope			

Out of Scope

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the</p> <p>(a) Canberra Hospital and</p> <p>(b) Calvary Public Hospital, including</p> <p>(i) a brief description of each ward,</p> <p>(ii) how many beds are in each ward,</p> <p>(iii) how many treatment spaces are in each ward,</p> <p>(iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift,</p> <p>(v) how many patients have been admitted to each ward in the last financial year,</p> <p>(vi) how many patients have been discharged from each ward in the last financial year,</p> <p>(vii) how many staff (headcount) have been recruited for each ward in the last financial year,</p> <p>(viii) how many staff (headcount) have separated from each ward in the last financial year,</p> <p>(ix) what was the budget allocated for each ward in the last financial year,</p> <p>(x) how much was spent by each ward in the last financial year and</p> <p>(xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from CHS and DAB on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv)) • Does DAB hold data to answer questions a/b (v) and (xi)
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Out of Scope

From: LHN Coord
Sent: Monday, 27 June 2022 11:59 AM
To: GovernmentBusinessHealth
Cc: LHN Coord; Rad, Chadia (Health); Pini, Sallyanne (Health)
Subject: RE: CHS advice re QON 829 and 833 - 10 June 2022

Categories: 02. QoN

OFFICIAL

Hi Kylie,

Can you confirm if you are waiting on advice from CHS on both QONs below, would it be possible to chase them for it?

We have confirmed with DAB that they can provide input to questions in green below the rest to come from Calvary (not yet requested).

Out of Scope

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the</p> <p>(a) Canberra Hospital and</p> <p>(b) Calvary Public Hospital, including</p> <p>(i) a brief description of each ward,</p> <p>(ii) how many beds are in each ward,</p> <p>(iii) how many treatment spaces are in each ward,</p> <p>(iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift,</p> <p>(v) how many patients have been admitted to each ward in the last financial year,</p> <p>(vi) how many patients have been discharged from each ward in the last financial year,</p> <p>(vii) how many staff (headcount) have been recruited for each ward in the last financial year,</p> <p>(viii) how many staff (headcount) have separated from each ward in the last financial year,</p> <p>(ix) what was the budget allocated for each ward in the last financial year,</p> <p>(x) how much was spent by each ward in the last financial year and</p> <p>(xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from CHS and DAB on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv)) • Does DAB hold data to answer questions a/b (v) and (x)
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Thanks

Sinead

Out of Scope

Out of Scope

From: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Sent: Monday, 20 June 2022 2:32 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Subject: FW: Advice required - QONs

OFFICIAL

Hi Kylie

See below our comments on these QONs in relation to clarification/advice required to assist in seeking Calvary responses. Are MAGS able to assist in seeking this information? Happy to discuss.

Thanks
Sallyanne

TRIM and QON No.	Questions	Lead	Comments
Out of Scope			

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from CHS and DAB on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv)) • Does DAB hold data to answer questions a/b (v) and (xi)
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From: White, Liam (Health)
Sent: Monday, 27 June 2022 5:02 PM
To: Clarke, Sinead (Health)
Cc: LHN Coord; Pini, Sallyanne (Health); Crimmins, Lucas (Health)
Subject: RE: Advice required - QONs Calvary input

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Coord Huddle

OFFICIAL

Hi Sinead,

As discussed, I've put together the code for the questions I noted we would cover on the below QONs. Lucas is checking my code but it will be good to get Calvary's response to test the similarity in the outputs.

I'll get back to you once we have tested the code properly.

Cheers

Liam White A/g Director, Government Business

Phone: 02 5124 6373 | Email: liam.white@act.gov.au | Level 2, 2-6 Bowes Street Phillip ACT 2606
Data Analytics Branch Policy, Partnerships and Programs Division ACT Health Directorate
www.health.act.gov.au/digital



From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
Sent: Wednesday, 22 June 2022 9:29 AM
To: Crimmins, Lucas (Health) <Lucas.Crimmins@act.gov.au>; White, Liam (Health) <Liam.White@act.gov.au>
Cc: ACTHealthPolicyPartnerships&Programs <ACTHealthPolicyPartnerships-Programs@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Porganyi, Katrina (Health) <Katrina.Porganyi@act.gov.au>
Subject: RE: Advice required - QONs Calvary input
Importance: High

OFFICIAL

Hi Lucas & Liam,

I think we need your advice as soon as you can, what DAB can provide in the first place so we are clear on what we need Calvary to provide.

Let me know if you need to discuss further, I am in Bowes tomorrow all day and on teams any time.

Thanks
Sinead

From: Crimmins, Lucas (Health) <Lucas.Crimmins@act.gov.au>
 Sent: Tuesday, 21 June 2022 1:27 PM
 To: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>; White, Liam (Health) <Liam.White@act.gov.au>
 Cc: ACTHealthPolicyPartnerships&Programs <ACTHealthPolicyPartnerships-Programs@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
 Subject: RE: Advice required - QONs Calvary input

OFFICIAL

Hi Sinead

Thanks for the email. When do you need this advice by? I will need to do some investigation.

I believe we would be able to calculate admissions / discharges by ward provided we know in scope wards (for the mental health and maternity ward questions) but I think we will need to consult with DSD.

I have a meeting with them on Thursday and can get back to you by COB that day.

I think the costing team might need to advise on the costing related questions.

Id say Staffing / recruitment related questions would probably need to go to Calvary.

Let me get back to you in relation to the ward information.

Regards

Lucas

Lucas Crimmins | A/g Director
 Direct Phone: (02) 5124 9809 | Direct Email: Lucas.Crimmins@act.gov.au
 Data Analytics Branch Policy, Partnerships and Programs Division ACT Health Directorate
www.health.act.gov.au/digital



From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
 Sent: Tuesday, 21 June 2022 8:50 AM
 To: White, Liam (Health) <Liam.White@act.gov.au>; Crimmins, Lucas (Health) <Lucas.Crimmins@act.gov.au>
 Cc: ACTHealthPolicyPartnerships&Programs <ACTHealthPolicyPartnerships-Programs@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
 Subject: RE: Advice required - QONs Calvary input

OFFICIAL

Hi Lucas & Liam,

Out of Scope

We have consolidated a list of all QONs that involve Calvary. Would you mind reviewing questions in red in table below and getting back to us.

TRIM and QON No.	Questions	Lead	Comments
Out of Scope			

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>21/06/2022 Mags sending to CHS, can DAB provide advice on if they can provide Calvary input?</p> <p>Clarity is required from CHS and DAB on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv))
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- Does DAB hold data to answer questions a/b (v) and (vi)

Out of Scope

Happy to discuss, give me a call.

Many thanks
Sinead

From: Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Sent: Monday, 20 June 2022 3:13 PM
To: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: Advice required - QONs

Hi Sallyanne

MAGS will seek advice from CHS on what is requested below however can HSPE please reach out to DAB directly to seek advice.

MAGS does not coordinate/pull together information from internal business units, the expectation is that the lead line area consults internally as required.

Many thanks
Chadia

Chadia Rad | Senior Director, Ministerial and Government Services
Mobile: [REDACTED] Email: Chadia.Rad@act.gov.au
Ministerial and Government Services, Office of the Director-General | ACT Health Directorate
Level 5, 6 Bowes Street Phillip ACT 2606
health.act.gov.au



From: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Sent: Monday, 20 June 2022 2:32 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Cc: HSPE <HSPE@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Subject: FW: Advice required - QONs

OFFICIAL

Hi Kylie

See below our comments on these QONs in relation to clarification/advice required to assist in seeking Calvary responses. Are MAGS able to assist in seeking this information? Happy to discuss.

Thanks
Sallyanne

TRIM and QON No.	Questions	Lead	Comments
Out of Scope			

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from CHS and DAB on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., Inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv)) • Does DAB hold data to answer questions a/b (v) and (xi)
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Out of Scope

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Tuesday, 28 June 2022 12:35 PM
To: LHN Coord
Cc: Pini, Sallyanne (Health); Rad, Chadia (Health); GovernmentBusinessHealth
Subject: CHS draft response QON 833 - Breakdown of wards
Attachments: GBCHS22172 Question on Notice (QoN) Minister for Health - Ward Breakdowns.DOCX

Importance: High

Categories: 02. QoN

OFFICIAL

Hi team

CHS has provided a very very early draft of their response to QON 833.

It will give you an indication of the direction they are going in but doesn't provide any info on definition/methodology for counting of beds and treatment spaces, or methodology for staff numbers.

Given that CHS are referencing ward maps for questions (i)-(iii) do you still need advice on how to respond to these questions re inclusion and counting beds?

I will follow up with CHS to get the advice on methodology for staff numbers.

Thanks
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



From: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>

Sent: Tuesday, 28 June 2022 9:29 AM

To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

OFFICIAL

Hi Kylie

here is the very draft unfinished response to 833, it may not help a great deal but I will give you an idea of the direction CHS is heading.

Kind Regards

Kerryn Hunter

Directorate Liaison Officer | Canberra Health Services

Phone: 620 55030 | Mobile: [REDACTED] | Email: chsdfo@act.gov.au

Office of Rachel Stephen-Smith MLA | Minister for Health | ACT Government
Office of Emma Davidson MLA | Minister for Mental Health and Justice Health | ACT Government

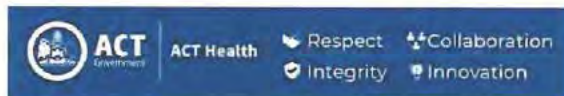
From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 27 June 2022 12:25 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

Thanks Kerryn

By my count we are just waiting on advice for QONs 829 & 833 in relation to this request. We will need the advice in order to ensure Calvary input is consistent with CHS response.

Thanks
Kylie

Kylie Gstrein | A/g Director, Government Business
Email: GovernmentBusinessHealth@act.gov.au
Ministerial and Government Services | ACT Health Directorate
Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au



Out of Scope

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 20 June 2022 4:38 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Subject: CHS Advice required - QONs 805, 830, 829 & 867
Importance: High

Hi Kerryn/team

Just tried to call. ACTHD is seeking the below clarification/advice to ensure consistent input is sought from Calvary in response to QONs. Given the volume of health related QONs I thought it would be useful to talk through them first. Also, I'm happy to send them through individually if that is easier to manage.

Could we get advice ASAP noting the QON 805 expires on 3 July and the rest expire on 10 July.

Thanks
Kylie

TRIM and QON No.	Questions	Lead	Advice required
Out of Scope			

Out of Scope

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv))
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Rachel Stephen-Smith MLA
Minister for Health
Minister for Families and Community Services
Minister for Aboriginal and Torres Strait Islander Affairs
Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE
Questions on Notice Paper No 19
10 June 2022
Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward, **COO**
- ii. how many beds are in each ward, **COO**
- iii. how many treatment spaces are in each ward, **COO**
- iv. how many staff are scheduled for each ward including job title and classification for **NMPSS**
 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year, **FBI**
- vi. how many patients have been discharged from each ward in the last financial year, **FBI**
- vii. how many staff (headcount) have been recruited for each ward in the last financial year, **P&C**
- viii. how many staff (headcount) have separated from each ward in the last financial year, **P&C**
- ix. what was the budget allocated for each ward in the last financial year
- x. how much was spent by each ward in the last financial year and **CFO**
- xi. what was the average length of stay for a patient in each ward. **FBI**

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

- i. See Canberra Health Services Ward Map, [Attachment A](#). Further information can be provided about specific wards, however these should be self-explanatory.
- ii. See above.
- iii. See above.
- iv. Nursing rostering templates are completed by the Nurse Manager for each ward, in conjunction with their finance business partner to reflect respective staffing levels/classification for morning, evening

and night shifts. Examples are provided at Attachment B. A complete list of all staff rostered for morning, afternoon and night shift for each ward at Canberra Health Services has not been provided.

A.

B.

C.

v.

vi.

vii.

viii.

ix. Please refer to *Budget Paper C*. Many services are not funded at the service/ward level.
https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf

x. Please refer to *Budget Paper C*. Many services are not funded at the service/ward level.
https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf

xi.

Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
 Minister for Health

Date:.....

This response required xxx minutes to complete, at an approximate cost of \$xx.xx.

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Tuesday, 28 June 2022 2:17 PM
To: Pini, Sallyanne (Health); LHN Coord
Cc: Rad, Chadia (Health); GovernmentBusinessHealth
Subject: RE: CHS draft response QON 833 - Breakdown of wards

OFFICIAL

Hi Sallyanne

CHS provided the following methodology for QON 830 which is essentially the same as 833:

- Definition/methodology for counting of beds and treatment spaces (questions i and ii)
Beds - Beds (funded) and included flex beds (unfunded) e.g. 12B - 10 beds (4 flex)
- Methodology for staff numbers – headcount or FTE (question iv)
CHS will use paid Head Count in specific Cost Centre Codes in 1 Jul 20 and 30 Jun 21 then detailed the difference in Head Count to show the variance.

I am still following up on a copy of Attachment A though.

Thanks
 Kylie

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Tuesday, 28 June 2022 1:26 PM
To: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Cc: Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS draft response QON 833 - Breakdown of wards

OFFICIAL

No sorry, Attachment A wasn't provided and I don't think the CHS ministerial team have it yet either. I've requested a copy though.

I've also advised that we will still need CHS advice on methodology for staff numbers.

Kylie

From: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Sent: Tuesday, 28 June 2022 1:06 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Cc: Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Subject: RE: CHS draft response QON 833 - Breakdown of wards

OFFICIAL

Thanks Kylie, did you get a copy of Att A?

Sallyanne Pini | Senior Director
 Ph: 02 6205 4689 | M: [REDACTED] Email: sallyanne.pini@act.gov.au
 Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Tuesday, 28 June 2022 12:35 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: CHS draft response QON 833 - Breakdown of wards
Importance: High

OFFICIAL

Hi team

CHS has provided a very very early draft of their response to QON 833.

It will give you an indication of the direction they are going in but doesn't provide any info on definition/methodology for counting of beds and treatment spaces, or methodology for staff numbers.

Given that CHS are referencing ward maps for questions (i)-(iii) do you still need advice on how to respond to these questions re inclusion and counting beds?

I will follow up with CHS to get the advice on methodology for staff numbers.

Thanks

Kylie

Kylie Gstrein | A/g Director, Government Business
 Email: GovernmentBusinessHealth@act.gov.au
Ministerial and Government Services | ACT Health Directorate
 Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au



From: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Sent: Tuesday, 28 June 2022 9:29 AM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

OFFICIAL

Hi Kylie

here is the very draft unfinished response to 833, it may not help a great deal but I will give you an idea of the direction CHS is heading.

Kind Regards

Kerryn Hunter

Directorate Liaison Officer | Canberra Health Services

Phone: 620 55030 | Mobile: [REDACTED] | Email: chsdl@act.gov.au

Office of Rachel Stephen-Smith MLA | Minister for Health | ACT Government

Office of Emma Davidson MLA | Minister for Mental Health and Justice Health | ACT Government

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 27 June 2022 12:25 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>

Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

Thanks Kerryn

By my count we are just waiting on advice for QONs 829 & 833 in relation to this request. We will need the advice in order to ensure Calvary input is consistent with CHS response.

Thanks

Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



Out of Scope

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth

Sent: Monday, 20 June 2022 4:38 PM

To: Canberra Health Services Ministerial <CHS_Ministerial@act.gov.au>

Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>

Subject: CHS Advice required - QONs 805, 830, 829 & 867

Importance: High

Hi Kerryn/team

Just tried to call. ACTHD is seeking the below clarification/advice to ensure consistent input is sought from Calvary in response to QONs. Given the volume of health related QONs I thought it would be useful to talk through them first. Also, I'm happy to send them through individually if that is easier to manage.

Could we get advice ASAP noting the QON 805 expires on 3 July and the rest expire on 10 July.

Thanks

Kylie

TRIM and QON No.	Questions	Lead	Advice required
Out of Scope			

Out of Scope

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv))
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From: LHN Coord
Sent: Tuesday, 28 June 2022 3:06 PM
To: Robin Haberecht (Calvary)
Cc: LHN Coord; Pini, Sallyanne (Health); Kanta Toraskar (Calvary); Greg Bayliss (Calvary)
Subject: ACTHealth 1213 - Requesting Input - Assembly matter - Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce

Categories: Pending with CPHB, Sinead, Awaiting response

OFFICIAL: Sensitive

Dear Robin,

The Minister for Health has received a Question on Notice (QON) from Ms Leanne Castley MLA. We are seeking Calvary response to below questions, CHS will also be providing input to this matter.

Following your request for an extension on ACTHealth 1212 just now, I will also request an extension on this one to bring it to 12 July 2022.

Request Reference	ACTHealth 1213
Type	ACT Legislative Assembly – Question on Notice 833
	<p>Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including</p> <ul style="list-style-type: none"> (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, *ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year, *ACT Health DAB can provide (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and *ACT Health DAB can provide (xi) what was the average length of stay for a patient in each ward.
Additional Information	<p>CHS methodology</p> <p>For question (i) CHS are providing a ward map as separate attachment to the QON (we have not received a copy yet and will send on as soon as we do)</p> <p>For question (iii)</p> <ul style="list-style-type: none"> • Definition/methodology for counting of beds and treatment spaces Beds - Beds (funded) and Included flex beds (unfunded) e.g. 12B - 10 beds (4 flex) • Methodology for staff numbers – headcount or FTE CHS will use paid Head Count in specific Cost Centre Codes
Due by:	12 July 2022 – We would appreciate your earliest advice if this date is unachievable or if the data is not in an easily accessible format.

Thank you,

[Sinead Clarke](#) | Assistant Director

Direct Phone: +61 2 5124 9351 | Direct Email: sinead.clarke@act.gov.au

Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate
Level 4, 6 Bowes Street Phillip ACT 2606

health.act.gov.au



From: LHN Coord
Sent: Tuesday, 28 June 2022 3:14 PM
To: GovernmentBusinessHealth
Cc: Pini, Sallyanne (Health); Rad, Chadia (Health); LHN Coord
Subject: Calvary requesting extension - QON 833 - Breakdown of wards

Follow Up Flag: Follow up
Flag Status: Flagged

Categories: 02. QoN

OFFICIAL

Hi Kylie,

Can you seek an extension to 12 July 2022, due to staffing constraints in Calvary.

Thank you,
 Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Tuesday, 28 June 2022 12:35 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: CHS draft response QON 833 - Breakdown of wards
Importance: High

OFFICIAL

Hi team

CHS has provided a very very early draft of their response to QON 833.

It will give you an indication of the direction they are going in but doesn't provide any info on definition/methodology for counting of beds and treatment spaces, or methodology for staff numbers.

Given that CHS are referencing ward maps for questions (i)-(iii) do you still need advice on how to respond to these questions re inclusion and counting beds?

I will follow up with CHS to get the advice on methodology for staff numbers.

Thanks
 Kylie

Kylie Gstrein | A/g Director, Government Business
 Email: GovernmentBusinessHealth@act.gov.au
 Ministerial and Government Services | ACT Health Directorate
 Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au



From: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Sent: Tuesday, 28 June 2022 9:29 AM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

OFFICIAL

Hi Kylie

here is the very draft unfinished response to 833, it may not help a great deal but I will give you an idea of the direction CHS is heading.

Kind Regards

Kerryn Hunter

Directorate Liaison Officer | Canberra Health Services

Phone: 620 55030 | Mobile: [REDACTED] Email: chsdl@act.gov.au

Office of Rachel Stephen-Smith MLA | Minister for Health | ACT Government

Office of Emma Davidson MLA | Minister for Mental Health and Justice Health | ACT Government

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Monday, 27 June 2022 12:25 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

Thanks Kerryn

By my count we are just waiting on advice for QONs 829 & 833 in relation to this request. We will need the advice in order to ensure Calvary input is consistent with CHS response.

Thanks

Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



Out of Scope

Out of Scope

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 20 June 2022 4:38 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Subject: CHS Advice required - QONs 805, 830, 829 & 867
Importance: High

Hi Kerryn/team

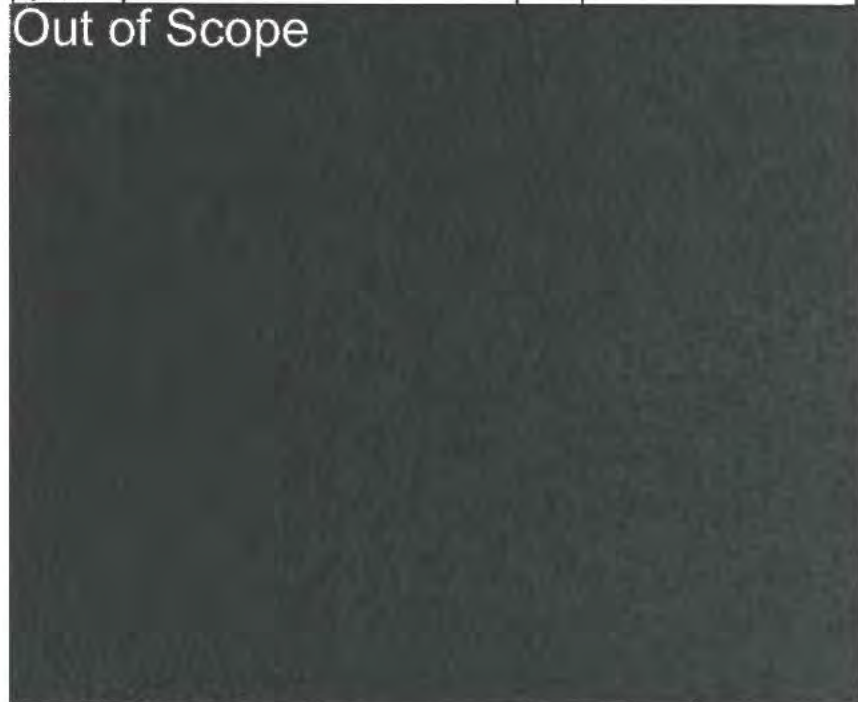
Just tried to call. ACTHD is seeking the below clarification/advice to ensure consistent input is sought from Calvary in response to QONs. Given the volume of health related QONs I thought it would be useful to talk through them first. Also, I'm happy to send them through individually if that is easier to manage.

Could we get advice ASAP noting the QON 805 expires on 3 July and the rest expire on 10 July.

Thanks
Kylie

TRIM and QON No.	Questions	Lead	Advice required
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Out of Scope



<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv))
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in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.		
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From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Thursday, 30 June 2022 2:15 PM
To: ACT Health DLO
Cc: GovernmentBusinessHealth; Rad, Chadia (Health)
Subject: Delay on Calvary input - Minister for Health - QON 833 - Breakdown of all wards at Canberra Hospital and Calvary

OFFICIAL

Hi Cath

MAGS have been advised that Calvary require more time to pull together input for QON 833 - *Breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital.*

Calvary advised this is due to staffing constraints and they are unlikely to have the input ready before the expiry date of 10 July 2022, potentially not until 12 July. Could you please flag this delay with the MO, the office may like to discuss with Ms Castley.

Many thanks
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



From: Ellis, Catherine (Health) on behalf of ACT Health DLO
Sent: Thursday, 30 June 2022 4:34 PM
To: Bransgrove, Meagen; Bergin, Catherine
Subject: Delay on Calvary Input for QON833

OFFICIAL

Hi both

MAGS have been advised that Calvary require more time to pull together input for QON 833 - *Breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital.*

Calvary advised that due to staffing constraints and they are unlikely to have the input ready before the due date of 10 July 2022, and we will potentially not receive until 12 July. Just want to flag this delay with you in advance in case you wished to discuss / raise with Ms Castley's Office.

Thanks
Cathy

Catherine Ellis | Directorate Liaison Officer | ACT Health Directorate

Mob: [REDACTED] Email: ACTHealthDLO@act.gov.au

Office of Rachel Stephen-Smith | Minister for Health

Office of Emma Davidson | Minister for Mental Health

Level 2, Legislative Assembly Building, Civic Square



From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Tuesday, 5 July 2022 11:47 AM
To: Pini, Sallyanne (Health); LHN Coord
Cc: HSPE; GovernmentBusinessHealth
Subject: CHS INPUT - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and ~ Castley.tr5

OFFICIAL

Hi Sallyanne

CHS have provided their cleared input to QON 833 – saved in the attached container.

Note there are Attachments A & B included with their input.

I note that Calvary had requested an extension to 12 July for this one.

Kind regards
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

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Rachel Stephen-Smith MLA

Minister for Health

Minister for Families and Community Services

Minister for Aboriginal and Torres Strait Islander Affairs

Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE

Questions on Notice Paper No 19

10 June 2022

Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward,
- ii. how many beds are in each ward,
- iii. how many treatment spaces are in each ward,
- iv. how many staff are scheduled for each ward including job title and classification for
 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward. FBI

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

- i. See Canberra Health Services (CHS) Ward Map, [Attachment A](#). Further information can be provided about specific wards, however this list should be self-explanatory. Note that bed numbers/wards are dynamic and subject to change according to clinical need.
- ii. See above.
- iii. See above.
- iv. Nursing rostering templates are completed by the Nurse Manager for each ward to reflect respective staffing levels/classification for morning, evening and night shifts. Examples are provided at

Attachment B. A complete list of all staff rostered for morning, afternoon and night shift for each ward at CHS has not been provided due to resources required to complete this request .

- v. CHS does not report at the Ward level. Performance information is available via the ACT Public Health Services Quarterly Performance Report
https://www.health.act.gov.au/sites/default/files/2022-05/Att%20A%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf
- vi. See above.
- vii. CHS is unable report at the ward level. Data has been provided detailing the paid headcount on 24 June 2020 and corresponding headcount paid on 23 June 2021.

Division	Headcount paid as of 24 June 2020	Headcount paid as of 23 June 2021	Difference
WYC	813	810	-3
UCH	306	323	17
Surgery	1020	1002	-18
RACS	530	523	-7
QSII	41	34	-7
P&C	90	90	0
ODCEO	34	49	15
OCEO	36	178	142
NMPSS	489	543	54
MHJHADS	818	836	18
MEDICINE	1098	1104	6
MEDICAL SERVICES	870	895	25
IHSS	335	363	28
FBI	194	194	0
COO	142	53	-89
CAS	557	704	147
AH	218	216	-2
TOTAL	7591	7917	326

- viii. See above
- ix. CHS does not report Budget allocations at the Ward level. Please refer to *Budget Paper C*:
https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf
- x. CHS does not report expenditure at the Ward level. CHS's 2021-22 Annual Report has yet to be finalised, however a comparison of CHS's financial position can be found within CHS' 2021-21 Annual Report - [Canberra Health Services Annual Report 2020-2021 \(act.gov.au\)](#)
- xi. CHS does not report at the Ward level. Performance information is available via the ACT Public Health Services Quarterly Performance Report
https://www.health.act.gov.au/sites/default/files/2022-05/Att%20A%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf

Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
Minister for Health

Date:.....

This response required xxx minutes to complete, at an approximate cost of \$xx.xx.

Legend

	WYC
	Medicine
	Surgery
	MHJHADS
	CAS
	RACS
	Empty
	COVID-19

Note:
See over page for abbreviations

Building 1 (Tower Block)

10A 32 beds General Surgery, Ophthalmology	Offices <i>Care @ Home Program</i>
9A 24 beds Gastroenterology	9B 23 beds – Neurosurgical 06 beds – Monitored beds <i>Trache Ward</i>
8A (No overnight beds) 10 – Dialysis day beds	8B 25 beds Paediatrics
7A 32 beds Neurology & Infectious Diseases Stroke Unit <i>Trache Ward</i>	7B 32 beds General Medicine
6A 32 beds Respiratory/Cardiology Rheumatology / Endocrinology	6B 34 beds including 28 – Cardiothoracic, Thoracic surgery, Urology, Vascular 06 – Monitored beds
5A 30 beds – Orthopaedic/ Orthopaedic-Geriatrics	5B 24 – Plastic/Ortho/ENT 02 – <i>flex beds</i> <i>Trache ward</i>
4A (30) ASU – surgery – 16 beds ACDL – medicine 8 beds <i>6 – Flex beds</i>	4B 20 – Renal + Medicine 0 – Discharge Lounge beds
CPEU/CCU 04 beds – CPEU 11 beds – CCU 04 beds – Subacute	CHS Outpatients Cardiology & Cardiothoracic
GROUND	N&M Office Outpatients

**University of Canberra
Hospital (UCH)**

Cotter 30 beds
Stromlo 30 beds Neurological
Majura 30 beds Older Persons
Namadgi 30 beds General
AMHRU 20 beds

Building 11

Centenary Hospital Women & Children

NICU 15 beds	SCN 14 beds	Birth Centre 5 beds Birth Suite 13 beds
PN 15 beds <i>Cots 3</i>	AN 15 beds	Ronald McDonald
PDS (15, funded 12)	COVID WARD 12 beds	PWA (12) Closed for expansion

Building 12

Operating Theatres 13 Theatres 14 – EDSU 18 – PACU	ICU (38 bed spaces) COVID: 5
ED - Emergency Medicine Unit (17) 12 – Beds 05 – Chairs	ED 58 treatment spaces including: 30 – Acute 05 – Resus 15 – FastTrack (3 procedure rooms) 06 – Paediatrics 02 – De-escalation
AMU 12 beds	MHSSU (6)

Building 3

14B (32) 28 – Oncology <i>4 – flex/clinical trials</i>	14A 22 beds Haematology
12B 10 beds – Mental Health <i>4 beds – flex beds</i>	
11B 26 beds Aged Care	11A 24 beds Aged Care

Building 7

Withdrawal Unit 10 beds

Building 25

AHMU PLD 30 beds PHD 10 beds

DMHU / GAW

DMHU 17 beds Gawnggal 10 beds



Abbreviation Location	Abbreviation	
Legend	WYC	Women Youth & Children
	MHJHADS	Mental Health Justice Health Alcohol and Drug Services
	CAS	Cancer and Ambulatory Support
	RACS	Rehabilitation Aged and Community Services
Building 11	NICU	Neonatal Intensive Care Unit
	SCN	Special Care Nursery
	PN	Postnatal
	AN	Antenatal
	PWH	Paediatric Ward High care
	PWS	Paediatrics Ward Surgery
	PDS	Paediatric Day Stay
	PWA	Paediatric Ward Adolescent
Building 12	EDSU	Extended Day Surgery Unit
	PACU	Post Anaesthetic Care Unit
	ICU	Intensive Care Unit
	ED	Emergency Department
	AMU	Acute Medical Unit
	MHSSU / PSS	Mental Health Short Stay Unit / Psychiatric Short Stay Unit
Building 1	ASU	Acute Surgical Unit
	ENT	Ear Nose & Throat
	CPEU	Chest Pain Evaluation Unit
	CCU	Coronary Care Unit
	N&M	Nursing & Midwifery
	OPD	Outpatient Department
	SCP	Seasonal Capacity Plan, adult beds
	ACDL	All Care Discharge Lounge
University of Canberra Hospital	AMHRU	Adult Mental Health Rehabilitation Unit
Building 25	AMHU	Adult Mental Health Unit
	PLD	Psychiatric Low Dependency
	PHD	Psychiatric High Dependency
DMHU / GAW	DMHU	Dhulwa Mental Health Unit
	GAW	Gawanggal (Extended Care Unit)

2021	Division	Medicine	Shift count		shift length	shift hour	shift count	shift hour	shift count	Updated	by who	enter date				
July	N Manager		Bed Open	32	Morn & Even shift length	8.00	8.00	1.00	10.00	1.25		Comments				
2022	UNIT	7A	Day open	7	Night Duty shift length	10.00	10.00	1.00	8.00	0.80		TEMPLATE21				
June	appt	8850							12.00	1.20						
	costcentre	61795	8 hour shift length = 1.00		Morn shift from 0700 ends 1600		default	count 1=	8.00	7.6 (nonackfill)						
Shift	Shift count	MORN	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	Shift Length	Wkly hrs	Shift length	
MORN	INDIRECT	RN5											7.60	38.00		
MORN	INDIRECT	RN4.3											7.60	38.00		
MORN	INDIRECT	RN4.2											7.60	38.00		
MORN	INDIRECT	RN4.1											8.00	38.00		
MORN	INDIRECT	RN3G2	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053	8.00	38.00		
MORN	INDIRECT	RN3G1	2.00	2.00			2.00	2.00	2.00	10.00	80.00	2.105	8.00	38.00		
MORN	INDIRECT	RN2CDN	1.00	1.00			1.00	1.00	1.00	5.00	38.00	1.000	7.60	38.00		
MORN	INDIRECT	RN2TL			1.00	1.00				2.00	16.00	0.421	8.00	38.00		
MORN	INDIRECT	RN2											8.00	38.00		
MORN	INDIRECT	RN1											8.00	38.00		
MORN	INDIRECT	EN2											8.00	38.00		
MORN	INDIRECT	EN1											8.00	38.00		
MORN	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
MORN	DIRECT	RN4NP											8.00	38.00		
MORN	DIRECT	RN3G2											8.00	38.00		
MORN	DIRECT	RN3G1											8.00	38.00		
MORN	DIRECT	RN2TL											8.00	38.00		
MORN	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00		
MORN	DIRECT	RN2*											8.00	38.00		
MORN	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	168.00	4.421	8.00	38.00		
MORN	DIRECT	RN1P	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00		
MORN	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
MORN	DIRECT	EN1											8.00	38.00		
MORN	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
MORN	DIRECT	spare											8.00	38.00		
MORN	Morn ShiftCount		14.00	14.00	11.00	11.00	14.00	14.00	14.00	92.00	734.00	19.32	7.94			
Shift	Shift count	shift length = 1.00	Even from 1200 ends before 2400				default	count 1=	8.00	7.6 (no backfill)				Shift Length	Wkly hrs	Even
EVEN	INDIRECT	RN5											7.60	38.00		
EVEN	INDIRECT	RN4.3											7.60	38.00		
EVEN	INDIRECT	RN4.2											7.60	38.00		
EVEN	INDIRECT	RN4.1											8.00	38.00		
EVEN	INDIRECT	RN3G2											7.60	38.00		
EVEN	INDIRECT	RN3G1											7.60	38.00		
EVEN	INDIRECT	RN2CDN											7.60	38.00		
EVEN	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	53.20	1.40	7.60	38.00		
EVEN	INDIRECT	RN2											7.60	38.00		
EVEN	INDIRECT	RN1											7.60	38.00		
EVEN	INDIRECT	EN2											7.60	38.00		
EVEN	INDIRECT	EN1											7.60	38.00		
EVEN	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
EVEN	DIRECT	RN4NP											8.00	38.00		
EVEN	DIRECT	RN3G2											8.00	38.00		
EVEN	DIRECT	RN3G1											8.00	38.00		
EVEN	DIRECT	RN2TL											8.00	38.00		
EVEN	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.95	8.00	38.00		
EVEN	DIRECT	RN2*											8.00	38.00		
EVEN	DIRECT	RN1	4.00	4.00	4.00	4.00	4.00	4.00	4.00	28.00	224.00	5.89	8.00	38.00		
EVEN	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
EVEN	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
EVEN	DIRECT	EN1											8.00	38.00		
EVEN	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
EVEN	DIRECT	spare											8.00	38.00		
EVEN	Even ShiftCount		11.00	11.00	11.00	11.00	11.00	11.00	11.00	77.00	613.20	16.14				
Shift	Shift count	shift length = 1.00	Night from 1800 ends 0730 2ndday				default	count 1=	10.00	9.5 (no backfill)				Shift Length	Wkly hrs	Night
NIGHT	INDIRECT	RN5											10.00	38.00		
NIGHT	INDIRECT	RN4.3											10.00	38.00		
NIGHT	INDIRECT	RN4.2											10.00	38.00		
NIGHT	INDIRECT	RN4.1											10.00	38.00		
NIGHT	INDIRECT	RN3G2											10.00	38.00		
NIGHT	INDIRECT	RN3G1											10.00	38.00		
NIGHT	INDIRECT	RN2CDN											10.00	38.00		
NIGHT	INDIRECT	RN2TL											10.00	38.00		
NIGHT	INDIRECT	RN2											10.00	38.00		
NIGHT	INDIRECT	RN1											10.00	38.00		
NIGHT	INDIRECT	EN2											10.00	38.00		
NIGHT	INDIRECT	EN1											10.00	38.00		
NIGHT	INDIRECT	AIN			1.00	1.00	1.00	1.00		4.00	40.00	1.05	10.00	38.00		
NIGHT	DIRECT	RN4NP											10.00	38.00		
NIGHT	DIRECT	RN3G2											10.00	38.00		
NIGHT	DIRECT	RN3G1											10.00	38.00		
NIGHT	DIRECT	RN2TL											10.00	38.00		
NIGHT	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	140.00	3.68	10.00	38.00		
NIGHT	DIRECT	RN2*											10.00	38.00		
NIGHT	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	210.00	5.53	10.00	38.00		
NIGHT	DIRECT	RN1P											10.00	38.00		
NIGHT	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00		
NIGHT	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00		
NIGHT	DIRECT	EN1P											10.00	38.00		
NIGHT	DIRECT	spare											10.00	38.00		
NIGHT	Night ShiftCount		7.00	7.00	8.00	8.00	8.00	8.00	7.00	53.00	530.00	13.95				
TOTAL	Total M-E-N shift Count		32.00	32.00	30.00	30.00	33.00	33.00	32.00	222.00	Nurse: patient Ratio		Bud beds	32		
Wkly FTE Summary			thu	fri	sat	sun	mon	tue	wed	Total	8h shift	Morn	9.000	4		
Total	Total wky shifts/staff		32.00	32.00	30.00	30.00	33.00	33.00	32.00	222.00	8h shift	Even	9.000	4		
Total	Total Wkly Hours		269.20	269.20	255.60	255.60	279.20	279.20	269.20	1877.20	10h shift	Night	7.000	5		
Total	Total Wkly FTE		7.08	7.08	6.73	6.73	7.35	7.35	7.08	49.40	Dir NP/PPD		6.89			

MUST ENTER	Bed/Unit Activities	ENTER Budget beds and Daily available Open bed numbers							BUDGET	32	OPEN	32	Note: Enter bed numbers / Unit as 1
	Most complete this section	thu	fri	sat	sun	mon	tue	wed	Total	Occup%	Type in total shift count if no NHPPD required or 1		
	Budget BEDS/Staff	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0	100.0%	Type Nos Budgeted Beds for the Unit here		
	BEDS/unit Staff OPEN	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0		Type Nos beds staff operating per day		
	DAY/UNIT OPEN	1	1	1	1	1	1	1	7		Type 1=unit is open on the day, 0 if not open		

Enter Budget Bed Numbers
Projects bed numbers open
day/Unit open 5 or 7 day

	thu	fri	sat	sun	mon	tue	wed	TOTAL	Avg day	Fixed Targets	FTEs
NHPPD	214.00	214.00	214.00	214.00	214.00	214.00	214.00	1498.00	214.00	Direct FTE	39.42
Direct Hours	55.20	55.20	41.80	41.80	65.20	65.20	55.20	379.20	54.17	Indirect FTE	9.98
Indirect Hours	6.69	6.69	6.69	6.69	6.69	6.69	6.69	6.69	6.69	Non prod FTE	8.23
NHPPD DIRECT	1.73	1.73	1.30	1.30	2.04	2.04	1.73			Prod FTE	49.40
NHPPD IND	8.41	8.41	7.99	7.99	8.73	8.73	8.41			Total FTE	57.63
Prod NHPPD	1.40	1.40	1.40	1.40	1.40	1.40	1.40				1.396
NONPROD NHPPD											

Daily \$ Cost											
UoSNHPPD Est	thu	fri	sat	sun	mon	tue	wed	\$\$/UoS	Tot\$/UoS	Dir	\$ 11,710
UoS NHPPD Direct \$	\$ 331	\$ 331	\$ 428	\$ 500	\$ 327	\$ 327	\$ 331	\$ 365		Ind	\$ 2,964
UoS NHPPD Indirect \$	\$ 85	\$ 85	\$ 83	\$ 97	\$ 100	\$ 100	\$ 85	\$ 93		NonProd	\$ 76
UoS NHPPD PROD \$\$\$	\$ 416	\$ 416	\$ 512	\$ 597	\$ 427	\$ 427	\$ 416	\$ 459		Prod	\$ 14,674
UoSNHPPD NonProd\$\$\$	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 535	Total	\$ 14,750

Annual FTE POSITION class details:												Office use only	
Annual FTE:	WEEKLY	Wk FTE	Wk	Day	Day	Day	Day	Backfill	Recruit	Premium	Estimate	Adjustment column	
FTE	Class	Prod (p)	Annual L	PDL L	Man/Train	PersL	Other	Factor FTE	FTE	FTE	Annual FTE	Recruit	FTE adjust
INDIRECT	RN5												
INDIRECT	RN4.3												
INDIRECT	RN4.2												
INDIRECT	RN4.1												
INDIRECT	RN3G2	1.053	0.081	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191		
INDIRECT	RN3G1	2.105	0.161	0.017	0.012	0.081	0.006	0.277	2.284	0.098	2.382		
INDIRECT	RN2CDN	1.000	0.038					0.038	1.038		1.038		
INDIRECT	RN2TL	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.095	2.165		
INDIRECT	RN2												
INDIRECT	RN1												
INDIRECT	EN2												
INDIRECT	EN1												
INDIRECT	AIN	4.000							4.000		4.000		
DIRECT	RN4NP												
DIRECT	RN3G2												
DIRECT	RN3G1												
DIRECT	RN2TL												
DIRECT	RN2	9.579	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.446	11.390		
DIRECT	RN2*												
DIRECT	RN1	15.842	2.127	0.130	0.087	0.606	0.043	2.995	18.099	0.738	18.837		
DIRECT	RN1P	4.421	0.594			0.170	0.061	0.824	5.015	0.230	5.245		
DIRECT	ENL2	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695		
DIRECT	EN1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.096	2.190		
DIRECT	EN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
DIRECT	spare												
Total FTE equiv		49.400	5.817	0.304	0.203	1.703	0.202	8.230	55.522	2.108	57.630		

Estimate FTE by Classification												
Annual FTE summary	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Pool in	Annual	Check	
Pro & Non Prod FTE	Prod	Annual L	PDL L	Man/Train	PersL	Other	FTE	FTE	FTE	FTE	Budget TM1	
RN	R5											
RN	R43											
RN	R42											
RN	R42NP											
RN	R41											
RN	R3G2	1.053	0.081	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191	
RN	R3G1	2.105	0.161	0.017	0.012	0.081	0.006	0.277	2.284	0.098	2.382	
RN	R2CDN	1.000	0.038					0.038	1.038		1.038	
RN	R2TL/S	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.095	2.165	
RN	RN2	9.579	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.446	11.390	
RN	R1	15.842	2.127	0.130	0.087	0.606	0.043	2.995	18.099	0.738	18.837	
RN	R1P	4.421	0.594			0.170	0.061	0.824	5.015	0.230	5.245	
EN	ENL2	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695	
EN	ENL1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.096	2.190	
EN	ENL1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496	
EN	AIN	4.000							4.000		4.000	
Other	spare											
FTE total		49.400	5.817	0.304	0.203	1.703	0.202	8.230	55.522	2.108	57.630	

Notes:	Unit Summary		Annual Cost Sal Calculation Est		\$ 121,151.84
	Prod FTE Sal base	FTE	\$		
Includes Stroke Liaison Nurse RN 3.1	Annual Leave FTE	5.82	\$	517,527	NHPPD /UoS 79%
	Prof Develop FTE	0.30	\$	28,598	Per Unit of Service 19%
Alignment to TM1 Budget 27/5/21	Mandatory FTE	0.20	\$	19,065	Direct 2%
	Personal Leave FTE	1.70	\$	152,919	Mandatory FTE 100%
Added for Ratios	Other FTE	0.20	\$	16,480	Indirect 1.69 \$ 93
	Backfill/Relief Factor	2.11	\$	734,562	Prod 8.36 \$ 459
	Recruit FTE	55.52	\$	4,857,885	
	Total EST Annual FTE	57.63	\$	5,046,353	Non Prod 1.40 \$ 76 \$ 1,042,883.21
	Shift Penalty Cal		\$	1,042,883	AV wky \$ 121,151.84
	PH loading 50% PH (Exclude M-F)		\$	121,152	
	Prod FTE (incl Pen)	49.40	\$	4,475,795	
	Est Daily \$\$ Cost Prod/Unit		\$	14,674	\$\$ per Uos \$ 535

APPROVED BY: _____ Date _____

Comments:
Weekly prod FTE = the must have FTE

Projected FTE has been signed off? approved? Then, don't forget!
Please forward a copy of the template to NIMS Unit for updating of the Proact database

Shift Count including AIN Staffing guide report									
Direct+AIN	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct+AIN	Morn	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0
Direct+AIN	Even	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0
Direct+AIN	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0
Direct Total	Total	27.0	27.0	28.0	28.0	28.0	28.0	27.0	193.0

Shift count Direct (not counting AIN)									
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct	Morn	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0
Direct	Even	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0
Direct	Night	7.0	7.0	7.0	7.0	7.0	7.0	7.0	49.0
Direct Total	Total	25.0	25.0	25.0	25.0	25.0	25.0	25.0	175.0

AIN shift count									
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct	Morn	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Even	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Night			1.0	1.0	1.0	1.0		4.0
Direct Total	Total	2.0	2.0	3.0	3.0	3.0	3.0	2.0	18.0

Shift Count INDIRECT (include AIN)									
INDIRECT	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Indirect	Morn	5.0	5.0	2.0	2.0	5.0	5.0	5.0	29.0
Indirect	Even	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0
Indirect	Night			1.0	1.0	1.0	1.0		4.0
Indirect Total	Total	7.0	7.0	5.0	5.0	8.0	8.0	7.0	47.0

Total shift count									
Total	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Total	Morn	14.0	14.0	11.0	11.0	14.0	14.0	14.0	92.0
Total	Even	11.0	11.0	11.0	11.0	11.0	11.0	11.0	77.0
Total	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0
Total	Total	32.0	32.0	30.0	30.0	33.0	33.0	32.0	222.0

Patient Ratio (AIN excluded)										Bed
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	Avgday	occupy
Direct	Morn	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Even	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Night	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	32
Direct Pt/N Ratio av DAY		4	4	4	4	4	4	4	4	32

check:	Weekly	Wkly Prod	Wk Annual L	Day PDL L	Day ManTrain	Day PersL	Day Other	Backfill FTE	Recruit FTE	Pool In FTE	Annual FTE
FTE total	49.40	5.82	0.30	0.20	1.70	0.20	8.23	55.52	2.11	57.63	
38 wkly Hour	1,877.20	221.05	11.57	7.71	64.71	7.69	312.74	2,109.82	80.12	2,189.94	
Count	Shift	Estimate number of shifts per week / 5 shift count / FTE									
7.80	Stand shift	247.0	29.1	1.5	1.0	8.5	1.0	41.1	277.6	10.5	288.1

Note: AIN hours are INDIRECT hours
ProAct Staffing DEMAND use this figures
Contact NIMS if Demand to exclude AIN count
See below shift count
NHPPD - Direct hours (AIN hours are NOT included)
Rate NP AIN not included

Note:
ProAct system - Roster DEMAND Screen
Default screen
Demand Screen
Staffing guide set up

Attention:
The Template projects:
the number of staffing requirement for each shift
This figures must be accurate and signed of as the Budget plan for this year.

Note:
Update notes are available.

Note: Nurse /Patient Ratio based on Full occupancy

Item	7A
Appr Code	888 600
Crat Code	0076 000
Budget Position No	22
Spec Position No	07
Use Spare Key	7
WAG Position PTE	114
R43	
R42	
R40P	
R41	
R322	1,683
R301	2,108
R320H	1,830
R3TL5	4,821
R32	5,239
R1	79,402
R3P	4,420
DAL2	4,789
DAL1	7,842
DALP	3,847
AN	<200
R3P	
Annual Leave	5,817
R4	
R42	
R40P	
R41	
R382	0,081
R38	0,161
R320H	0,036
R3TL5	0,244
R32	1,248
R1	2,137
R3P	0,394
DAL2	0,643
DAL1	2,247
DALP	2,266
AN	
R3P	
Personal	0,304
R4	
R42	
R40P	
R41	
R381	0,038
R381	0,017
R320H	
R3TL5	0,010
R42	0,076
R1	0,130
R3P	
DAL2	0,048
DAL1	0,016
DALP	
AN	
R3P	
Mandatory Training	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,017
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Personal Leave	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Other Day	1,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Total	7,700
R4	
R42	
R40P	
R41	
R322	0,538
R301	0,270
R320H	0,000
R3TL5	0,244
R42	0,076
R1	2,995
R3P	0,394
DAL2	0,643
DAL1	2,247
DALP	2,266
AN	
R3P	
Personal	0,304
R4	
R42	
R40P	
R41	
R382	0,081
R38	0,161
R320H	
R3TL5	0,244
R32	1,248
R1	2,137
R3P	0,394
DAL2	0,643
DAL1	2,247
DALP	2,266
AN	
R3P	
Other Day	1,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,000
DAL1	0,000
DALP	
AN	
R3P	
Run Prod component	0,000
R4	
R42	
R40P	
R41	
R322	0,000
R301	0,000
R320H	
R3TL5	0,000
R32	0,000
R1	0,000
R3P	0,000
DAL2	0,0

The NIMS Template is used to estimate the Annual Nursing FTE requirements for the unit
Nurse Manager Worksheet

Data entry - Only use the active cells to enter the number of shifts required

Unit Data Enter the following information on the worksheet
 Division Enter the Service type
 N Manager Enter the Name of RN3 preparing the estimate - NM
 UNIT Enter the name of the Unit
 apgn Enter the Apgn code - salary/costcentre
 costcentre Enter the Correct Cost Centre
 Bed open and Day open fields - data will be populated into these two fields.

Save file instruction:
 Save the file immediately after you have enter Unit data using the following preferred file name:
 [apgncode-costcentre][unitname]-2013-14 TCH NIMS FTE template [initials][date] [V#]

Data Entry Enter the shift count between Thu - Wed column

Shift count is based on the standard shift length of 8-8-10
 Shift length box is set up to calculate the Shift count per shift based on the current standard shift length

Morn shift standard shift length is 8 hours 7:00am start
 Even shift standard shift length is 8 hours 12:00 pm start
 Night shift standard shift length is 10 hours 8:00pm start

If roster contains 12hr shift / 10 hr shift, use the appropriate shift count guidelines
 Note: 12hr shift - place Day 12h in Morn cell, place Night 12h in Night cell

Using the active cells highlighted in colour -
 enter the Equivalent no of shift counts required for each classification
 use separate template for each sub-group if a separate ROSTER is required (Proact system)

For example - Postnatal ward and Midcall program requires separate rosters
 Use a separate template to calculate the shift/requirements for subgroups under same cost centre
 add the shift count data together in a separate template for calculation of total FTE

Annual FTE Estimate section Relief Factor calculation section

Backfill/Relief Factor component set up:
Executive Decision - adjustment of Relief Factor reference in Column U,V,W,X,Y,Z (starting in row 124)

check the No. of annual leave weeks - 4, 5, 6, or 7
 Check the No. of days required for Personal leave provision - backfill factor stands at 14 days
 Check the No. of days required for PDL/Education provision & PPT provision default 3 days
 Check the No. of days required for Mandatory Training default 2 days
 Check the No. of Other days required for Other relief type - mainly for Goodwill program eg Supernumery/Program Devp

the number entered in the Backfill Relief Factor active cells would automatically be calculated to determine
 the weekly FTE requirements to complete a unit roster
 the weekly Annual Leave allocation for the unit / determine the backfill FTE
 the estimate relief factor - for backfilling of unscheduled leave
 the estimate Education / PDL backfill

these facts contained formula that will calculate the Backfill/Relief component that form the Annual FTE requirement

check annual leave requirement for Rte Leave relief factor

Mon-Fri Non shift workers +PH off	annual Leave entitlement	4
Mon-Fri Non shift workers +PH off +wk wkends	annual Leave entitlement	5
Shift workers +PH off + no weekends	annual Leave entitlement	5
Shift workers + weekends +PH off	annual Leave entitlement	6
Shift workers +PH + weekends	annual Leave entitlement	7

Note: worked One PH, One weekend rule

the worksheet will automatically calculate the annual FTE requirements once the correct shift count numbers are entered
Use Unit activities - per day for Inpatients / day patients / no. estimation booked consultations / no. of staff working in the unit

Enter the BUDGETED beds number / shifts to the day
 Enter the number of projected beds available (OPEN) for each day
 for example, in some area, the available staff beds may be reduced at the week ends
 Enter the day (equivalent to 1) that the unit is opened - is day open count
 If the Unit is closed on Sat and Sun, then do not enter the figure (1) on the cell
 the data must be entered accurately as this information is required to calculate the

Missing Hours per patient days & based on the average hours provided for the operational bed numbers & % bed Count

Direct Nursing Hours Per Patient Day / Unit of Service estimates (Proact system)
 The Template is set up with formula to clearly identify the estimated Direct FTE (direct patient care) hours required for the unit
 Estimated Indirect FTE hours (staff rostered to the Unit but not directly taking on patient care load)

Check Agreed NIPPDP for units included in the Reasonable workload program
Unit of Service/Daily/Average \$ cost
 The template provides an estimate of Unit of Service cost estimate per patient hours provided.
 Note: Average Hly rate is calculated based on the total hours rostered to the unit (including shift penalties)
 this is an estimate of the hly rate based on the combination of shift mix required for the unit
 It also calculate the average Daily \$ cost - it gives an estimate of the \$\$/Daily cost required to run the unit

Indirect nursing hours
 calculated automatically to identify the nursing hours provided not directly related to individual patient care
 for example - Clinical Nurse consultant, CDN, Supernumery (team leader) not providing direct individual patient care

Annual FTE Estimate by Class Details:
 When the shift counts have been entered into the worksheet, all the calculation will be done automatically to provide details of FTE estimate:
 the determined staffing requirement to roster the unit on an average weekly basis from Thu-Wed
 the determined annual leave FTE that can be released & estimate Backfill/Recruitable component factor
 the determined PDL leave component
 the determined Mandatory training hours component to estimate the backfill/RELIEF pool component
 the determined personal leave backfill/RELIEF pool component

The Class details can then be compared with the current FTE eq of staff employed in the Unit.
 Space for notes and other comments that may affect the estimate
 Use this space to record specific anomalies / variance that may occur throughout the budget period.

FTE Dollar calculation
 The template include the basic \$\$ cost based on the hly rate and shift penalty rate only.
 Project shift penalty for every shift count
 Project PH Penalty 50% loading
Excluded from this template are:
 Project on call / close call hours payable for on/call allowances
 Projected hours payable for responsibility allowance

For further details or explanation on the use of template, please contact Chin Wong K 42415
 This template is not to be reproduced without permission.

NIMS Template for Non-Nursing is available for a separate set of other employees (cleaning/ maintenance/ janitorial) FTE.
 please contact Chin Wong if required.

Shift count calculation based on 8hr/10 pattern

AM Bshift	default hour - 8	
Standard hr	shift hr	shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50
8	7.6	0.95 No ADO

PM Bshift

Standard hr	shift hr	Shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50

Night Duty
 The default ND hour = 10

Standard hr	shift hr	shift count
10	10	1.00
10	12	1.20
10	8	0.80
10	8.5	0.95

12 Hour shift
 Morn
 0700-1900 base penalty - Morn shift hours
 after 1800 22.5% penalty - Night shift hours
 Even start
 1200-1800 Even 12.5% - Even shift hours
 after 1800 22.5% penalty - Night shift hours
 Night
 1800 start till 0730
 22.5% penalty - Night shift hours
 Beyond 0730 revert base penalty

2021	Division	CAS	Shift count							shift length	shift hour	shift count	shift hour	shift count	Updated	by who	enter date	
July	N Manager		Bed Open	Morn & Even shift length							8.00	8.00	1.00	10.00	1.25	If ADO backfill hrs required, change shift length to 8.00	Comments TEMPLATE21	
2022	UNIT	14B	31	Night Duty shift length							10.00	10.00	1.00	8.00	0.80			
June	appt	7516	7											12.00	1.20			
	costcentre	61739																
Shift	Shift count	MORN	8 hour shift length = 1.00							Morn shift from 0700 ends 1800	default	count 1=	8.00	7.6 (nonackfill)	Shift Length	Wkly hrs	Shift length	
Morn	INDIRECT	RN5	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	8.00	38.00		If ADO back change shift		
Morn	INDIRECT	RN4.3											7.60	38.00				
Morn	INDIRECT	RN4.2											7.60	38.00				
Morn	INDIRECT	RN4.1											8.00	38.00				
Morn	INDIRECT	RN3G2											7.60	38.00				
Morn	INDIRECT	RN3G1											7.60	38.00				
Morn	INDIRECT	RN2CDN	1.00	1.00			1.00	1.00	1.00	5.00	38.00	1.000	7.60	38.00				
Morn	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00				
Morn	INDIRECT	RN2	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053	8.00	38.00				
Morn	INDIRECT	RN1											8.00	38.00				
Morn	INDIRECT	EN2											8.00	38.00				
Morn	INDIRECT	EN1											8.00	38.00				
Morn	INDIRECT	AJN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00				
Morn	DIRECT	RN4NP											8.00	38.00				
Morn	DIRECT	RN3G2											8.00	38.00				
Morn	DIRECT	RN3G1											8.00	38.00				
Morn	DIRECT	RN2TL											8.00	38.00				
Morn	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00				
Morn	DIRECT	RN2*	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053	8.00	38.00				
Morn	DIRECT	RN1	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00				
Morn	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00				
Morn	DIRECT	ENL2											8.00	38.00				
Morn	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00				
Morn	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00				
Morn	DIRECT	spare											8.00	38.00				
Morn	Morn ShiftCount		12.00	12.00	9.00	9.00	12.00	12.00	12.00	78.00	622.00	16.37	7.90					
Shift	Shift count	EVEN	Even from 1200 ends before 2400							default	count 1=	8.00	7.6 (no backfill)	Shift Length	Wkly hrs	Even		
Even	INDIRECT	RN5	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	7.60	38.00				
Even	INDIRECT	RN4.3											7.60	38.00				
Even	INDIRECT	RN4.2											7.60	38.00				
Even	INDIRECT	RN4.1											7.60	38.00				
Even	INDIRECT	RN3G2											7.60	38.00				
Even	INDIRECT	RN3G1											7.60	38.00				
Even	INDIRECT	RN2CDN											7.60	38.00				
Even	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	53.20	1.40	7.60	38.00				
Even	INDIRECT	RN2											7.60	38.00				
Even	INDIRECT	RN1											7.60	38.00				
Even	INDIRECT	EN2											7.60	38.00				
Even	INDIRECT	EN1											7.60	38.00				
Even	INDIRECT	AJN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00				
Even	DIRECT	RN4NP											8.00	38.00				
Even	DIRECT	RN3G2											8.00	38.00				
Even	DIRECT	RN3G1											8.00	38.00				
Even	DIRECT	RN2TL											8.00	38.00				
Even	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.95	8.00	38.00				
Even	DIRECT	RN2*	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.05	8.00	38.00				
Even	DIRECT	RN1											8.00	38.00				
Even	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00				
Even	DIRECT	ENL2											8.00	38.00				
Even	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00				
Even	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00				
Even	DIRECT	spare											8.00	38.00				
Even	Even ShiftCount		8.00	8.00	7.00	7.00	8.00	8.00	8.00	54.00	429.20	11.29						
Shift	Shift count	NIGHT	Night from 1800 ends 0730 2ndday							default	count 1=	10.00	9.5 (no backfill)	Shift Length	Wkly Night hrs	Night		
Night	INDIRECT	RN5	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	10.00	38.00				
Night	INDIRECT	RN4.3											10.00	38.00				
Night	INDIRECT	RN4.2											10.00	38.00				
Night	INDIRECT	RN4.1											10.00	38.00				
Night	INDIRECT	RN3G2											10.00	38.00				
Night	INDIRECT	RN3G1											10.00	38.00				
Night	INDIRECT	RN2CDN											10.00	38.00				
Night	INDIRECT	RN2TL											10.00	38.00				
Night	INDIRECT	RN2											10.00	38.00				
Night	INDIRECT	RN1											10.00	38.00				
Night	INDIRECT	EN2											10.00	38.00				
Night	INDIRECT	EN1											10.00	38.00				
Night	INDIRECT	AJN											10.00	38.00				
Night	DIRECT	RN4NP											10.00	38.00				
Night	DIRECT	RN3G2											10.00	38.00				
Night	DIRECT	RN3G1											10.00	38.00				
Night	DIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00				
Night	DIRECT	RN2											10.00	38.00				
Night	DIRECT	RN2*											10.00	38.00				
Night	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	210.00	5.53	10.00	38.00				
Night	DIRECT	RN1P											10.00	38.00				
Night	DIRECT	ENL2											10.00	38.00				
Night	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00				
Night	DIRECT	EN1P											10.00	38.00				
Night	DIRECT	spare											10.00	38.00				
Night	Night ShiftCount		5.00	5.00	5.00	5.00	5.00	5.00	5.00	35.00	350.00	9.21						
TOTAL	Total M-E-N shift Count		25.00	25.00	21.00	21.00	25.00	25.00	25.00	167.00								
	Wkly FTE Summary		thu	fri	sat	sun	mon	tue	wed	Total	shift length	Shift	FTE	Bud beds	31			
Total	Total wky shifts/staff		25.00	25.00	21.00	21.00	25.00	25.00	25.00	167.00	8h shift	Morn	7.714	4				
Total	Total Wkly Hours		209.20	209.20	177.60	177.60	209.20	209.20	209.20	1401.20	8h shift	Even	5.714	5				
Total	Total Wkly FTE		5.51	5.51	4.67	4.67	5.51	5.51	5.51	36.87	10h shift	Night	5.000	6				
											Of NRPPD		5.10					

If ADO back change shift

Morn Direct
452.00
61.71
7.714

Even Direct
320.00
45.71
5.7142857

ND Direct
350.00
50.00
5

MUST ENTER	bed/Unit Activities	ENTER Budget Beds and Daily available Open Bed numbers							BUDGET	31	OPEN	31	Note: Enter Bed numbers 1 Unit as 1	
	Must complete this section	thu	fri	sat	sun	mon	tue	wed	Total	Occup%	Type in total shift count if no NHPPD required or 1			
	Budget BEDS/Staff	32.0	32.0	28.0	28.0	32.0	32.0	32.0	216.0	100.0%	Type Nos Budgeted Beds for the Unit here			
	BEDS/Unit Staff OPER	32.0	32.0	28.0	28.0	32.0	32.0	32.0	216.0		Type Nos beds staff operating per day			
	DAY/UNIT OPEN	1	1	1	1	1	1	1	7		Type 1=unit is open on the day, 0 if not open			
	NHPPD	thu	fri	sat	sun	mon	tue	wed	TOTAL	Avg day	Fixed targets: FTEs			
	Direct Hours	162.00	162.00	148.00	148.00	162.00	162.00	162.00	1102.00	157.45	Direct FTE 29.00			
	Indirect Hours	47.20	47.20	31.60	31.60	47.20	47.20	47.20	299.20	42.74	Indirect FTE 7.87			
	NHPPD DIRECT	5.06	5.06	5.21	5.21	5.06	5.06	5.06		5.1#2	Non prod FTE 6.25			
	NHPPD IND	1.48	1.48	1.13	1.13	1.48	1.48	1.48		1.385	Prod FTE 36.87			
	Prod NHPPD	6.54	6.54	6.34	6.34	6.54	6.54	6.54		6.487	Total FTE 43.12			
	NONPROD NHPPD	1.10	1.10	1.10	1.10	1.10	1.10	1.10		1.089				
	Daily \$ Cost													
	UoS/NHPPD Est	thu	fri	sat	sun	mon	tue	wed	\$/UoS	Tot\$/UoS	Dir \$ 8,457			
	UoS NHPPD Direct \$	\$ 245	\$ 245	\$ 334	\$ 390	\$ 245	\$ 245	\$ 245	\$ 274		Ind \$ 2,296			
	UoS NHPPD Indirect \$	\$ 71	\$ 71	\$ 72	\$ 84	\$ 71	\$ 71	\$ 71	\$ 74		NonProd \$ 59			
	UoS NHPPD PROD \$\$\$	\$ 316	\$ 316	\$ 406	\$ 474	\$ 316	\$ 316	\$ 316	\$ 348		Prod \$ 10,753			
	UoS/NHPPD NonProd\$\$\$	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 408	Total \$ 10,812			
	Annual FTE POSITION class details:											Office use only		
	Annual FTE:	WEEKLY	Wk FTE	Day	Day	Day	Day	Backfill	Recruit	Premium	Estimate	Adjustment column		
	FTE	Class	Prod (p)	Annual L	PDL L	Man Train	PersL	Super	Factor FTE	FTE	FTE	Annual FTE	Recruit FTE adjust	
	INDIRECT	RN5												
	INDIRECT	RN4.3												
	INDIRECT	RN4.2												
	INDIRECT	RN4.1												
	INDIRECT	RN3G2												
	INDIRECT	RN3G1												
	INDIRECT	RN2CDN	1.000	0.038				0.038	1.038		1.038			
	INDIRECT	RN2TL	2.874	0.386	0.024	0.016	0.110	0.008	6.543	3.283	0.134	3.417		
	INDIRECT	RN2	1.053	0.141	0.009	0.008	0.040	0.003	0.199	1.203	0.049	1.252		
	INDIRECT	RN1												
	INDIRECT	EN2												
	INDIRECT	EN1												
	INDIRECT	AIN	2.947						2.947			2.947		
	DIRECT	RN4NP												
	DIRECT	RN3G2												
	DIRECT	RN3G1												
	DIRECT	RN2TL	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.096	2.190		
	DIRECT	RN2	5.895	0.791	0.048	0.032	0.226	0.016	1.114	6.735	0.275	7.009		
	DIRECT	RN2*	2.105	0.283	0.017	0.012	0.081	0.006	0.398	2.405	0.098	2.503		
	DIRECT	RN1	8.474	1.138	0.070	0.046	0.325	0.023	1.602	9.681	0.395	10.076		
	DIRECT	RN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	DIRECT	ENL2												
	DIRECT	EN1	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695		
	DIRECT	EN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	DIRECT	spare												
	Total FTE equiv		36.874	4.459	0.222	0.148	1.263	0.156	6.247	41.554	1.596	43.120		
	Estimate FTE by Classification													
	Annual FTE summary	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Pool In	Annual	Check		
	Pro & Non Prod FTE	Prod	Annual L	PDL L	Man Train	PersL	Other	FTE	FTE	FTE	FTE	Budget TM1		
	RN	R5												
	RN	R43												
	RN	R42												
	RN	R42NP												
	RN	R41												
	RN	R3G2												
	RN	R3G1												
	RN	R2CDN	1.000	0.038				0.038	1.038		1.038			
	RN	R2TL/S	4.716	0.633	0.039	0.026	0.161	0.013	0.891	5.388	0.220	5.607		
	RN	RN2	9.053	1.215	0.074	0.050	0.347	0.025	1.711	10.342	0.422	10.764		
	RN	R1	8.474	1.138	0.070	0.046	0.325	0.023	1.602	9.681	0.395	10.076		
	RN	R1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	EN	ENL2												
	EN	ENL1	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695		
	EN	ENL1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	AIN	AIN	2.947						2.947			2.947		
	Other	spare												
	FTE total		36.874	4.459	0.222	0.148	1.263	0.156	6.247	41.554	1.596	43.120		
	Unit Summary											Annual Cost Sal Calculation Est		
	Notes:	Prod FTE Sal base	FTE	\$	3,196,628	NHPPD	/UoS	80%						
	Team Leader indirect	Annual Leave FTE	4.46	\$	397,305	Per Unit of Service		18%						
	RNL2 Indirect in the DLN	Prof Develop FTE	0.22	\$	20,792	Direct		2%						
	RNL2* is the Phase 1 unit	Mandatory FTE	0.15	\$	13,861	5.10	\$	274	100%					
		Personal Leave FTE	1.25	\$	112,389	Indirect								
		Other FTE	0.15	\$	12,417	1.39	\$	74						
		Backfill/Relief Factor	1.57	\$	556,764	Prod								
		Recruit FTE	41.55	\$	3,614,724	6.48	\$	348						
		Total EST Annual FTE	43.12	\$	3,753,391	Non Prod								
		Shift Penalty Cal		\$	727,726	1.10	\$	59	\$	727,725.95				
		PH loading 50% PH (Exclude M-F)		\$	87,597	Av wky	Av Hry Rate	\$	87,596.96					
		Prod FTE (incl Pen)	36.87	\$	4,011,951		\$	53.72						
	APPROVED BY:	Date			Eet Daily \$\$ Cost Prod/Unit	\$	10,753	\$\$ per Uos	\$	408				
	Comments:													
	Weekly prod FTE = the must have FTE													
	Projected FTE has been signed off? approved? Then, don't forget!													
	Please forward a copy of the template to NIMS Unit for updating of the Proact database													

Shift Count including AIN Staffing guide report										
Direct+AIN	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL	
Direct+AIN	Morn	9.0	9.0	8.0	8.0	9.0	9.0	9.0	61.0	
Direct+AIN	Even	7.0	7.0	6.0	6.0	7.0	7.0	7.0	47.0	
Direct+AIN	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0	
Direct Total	Total	21.0	21.0	19.0	19.0	21.0	21.0	21.0	143.0	

Shift count Direct (not counting AIN)										
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL	
Direct	Morn	8.0	8.0	7.0	7.0	8.0	8.0	8.0	54.0	
Direct	Even	6.0	6.0	5.0	5.0	6.0	6.0	6.0	40.0	
Direct	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0	
Direct Total	Total	19.0	19.0	17.0	17.0	19.0	19.0	19.0	129.0	

AIN shift count										
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL	
Direct	Morn	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0	
Direct	Even	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0	
Direct	Night									
Direct Total	Total	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0	

Shift Count INDIRECT (includes AIN)										
INDIRECT	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL	
Indirect	Morn	4.0	4.0	2.0	2.0	4.0	4.0	4.0	24.0	
Indirect	Even	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0	
Indirect	Night									
Indirect Total	Total	6.0	6.0	4.0	4.0	6.0	6.0	6.0	38.0	

Total shift count										
Total	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL	
Total	Morn	12.0	12.0	9.0	9.0	12.0	12.0	12.0	78.0	
total	Even	8.0	8.0	7.0	7.0	8.0	8.0	8.0	54.0	
Total	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0	
Total	Total	25.0	25.0	21.0	21.0	25.0	25.0	25.0	167.0	

Note: AIN hours are INDIRECT hours
 ProAct Staffing DEMAND use this figures
 Contact NIMS if Demand to exclude AIN count
 See below shift count
 NHPPD - Direct hours (AIN hours are NOT included)
 Ratio N:P AIN not included

Note: ProAct system - Roster DEMAND Screen
 Default screen
 Demand Screen
 Staffing guide set up

Attention: The Template projects:
 the number of staffing requirement for each shift
 This figures must be accurate and signed of as the Budget plan for this year.

Note: Unupdate notes are available:

Patient Ratio (AIN excluded)											Bed
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	Avgday	occupy	
Direct	Morn	3.9	3.9	4.4	4.4	3.9	3.9	3.9	4.0	31	
Direct	Even	5.1	5.1	6.2	6.2	5.1	5.1	5.1	5.4	31	
Direct	Night	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	31	
Direct P/N Ratio av DAY		5	5	6	6	5	5	5	5	31	

Note: Nurse /Patient Ratio based on Full occupancy

check:	Weekly	Wkly Prod	Wk Annual L	Day PDL L	Day ManTrain	Day PersL	Day Other	Backfill FTE	Recruit FTE	Pool in FTE	Annual FTE
FTE total	38	36.87	4.46	0.22	0.15	1.26	0.15	6.25	41.55	1.57	43.12
38 wkly Hour		1,401.20	169.43	8.44	5.63	47.99	5.88	237.37	1,579.07	59.50	1,638.57
Count	Shift	Estimate number of shifts per week / S shift count / FTE									
	7.50 Stand shift	184.4	22.3	1.1	0.7	6.3	0.8	31.2	207.8	7.8	215.6

Use	148
Appn Code	7016.000
Class Code	60700000
Miniproductive PTE	17
Open Position PTE	17
Unk Open Day	CLASS
Miniproductive PTE	17
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	1,001
R4106	4,744
R42	9,191
R1	5,474
R4P	3,847
R4L2	
R4L1	4,759
R4L1P	2,547
R4	5,847
R4P	
Annual Leave	6,857
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	6,034
R4106	6,831
R42	12,112
R1	1,118
R4P	9,294
R4L2	
R4L1	6,947
R4L1P	2,294
R4	
R4P	
Annual Leave	8,136
Professional	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	3,046
R4106	10,074
R42	5,076
R1	
R4P	
R4L2	
R4L1	3,038
R4L1P	
R4	
R4P	
Professional	9,222
Mandatory Training	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	9,020
R4106	9,310
R42	9,348
R1	
R4P	
R4L2	
R4L1	9,028
R4L1P	
R4	
R4P	
Mandatory Training	9,148
Personal Leave	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	8,941
R4106	9,247
R42	9,130
R1	
R4P	
R4L2	
R4L1	4,194
R4L1P	5,115
R4	
R4P	
Personal Leave	1,363
Other Day	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	8,013
R4106	8,351
R42	8,233
R1	
R4P	
R4L2	
R4L1	8,415
R4L1P	9,040
R4	
R4P	
Other Day	8,163
Non-Productive PTE	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	3,036
R4106	3,072
R42	1,208
R1	1,207
R4P	3,161
R4L2	
R4L1	8,688
R4L1P	9,598
R4	
R4P	
Non-Productive PTE	1,661
Supervisor	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	8,038
R4106	8,991
R42	1,711
R1	1,623
R4P	8,544
R4L2	
R4L1	9,800
R4L1P	9,549
R4	
R4P	
Supervisor	9,811
Other PTE	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	1,038
R4106	3,188
R42	1,028
R1	9,881
R4P	3,849
R4L2	
R4L1	9,112
R4L1P	3,849
R4	
R4P	
Other PTE	11,517
Productive PTE	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	9,088
R4106	9,400
R42	10,794
R1	1,018
R4P	2,442
R4L2	
R4L1	3,886
R4L1P	3,840
R4	
R4P	
Productive PTE	41,138
Other PTE	
R43	
R42	
R42DP	
R41	
R422	
R421	
R420	
R420M	9,000
R4106	9,214
R42	9,572
R1	1,207
R4P	3,161
R4L2	
R4L1	8,688
R4L1P	9,598
R4	
R4P	
Other PTE	9,214
Productive PTE	
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R42DP	
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R420M	8,000
R4106	8,400
R42	9,572
R1	1,207
R4P	3,161
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R4L1	8,688
R4L1P	9,598
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Productive PTE	41,138
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R420M	9,000
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R4L1P	9,598
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Productive PTE	41,138
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R420M	9,000
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R4L1P	9,598
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Productive PTE	41,138
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R420M	9,000
R4106	9,214
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Productive PTE	41,138
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Productive PTE	41,138
Other PTE	
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R4106	9,214
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R4P	3,161
R4L2	
R4L1	8,688
R4L1P	9,598
R4	
R4P	

The NIMS Template is used to estimate the Annual Nursing FTE requirements for the unit.

Nurse Manager Worksheet

Data entry - Only use the active cells to enter the number of shifts required

Unit Data Enter the following information on the worksheet
 Division Enter the Service type
 N Manager Enter the Name of RN3 preparing the estimate - NM
 UNIT Enter the name of the Unit
 appn Enter the Appn code - salary costcentre
 costcentre Enter the Correct Cost Centre
 Bed open and Day open fields - data will be populated into these two fields.

Save file instruction:

Save the file immediately after you have enter Unit data using the following preferred file name:
 [appcode-costcentre][unitname]-2013-14 TCH NIMS FTE template [initials][date] [V#]

Data Entry Enter the shift count between Thu - Wed columns

Shift count is based on the standard shift length of 8-8-10

Shift length box is set up to calculate the Shift count per shift based on the current standard shift length

Morn shift standard shift length is	8 hours	7:00am start
Even shift standard shift length is	8 hours	12:00 pm start
Night shift standard shift length is	10 hours	9:00pm start

If roster contains 12hr shift / 10 hr shift, use the appropriate shift count guidelines

Note: 12hr shift - place Day 12h in Morn cell, place Night 12h in Night cell

Using the active cells highlighted in colour -

enter the Equivalent no of shift counts required for each classification

use separate template for each sub-group if a separate ROSTER is required (Proact system)

For example - Postnatal ward and Midcall program requires separate rosters

Use a separate template to calculate the shift/te requirements for subgroups under same cost centre

add the shift count data together in a separate template for calculation of total FTE

Annual FTE Estimate section

Relief Factor calculation section

Backfill/Relief Factor component set up:

Executive Decision - adjustment of relief factor reference in Columns U,V,W,X,Y,Z (starting in row 120)

check the No. of annual leave weeks - 4, 5, 6, or 7

Check the No. of days required for Personal leave provision - backfill factor stands at 14 days

Check the No. of days required for PDL/Education provision & PPT provision default 3 days

Check the No. of days required for Mandatory Training default 2 days

Check the No. of Other days required for Other roles (tips - mainly for Graduate program eg Supervisory/Program Dev)

the number entered in the Backfill/Relief Factor active cells would automatically be calculated to determine the weekly FTE requirements to complete a unit roster
 the weekly Annual Leave allocation for the unit / determine the backfill FTE
 the estimate relief factor - for backfilling of unscheduled leave
 the estimate Education / PDL backfill

these fields contained formula that will calculate the Backfill/Relief component that form the Annual FTE requirement

check annual leave requirements for Free Leave relief factor:

Mon-Fri Non shift workers +PH off	annual Leave entitlement	4
Mon-Fri Non shift workers +PH off +wk wkends	annual Leave entitlement	5
Shift workers +PH off + no weekends	annual Leave entitlement	5
Shift workers +weekends +PH off	annual Leave entitlement	6
Shift workers +PH +weekends	annual Leave entitlement	7

Note: worked One PH, One weekend rule

the worksheet will automatically calculate the annual FTE requirements once the correct shift count numbers are entered

Bed Unit activities per day for inpatients / day patients / no estimation booked consultations / no. of staff working in the unit

Enter the BUDGETED beds number / shifts to the day
 Enter the number of projected beds available [OPEN] for each day
 for example, in some area, the available/staff beds may be reduced at the week ends
 Enter the day (equivalent to 1) that the unit is opened - ie day open count
 If the Unit is closed on Sat and Sun, then do not enter the figure [1] on the cell

the data must be entered accurately as this information is required to calculate the

Nursing Hours per patient days is based on the average hours provided for the operational bed numbers & % bed Occup

Direct Nursing Hours Per Patient Day / Unit of Service estimate (Proact system)

The Template is set up with formula to clearly identify the estimated Direct FTE (direct patient care) hours required for the unit
 Estimated Indirect FTE hours (staff rostered to the Unit but not directly taking on patient care load)

Check Ageded NHPFD for units included in the Reasonable workload program

Unit of Service/Daily Average & cost

The template provides an estimate of Unit of Service cost estimate per patient hours provided.
 Note: Average hly rate is calculated based on the total hours rostered to the unit (including shift penalties)
 this is an estimate of the hly rate based on the combination of skill mix required for the unit
 It also calculate the average Daily \$\$ cost - it gives an estimate of the \$Daily cost required to run the unit

Indirect nursing hours

calculated automatically to identify the nursing hours provided not directly related to individual patient care
 for example - Clinical Nurse consultant, CDM, Supervisory (team leader) not providing direct individual patient care

Annual FTE Estimate by Class Details:

When the shift counts have been entered into the worksheet, all the calculation will be done automatically to provide details of FTE estimate:
 the determined staffing requirement to roster the unit on an average weekly basis from Thur-Wed
 the determined annual leave FTE (that can be released & estimate Backfill/Relief component factor)
 the determined PDL leave component
 the determined Mandatory training hours component to estimate the backfill/RELIEF pool component:
 the determined personal leave backfill/RELIEF pool component

The Class details can then be compared with the current FTE eq of staff employed in the Unit.

Space for notes and other comments that may affect the estimate

Use this space to record specific anomalies / variance that may occur throughout the budget period.

FTE Dollar calculation

The template include the basic \$\$ cost based on the hly rate and shift penalty rate only.

Project shift penalty for every shift count

Project PH Penalty 50% loading

Excluded from this template are

Project on call / close call hours payable for on/close call allowances

Projected hours payable for responsibility allowance

For further details or explanation on the use of template, please contact Chin Wong K 42419

This template is not to be reproduced without permission.

NIMS Template for NON Nursing is available for calculation of nurse employees classification included position FTE

please contact Chin Wong if required.

Shift count calculation based on 8x6x10 pattern
 All shift default hour = 8

Standard hr	shift hr	shift count
8	8	0.50
8	8	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50
8	7.5	0.95 No ADO

PM Shift

Standard hr	shift hr	Shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50

Night Duty:

The default ND hour = 10

Standard hr	shift hr	shift count
10	10	1.00
10	12	1.20
10	8	0.80
10	0.8	0.95

12 Hour shift:

Morn
 0700-1800 base penalty - Morn shift hours
 after 1800 22.5% penalty - Night shift hours

Even start
 1200-1800 Even 12.5% - Even shift hours
 after 1800 22.5% penalty - Night shift hours

Night
 1800 start till 0730
 22.5% penalty - Night shift hours
 Beyond 0730 revert base penalty

From: Kanta Toraskar [REDACTED]
Sent: Thursday, 14 July 2022 12:12 PM
To: LHN Coord
Cc: Greg Bayliss (Calvary); Pini, Sallyanne (Health)
Subject: RE: ACT Health - Legislative Assembly Qons - 829 , 830, 833 - status update

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Sinead

Caution: This email originated from outside of the ACT Government. Do not click links or open attachments unless you recognise the sender and know the content is safe. [Learn why this is important](#)

Yes just this one, extension requested till 21 July

Regards

Kanta Toraskar
 Executive Assistant to General Manager and CFO



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary.com.au

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Thursday, 14 July 2022 11:57 AM
To: Kanta Toraskar <[REDACTED]>
Cc: LHN Coord <LHNCoord@act.gov.au>; Greg Bayliss <[REDACTED]>; Pini, Sallyanne <Sallyanne.Pini@act.gov.au>
Subject: RE: ACT Health - Legislative Assembly Qons - 829 , 830, 833 - status update

CAUTION: This email originated from outside of Calvary Public Hospital Bruce. Do not click links or open attachments unless you recognise the sender and know the content is safe.

OFFICIAL

Hi Kanta,

Can you let me know how long you need for 1214? and is your extension request just for this QON?

ACTHEALTH	1214	28/05/2022	12/07/2022	Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce
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Thanks
 Sinead

From: Kanta Toraskar [REDACTED]
 Sent: Thursday, 14 July 2022 11:38 AM
 To: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
 Cc: LHN Coord <LHNCoord@act.gov.au>; Greg Bayliss (Calvary [REDACTED]); Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
 Subject: RE: ACT Health - Legislative Assembly Qons - 829 , 830, 833 - status update

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Hi Sallyanne

We would like to request an extension for ACTH 1214 please as the staff who needs to work on this is on leave.

Regards

Kanta Toraskar
 Executive Assistant to General Manager and CFO



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
 Sent: Monday, 11 July 2022 3:48 PM
 To: Robin Haberecht [REDACTED]; Greg Bayliss [REDACTED]; Pini, Sallyanne <Sallyanne.Pini@act.gov.au>
 Cc: LHN Coord <LHNCoord@act.gov.au>; Kanta Toraskar [REDACTED]
 Subject: ACT Health - Legislative Assembly Qons - 829 , 830, 833 - status update
 Importance: High

CAUTION: This email originated from outside of Calvary Public Hospital Bruce. Do not click links or open attachments unless you recognise the sender and know the content is safe.

OFFICIAL: Sensitive

Dear Robin,

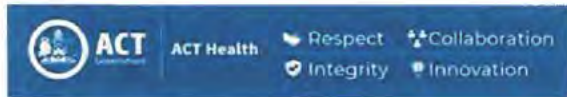
I'm following up on below outstanding QONs and just want to confirm status with you, two are due tomorrow. We need to progress the information up through the ACT Health clearance process as soon as we can, and would appreciate your update.

Calvary Ref number	Date to Calvary	Date due from Calvary	Title
Out of Scope			
ACTHEALTH 1214	28/06/2022	12/07/2022	Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce.

Thank you,

Vjgt d3#

Sinead Clarke | Assistant Director
Direct Phone: +61 2 5124 9351 | Direct Email: sinead.clarke@act.gov.au
Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate
Level 4, 6 Bowes Street Phillip ACT 2606
health.act.gov.au



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Hospitality | Healing | Stewardship | Respect

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From: LHN Coord
Sent: Thursday, 14 July 2022 1:41 PM
To: GovernmentBusinessHealth
Cc: Pini, Sallyanne (Health); Rad, Chadia (Health); LHN Coord
Subject: RE: Calvary requesting extension - QON 833 - Breakdown of wards

Categories: 02. QoN

OFFICIAL

Hi Kylie,

Calvary have advised they are unable to provide input to this QON until 21 July 2022, due staffing restraints.

Thank you,
Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Thursday, 30 June 2022 1:30 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: Calvary requesting extension - QON 833 - Breakdown of wards

OFFICIAL

Hi Sinead

Apologies for the delay getting back to you.

I will email the DLO to advise Calvary input will be late and to flag this with the MO. Consider the request approved.

Kind regards
Kylie

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Tuesday, 28 June 2022 3:14 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: Calvary requesting extension - QON 833 - Breakdown of wards

OFFICIAL

Hi Kylie,

Can you seek an extension to 12 July 2022, due to staffing constraints in Calvary.

Thank you,
Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Tuesday, 28 June 2022 12:35 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: CHS draft response QON 833 - Breakdown of wards
Importance: High

OFFICIAL

Hi team

CHS has provided a very very early draft of their response to QON 833.

It will give you an indication of the direction they are going in but doesn't provide any info on definition/methodology for counting of beds and treatment spaces, or methodology for staff numbers.

Given that CHS are referencing ward maps for questions (i)-(iii) do you still need advice on how to respond to these questions re inclusion and counting beds?

I will follow up with CHS to get the advice on methodology for staff numbers.

Thanks
Kylie

Kylie Gstrein | A/g Director, Government Business
 Email: GovernmentBusinessHealth@act.gov.au
 Ministerial and Government Services | ACT Health Directorate
 Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au



From: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Sent: Tuesday, 28 June 2022 9:29 AM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

OFFICIAL

Hi Kylie

here is the very draft unfinished response to 833, it may not help a great deal but I will give you an idea of the direction CHS is heading.

Kind Regards
Kerryn Hunter
 Directorate Liaison Officer | Canberra Health Services
 Phone: 620 55030 | Mobile [REDACTED] | Email: chsdl@act.gov.au
 Office of Rachel Stephen-Smith MLA | Minister for Health | ACT Government
 Office of Emma Davidson MLA | Minister for Mental Health and Justice Health | ACT Government

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Monday, 27 June 2022 12:25 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>

Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

Thanks Kerryn

By my count we are just waiting on advice for QONs 829 & 833 in relation to this request. We will need the advice in order to ensure Calvary input is consistent with CHS response.

Thanks
Kylie

Kylie Gstrein | A/g Director, Government Business
Email: GovernmentBusinessHealth@act.gov.au
Ministerial and Government Services | ACT Health Directorate
Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au



Out of Scope

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 20 June 2022 4:38 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Subject: CHS Advice required - QONs 805, 830, 829 & 867
Importance: High

Hi Kerryn/team

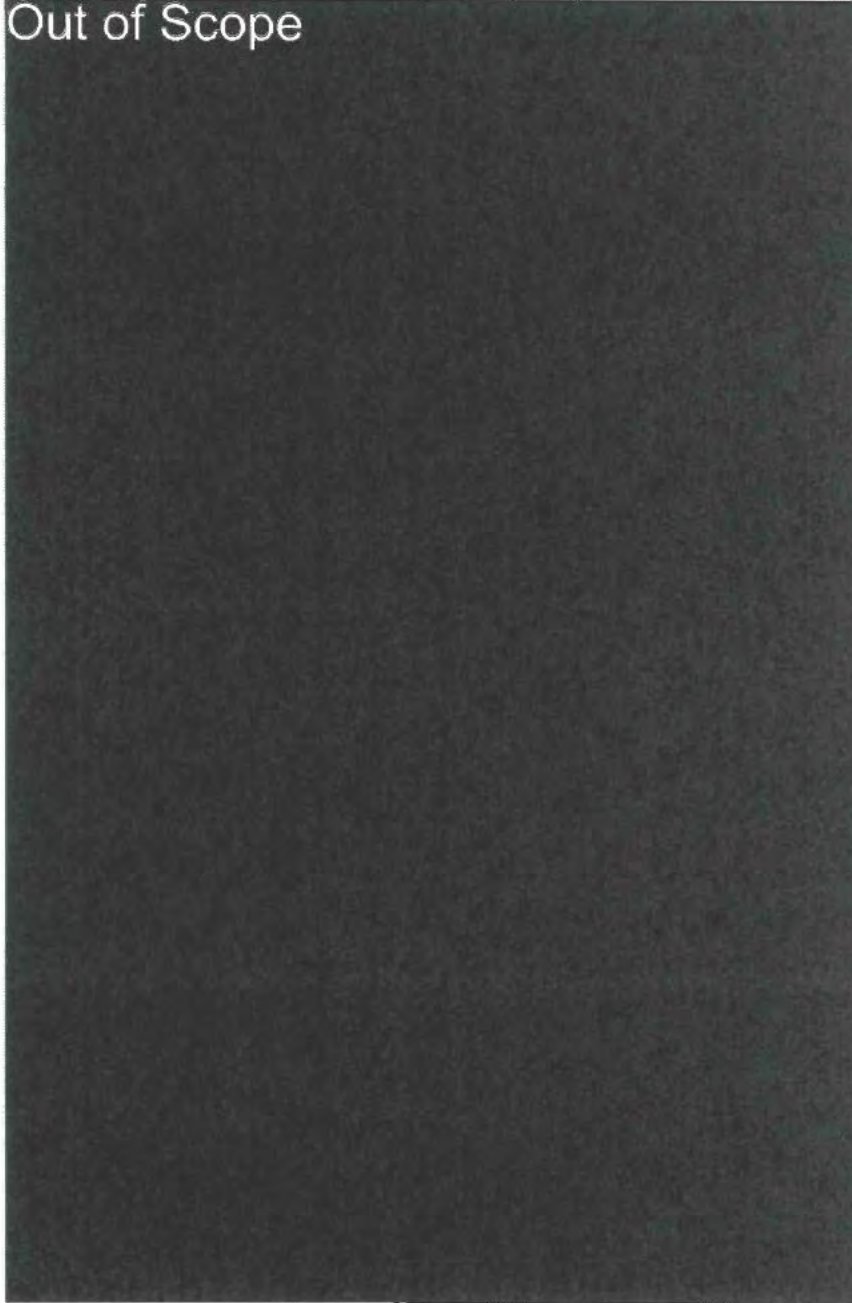
Just tried to call. ACTHD is seeking the below clarification/advice to ensure consistent input is sought from Calvary in response to QONs. Given the volume of health related QONs I thought it would be useful to talk through them first. Also, I'm happy to send them through individually if that is easier to manage.

Could we get advice ASAP noting the QON 805 expires on 3 July and the rest expire on 10 July.

Thanks
Kylie

TRIM and QON No.	Questions	Lead	Advice required
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Out of Scope



Out of Scope

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv))
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From: Clarke, Sinead (Health)
Sent: Thursday, 14 July 2022 1:45 PM
To: Kanta Toraskar (Calvary)
Cc: LHN Coord; Greg Bayliss (Calvary); Pini, Sallyanne (Health)
Subject: RE: ACT Health - Legislative Assembly Qons - 829 , 830, 833 - status update

Categories: FYI

OFFICIAL

Thanks Kanta,

I've put your requested date to the Government Business team, I'll let you know if there is any issue.

Sinead

From: Kanta Toraskar [REDACTED]
Sent: Thursday, 14 July 2022 11:38 AM
To: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; Greg Bayliss (Calvary) [REDACTED]; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Subject: RE: ACT Health - Legislative Assembly Qons - 829 , 830, 833 - status update

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Hi Sallyanne

We would like to request an extension for ACTH 1214 please as the staff who needs to work on this is on leave.

Regards

Kanta Toraskar
Executive Assistant to General Manager and CFO



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
Sent: Monday, 11 July 2022 3:48 PM
To: Robin Haberecht <[REDACTED]>
Cc: LHN Coord <LHNCoord@act.gov.au>; Kanta Toraskar [REDACTED]; Greg Bayliss <[REDACTED]> Pini, Sallyanne <Sallyanne.Pini@act.gov.au>
Subject: ACT Health - Legislative Assembly Qons - 829 , 830, 833 - status update
Importance: High

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Dear Robin,

I'm following up on below outstanding QONs and just want to confirm status with you, two are due tomorrow. We need to progress the information up through the ACT Health clearance process as soon as we can, and would appreciate your update.

Calvary Ref number	Date to Calvary	Date due from Calvary	Title
Out of Scope			
ACTHEALTH	1214	28/06/2022	12/07/2022
Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce			

Thank you,

Vj1tdg#

Sinead Clarke | Assistant Director
 Direct Phone: +61 2 5124 9951 | Direct Email: sinead.clarke@act.gov.au
 Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate
 Level 4, 6 Bowes Street Phillip ACT 2606
health.act.gov.au



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From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Thursday, 14 July 2022 2:29 PM
To: LHN Coord
Cc: Pini, Sallyanne (Health); Rad, Chadia (Health); GovernmentBusinessHealth
Subject: RE: Calvary requesting extension - QON 833 - Breakdown of wards

OFFICIAL

Hi Sinead

Thanks for the update. I have advised the DLO of the delay on that QON.

Out of Scope



Thanks
Kylie

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Thursday, 14 July 2022 1:41 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: Calvary requesting extension - QON 833 - Breakdown of wards

OFFICIAL

Hi Kylie,

Calvary have advised they are unable to provide input to this QON until 21 July 2022, due staffing restraints.

Thank you,
Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Thursday, 30 June 2022 1:30 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: Calvary requesting extension - QON 833 - Breakdown of wards

OFFICIAL

Hi Sinead

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I will email the DLO to advise Calvary input will be late and to flag this with the MO. Consider the request approved.

Kind regards

Kylie

From: LHN Coord <LHNCoord@act.gov.au>

Sent: Tuesday, 28 June 2022 3:14 PM

To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>

Subject: Calvary requesting extension - QON 833 - Breakdown of wards

OFFICIAL

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Can you seek an extension to 12 July 2022, due to staffing constraints in Calvary.

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Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth

Sent: Tuesday, 28 June 2022 12:35 PM

To: LHN Coord <LHNCoord@act.gov.au>

Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Subject: CHS draft response QON 833 - Breakdown of wards

Importance: High

OFFICIAL

Hi team

CHS has provided a very very early draft of their response to QON 833.

It will give you an indication of the direction they are going in but doesn't provide any info on definition/methodology for counting of beds and treatment spaces, or methodology for staff numbers.

Given that CHS are referencing ward maps for questions (i)-(iii) do you still need advice on how to respond to these questions re inclusion and counting beds?

I will follow up with CHS to get the advice on methodology for staff numbers.

Thanks

Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



From: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Sent: Tuesday, 28 June 2022 9:29 AM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

OFFICIAL

Hi Kylie

here is the very draft unfinished response to 833, it may not help a great deal but I will give you an idea of the direction CHS is heading.

Kind Regards

Kerryn Hunter

Directorate Liaison Officer | Canberra Health Services

Phone: 620 55030 | Mobile: [REDACTED] | Email: chsdl@act.gov.au

Office of Rachel Stephen-Smith MLA | Minister for Health | ACT Government

Office of Emma Davidson MLA | Minister for Mental Health and Justice Health | ACT Government

From: Gstrein, Kylie (Health) <kylie.gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 27 June 2022 12:25 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: RE: CHS Advice required - QONs 805, 830, 829 & 867

Thanks Kerryn

By my count we are just waiting on advice for QONs 829 & 833 in relation to this request. We will need the advice in order to ensure Calvary input is consistent with CHS response.

Thanks

Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



Out of Scope

OFFICIAL

Out of Scope

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 20 June 2022 4:38 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>
Subject: CHS Advice required - QONs 805, 830, 829 & 867
Importance: High

Hi Kerry/team

Just tried to call. ACTHD is seeking the below clarification/advice to ensure consistent input is sought from Calvary in response to QONs. Given the volume of health related QONs I thought it would be useful to talk through them first. Also, I'm happy to send them through individually if that is easier to manage.

Could we get advice ASAP noting the QON 805 expires on 3 July and the rest expire on 10 July.

Thanks
Kylie

TRIM and QON No.	Questions	Lead	Advice required
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Out of Scope

<p>GBC22/367 – QON 833</p>	<p>Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, (v) how many patients have been admitted to each ward in the last financial year, (vi) how many patients have been discharged from each ward in the last financial year,</p>	<p>ACTHD lead with CHS input</p>	<p>Clarity is required from on the following:</p> <ul style="list-style-type: none"> • Inclusions for wards i.e., inpatient/admitted only or will this include Emergency Department etc • Definition/methodology for counting of beds and treatment spaces (question a/b (ii) and (iii)) • Methodology for staff numbers – headcount or FTE (question a/b (iv))
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(vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and (xi) what was the average length of stay for a patient in each ward.		
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From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Friday, 15 July 2022 2:59 PM
To: ACT Health DLO
Cc: GovernmentBusinessHealth; Rad, Chadia (Health)
Subject: Status of ACTHD QONs 862 & 833

Importance: High

OFFICIAL

Hi Cath

As I mentioned earlier this morning, MAGS have been advised that there are further delays in receiving Calvary input for QONs. Calvary have indicated delays until 21 July 2022, noting that final responses will also need to be EGM cleared once input is received.

Below are our outstanding QONs. QON 862 is waiting on Calvary input, and QON 833 is waiting on DAB input after receiving advice from CHS yesterday that they will not provide input due to the TW nature of questions 3 & 4.

Out of Scope

GBC22/367	Expired 10/7/22	HSPE	QON 833 - A breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital	Ms Castley	15/7/22 – Awaiting Calvary input.
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Thanks
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



From: LHN Coord
Sent: Monday, 25 July 2022 9:37 AM
To: Robin Haberecht (Calvary)
Cc: Pini, Sallyanne (Health); Kanta Toraskar (Calvary); Greg Bayliss (Calvary); LHN Coord
Subject: RE: ACTHealth 1214 - Requesting Input - Assembly matter - Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce

Categories: Sinead, Awaiting response

OFFICIAL- Sensitive

Good Morning,

We would appreciate an update on your response to this QON and your clearance of the ACT Health data provided below.

ACT Legislative Assembly – Question on Notice 833

Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including

- (i) a brief description of each ward,
- (ii) how many beds are in each ward,
- (iii) how many treatment spaces are in each ward,
- (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift,
- * Data provided for clearance - ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year,
- * Data provided for clearance - ACT Health DAB can provide (vi) how many patients have been discharged from each ward in the last financial year,
- (vii) how many staff (headcount) have been recruited for each ward in the last financial year,
- (viii) how many staff (headcount) have separated from each ward in the last financial year,
- (ix) what was the budget allocated for each ward in the last financial year,
- (x) how much was spent by each ward in the last financial year and
- *Data provided for clearance - ACT Health DAB can provide (xi) what was the average length of stay for a patient in each ward.

The next ACT Legislative Assembly sitting is next week and we need to finalise the questions as soon as we can and move them into the government clearance workflow, the Ministers may be questioned on any late responses. I would appreciate your early advice today if possible.

Thank you,

Sinead

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Monday, 18 July 2022 2:42 PM
To: Robin Haberecht (Calvary [REDACTED])
Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Kanta Toraskar (Calvary [REDACTED]); Greg Bayliss (Calvary [REDACTED]); LHN Coord <LHNCoord@act.gov.au>
Subject: RE: ACTHealth 1214 - Requesting Input - Assembly matter - Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce

OFFICIAL- Sensitive

Dear Robin,

See below data provided for questions v, vi and xi through the ACT Health Data Analytics Branch (DAB).

Policy, Partnerships and Programs Division

Data Analytics Branch

DSD- 211825

ACT Health Data Repository



ACT
Government

ACT Health

01/07/2020 - 30/06/2021

Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce and

(v) how many patients have been admitted to each ward in the last financial year

Financial Year	LocationID	WardCode	Ward Name	Total Admissions
2020-21	83	SSU_CHC	Short Stay Unit	13,235
2020-21	83	DC_CHC	Day Surgery	4,750
2020-21	83	6WW_CHC	Ward 6 West	3,442
2020-21	83	OR_CHC	OR Elective Patient Admissions	3,339
2020-21	83	MAP_CHC	Ward 5 MAPU	3,313
2020-21	83	3S_CHC	Ward 3 South	2,500
2020-21	83	PEN_CHC	Endoscopy	2,315
2020-21	83	ZM_CHC	Zita Mary	1,889
2020-21	83	BS_CHC	Birth Suite	1,705
2020-21	83	4E_CHC	Ward 4 East	1,260
2020-21	83	HH_CHC	HITH	1,224
2020-21	83	4W_CHC	Ward 4 West	1,162
2020-21	83	CCU_CHC	CCU	866
2020-21	83	5W_CHC	Ward 5 West	759
2020-21	83	ICU_CHC	ICU	746
2020-21	83	5WS_CHC	Ward 5 Stroke Service	568
2020-21	83	MHK_CHC	Mental Health Keaney	485
2020-21	83	6X_CHC	Ward 6 Xavier	425
2020-21	83	NQ_CHC	SC Nursery	407
2020-21	83	HP_CHC	Clare Holland House	357
2020-21	83	OMH_CHC	OPMHIU	253
2020-21	83	BC_CHC	Birth Centre CHC	218
2020-21	83	NU_CHC	3S Nursery	218
2020-21	83	MAA_CHC	Maternity Assessment Area	71
2020-21	83	2N_CHC	Ward 2 North	<5

(xi) what was the average length of stay for a patient in each ward

Financial Year	LocationID	TotalSeparation	WardCode	WardDescription	Avg Length Of Stay
2020-21	83	13,211	SSU_CHC	Short Stay Unit	1.75
2020-21	83	4,750	DC_CHC	Day Surgery	1.07
2020-21	83	3,426	6WW_CHC	Ward 6 West	3.68
2020-21	83	3,323	OR_CHC	OR Elective Patient A	2.57
2020-21	83	3,297	MAP_CHC	Ward 5 MAPU	6.27
2020-21	83	2,497	3S_CHC	Ward 3 South	2.71
2020-21	83	2,316	PEN_CHC	Endoscopy	1.35
2020-21	83	1,891	ZM_CHC	Zita Mary	1.41
2020-21	83	1,706	BS_CHC	Birth Suite	2.6
2020-21	83	1,261	4E_CHC	Ward 4 East	10.71
2020-21	83	1,216	HH_CHC	HITH	6.3
2020-21	83	1,159	4W_CHC	Ward 4 West	11.07
2020-21	83	864	CCU_CHC	CCU	3.29
2020-21	83	743	ICU_CHC	ICU	8.7
2020-21	83	726	5W_CHC	Ward 5 West	8.02
2020-21	83	564	5WS_CHC	Ward 5 Stroke Service	5.4
2020-21	83	476	MHK_CHC	Mental Health Keane	17.32
2020-21	83	417	6X_CHC	Ward 6 Xavier	3.99
2020-21	83	406	NQ_CHC	SC Nursery	7.87
2020-21	83	357	HP_CHC	Clare Holland House	15.91
2020-21	83	252	OMH_CHC	OPMHIU	31.19
2020-21	83	218	NU_CHC	3S Nursery	3.05
2020-21	83	217	BC_CHC	Birth Centre CHC	1.55
2020-21	83	70	MAA_CHC	Maternity Assessment	2.75
2020-21	83	<5	2N_CHC	Ward 2 North	94.25

We would appreciate your clearance on above with the provision of the data for remaining questions with you.

Many thanks,
Sinead

From: LHN Coord <LHNCoord@act.gov.au>

Sent: Tuesday, 28 June 2022 3:28 PM

To: Robin Haberecht (Calvary) <[REDACTED]>

Cc: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Kanta Toraskar (Calvary) <[REDACTED]>; Greg Bayliss (Calvary) <[REDACTED]>; LHN Coord <LHNCoord@act.gov.au>

Subject: RE: ACTHealth 1214 - Requesting Input - Assembly matter - Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce

From: LHN Coord <LHNCoord@act.gov.au>

Sent: Tuesday, 28 June 2022 3:06 PM

To: Robin Haberecht (Calvary) <[REDACTED]>

Cc: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Kanta Toraskar (Calvary) <[REDACTED]>; Greg Bayliss (Calvary) <[REDACTED]>

Subject: ACTHealth 1214 - Requesting Input - Assembly matter - Question on Notice 833 -Can the Minister provide a breakdown of all wards at Calvary Public Hospital Bruce

OFFICIAL: Sensitive

Dear Robin,

The Minister for Health has received a Question on Notice (QON) from Ms Leanne Castley MLA. We are seeking Calvary response to below questions, CHS will also be providing input to this matter.

Following your request for an extension on ACTHealth 1212 just now, I will also request an extension on this one to bring it to 12 July 2022.

Request Reference	ACTHealth 1213
Type	ACT Legislative Assembly – Question on Notice 833
	<p>Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including</p> <ul style="list-style-type: none"> (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, (iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, *ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year, *ACT Health DAB can provide (vi) how many patients have been discharged from each ward in the last financial year, (vii) how many staff (headcount) have been recruited for each ward in the last financial year, (viii) how many staff (headcount) have separated from each ward in the last financial year, (ix) what was the budget allocated for each ward in the last financial year, (x) how much was spent by each ward in the last financial year and *ACT Health DAB can provide (xi) what was the average length of stay for a patient in each ward.
Additional Information	<p>CHS methodology</p> <p>For question (i) CHS are providing a ward map as separate attachment to the QON (we have not received a copy yet and will send on as soon as we do)</p> <p>For question (ii)</p> <ul style="list-style-type: none"> • Definition/methodology for counting of beds and treatment spaces <ul style="list-style-type: none"> Beds - Beds (funded) and included flex beds (unfunded) e.g. 12B - 10 beds (4 flex) • Methodology for staff numbers – headcount or FTE <ul style="list-style-type: none"> CHS will use paid Head Count in specific Cost Centre Codes
Due by:	12 July 2022 – We would appreciate your earliest advice if this date is unachievable or if the data is not in an easily accessible format.

Thank you,

V. Clarke

Sinead Clarke | Assistant Director

Direct Phone: +61 2 5124 9351 | Direct Email: sinead.clarke@act.gov.au

Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate

Level 4, 6 Bowes Street Phillip ACT 2606

health.act.gov.au



From: Warne, Hayley (Health) on behalf of GovernmentBusinessHealth
Sent: Friday, 29 July 2022 2:42 PM
To: LHN Coord
Cc: HSPE: Pini, Sallyanne (Health); GovernmentBusinessHealth
Subject: URGENT - Update on QONs 805, 830, 835 & 833

Importance: High

OFFICIAL

Good afternoon team,

The MO office is very keen to get these QoN's to the committee before sitting next week. Can you please give an updated ETA for the input below for CHS and from Calvary for the HD led QTB.

Thanks


Hayley

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Wednesday, 27 July 2022 1:44 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: Update on QONs 805, 830, 835 & 833

OFFICIAL

Hello Hayley,
See green updates.

Out of Scope



GBC22/367	833	Health	MS CASTLEY: To ask the Minister for Health—Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital,	ACTHD (HSPE) - CHS Input	<p>14/7 - LHN advised calvary delays until 21 July. 18/7 - Input still pending from Calvary</p> <p>17/7/22 LHN report pending from Calvary - committee sent to Health Director 15/8</p>
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Sinead

From: Warne, Hayley (Health) <Hayley.Warne@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Wednesday, 27 July 2022 1:15 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: Update on QONs 805, 830, 835 & 833
Importance: High

OFFICIAL

Good afternoon team,

Can you please provide an update on the below, specifically if there have been any changes to the below advice given to MAGS on Friday 22 July 2022.

Thanks

Hayley

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Friday, 22 July 2022 11:13 AM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Rad, Chadia (Health) <Chadia.Rad@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: Update on QONs 805, 830, 835 & 833

OFFICIAL

Hi Team

Following up on the below QONS. The next sitting is on 2-4 August and MO will want to have responses ASAP to review and provide to chamber support before the sitting. Could I please ask for an update on how these are progressing.



Out of Scope

GBC22/367	833	Health	MS CASTLEY: To ask the Minister for Health—Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital,	ACTHD (HSPE) - CHS Input	14/7 - LHN advised calvary delays until 21 July. 18/7 - Input still pending from Calvary 22/07 – Awaiting clearance from Calvary on DAB data
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Many thanks
Kylie

Kylie Gstrein| A/g Director, Government Business
Email: GovernmentBusinessHealth@act.gov.au
Ministerial and Government Services | ACT Health Directorate
Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au



From: Greg Bayliss <[REDACTED]>
Sent: Thursday, 4 August 2022 1:28 PM
To: Clarke, Sinead (Health)
Cc: Kanta Toraskar (Calvary); LHN Coord
Subject: RE: Response QoN 833.docx

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Sinead

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Hi Sinead

There is not a lot more we can provide – our medical wards (patients not requiring or having surgery) are not delineated into specialties.

Our people do not use treatment spaces at all, it is not a metric that we use for any reporting or capacity considerations. If it some form of assessment of how many beds could be jammed into calvary if every centimetre of floor space in the inpatient areas footprint, again it is meaningless as capacity is against our funded beds. And if such an estimate was given, it would only be used to claim there in unused capacity.

I am sorry that that I cannot assist but our reporting people are loathe to include in a reply to a QoN information that is not part of our normal operational considerations.

Greg

Greg Bayliss
 Communications Manager



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
Sent: Thursday, 4 August 2022 10:22 AM
To: Greg Bayliss <[REDACTED]>
Cc: Kanta Toraskar <[REDACTED]>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: Response QoN 833.docx

CAUTION: This email originated from outside of Calvary Public Hospital Bruce. Do not click links or open attachments unless you recognise the sender and know the content is safe.

OFFICIAL

Thank you Greg,

A couple of initial questions from me, just to flag we may have more as this input goes through clearance.

1. Question i. - asks for a brief description of each ward – acknowledging most wards are self-explanatory, however we may be asked to provide.
 - a. Do you have a document to hand that I can pull some words from? or a map of the wards listed
2. Question iii – asks for treatment spaces, can you confirm the numbers provided are for funded beds and treatment spaces?

Thank you,

Sinead

From: Greg Bayliss <[REDACTED]>
 Sent: Thursday, 4 August 2022 8:05 AM
 To: LHN Coord <LHNCoord@act.gov.au>
 Cc: Kanta Toraskar (Calvary) <[REDACTED]>
 Subject: Response QoN 833.docx
 Importance: High

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Hello LHN
 Please find below our response to QoN 833.
 This material has been cleared by GM Robin Haberecht in an email to me.
 As that email contained other material not related to this matter, I am not forwarding it.
 Greg

Greg Bayliss
 Communications Manager



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including

- (i) a brief description of each ward,
- (ii) how many beds are in each ward,
- (iii) how many treatment spaces are in each ward,

RESPONSE:

Calvary received funding to operate at the following capacity:

Birth Suites	8
Calvary Respiratory Assessment Unit	16
Critical Care	14
Emergency Short Stay Unit	19
Hospital In The Home	18
Maternity	18
Medical	86
Mental Health	36
Palliative Care	19
Special Care Nursery	8
Surgical	28

(iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift,

Staff rostering and roles are dynamic and respond to proven requirements, patient safety considerations, industrial agreements and the nurse/midwife ratios being introduced in the ACT.

The following staffing profile represents a 'normal' weekday at Calvary:

- 30 midwives – 11 for morning, 10 for afternoon, 9 for night shifts
- 205 nurses – 70 for morning, 80 for afternoon, 55 for night shifts
- 120 Junior Medical Officers across 24 hours, supplemented in various specialties and at different times by specialist consultants and visiting medical officers

- Around 100 Allied Health Professionals in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and medical imaging

* Data provided for clearance - ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year,

* Data provided for clearance - ACT Health DAB can provide (vi) how many patients have been discharged from each ward in the last financial year,

(vii) how many staff (headcount) have been recruited for each ward in the last financial year,

This data is not collected for recruitment activities

(viii) how many staff (headcount) have separated from each ward in the last financial year,

This data is not collected for staff separations

(ix) what was the budget allocated for each ward in the last financial year,

Budgets are not assigned to particular wards. Given the dynamic nature of service provision, resources are considered hospital-wide which ensures collaboration around patient care is not compromised by localised budgetary considerations.

(x) how much was spent by each ward in the last financial year and

The perspective applied to budgets is also applied to expenditure, with the imperative being Calvary meeting the activity specified in the Annual Performance Plan from the funding provided from the Territory

*Data provided for clearance - ACT Health DAB can provide (xi) what was the average length of stay for a patient in each ward.

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From: Greg Bayliss <[REDACTED]>
Sent: Wednesday, 10 August 2022 2:59 PM
To: LHN Coord
Cc: Pini, Sallyanne (Health)
Subject: RE: Further questions - inconsistencies in Responses to QoN 805 and QoN 833.docx

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Sinead

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Hi Sinead
I will be seeing Mick Barnes about this tomorrow, he is at the DHR event today.
Greg

Greg Bayliss
Communications Manager



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

www.calvary-act.gov.au

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Wednesday, 10 August 2022 2:36 PM
To: Greg Bayliss <[REDACTED]>
Cc: Kanta Toraskar <[REDACTED]>; Pini, Sallyanne <Sallyanne.Pini@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: Further questions - inconsistencies in Responses to QoN 805 and QoN 833.docx

CAUTION: This email originated from outside of Calvary Public Hospital Bruce. Do not click links or open attachments unless you recognise the sender and know the content is safe.

OFFICIAL

Hi Greg,

I'm following up on the further information for QON 833?

FYI - QON 805 Maternity and QON 830 Mental Health Wards, we provided Calvary input to CHS who were managing both and who will move them up the line into the Ministers Office.

Thank you,

Sinead

From: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Sent: Monday, 8 August 2022 11:31 AM

To: Greg Bayliss (Calvary) [REDACTED] LHN Coord <LHNCoord@act.gov.au>
 Cc: Kanta Toraskar (Calvary) [REDACTED]
 Subject: RE: Further questions - inconsistencies in Responses to QoN 805 and QoN 833.docx

Hi Greg

Sorry for the back on forth on the QONs, and thank you for being patient with us as we try to work through them. Apologies if we've made this one confusing and hopefully our chat just now has helped to clarify few points.

For the maternity question, we just wanted to double check which areas were included in the 30 physical beds number provided under QON 805 e.g., does that include or exclude SCN and Birthing Suite (assuming it is excluding if the total funded adds up to more than the total physical)?

For context, in the other recent QONs e.g. maternity QON 805 and mental health QON 830, we have decided to use physical bed numbers only and in this QON 833 we've got funded bed numbers. This is what each of the responses will provide as it stands:

	Out of Scope	QON 833
Maternity		18 funded
Special care nursery		8 funded
Birthing suite		8 funded

	Out of Scope	QON 833
Mental Health		36 funded

We just want to ensure we're across the detail and we make a note of the difference in numbers at the outset in anticipation of different numbers creating a whole new set of questions. Alternatively, we could include physical bed numbers for this QON 833 as well so that it matches the others if that would be preferred?

Happy to chat further if needed.

Thanks
 Saliyanne

Saliyanne Pini | Senior Director
 Ph: 02 6205 4689 | M [REDACTED] Email: saliyanne.pini@act.gov.au
 Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate

From: Greg Bayliss [REDACTED]
 Sent: Monday, 8 August 2022 11:04 AM
 To: LHN Coord <LHNCoord@act.gov.au>; Pini, Saliyanne (Health) <Saliyanne.Pini@act.gov.au>
 Cc: Kanta Toraskar (Calvary) [REDACTED]
 Subject: RE: Further questions - inconsistencies in Responses to QoN 805 and QoN 833.docx

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Hi LHN and Saliyanne

Further to this – would it be possible for me to see the draft material that has been compiled for QoN – in its most recent state.

I spoke to the Assembly this morning and they confirmed the answer has not been provided or tabled.

I am going around in circles here with our Performance and Data people.

I appreciate you have recognised an inconsistency but it would be helpful if you could give me the actual material you have – perhaps the inaccuracy or confusion is coming from content in 805.

I hope you can assist.

Greg

Greg Bayliss
 Communications Manager

Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: Greg Bayliss
Sent: Monday, 8 August 2022 9:49 AM
To: 'LHN Coord' <LHNCoord@act.gov.au>
Cc: Kanta Toraskar <[REDACTED]>; Pini, Sallyanne <Sallyanne.Pini@act.gov.au>
Subject: RE: Further questions - Response QoN 833.docx

Good morning All
Please see comments below.
I am still trying to formulate our response to your query about maternity beds.
Greg

Q. For the Mental Health QON you gave us both beds/treatment spaces, so we are consistent can you provide same for this QON

A. Mental health services can only be physically provided in either Acacia or OPMHU.

You would appreciate the physical infrastructure, fittings and equipment requirements for these patients. It is not possible to locate these patients in other clinical settings.

Therefore this is a physical capacity (treatment spaces) limit. The same does not apply for medical or surgical patients who may be placed in other areas depending on activity and capacity, or for whom other ward settings may be deemed a suitable place for medical or surgical inpatient admissions.

Q. Please confirm if the 120 staff is at any given time during the day, or split into different shifts?

A. the 120 JMOs are spread over shifts to provide appropriate coverage over each 24 hours

Q. Please confirm if the 100 staff is at any given time during the day, or split into different shifts?

A. these staff work a variety of shifts to provide a span of hours in disciplines where that is required, noting that Medical Imaging is the only 24/7 allied health service

Greg Bayliss
Communications Manager

Public Hospital Bruce
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PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Thursday, 4 August 2022 2:13 PM
To: Greg Bayliss <[REDACTED]>
Cc: Kanta Toraskar <[REDACTED]>; LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne <Sallyanne.Pini@act.gov.au>
Subject: Further questions - Response QoN 833.docx
Importance: High

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OFFICIAL: Sensitive

Thanks Greg,

I'll note your advice below as it moves upwards.
 As promised (sorry) we have some 4 more questions – see red below.

Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including (i) a brief description of each ward, (ii) how many beds are in each ward, (iii) how many treatment spaces are in each ward, RESPONSE: Calvary received funding to operate at the following capacity:	
Birth Suites	11
Calvary Respiratory Assessment Unit	16
Critical Care	14
Emergency Short Stay Unit	19
Hospital In The Home	18
Maternity – Scott Mackenzie provided us beds numbers for QON 805 = 30 unfunded – when we calculate the three maternity type wards here it is 34 beds please let us know what the variance is – I'm sure it to do with methodology ?	18
Medical	86
Mental Health	36
Palliative Care	19
Special Care Nursery	11
Surgical	28
Q (ii) (iii) Noting your advice below – can you provide us physical bed numbers as well as funded?	
<ul style="list-style-type: none"> Our people do not use treatment spaces at all, it is not a metric that we use for any reporting or capacity considerations. For the Mental Health QON you gave us both beds/treatment spaces, so we are consistent can you provide same for this QON? 	
(iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift, Staff rostering and roles are dynamic and respond to proven requirements, patient safety considerations, industrial agreements and the nurse/midwife ratios being introduced in the ACT. The following staffing profile represents a 'normal' weekday at Calvary:	
<ul style="list-style-type: none"> 30 midwives – 11 for morning, 10 for afternoon, 9 for night shifts 205 nurses – 70 for morning, 80 for afternoon, 55 for night shifts 120 Junior Medical Officers across 24 hours, supplemented in various specialties and at different times by specialist consultants and visiting medical officers Please confirm if the 120 staff is at any given time during the day, or split into different shifts? Around 100 Allied Health Professionals in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and medical imaging Please confirm if the 100 staff is at any given time during the day, or split into different shifts? 	
* Data provided for clearance - ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year,	
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(vii) how many staff (headcount) have been recruited for each ward in the last financial year, This data is not collected for recruitment activities	
(viii) how many staff (headcount) have separated from each ward in the last financial year,	

Out of Scope

This data is not collected for staff separations
 (ix) what was the budget allocated for each ward in the last financial year,
 Budgets are not assigned to particular wards. Given the dynamic nature of service provision,
 resources are considered hospital-wide which ensures collaboration around patient care is not
 compromised by localised budgetary considerations.
 (x) how much was spent by each ward in the last financial year and
 The perspective applied to budgets is also applied to expenditure, with the imperative being Calvary
 meeting the activity specified in the Annual Performance Plan from the funding provided from the
 Territory
 *Data provided for clearance - ACT Health DAB can provide (xi) what was the average length of stay
 for a patient in each ward.

From: Greg Bayliss <[REDACTED]>
 Sent: Thursday, 4 August 2022 1:28 PM
 To: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
 Cc: Kanta Toraskar (Calvary) <[REDACTED]> LHN Coord <LHNCoord@act.gov.au>
 Subject: RE: Response QoN 833.docx

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Hi Sinead

There is not a lot more we can provide – our medical wards (patients not requiring or having surgery) are not delineated into specialties.

Our people do not use treatment spaces at all, it is not a metric that we use for any reporting or capacity considerations.

If it some form of assessment of how many beds could be jammed into calvary if every centimetre of floor space in the inpatient areas footprint. again it is meaningless as capacity is against our funded beds. And if such an estimate was given, it would only be used to claim there in unused capacity.

I am sorry that that I cannot assist but our reporting people are loathe to include in a reply to a QoN information that is not part of our normal operational considerations.

Greg

Greg Bayliss
 Communications Manager



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
 Sent: Thursday, 4 August 2022 10:22 AM
 To: Greg Bayliss <[REDACTED]>
 Cc: Kanta Toraskar <[REDACTED]> LHN Coord <LHNCoord@act.gov.au>
 Subject: RE: Response QoN 833.docx

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OFFICIAL

Thank you Greg,

A couple of initial questions from me, just to flag we may have more as this input goes through clearance.

1. Question i. - asks for a brief description of each ward – acknowledging most wards are self-explanatory, however we may be asked to provide.
 - a. Do you have a document to hand that I can pull some words from? or a map of the wards listed
2. Question iii – asks for treatment spaces, can you confirm the numbers provided are for funded beds and treatment spaces?

Thank you,

Sinead

From: Greg Bayliss [redacted]
 Sent: Thursday, 4 August 2022 8:05 AM
 To: LHN Coord <LHNCoord@act.gov.au>
 Cc: Kanta Toraskar (Calvary) [redacted]
 Subject: Response QoN 833.docx
 Importance: High

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Hello LHN
 Please find below our response to QoN 833.
 This material has been cleared by GM Robin Haberecht in an email to me.
 As that email contained other material not related to this matter, I am not forwarding it.
 Greg

Greg Bayliss
 Communications Manager



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614
www.calvary-act.com.au

Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including
 (i) a brief description of each ward,
 (ii) how many beds are in each ward,
 (iii) how many treatment spaces are in each ward,
 RESPONSE:

Calvary received funding to operate at the following capacity:

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Medical	86
Mental Health	36
Palliative Care	19
Special Care Nursery	8

(iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift,

Staff rostering and roles are dynamic and respond to proven requirements, patient safety considerations, industrial agreements and the nurse/midwife ratios being introduced in the ACT.

The following staffing profile represents a 'normal' weekday at Calvary:

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- 120 Junior Medical Officers across 24 hours, supplemented in various specialties and at different times by specialist consultants and visiting medical officers
- Around 100 Allied Health Professionals in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and medical imaging

* Data provided for clearance - ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year,

* Data provided for clearance - ACT Health DAB can provide (vi) how many patients have been discharged from each ward in the last financial year,

(vii) how many staff (headcount) have been recruited for each ward in the last financial year,

This data is not collected for recruitment activities

(viii) how many staff (headcount) have separated from each ward in the last financial year,

This data is not collected for staff separations

(ix) what was the budget allocated for each ward in the last financial year,

Budgets are not assigned to particular wards. Given the dynamic nature of service provision, resources are considered hospital-wide which ensures collaboration around patient care is not compromised by localised budgetary considerations.

(x) how much was spent by each ward in the last financial year and

The perspective applied to budgets is also applied to expenditure, with the imperative being Calvary meeting the activity specified in the Annual Performance Plan from the funding provided from the Territory

*Data provided for clearance - ACT Health DAB can provide (xi) what was the average length of stay for a patient in each ward.

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From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Monday, 15 August 2022 9:23 AM
To: LHN Coord
Cc: HSPE; Pini, Sallyanne (Health); Stewart, Margaret (Health); GovernmentBusinessHealth; Ellis, Catherine (Health)
Subject: VERY URGENT - Update on QONs 830, 835, 833 & QTON

Importance: High

OFFICIAL

Hi all

MO is chasing the response to QON 833. Can you please advise where this is up to ASAP.

Thanks
Kylie

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Tuesday, 9 August 2022 1:16 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: FOR ADVICE BY 3PM TODAY- Update on QONs 830, 835, 833 & QTON

OFFICIAL

Hi Kylie,

Out of Scope

ACTHD QON
QON 833 – Breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital –
Qon input drafted, further clarification on the bed numbers is pending back with Calvary, we cross checked with previous QON input (Maternity 805) which resulted in us seeking further input from Calvary to ensure data consistency

Regards,

Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Tuesday, 9 August 2022 12:17 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: FOR ADVICE BY 3PM TODAY- Update on QONs 830, 835, 833 & QTON

OFFICIAL

Hi Sinead

Just a follow up on the outstanding QON input and response below. I will be attending a catch up with the Minister's Office today at 3.30PM and would appreciate any updates by 3pm.

Out of Scope

ACTHD QON

- QON 833 – Breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital – *Calvary provided a response this morning – I'm drafting now and it's about to go into clearance – (note I've already sought further advice from Calvary on their input) (4/8/22)*

Kind regards
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au

From: LHN Coord <LHNCoord@act.gov.au>

Sent: Thursday, 4 August 2022 11:49 AM

To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>

Subject: RE: FOR ADVICE BY 2PM TODAY- Update on QONs 830, 835, 833 & QTON

Importance: High

OFFICIAL

Hi Kylie,

LHN update

- Out of Scope
- Pending with Calvary
- Out of Scope
- QON 833 – *Calvary provided a response this morning – I'm drafting now and it's about to go into clearance – (note I've already sought further advice from Calvary on their input)*
- Out of Scope

Sorry again Kylie, please express our apologies to the MO.

Thank you,

Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth

Sent: Thursday, 4 August 2022 11:36 AM

To: LHN Coord <LHNCoord@act.gov.au>

Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Subject: FOR ADVICE BY 2PM TODAY- Update on QONs 830, 835, 833 & QTON

Importance: High

OFFICIAL

Hi Sinead

I will be attending a fortnightly catch up with the Minister's Office today at 3PM. I expect the MO will ask about the status of the below QONs/QTON and Calvary input.

Could I please get an update on where things are up to and ETAs if possible so I can update the MO – by 2PM today please.

- Out of Scope [Redacted]
- Pending with Calvary
- Out of Scope [Redacted]
- QON 833 – Still pending with Calvary for full input
- Out of Scope [Redacted]

Many thanks
Kylie

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Tuesday, 2 August 2022 11:54 AM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: FOR ADVICE: URGENT - Update on QONs 805, 830, 835 & 833

OFFICIAL

Hi Kylie,
I'm sorry for my late response, I was away yesterday afternoon.

- ✓ Out of Scope [Redacted]
- Pending with Calvary – Calvary are aware of the urgency, unfortunately I don't have an ETA from them
- Out of Scope [Redacted]
- QON 833 – Still pending with Calvary for full input
- Out of Scope [Redacted]

Give me a call if you want any further clarification.

Thank you,
Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 1 August 2022 2:58 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: FOR ADVICE: URGENT - Update on QONs 805, 830, 835 & 833
Importance: High

OFFICIAL

Hi Sinead

Are we likely to get any of the below today?

I note input for 803 & 830 have been in clearance for some time now.

An ETA on 835 & 833 would also be appreciated so we can advise MO.

Many thanks
Kylie

From: Warne, Hayley (Health) <Hayley.Warne@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Friday, 29 July 2022 2:42 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: URGENT - Update on QONs 805, 830, 835 & 833
Importance: High

OFFICIAL

Good afternoon team,

The MO office is very keen to get these QoN's to the committee before sitting next week. Can you please give an updated ETA for the input below for CHS and from Calvary for the HD led QTB.

Thanks


Hayley

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Wednesday, 27 July 2022 1:44 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Subject: RE: Update on QONs 805, 830, 835 & 833

OFFICIAL

Hello Hayley,
See green updates.

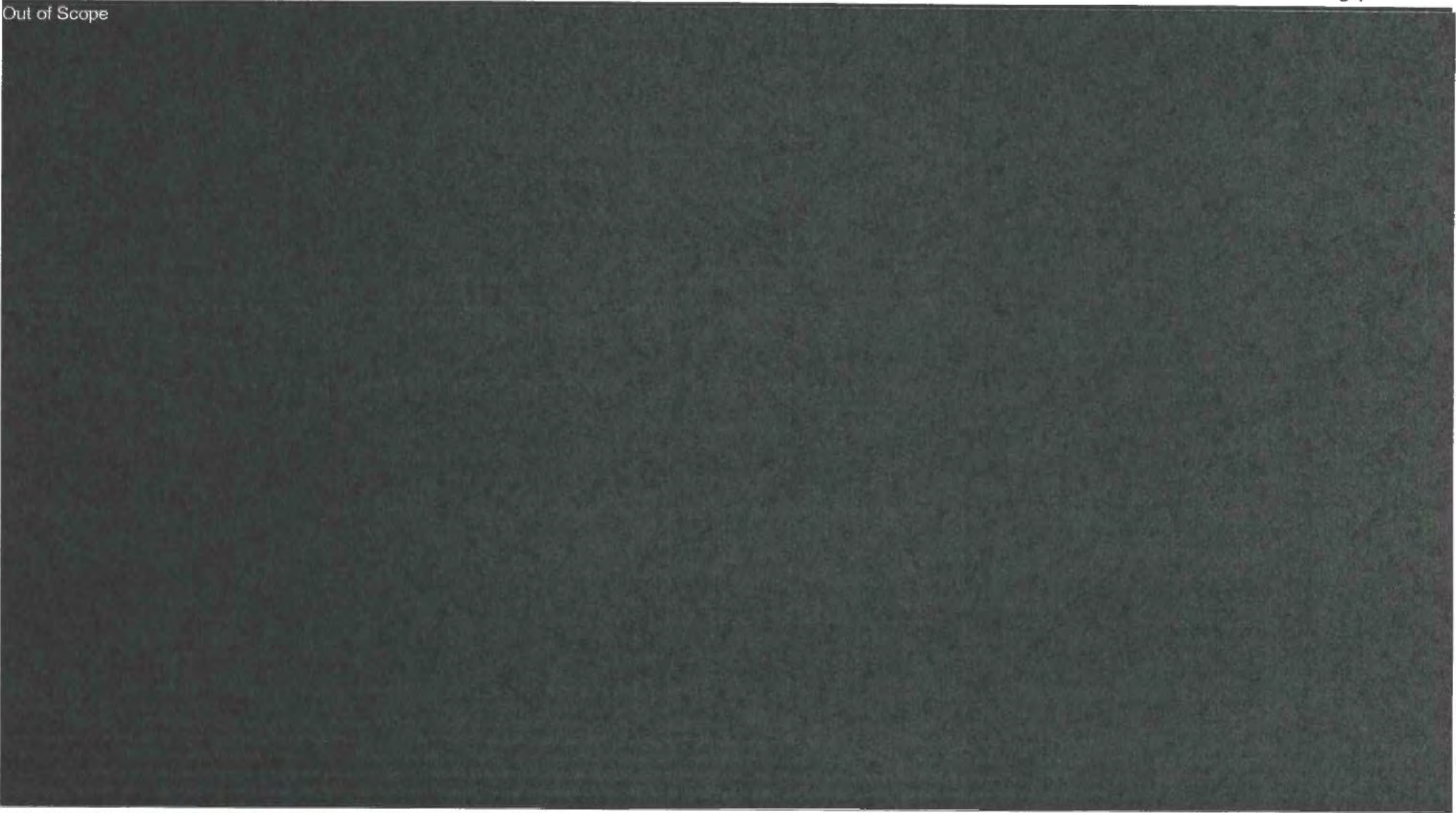
Out of Scope



GBC22/367	833	Health	MS CASTLEY: To ask the Minister for Health—Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital,	ACTHD (HSPE) - CHS Input	<p>14/7 - LHN advised calvary delays until 21 July. 18/7 - Input still pending from Calvary</p> <p>21/07 All input pending from Calvary regarding until the next Monday ASX</p>
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Sinead

Out of Scope



From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Monday, 15 August 2022 9:57 AM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: UGENT ADVICE - Status of QON 830 and QON 805
Importance: High

OFFICIAL

Hi Team

Can you please let me know where QON 830 and QON 805 are up to in the process?

ACTHD have advised we might need to edit input in each of them if possible - To use same methodology for beds that ACTHD are using in QON 833.

Thanks

Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



From: Greg Bayliss [REDACTED]
Sent: Monday, 15 August 2022 1:14 PM
To: LHN Coord
Cc: Pini, Sallyanne (Health); Elvira Nikolic (Calvary)
Subject: RE: ACTHEALTH1214 - Further questions - Response QoN 833.docx

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Sinead

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Hello All
That caveat is entirely accurate. It is in fact identical to the qualification provided to me when I requested the numbers from our internal sources.
Greg

Greg Bayliss
Communications Manager



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 754 Jamison Centre ACT 2614

www.calvary-act.com.au

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Monday, 15 August 2022 1:09 PM
To: Greg Bayliss [REDACTED]
Cc: Pini, Sallyanne <Sallyanne.Pini@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; Elvira Nikolic [REDACTED]
Subject: RE: ACTHEALTH1214 - Further questions - Response QoN 833.docx
Importance: High

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OFFICIAL

Hi Greg,
Margaret Stewart has requested a caveat for the response to question (iv) can you review below * and advise if those words are accurate and suitable, or if Calvary have preferred words.

- iv. how many staff are scheduled for each ward including job title and classification for
- A. morning,
 - B. afternoon and
 - C. night shift,

Calvary Public Hospital Bruce*			
	Morning	Afternoon	Night
Midwives	11	10	9
Nurses	70	80	55
Junior Medical Doctors (JMOs)	120 JMOs across a 24-hour shift roster JMOs are supplemented by specialist medical officers /consultants and visiting medical officers		
Allied Health professionals	100 (approx.) Allied Health Professionals across a variety of shifts, in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and 24/7 medical imaging.		

* This is a typical daily roster but can be subject to change due to demand

We would appreciate your earliest response today if you can please as the Ministers Office are seeking finalisation of the this QON asap. I know you are also liaising with Sallyanne on the bed numbers.

Many thanks

Vztdg#

[Sinead Clarke](#) | Assistant Director

Direct Phone: +61 2 5124 9351 | Direct Email: sinead.clarke@act.gov.au

Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate

Level 4, 6 Bowes Street Phillip ACT 2606

health.act.gov.au



From: Greg Bayliss

Sent: Monday, 8 August 2022 9:49 AM

To: LHN Coord <LHNCoord@act.gov.au>

Cc: Kanta Toraskar (Calvary); Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>

Subject: RE: Further questions - Response QoN 833.docx

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Good morning All

Please see comments below.

I am still trying to formulate our response to your query about maternity beds.

Greg

Q. For the Mental Health QON you gave us both beds/treatment spaces, so we are consistent can you provide same for this QON

A. Mental health services can only be physically provided in either Acacia or OPMHU.

You would appreciate the physical infrastructure, fittings and equipment requirements for these patients. It is not possible to locate these patients in other clinical settings.

Therefore this is a physical capacity (treatment spaces) limit. The same does not apply for medical or surgical patients who may be placed in other areas depending on activity and capacity, or for whom other ward settings may be deemed a suitable place for medical or surgical inpatient admissions.

Q. Please confirm if the 120 staff is at any given time during the day, or split into different shifts?

A. the 120 JMOs are spread over shifts to provide appropriate coverage over each 24 hours

Q. Please confirm if the 100 staff is at any given time during the day, or split into different shifts?

A. these staff work a variety of shifts to provide a span of hours in disciplines where that is required, noting that Medical Imaging is the only 24/7 allied health service

Greg Bayliss
Communications Manager



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

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From: LHN Coord <LHNCoord@act.gov.au>
Sent: Thursday, 4 August 2022 2:13 PM
To: Greg Bayliss <[REDACTED]>
Cc: Kanta Toraskar <[REDACTED]>; LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne <Sallyanne.Pini@act.gov.au>
Subject: Further questions - Response QoN 833.docx
Importance: High

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OFFICIAL: Sensitive

Thanks Greg,

I'll note your advice below as it moves upwards.
As promised (sorry) we have some 4 more questions – see red below.

Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including
 (i) a brief description of each ward,
 (ii) how many beds are in each ward,
 (iii) how many treatment spaces are in each ward,

RESPONSE:

Calvary received funding to operate at the following capacity:

Birthing Suites	16
Calvary Respiratory Assessment Unit	14
Critical Care	19
Emergency Short Stay Unit	18
Hospital In The Home	
Maternity – Scott Mackenzie	
provided us beds numbers for QON	
805 = 30 unfunded – when we	
calculate the three maternity type	
wards here it is 34 beds please let us	
know what the variance is – I'm sure	
it to do with methodology ?	18
Medical	86
Mental Health	36
Palliative Care	19
Special Care Nursery	
Surgical	28

Q (ii) (iii) Noting your advice below – can you provide us physical bed numbers as well as funded?

- Our people do not use treatment spaces at all, it is not a metric that we use for any reporting or capacity considerations. For the Mental Health QON you gave us both beds/treatment spaces, so we are consistent can you provide same for this QON?

(iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift,

Staff rostering and roles are dynamic and respond to proven requirements, patient safety considerations, industrial agreements and the nurse/midwife ratios being introduced in the ACT.

The following staffing profile represents a 'normal' weekday at Calvary:

- 30 midwives – 11 for morning, 10 for afternoon, 9 for night shifts
- 205 nurses – 70 for morning, 80 for afternoon, 55 for night shifts
- 120 Junior Medical Officers across 24 hours, supplemented in various specialties and at different times by specialist consultants and visiting medical officers
- **Please confirm if the 120 staff is at any given time during the day, or split into different shifts?**
- Around 100 Allied Health Professionals in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and medical imaging
- **Please confirm if the 100 staff is at any given time during the day, or split into different shifts?**

* Data provided for clearance - ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year,

* Data provided for clearance - ACT Health DAB can provide (vi) how many patients have been discharged from each ward in the last financial year,

(vii) how many staff (headcount) have been recruited for each ward in the last financial year, This data is not collected for recruitment activities

(viii) how many staff (headcount) have separated from each ward in the last financial year, This data is not collected for staff separations

(ix) what was the budget allocated for each ward in the last financial year,

Budgets are not assigned to particular wards. Given the dynamic nature of service provision, resources are considered hospital-wide which ensures collaboration around patient care is not

Out of Scope

compromised by localised budgetary considerations.
 (x) how much was spent by each ward in the last financial year and
 The perspective applied to budgets is also applied to expenditure, with the imperative being Calvary meeting the activity specified in the Annual Performance Plan from the funding provided from the Territory
 *Data provided for clearance - ACT Health DAB can provide (xi) what was the average length of stay for a patient in each ward.

From: Greg Bayliss [REDACTED]
 Sent: Thursday, 4 August 2022 1:28 PM
 To: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
 Cc: Kanta Toraskar (Calvary) [REDACTED]; LHN Coord <LHNCoord@act.gov.au>
 Subject: RE: Response QoN 855.006x

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Hi Sinead
 There is not a lot more we can provide – our medical wards (patients not requiring or having surgery) are not delineated into specialties. Our people do not use treatment spaces at all, it is not a metric that we use for any reporting or capacity considerations. If it some form of assessment of how many beds could be jammed into calvary if every centimetre of floor space in the inpatient areas footprint, again it is meaningless as capacity is against our funded beds. And if such an estimate was given, it would only be used to claim there in unused capacity.
 I am sorry that that I cannot assist but our reporting people are loathe to include in a reply to a QoN information that is not part of our normal operational considerations.
 Greg

Greg Bayliss
 Communications Manager



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary.act.com.au

From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
 Sent: Thursday, 4 August 2022 10:22 AM
 To: Greg Bayliss [REDACTED]
 Cc: Kanta Toraskar [REDACTED]; LHN Coord <LHNCoord@act.gov.au>
 Subject: RE: Response QoN 855.006x

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OFFICIAL

Thank you Greg,

A couple of initial questions from me, just to flag we may have more as this input goes through clearance.

1. Question i. - asks for a brief description of each ward – acknowledging most wards are self-explanatory, however we may be asked to provide.
 - a. Do you have a document to hand that I can pull some words from? or a map of the wards listed
2. Question iii – asks for treatment spaces, can you confirm the numbers provided are for funded beds and treatment spaces?

Thank you,

Sinead

From: Greg Bayliss [redacted]
 Sent: Thursday, 4 August 2022 8:05 AM
 To: LHN Coord <LHNCoord@act.gov.au>
 Cc: Kanta Toraskar (Calvary) [redacted]
 Subject: Response QoN 833.docx
 Importance: High

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Hello LHN
 Please find below our response to QoN 833.
 This material has been cleared by GM Robin Haberecht in an email to me.
 As that email contained other material not related to this matter, I am not forwarding it.
 Greg

Greg Bayliss
 Communications Manager



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

Can the Minister provide a breakdown of all wards at the Calvary Public Hospital, including
 (i) a brief description of each ward,
 (ii) how many beds are in each ward,
 (iii) how many treatment spaces are in each ward,

RESPONSE:

Calvary received funding to operate at the following capacity:

Birth Suites	8
Calvary Respiratory Assessment Unit	16
Critical Care	14
Emergency Short Stay Unit	19
Hospital In The Home	18
Maternity	18
Medical	86
Mental Health	36
Palliative Care	19
Special Care Nursery	8
Surgical	28

(iv) how many staff are scheduled for each ward including job title and classification for (A) morning, (B) afternoon and (C) night shift,
 Staff rostering and roles are dynamic and respond to proven requirements, patient safety considerations, industrial agreements and the nurse/midwife ratios being introduced in the ACT.
 The following staffing profile represents a 'normal' weekday at Calvary:

- 30 midwives – 11 for morning, 10 for afternoon, 9 for night shifts
- 205 nurses – 70 for morning, 80 for afternoon, 55 for night shifts
- 120 Junior Medical Officers across 24 hours, supplemented in various specialties and at different times by specialist consultants and visiting medical officers
- Around 100 Allied Health Professionals in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and medical imaging

* Data provided for clearance - ACT Health DAB can provide (v) how many patients have been admitted to each ward in the last financial year.

* Data provided for clearance - ACT Health DAB can provide (vi) how many patients have been discharged from each ward in the last financial year.

(vii) how many staff (headcount) have been recruited for each ward in the last financial year,

This data is not collected for recruitment activities

(viii) how many staff (headcount) have separated from each ward in the last financial year,

This data is not collected for staff separations

(ix) what was the budget allocated for each ward in the last financial year,

Budgets are not assigned to particular wards. Given the dynamic nature of service provision, resources are considered hospital-wide which ensures collaboration around patient care is not compromised by localised budgetary considerations.

(x) how much was spent by each ward in the last financial year and

The perspective applied to budgets is also applied to expenditure, with the imperative being Calvary meeting the activity specified in the Annual Performance Plan from the funding provided from the Territory

*Data provided for clearance - ACT Health DAB can provide (xi) what was the average length of stay for a patient in each ward.

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From: Pini, Sallyanne (Health)
Sent: Friday, 19 August 2022 5:00 PM
To: LHN Coord
Subject: RE: Calvary reviewed - FW: QON833 All wards

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Sinead

OFFICIAL

I took them out before I sent 😊 Because CHH isn't a ward of CPHB. M and I had agreed to remove previously. SA

Sallyanne Pini | Senior Director
Ph: 02 6205 4689 | M: [REDACTED] Email: sallyanne.pini@act.gov.au
Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Friday, 19 August 2022 4:58 PM
To: Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>
Subject: Calvary reviewed - FW: QON833 All wards

OFFICIAL

Hi Sallyanne,

See word doc attached reviewed by Jarrad Nuss, I have updated our version in objective.

Jarrad removed CHH bed numbers from the table ?? I have left in our version?

QoN 833 - Minister for Health - Ward Breakdowns
<https://objective.act.gov.au/documents/A35907053/details>

Thank you,

Sinead

From: Jarrad Nuss [REDACTED]
Sent: Friday, 19 August 2022 2:50 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Greg Bayliss (Calvary) [REDACTED]; Elvira Nikolic (Calvary) [REDACTED]; Robin Haberecht (Calvary) [REDACTED]
Subject: QON833

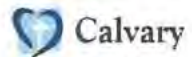
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Hi LHN

We have pulled together all the information that we can at this stage. Please let me know if further information is required.

Thanks

Jarrad Nuss
Chief Financial Officer & Director Corporate Services



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

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From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Monday, 22 August 2022 4:27 PM
To: Canberra Health Services Ministerial
Cc: GovernmentBusinessHealth
Subject: URGENT UPDATED ACTHD input QON 805
Attachments: ACTHD Input - QoN 805 Maternity Options.DOCX

Importance: High

OFFICIAL

Hi Kerry

MAGS have received an updated version of Calvary input for QON 805 attached. This has been updated to ensure the methodology for beds is consistent with the response to QON 833.

If possible can this be updated in the CHS response? Please let me know either way.

Many thanks
Kylie

Kylie Gstrein | A/g Director, Government Business

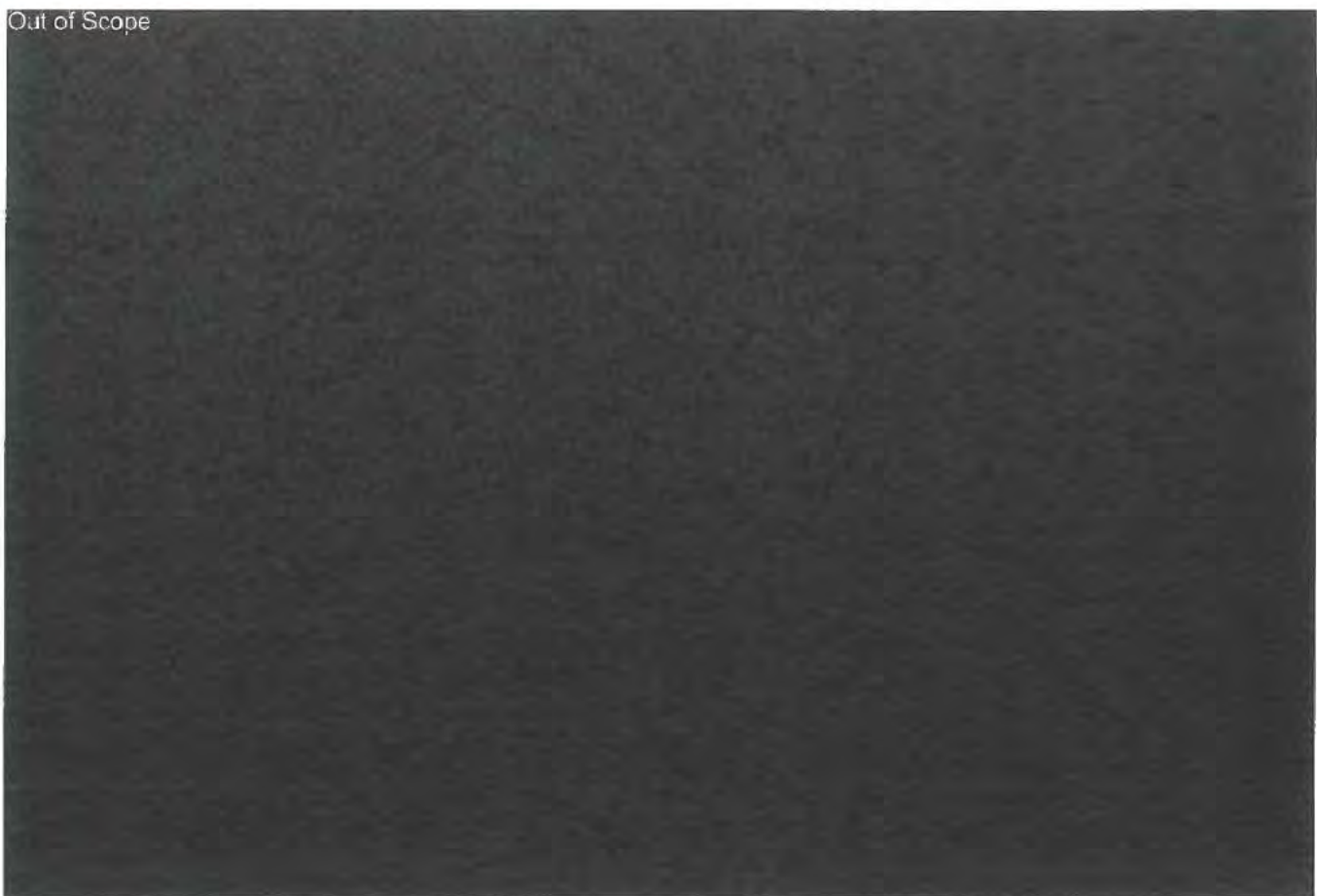
Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au

Out of Scope



From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 15 August 2022 9:57 AM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: UGENT ADVICE - Status of QON 830 and QON 805
Importance: High

OFFICIAL

Hi Team

Can you please let me know where QON 830 and QON 805 are up to in the process?

ACTHD have advised we might need to edit input in each of them if possible - To use same methodology for beds that ACTHD are using in QON 833.

Thanks
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Monday, 22 August 2022 4:28 PM
To: Pini, Sallyanne (Health)
Cc: HSPE; LHN Coord; Stewart, Margaret (Health); ACT Health DLO; GovernmentBusinessHealth
Subject: RE: URGENT - ACTHD Updates for QONS 805 & 830

OFFICIAL

Thanks Sallyanne

Confirming the revised input has been provided to CHS for inclusion in their response. I have asked CHS to confirm whether this can still be amended in their response and will let you know either way.

Thanks
Kylie

Out of Scope



From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 15 August 2022 10:59 AM
To: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Cc: HSPE <HSPE@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>;
GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; ACT Health DLO
<ACTHealthDLO@act.gov.au>
Subject: URGENT - ACTHD Updates for QONS 805 & 830
Importance: High

OFFICIAL

Hi Sallyanne

As discussed, ACTHD input has already been provided to CHS for the below QONs. You had mentioned that updates may need to be made to ensure the methodology for beds is consistent with the response to QON 833. CHS may be able to put through updates if need be, but MAGS will need those ASAP.

Out of Scope

To facilitate this quickly, can the attached responses please be updated and cleared appropriately, then returned to MAGS and we will progress them to CHS. I will TRIM the updated responses

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



From: LHN Coord
Sent: Friday, 26 August 2022 9:08 AM
To: Jarrad Nuss (Calvary)
Cc: Greg Bayliss (Calvary); Elvira Nikolic (Calvary); Stewart, Margaret (Health); LHN Coord
Subject: RE: Further clarification - RE: QON833
Attachments: QoN 833 Ward Breakdowns - 17 August 2022.docx

Categories: Sinead, Awaiting response

OFFICIAL: Sensitive

Good Morning Jarrad,
Sorry to chase on this one, would it be possible to receive an update today please?
Thank you,
Sinead

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Wednesday, 24 August 2022 1:58 PM
To: Jarrad Nuss (Calvary) <[REDACTED]>
Cc: Greg Bayliss (Calvary) <[REDACTED]>; Elvira Nikolic (Calvary) <[REDACTED]>; LHN Coord <LHNCoord@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>
Subject: Further clarification - RE: QON833

OFFICIAL: Sensitive

Hi Jarrad,

Jacinta George has sought clarification on two items

1. Can you confirm the full title of the Critical Care unit noted as having 14 beds – is it the **Intensive Care and Coronary Care Unit**
2. Can you confirm the staff numbers provided at question iv. are across the hospital or only for the wards provided in the table at questions i,ii,iii.

Thank you,

Sinead

From: Jarrad Nuss <[REDACTED]>
Sent: Friday, 19 August 2022 2:50 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Greg Bayliss (Calvary) <[REDACTED]>; Elvira Nikolic (Calvary) <[REDACTED]>; Robin Haberecht (Calvary) <[REDACTED]>
Subject: QON833

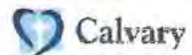
Caution: This email originated from outside of the ACT Government. Do not click links or open attachments unless you recognise the sender and know the content is safe. [Learn why this is important](#)

Hi LHN

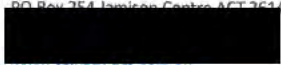
We have pulled together all the information that we can at this stage. Please let me know if further information is required.

Thanks

Jarrad Nuss
Chief Financial Officer & Director Corporate Services



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 354 Jamison Centre ACT 2614



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Rachel Stephen-Smith MLA
 Minister for Health
 Minister for Families and Community Services
 Minister for Aboriginal and Torres Strait Islander Affairs
 Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE
Questions on Notice Paper No 19
10 June 2022
Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward,
- ii. how many beds are in each ward,
- iii. how many treatment spaces are in each ward,
- iv. how many staff are scheduled for each ward including job title and classification for
 - A. morning,
 - B. afternoon and
 - C. night shift.
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward. FBI

Commented [CS(1)]: Last FY is interpreted as 2020-21 noting the question paper was taken on 10 June 2022.

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

i., ii., iii.

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Critical Care (Intensive Care Unit) ²	14

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[rachelSSMLA](https://www.facebook.com/rachelSSMLA)

[rachelss_mla](https://www.instagram.com/rachelss_mla)

Emergency Short Stay Unit ¹	15
Hospital in the Home ⁴	18
Maternity	18
Birth Suite and Birth Centre	8
Special Care Nursery	8
Medical	86
Acacia Ward (Mental Health services only)	21
Older Persons Mental Health Unit (Mental Health services only)	15
Surgical	28

¹ – Average number of beds operated throughout the year. Note that bed numbers/wards are dynamic and subject to change according to clinical need.

² – ICU capacity depends on activity.

³ – Excludes beds currently utilised for the COVID-19 Red Zone.

⁴ – HITH beds are virtual beds as care is homebased.

iv.

Calvary Public Hospital Bruce*			
	Morning	Afternoon	Night
Midwives	11	10	9
Nurses	70	80	55
Junior Medical Doctors (JMOs)	120 JMOs across a 24-hour shift roster JMOs are supplemented by specialist medical officers /consultants and visiting medical officers		
Allied Health professionals	100 (approx.) Allied Health Professionals across a variety of shifts, in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and 24/7 medical imaging.		

* This is a typical daily roster but can be subject to change due to demand

- v. Neither Calvary Public Hospital Bruce nor CHS report at the ward level. Performance information for each hospital is available via the ACT Public Health Services Quarterly Performance Report https://www.health.act.gov.au/sites/default/files/2022-05/Att%20A%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf
- vi. For Calvary Public Hospital Bruce, refer to response at v. above.
- vii. Calvary Public Hospital Bruce does not routinely collect data at ward level for staff recruitment. ACTHD provided mental health ward level data for QON 830, however, to provide detailed staffing for each all ward would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.
- viii. Calvary Public Hospital Bruce do not routinely collect data at ward level for staff separations. ACTHD recently provided mental health staff exits in QON 829, however, to provide detailed staffing separations by all wards would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.
- ix. Calvary Public Hospital Bruce does not report budget allocation at the Ward level. Internal budgets are not representative of the costs as there are different treatments between hospitals as to the

allocation of direct and indirect costs. National Weighted Activity Unit (NWAU) costs per patient episode are available through the Independent Hospital Pricing Authority (IHPA) benchmarking portal, the latest data publicly available is 2019-20. the system allows the user to filter by care type.

<https://benchmarking.ihpa.gov.au/extensions/lhpanbp/index.html#/periodic-insights/overview>

- x. See response at question ix) for Calvary Public Hospital Bruce
- xi. Neither CHS nor Calvary Public Hospital Bruce report Length of Stay at the Ward level. Performance information is available via the ACT Public Health Services Quarterly Performance Report
https://www.health.act.gov.au/sites/default/files/2022-05/Att%20A%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf

Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
 Minister for Health

Date:.....

This response required xxx minutes to complete, at an approximate cost of \$xx.xx.

From: LHN Coord
Sent: Friday, 26 August 2022 1:47 PM
To: HSPE
Cc: LHN Coord; Stewart, Margaret (Health); Pini, Sallyanne (Health)
Subject: RE: For URGENT clearance please - QoN 833 - Minister for Health - Ward Breakdowns (A35907053)

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Coord Huddle

OFFICIAL: Sensitive

Hi Tafa,

Jacinta's comments have been addressed.

iii. See above.

Question i., ii., iii. - CPBH

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Intensive Care and Coronary care unit ²	14
Emergency Short Stay Unit ³	15
Hospital in the Home ⁴	18
Maternity Units	34
Medical	86
Acacia Ward (Mental Health services only)	21
Older Persons Mental Health Unit (Mental Health services only)	15
Surgical	28

¹ - Average number of beds operated throughout the year. Note that bed numbers/wards are dynamic and subject to change according to clinical need.

² - ICU capacity depends on activity.

³ - Excludes beds currently utilised for the COVID-19 Red zone

⁴ - HITH beds are virtual beds as care is homebased

George Jacinta (Health)
 ? This is CCU as well? If so (Intensive Care and Coronary Care Unit)

Clarke, Sinead (Health)
 Confirming as you state - amended

Clarke, Sinead (Health)
 Deleted: Critical Care (

Clarke, Sinead (Health)
 Deleted: U

Clarke, Sinead (Health)
 Deleted:)

iv. CHS nursing rostering templates are completed by the Nurse Manager for each ward to reflect respective staffing levels/classification for morning, evening and night shifts. Examples are provided at Attachment B. A complete list of all staff rostered for morning, afternoon and night shift for each ward at CHS and CPBH has not been provided due to resources required to complete this request .

Calvary Public Hospital Bruce			
	Morning	Afternoon	Night
Midwives	11	10	9
Nurses	70	80	55
Junior Medical Doctors (JMOs)	120 JMOs across a 24-hour shift roster JMOs are supplemented by specialist medical officers /consultants and visiting medical officers		
Allied Health professionals	100 (approx.) Allied Health Professionals across a variety of shifts, in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and 24/7 medical imaging.		

* This is a typical daily roster but can be subject to change due to demand

George Jacinta (Health) Wednesday
 Is this across the hospital or only for the wards in the table above?

Clarke, Sinead (...) A few seconds ago
 Confirming staff are for wards in table above

Reply Resolve

QoN 833 - Minister for Health - Ward Breakdowns
<https://objective.act.gov.au/documents/A35907053/details>

I have loaded a clean version into TRIM, I'll leave to you to let mags know once you have loaded Jacinta's clearance and the costing tool is updated.

Thank you,
 Sinead

From: Malifa, Tafaeafe (Health) <Tafaeafe.Malifa@act.gov.au> On Behalf Of HSPE
 Sent: Wednesday, 24 August 2022 1:29 PM

To: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>; HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Subject: RE: For URGENT clearance please - QoN 833 - Minister for Health - Ward Breakdowns (A35907053)

OFFICIAL: Sensitive

Hi Sinead

Jacinta has some minor queries but it does need to be recleared by her once addressed.

Regards,

Tafaeafe Malifa | A/g Executive Assistant to the Executive Group Manager
Health System Planning and Evaluation, ACT Health Directorate
Level 3, 2-6 Bowes Street, Woden ACT
Ph: (02) 512 46791 | **Email:** Tafaeafe.Malifa@act.gov.au
health.act.gov.au



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From: Clarke, Sinead (Health) <Sinead.Clarke@act.gov.au>
Sent: Wednesday, 24 August 2022 11:17 AM
To: HSPE <HSPE@act.gov.au>; George, Jacinta (Health) <Jacinta.George@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Subject: For URGENT clearance please - QoN 833 - Minister for Health - Ward Breakdowns (A35907053)

OFFICIAL: Sensitive

Hi Jacinta & team,

Can you clear QON 833 at below link. We have had extensive liaison with Calvary to finalise and confirm the numbers provided.

QoN 833 - Minister for Health - Ward Breakdowns
<https://objective.act.gov.au/documents/A35907053/details>

I will update the costing tool in TRIM now.

Thank you,

Sinead

From: Pini, Sallyanne (Health)
Sent: Monday, 29 August 2022 11:08 AM
To: GovernmentBusinessHealth; HSPE
Cc: LHN Coord; Ellis, Catherine (Health)
Subject: RE: GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Categories: 02. QoN

OFFICIAL

Hi Kylie

I have added a note in to the table to address this. Margaret has cleared verbally. Saved in tracked changes in TRIM version.

Thanks
 Sallyanne

Sallyanne Pini | Senior Director

Ph: 02 6205 4689 | M [REDACTED] Email: sallyanne.pini@act.gov.au

Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Friday, 26 August 2022 4:59 PM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>
Subject: RFA: GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

Can HSPE please review the answer to *Qiii. how many treatment spaces are in each ward ASAP.*

There doesn't seem to be a clear response to this question and MAGS anticipate that the response may come back with similar comment from MO. I understand that this may be an issue around terminology, however, MAGS suggest some form of response or footnote to address this e.g. 'Treatment spaces not applicable as..etc.'

Thank you
 Kylie

-----Original Message-----

From: Malifa, Tafaeafe (Health) <Tafaeafe.Malifa@act.gov.au> **On Behalf Of** HSPE

Sent: Friday, 26 August 2022 2:11 PM

To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Cc: HSPE <HSPE@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>

Subject: Cleared: GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Good afternoon

Please see in container QON 833 HSPE input cleared by HSPE EGM.

Please note, please see COR22/21749 as our input is loaded into the CHS template.

Thank you

-----< HPE Content Manager record Information >-----

Record Number : GBC22/367

Title : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Monday, 29 August 2022 3:32 PM
To: ACT Health DLO
Cc: GovernmentBusinessHealth
Subject: FOR MO: GBC22/367 - Minister for Health - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and ~ Castley.tr5
Importance: High

OFFICIAL

Hi Tara

Please progress the attached QON response to MO for review. The response includes:

- COR22/21749 Final Response - QoN 833 - Minister for Health - Ward Breakdowns
- COR22/21756 QON 833 - Attachment A - CHS Ward Map 24 June 2022
- COR22/21760 QON 833 - Attachment B - Rostering Template

This QON was listed in QON Paper 19 (10 June) and is overdue to Chamber support. MAGS apologises for the delay due to Calvary input and consultation with CHS.

Kind regards
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



Rachel Stephen-Smith MLA

Minister for Health
Minister for Families and Community Services
Minister for Aboriginal and Torres Strait Islander Affairs

Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE
Questions on Notice Paper No 19
10 June 2022
Question No. 833

Asked by **MS CASTLEY MLA** –

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- i. a brief description of each ward,
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 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward.

Commented [CS(1): Last FY is interpreted as 2020-21 noting the question paper was taken on 10 June 2022.

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

- i. See Canberra Health Services (CHS) Ward Map at [Attachment A](#). Further information can be provided about specific wards, however this list should be self-explanatory. Note that bed numbers/wards are dynamic and subject to change according to clinical need.

See the below table for information from Calvary Public Hospital Bruce (CPHB).

ACT Legislative Assembly London Circuit, GPO Box 1020, Canberra ACT 2601



+61 2 6205 2661



stephen-smith@act.gov.au



@RachelSS_MLA



rachelSSMLA



rachelss_rmla

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Intensive Care and Coronary care unit ²	14
Emergency Short Stay Unit ³	15
Hospital in the Home ⁴	18
Maternity Units	34
Medical	86
Acacia Ward (Mental Health services only)	21
Older Persons Mental Health Unit (Mental Health services only)	15
Surgical	28

¹ - Average number of beds operated throughout the year. Beds is the measure used for inpatient settings, treatment spaces not applicable. Note that bed numbers/wards are dynamic and subject to change according to clinical need.

² - ICU capacity depends on activity.

³ - Excludes beds currently utilised for the COVID-19 Red zone

⁴ - HITH beds are virtual beds as care is homebased

- ii. See above response to Question ii.
- iii. See above response to Question ii.
- iv. CHS nursing rostering templates are completed by the Nurse Manager for each ward to reflect respective staffing levels/classification for morning, evening and night shifts. Examples are provided at Attachment B.

See the below table for information from CPHB.

Calvary Public Hospital Bruce*			
	Morning	Afternoon	Night
Midwives	11	10	9
Nurses	70	80	55
Junior Medical Doctors (JMOs)	120 JMOs across a 24-hour shift roster JMOs are supplemented by specialist medical officers /consultants and visiting medical officers		
Allied Health professionals	100 (approx.) Allied Health Professionals across a variety of shifts, in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and 24/7 medical imaging.		

* This is a typical daily roster but can be subject to change due to demand

A complete list of all staff rostered for morning, afternoon and night shift for each ward at CHS and CPHB has not been provided due to resources required to complete this request.

- v. Neither CPHB nor CHS report at the ward level. Performance information for each hospital is available via the ACT Public Health Services Quarterly Performance Report https://www.health.act.gov.au/sites/default/files/2022-05/Att%20A%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf

- vi. Refer to response to Question v.
- vii. CHS is unable report at the ward level. Data has been provided detailing the paid headcount on 24 June 2020 and corresponding headcount paid on 23 June 2021.

Canberra Health Services			
Division	Headcount paid as of 24 June 2020	Headcount paid as of 23 June 2021	Difference
WYC	813	810	-3
UCH	306	323	17
Surgery	1020	1002	-18
RACS	530	523	-7
QSII	41	34	-7
P&C	90	90	0
ODCEO	34	49	15
OCEO	36	178	142
NMPSS	489	543	54
MHJHADS	818	836	18
MEDICINE	1098	1104	6
MEDICAL SERVICES	870	895	25
IHSS	335	363	28
FBI	194	194	0
COO	142	53	-89
CAS	557	704	147
AH	218	216	-2
TOTAL	7591	7917	326

CPHB does not routinely collect data at ward level for staff recruitment. The ACT Health Directorate provided mental health ward level data for QON 830, however, to provide detailed staffing for each ward would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.

- viii. Refer to CHS response to Question vii.

CPHB do not routinely collect data at ward level for staff separations. The ACT Health Directorate recently provided mental health staff exits in QON 829, however, to provide detailed staffing separations by all wards would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.

- ix. CHS does not report Budget allocations at the Ward level. Please refer to *Budget Paper C*: https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf

CPHB does not report budget allocation at the Ward level. Internal budgets are not representative of the costs as there are different treatments between hospitals as to the allocation of direct and indirect costs. National Weighted Activity Unit (NWAU) costs per patient episode are available through the Independent

Hospital Pricing Authority (IHPA) benchmarking portal, the latest data publicly available is 2019-20. the system allows the user to filter by care type.

<https://benchmarking.ihoa.gov.au/extensions/ihoanbp/index.html#/periodic-insights/overview>

- x. CHS does not report expenditure at the Ward level. CHS's 2021-22 Annual Report has yet to be finalised, however a comparison of CHS's financial position can be found within CHS' 2021-21 Annual Report - [Canberra Health Services Annual Report 2020-2021 \(act.gov.au\)](#)

See CPHB response to Question ix.

- xi. Neither CHS nor CPHB report Length of Stay at the Ward level. Performance information is available via the ACT Public Health Services Quarterly Performance Reports
<https://health.act.gov.au/about-our-health-system/act-public-health-services-quarterly-performance-report>

Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
Minister for Health

Date:.....

This response required 26 hours and 50 minutes to complete, at an approximate cost of \$2741.61.

Legend

	WYC
	Medicine
	Surgery
	MHJHADS
	CAS
	RACS
	Empty
	COVID-19

Note:
See over page for abbreviations

Building 1 (Tower Block)

10A 32 beds General Surgery, Ophthalmology	Offices Care @ Home Program
9A 24 beds Gastroenterology	9B 23 beds – Neurosurgical 06 beds – Monitored beds <i>Trache Ward</i>
8A (No overnight beds) 10 – Dialysis day beds	8B 25 beds Paediatrics
7A 32 beds Neurology & Infectious Diseases Stroke Unit <i>Trache Ward</i>	7B 32 beds General Medicine
6A 32 beds Respiratory/Cardiology Rheumatology / Endocrinology	6B 34 beds including 28 – Cardiothoracic, Thoracic surgery, Urology, Vascular 06 – Monitored beds
5A 30 beds – Orthopaedic/ Orthopaedic-Geriatrics	5B 24 – Plastic/Ortho/ENT 02 – <i>flex beds</i> <i>Trache ward</i>
4A (30) ASU – surgery – 16 beds ACDL – medicine 8 beds 5 – <i>Flex beds</i>	4B 20 – Renal + Medicine 0 – Discharge Lounge beds
CPEU/CCU 04 beds – CPEU 11 beds – CCU 04 beds – Subacute	CHS Outpatients Cardiology & Cardiothoracic
GROUND	N&M Office Outpatients

**University of Canberra
Hospital (UCH)**

Cotter 30 beds
Stromlo 30 beds Neurological
Majura 30 beds Older Persons
Namadgi 30 beds General
AMHRU 20 beds

Building 11

Centenary Hospital Women & Children

MICU 15 beds	5CN 14 beds	Birth Centre 5 beds Birth Suite 13 beds
PN 15 beds Cots 3	AM 15 beds	Ronald McDonald
PDS (16, funded 12)	COVID WARD 12 beds	MWA (12) Closed for expansion

Building 12

Operating Theatres 13 Theatres 14 – EDSU 18 – PACU	ICU (38 bed spaces) COVID: 5
ED - Emergency Medicine Unit (17) 12 – Beds 05 – Chairs	ED 58 treatment spaces including: 30 – Acute 05 – Resus 15 – FastTrack (3 procedure rooms) 06 – Paediatrics 02 – De-escalation
AMU 12 beds	MHSSU (6)

Building 3

14B (12) 28 – Oncology 4 – <i>flex/clinical trials</i>	14A 22 beds Haematology
17B 10 beds - Mental Health 4 beds – <i>flex beds</i>	
11B 26 beds Aged Care	11A 24 beds Aged Care

Building 7

Withdrawal Unit 10 beds

Building 25

AHMU PLD 30 beds PHD 10 beds

DMHU / GAW

DMHU 17 beds Gawangal 10 beds



Abbreviation Location	Abbreviation	
Legend	WYC	Women Youth & Children
	MHJHADS	Mental Health Justice Health Alcohol and Drug Services
	CAS	Cancer and Ambulatory Support
	RACS	Rehabilitation Aged and Community Services
Building 11	NICU	Neonatal Intensive Care Unit
	SCN	Special Care Nursery
	PN	Postnatal
	AN	Antenatal
	PWH	Paediatric Ward High care
	PWS	Paediatrics Ward Surgery
	PDS	Paediatric Day Stay
	PWA	Paediatric Ward Adolescent
Building 12	EDSU	Extended Day Surgery Unit
	PACU	Post Anaesthetic Care Unit
	ICU	Intensive Care Unit
	ED	Emergency Department
	AMU	Acute Medical Unit
	MHSSU / PSS	Mental Health Short Stay Unit / Psychiatric Short Stay Unit
Building 1	ASU	Acute Surgical Unit
	ENT	Ear Nose & Throat
	CPEU	Chest Pain Evaluation Unit
	CCU	Coronary Care Unit
	N&M	Nursing & Midwifery
	OPD	Outpatient Department
	SCP	Seasonal Capacity Plan, adult beds
	ACDL	All Care Discharge Lounge
University of Canberra Hospital	AMHRU	Adult Mental Health Rehabilitation Unit
Building 25	AMHU	Adult Mental Health Unit
	PLD	Psychiatric Low Dependency
	PHD	Psychiatric High Dependency
DMHU / GAW	DMHU	Dhulwa Mental Health Unit
	GAW	Gawanggal (Extended Care Unit)

MOST ENTER	ENTER Budget Beds and Daily Available Open Bed numbers										BUDGET		OPEN		Note: Enter Bed numbers / Unit as 1	
	th	fr	sat	sun	mon	tue	wed	total	Occup%	Type Nos Budgeted Beds for the Unit here	Type Nos beds staff operating per day	Type 1=unit is open on the day, 0 if not open				
Must complete this section																
Budget BEDS/Staff	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0	100.0%							
BEDS/unit Staff OPEN	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0								
DAY/UNIT OPEN	1	1	1	1	1	1	1	7								
NHPPD																
Direct Hours	214.00	214.00	214.00	214.00	214.00	214.00	214.00	1498.00	214.00	Direct FTE	39.42					
Indirect Hours	55.20	55.20	41.60	41.60	55.20	55.20	55.20	378.20	54.17	Indirect FTE	9.98					
NHPPD DIRECT	6.69	6.69	6.69	6.69	6.69	6.69	6.69	6.69	6.69	Non prod FTE	8.23					
NHPPD IND	1.73	1.73	1.30	1.30	2.04	2.04	1.73		1.693	Prod FTE	49.40					
Prod NHPPD	8.41	8.41	7.99	7.99	8.73	8.73	8.41		8.380	Total FTE	57.63					
NONPRGD NHPPD	1.40	1.40	1.40	1.40	1.40	1.40	1.40		1.396							
Daily \$ Cost																
UoS/NHPPD Est	th	fr	sat	sun	mon	tue	wed	\$\$/UoS	Tot\$/UoS	DIF	\$ 11,710					
UoS NHPPD Direct \$	\$ 331	\$ 331	\$ 428	\$ 500	\$ 327	\$ 327	\$ 331	\$ 366		Ind	\$ 2,964					
UoS NHPPD Indirect \$	\$ 85	\$ 85	\$ 83	\$ 97	\$ 100	\$ 100	\$ 85	\$ 93		NonProd	\$ 76					
UoS NHPPD PROD \$\$\$	\$ 416	\$ 416	\$ 512	\$ 597	\$ 427	\$ 427	\$ 416	\$ 459		Prod	\$ 14,674					
UoS/NHPPD NonProd\$\$\$	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 535	Total	\$ 14,750					
Annual FTE POSITION class details:																
Annual FTE:	WEEKLY	Wk FTE	Wk	Day	Day	Day	Day	Backfill	Recruit	Premium	Estimate	Recruit				
FTE	Class	Prod (p)	Annual L	PDL L	Man/Train	Per/L	Other	Factor FTE	FTE	FTE	Annual FTE	FTE adjust				
INDIRECT RN5																
INDIRECT RN4.3																
INDIRECT RN4.2																
INDIRECT RN4.1																
INDIRECT RN3G2	1.053	0.081	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191						
INDIRECT RN3G1	2.105	0.161	0.017	0.012	0.061	0.006	0.277	2.284	0.098	2.382						
INDIRECT RN2CDN	1.000	0.038					0.038	1.038		1.038						
INDIRECT RN2TL	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.085	2.165						
INDIRECT RN2																
INDIRECT RN1																
INDIRECT EN2																
INDIRECT EN1																
INDIRECT AIN	4.000							4.000		4.000						
DIRECT RN4NP																
DIRECT RN3G2																
DIRECT RN3G1																
DIRECT RN2TL																
DIRECT RN2	9.579	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.446	11.390						
DIRECT RN2*																
DIRECT RN1	15.842	2.127	0.130	0.087	0.608	0.043	2.995	18.099	0.738	18.837						
DIRECT RN1P	4.421	0.594			0.170	0.061	0.824	5.015	0.230	5.245						
DIRECT ENL2	4.789	0.643	0.039	0.026	0.164	0.013	0.905	5.472	0.223	5.695						
DIRECT EN1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.086	2.190						
DIRECT EN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496						
DIRECT spare																
Total FTE equiv	49.400	5.817	0.304	0.203	1.703	0.202	6.230	55.522	2.109	57.630						
Estimate FTE by Classification																
Annual FTE summary	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Prod in	Annual	Check					
Pro & Non Prod FTE	Prod	Annual L	PDL L	Man/Train	Per/L	Other	FTE	FTE	FTE	FTE	Budget TM1					
RN R5																
RN R43																
RN R42																
RN R42NP																
RN R41																
RN R3G2	1.053	0.081	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191						
RN R3G1	2.105	0.161	0.017	0.012	0.061	0.006	0.277	2.284	0.098	2.382						
RN R2CDN	1.000	0.038					0.038	1.038		1.038						
RN R2TL/S	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.085	2.165						
RN RN2	9.579	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.446	11.390						
RN R1	15.842	2.127	0.130	0.087	0.608	0.043	2.995	18.099	0.738	18.837						
RN R1P	4.421	0.594			0.170	0.061	0.824	5.015	0.230	5.245						
EN ENL2	4.789	0.643	0.039	0.026	0.164	0.013	0.905	5.472	0.223	5.695						
EN ENL1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.086	2.190						
EN ENL1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496						
AIN AIN	4.000							4.000		4.000						
Other spare																
FTE total	49.400	5.817	0.304	0.203	1.703	0.202	6.230	55.522	2.109	57.630						
Notes:																
Includes Stroke Liaison Nurse RN 3.1																
Alignment to TM1 Budget 27/5/21																
Added for Ratio																
Unit Summary																
Annual Cost/Sal Calculation Est																
Prod FTE Sal base	FTE	\$ 4,311,760	NHPPD /UCS\$		78%	Annual Leave FTE		5.82	\$ 517,527	Per Unit of Service		19%				
Prof Develop FTE	0.30	\$ 26,598	Direct		2%	Mandatory FTE	0.20	\$ 19,065	6.69	\$ 366	100%					
Personal Leave FTE	1.70	\$ 152,919	Indirect			Other FTE	0.20	\$ 16,483	1.69	\$ 93						
Backfill/Relief Factor	2.11	\$ 734,592	Prod			Recruit FTE	55.52	\$ 4,857,885	8.38	\$ 459						
Total EST Annual FTE	57.63	\$ 5,040,353	Non Prod			Shift Penalty Cal		\$ 1,042,883	1.40	\$ 76	\$ 1,042,883.21					
PH loading 50% PH (Exclude M-F)		\$ 121,152	Av wkly			Prod FTE (incl Pen)	49.40	\$ 5,475,795		\$ 54.72	\$ 121,151.84					
Est Daily \$\$ Cost Prod/Unit		\$ 14,674	\$\$ per Uos		\$ 535											
APPROVED BY:	Date															
Comments:	Weekly prod FTE = the must have FTE															
Projected FTE has been signed off? approved? Then, don't forget!																
Please forward a copy of the template to NIMS Unit for updating of the Proact database																

Shift Count including AIN Staffing guide report									
Direct+AIN	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct+AIN	Morn	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0
Direct+AIN	Even	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0
Direct+AIN	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0
Direct Total	Total	27.0	27.0	28.0	28.0	28.0	28.0	27.0	193.0

Note: AIN hours are INDIRECT hours
ProAct Staffing DEMAND use this figures
Contact NIMS if Demand to exclude AIN count
See below shift count.
NHPPD - Direct hours (AIN hours are NOT included)
Ratio N:P AIN not included

Shift count Direct (not counting AIN)									
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct	Morn	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0
Direct	Even	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0
Direct	Night	7.0	7.0	7.0	7.0	7.0	7.0	7.0	49.0
Direct Total	Total	25.0	25.0	25.0	25.0	25.0	25.0	25.0	175.0

Note: ProAct system - Roster DEMAND Screen
Default screen
Demand Screen
Staffing guide set up

AIN shift count									
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct	Morn	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Even	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Night			1.0	1.0	1.0	1.0		4.0
Direct Total	Total	2.0	2.0	3.0	3.0	3.0	3.0	2.0	18.0

Attention: The Template projects:
the number of staffing requirement for each shift
This figures must be accurate and signed of as the Budget plan for this year.

Shift Count INDIRECT (include AIN)									
INDIRECT	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Indirect	Morn	5.0	5.0	2.0	2.0	5.0	5.0	5.0	29.0
Indirect	Even	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0
Indirect	Night			1.0	1.0	1.0	1.0		4.0
Indirect Total	Total	7.0	7.0	5.0	5.0	8.0	8.0	7.0	47.0

Note: Update notes are available.

Total shift count									
Total	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Total	Morn	14.0	14.0	11.0	11.0	14.0	14.0	14.0	92.0
Total	Even	11.0	11.0	11.0	11.0	11.0	11.0	11.0	77.0
Total	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0
Total	Total	32.0	32.0	30.0	30.0	33.0	33.0	32.0	222.0

Patient Ratio (AIN excluded)										Bed
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	Avgday	occupy
Direct	Morn	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Even	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Night	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	32
Direct Pt/N Ratio av DAY		4	4	4	4	4	4	4	4	32

Note: Nurse /Patient Ratio based on Full occupancy

check:	Weekly	Wkly Prod	Wk Annual L	Day PDLL	Day ManTrain	Day PersL	Day Other	Backfill FTE	Recruit FTE	Pool in FTE	Annual FTE
Shift count	FTE total	49.40	5.82	0.30	0.20	1.70	0.20	8.23	55.52	2.11	57.63
38 wky Hour	1,877.20	221.05	11.57	7.71	64.71	7.68	312.74	2,109.82	60.12	2,189.94	
Count:	Shift	Estimate number of shifts per week / 5 shift count / FTE									
	7.50 Stand shift	247.0	29.1	1.5	1.0	8.5	1.0	41.1	277.6	10.5	288.1

Use	FA
Appr Cycle	8450,000
Cost Center	8178,800
Budget Available to:	0
Open Budget for:	0
Use Open Day	7
99% Productive FTE	11,000
R43	
R42	
R420P	
R44	
R322	1,623
R321	2,163
R320P	1,000
R2FLS	1,421
R12	6,519
R1	12,842
R1P	4,421
R1L2	4,716
R1L1	1,842
R1L1P	2,917
R1P	4,491
R1P	
Annual Leave	1,100
R43	
R42	
R420P	
R41	
R322	0,941
R321	0,541
R320P	0,039
R3FLS	0,544
R12	1,289
R1	3,122
R1P	0,594
R1L2	0,644
R1L1	0,247
R1L1P	0,165
R1P	
Professional	0,327
R43	
R42	
R420P	
R41	
R322	0,029
R321	0,017
R320P	
R2FLS	0,015
R12	0,079
R1	0,158
R1P	
R1L2	0,049
R1L1	0,013
R1L1P	
R1P	
Mandatory Training	0,326
R43	
R42	
R420P	
R41	
R322	0,004
R321	0,012
R320P	
R2FLS	-0,010
R12	0,026
R1	0,007
R1P	
R1L2	0,026
R1L1	0,010
R1L1P	
R1P	
Personal Leave	0,303
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,041
R320P	
R2FLS	0,000
R12	0,260
R1	0,260
R1P	0,190
R1L2	0,164
R1L1	0,017
R1L1P	0,112
R1P	
Other Day	1,723
R43	
R42	
R420P	
R41	
R322	0,002
R321	0,000
R320P	
R2FLS	0,000
R12	0,000
R1	0,043
R1P	0,041
R1L2	0,013
R1L1	0,046
R1L1P	0,043
R1P	
Not Filled requirement	0,203
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Not Filled requirement	4,102
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
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R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
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R2FLS	0,233
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R1L2	0,002
R1L1	0,002
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Excess	3,028
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R1L1P	0,009
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R1P	
Excess	3,028
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Excess	3,028
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R1P	
Excess	3,028
R43	
R42	
R420P	
R41	
R322	0,049
R321	0,129
R320P	0,128
R2FLS	0,233
R12	1,205
R1	2,237
R1P	0,354
R1L2	0,002
R1L1	0,002
R1L1P	0,009
R1P	
Excess	3,028
R43	

The NIMS Template is used to estimate the Annual Nursing FTE requirements for the unit.

Nurse Manager Worksheet

Data entry - Only use the active cells to enter the number of shifts required

Unit Data Enter the following information on the worksheet
 Division Enter the Service type
 N Manager Enter the Name of RNS preparing the estimate - NM
 UNIT Enter the name of the Unit
 appn Enter the Appn code - salary costcentre
 costcentre Enter the Correct Cost Centre
 Bed open and Day open fields - data will be populated into these two fields.

Save file instructions:

Save the file immediately after you have enter Unit data using the following preferred file name:
 [ppcode-costcentre][unitname]-2013-14 TCH NIMS FTE template ([initials])[date] [v#]

Data Entry Enter the shift count between Thu - Wed columns

Shift count is based on the standard shift length of 8-8-10
 Shift length box is set up to calculate the Shift count per shift based on the current standard shift length
 Mom shift standard shift length is 8 hours 7:00am start
 Even shift standard shift length is 8 hours 12:00 pm start
 Night shift standard shift length is 10 hours 9:00pm start

If roster contains 12hr shift / 10 hr shift, use the appropriate shift count guidelines
 Note: 12hr shift - please Day 12h in Mom cell, place Night 12h in Night cell

Using the active cells highlighted in colour -

enter the Equivalent no of shift counts required for each classification
 use separate template for each sub-group if a separate ROSTER is required (Proact system)

For example - Postnatal ward and Midcall program requires separate rosters

Use a separate template to calculate the shift/re requirements for subgroups under same cost centre
 add the shift count data together in a separate template for calculation of total FTE

Annual FTE Estimate section Relief Factor calculation section

Backfill/Relief Factor component set up:

Executive Decision - adjustment of relief factor reference in Column U,V,W,X,Y,Z (starting in row10)

check the No. of annual leave weeks - 4, 5, 6, or 7

Check the No. of days required for Personal leave provision - backfill factor stands at 14 days

Check the No. of days required for PDL/Education provision & PPT provision default 3 days

Check the No. of days required for Mandatory Training - default 2 days

Check the No. of Other days required for Other relief type - mainly for Graduate program eg Supernumary/Program Devp

the number entered in the Backfill/Relief Factor active cells would automatically be calculated to determine

the weekly FTE requirements to complete a unit roster

the weekly Annual Leave allocation for the unit / determine the backfill FTE

the estimate relief factor - for backfilling of unscheduled leave

the estimate Education / PDL backfill

these fields contained formula that will calculate the Backfill/Relief component that form the Annual FTE requirement

check annual leave requirement for Rec Leave relief factor

Mon-Fri Non shift workers +PH off	annual Leave entitlement	4
Mon-Fri Non shift workers +PH off +wk wkends	annual Leave entitlement	5
Shift workers +PH off + no weekends	annual Leave entitlement	5
Shift workers + weekends +PH off	annual Leave entitlement	6
Shift workers +PH + weekends	annual Leave entitlement	7

Note: worked One PH, One weekend rule

The worksheet will automatically calculate the annual FTE requirements once the correct shift count numbers are entered

Bed Unit activities per day for inpatients / day patients / no. estimation booked consultations / no. of staff working in the unit

Enter the BUDGETED beds number / shifts for the day
 Enter the number of projected beds available [OPEN] for each day
 for example, in some area, the available/staff beds may be reduced at the week ends
 Enter the day (equivalent to 1) that the unit is opened - ie day open count
 If the Unit is closed on Sat and Sun, then do not enter the figure (1) on the call

The data must be entered accurately as this information is required to calculate the

Nursing Hours per patient days is based on the average hours worked provided for the operational bed numbers % bed Occup

Direct Nursing Hours Per Patient Day / Unit of Service estimate (Proact system)

The Template is set up with formula to clearly identify the estimated Direct FTE (direct patient care) hours required for the unit

Estimated indirect FTE hours (staff rostered to the Unit but not directly taking on patient care load)

Check Agreed NMPD for units included in the Reasonable workload program

Unit of Service/Daily/Average \$ cost

The template provides an estimate of Unit of Service cost estimate per patient hours provided.
 Note: Average Hly rate is calculated based on the total hours rostered to the unit (including shift penalties)
 This is an estimate of the hly rate based on the combination of skill mix required for the unit
 It also calculate the average Daily \$ cost - it gives an estimate of the \$Daily cost required to run the unit

Indirect nursing hours

calculated automatically to identify the nursing hours provided not directly related to individual patient care
 for example - Clinical Nurse consultant, CDN, Supernumary (team leader) not providing direct individual patient care

Annual FTE Estimate by Class Details:

When the shift counts have been entered into the worksheet, all the allocation will be done automatically to provide details of FTE estimate:
 the determined staffing requirement to roster the unit on an average weekly basis from Thu-Wed
 the determined annual leave FTE that can be released & estimate Backfill/Relief component factor
 the determined PDL leave component
 the determined Mandatory training hours component to estimate the backfill/RELIEF pool component
 the determined personal leave backfill/RELIEF pool component

The Class details can then be compared with the current FTE eq of staff employed in the Unit.

Space for notes and other comments that may affect the estimate

Use this space to record specific anomalies / variance that may occur throughout the budget period.

FTE Dollar calculation

The template include the basic \$ cost based on the hly rate and shift penalty rate only.

Project shift penalty for every shift count

Project PHPenalty50% loading

Excluded from this template are:

Project on call / close call hours payable for onclose call allowances

Projected hours payable for responsibility allowance

For further details or explanation on the use of template, please contact Chin Wong R 42419

This template is not to be reproduced without permission.

THIS Template for NCR training is available for evaluation of other template users/units. Contact of position FTE - please contact Chin Wong if required.

Shift count calculation based on 8x8x10 pattern		
AM Shift	default hour = 8	
Standard hr	shift hr	shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50
8	7.6	0.95 No ADD

PM Shift		
Standard hr	shift hr	Shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50

Night Duty		
Standard hr	shift hr	shift count
10	10	1.00
10	12	1.20
10	8	0.80
10	9.5	0.95

12 Hour shift		
Mom	Even start	Night
0700-1800	1200-1800	1800 start till 0730
12.5% penalty - Mom shift hours	Even 12.5% - Even shift hours	22.5% penalty - Night shift hours
after 1800	after 1800	Beyond 0730 revert base penalty

2021 July	2022 June	Division N Manager	CAS	Bed Open 31	Shift count Morn & Even shift length	shift length 8.00	shift hour 8.00	shift count 1.00	shift hour 10.00	shift count 1.25	Updated If ADO backfill hrs required, change shift length to 8.00	by who	enter date	Comments TEMPLATE21		
		UNIT appt costcentre	14B 7516 61738	Day open 7	Night Duty shift length	10.00	10.00	1.00	8.00	0.80	12.00	1.20				
Shift	Shift count	8 hour shift length = 1.00	Morn shift from 0700 ends 1800							default	count 1=	8.00	7.6 (no backfill)	Shift Length	Wkly hrs	Shift length ADO adjust to 8
MORN	Shift count	MORN	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	Shift Length	Wkly hrs		
Morn	INDIRECT	RN5											7.60	38.00		
Morn	INDIRECT	RN4.3											7.60	38.00		
Morn	INDIRECT	RN4.2											7.60	38.00		
Morn	INDIRECT	RN4.1											8.00	38.00		
Morn	INDIRECT	RN3G2											7.60	38.00		
Morn	INDIRECT	RN3G1											7.60	38.00		
Morn	INDIRECT	RN2CDN	1.00	1.00			1.00	1.00	1.00	5.00	38.00	1.000	7.60	38.00		
Morn	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
Morn	INDIRECT	RN2	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053	8.00	38.00		
Morn	INDIRECT	RN1											8.00	38.00		
Morn	INDIRECT	EN2											8.00	38.00		
Morn	INDIRECT	EN1											8.00	38.00		
Morn	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
Morn	DIRECT	RN4NP											8.00	38.00		
Morn	DIRECT	RN3G2											8.00	38.00		
Morn	DIRECT	RN3G1											8.00	38.00		
Morn	DIRECT	RN2TL											8.00	38.00		
Morn	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00		
Morn	DIRECT	RN2*	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053	8.00	38.00		
Morn	DIRECT	RN1	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00		
Morn	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
Morn	DIRECT	ENL2											8.00	38.00		
Morn	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
Morn	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00		
Morn	DIRECT	spare											8.00	38.00		
Morn	Morn Shift Count		12.00	12.00	9.00	9.00	12.00	12.00	12.00	78.00	622.00	16.37	7.90			
Shift	Shift count	shift length = 1.00	Even from 1200 ends before 2400							default	count 1=	8.00	7.6 (no backfill)	Shift Length	Wkly hrs	Even
EVEN	Shift count	EVEN	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	Shift Length	Wkly hrs	Even	
Even	INDIRECT	RN5											7.60	38.00		
Even	INDIRECT	RN4.3											7.60	38.00		
Even	INDIRECT	RN4.2											7.60	38.00		
Even	INDIRECT	RN4.1											7.60	38.00		
Even	INDIRECT	RN3G2											7.60	38.00		
Even	INDIRECT	RN3G1											7.60	38.00		
Even	INDIRECT	RN2CDN											7.60	38.00		
Even	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	53.20	1.40	7.60	38.00		
Even	INDIRECT	RN2											7.60	38.00		
Even	INDIRECT	RN1											7.60	38.00		
Even	INDIRECT	EN2											7.60	38.00		
Even	INDIRECT	EN1											7.60	38.00		
Even	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
Even	DIRECT	RN4NP											8.00	38.00		
Even	DIRECT	RN3G2											8.00	38.00		
Even	DIRECT	RN3G1											8.00	38.00		
Even	DIRECT	RN2TL											8.00	38.00		
Even	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.96	8.00	38.00		
Even	DIRECT	RN2*	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.05	8.00	38.00		
Even	DIRECT	RN1											8.00	38.00		
Even	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
Even	DIRECT	ENL2											8.00	38.00		
Even	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
Even	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00		
Even	DIRECT	spare											8.00	38.00		
Even	Even Shift Count		8.00	8.00	7.00	7.00	8.00	8.00	8.00	54.00	429.20	11.29				
Shift	Shift count	shift length = 1.00	Night from 1800 ends 0730 2ndday							default	count 1=	10.00	9.5 (no backfill)	Shift Length	Wkly hrs	Night
NIGHT	Shift count	NIGHT	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	Shift Length	Wkly hrs	Night	
Night	INDIRECT	RN5											10.00	38.00		
Night	INDIRECT	RN4.3											10.00	38.00		
Night	INDIRECT	RN4.2											10.00	38.00		
Night	INDIRECT	RN4.1											10.00	38.00		
Night	INDIRECT	RN3G2											10.00	38.00		
Night	INDIRECT	RN3G1											10.00	38.00		
Night	INDIRECT	RN2CDN											10.00	38.00		
Night	INDIRECT	RN2TL											10.00	38.00		
Night	INDIRECT	RN2											10.00	38.00		
Night	INDIRECT	RN1											10.00	38.00		
Night	INDIRECT	EN2											10.00	38.00		
Night	INDIRECT	EN1											10.00	38.00		
Night	INDIRECT	AIN											10.00	38.00		
Night	DIRECT	RN4NP											10.00	38.00		
Night	DIRECT	RN3G2											10.00	38.00		
Night	DIRECT	RN3G1											10.00	38.00		
Night	DIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00		
Night	DIRECT	RN2											10.00	38.00		
Night	DIRECT	RN2*											10.00	38.00		
Night	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	210.00	5.53	10.00	38.00		
Night	DIRECT	RN1P											10.00	38.00		
Night	DIRECT	ENL2											10.00	38.00		
Night	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00		
Night	DIRECT	EN1P											10.00	38.00		
Night	DIRECT	spare											10.00	38.00		
Night	Night Shift Count		5.00	5.00	5.00	5.00	5.00	5.00	5.00	35.00	350.00	9.21				
TOTAL	Total M-E-N Shift Count		25.00	25.00	21.00	21.00	25.00	25.00	25.00	167.00						
	Wkly FTE Summary		thu	fri	sat	sun	mon	tue	wed	Total	Nurse: patient Ratio		Bud beds	31		
Total	Total wky shifts/staff		25.00	25.00	21.00	21.00	25.00	25.00	25.00	167.00	8h shift	Morn	7.714	4		
Total	Total Wky Hours		209.20	209.20	177.80	177.80	209.20	209.20	209.20	1401.20	8h shift	Even	5.714	5		
Total	Total Wky FTE		5.51	5.51	4.67	4.67	5.51	5.51	5.51	36.87	10h shift	Nlght	5.000	6		
											UF NHPPU		5.10			

If ADO back change shift

Morn Direct
432.00
61.71
7.714

Even Direct
320.00
45.71
5.7142857

ND Direct
350.00
50.00
5

MOST ENTER	Bed/Unit Activities	ENTER Budget beds and Daily available Open Bed numbers							BUDGET	31	OPEN	31	Note: Enter Bed numbers / Unit as 1
	Must complete this section	thu	fr	sat	sun	mon	tue	wed	total	Occup%		Type In total shift count if no NHPPD required or 1	
	Budget BEDS/Staff	32.0	32.0	28.0	28.0	32.0	32.0	32.0	216.0	100.0%		Type Nos Budgeted Beds for the Unit here	
	BEDS/Unit Staff OPEN	32.0	32.0	28.0	28.0	32.0	32.0	32.0	216.0			Type Nos beds staff operating per day	
	DAY/UNIT OPEN	1	1	1	1	1	1	1	7			Type 1=unit is open on the day, 0 if not open	

Enter Budget Bed Numbers
Projecte Led numbers open
day Unit open 5 or 7 day

NHPPD	thu	fr	sat	sun	mon	tue	wed	total	Avg day	Fixed Targets:	FTEs
Direct Hours	162.00	162.00	146.00	146.00	162.00	162.00	162.00	1102.00	157.43	Direct FTE:	29.00
Indirect Hours	47.20	47.20	31.80	31.80	47.20	47.20	47.20	299.20	42.74	Indirect FTE:	7.87
NHPPD DIRECT	5.06	5.06	5.21	5.21	5.06	5.06	5.06	5.102		Non prod FTE:	6.25
NHPPD IND	1.48	1.48	1.13	1.13	1.48	1.48	1.48	1.385		Prod FTE:	36.87
Prod NHPPD	6.54	6.54	6.34	6.34	6.54	6.54	6.54	6.487		Total FTE:	43.12
NONPROD NHPPD	1.10	1.10	1.10	1.10	1.10	1.10	1.10	1.099			

UoS/NHPPD Est	thu	fr	sat	sun	mon	tue	wed	total	Dir	\$ 8,457
UoS NHPPD Direct \$	\$ 245	\$ 245	\$ 334	\$ 390	\$ 245	\$ 245	\$ 245	\$ 274	Ind	\$ 2,296
UoS NHPPD Indirect \$	\$ 71	\$ 71	\$ 72	\$ 84	\$ 71	\$ 71	\$ 71	\$ 74	NonProd	\$ 59
UoS NHPPD PROD \$\$\$	\$ 318	\$ 318	\$ 408	\$ 474	\$ 318	\$ 318	\$ 318	\$ 348	Prod	\$ 10,753
UoS/NHPPD NonProd\$\$\$	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	Total	\$ 10,812

Annual FTE POSITION class details:												Office use only	
Annual FTE:	WEEKLY	Wk FTE	Wk	Day	Day	Day	Day	Backfill	Recruit	Premium	Estimate	Adjustment column	
FTE	Class	Prod (p)	Annual L	PDL L	ManTrain	Peral	Super	Factor FTE	FTE	FTE	Annual FTE	Recruit	FTE adjust
INDIRECT	RN5												
INDIRECT	RN4.3												
INDIRECT	RN4.2												
INDIRECT	RN4.1												
INDIRECT	RN3G2												
INDIRECT	RN3G1												
INDIRECT	RN2CDN	1.000	0.038					0.038	1.038		1.038		
INDIRECT	RN2TL	2.874	0.366	0.024	0.016	0.110	0.008	0.543	3.283	0.134	3.417		
INDIRECT	RN2	1.053	0.141	0.009	0.006	0.040	0.003	0.199	1.203	0.049	1.252		
INDIRECT	RN1												
INDIRECT	EN2												
INDIRECT	EN1												
INDIRECT	AIN	2.947							2.947		2.947		
DIRECT	RN4NP												
DIRECT	RN3G2												
DIRECT	RN3G1												
DIRECT	RN2TL	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.086	2.190		
DIRECT	RN2	5.895	0.791	0.048	0.032	0.226	0.016	1.114	6.735	0.275	7.009		
DIRECT	RN2*	2.105	0.283	0.017	0.012	0.081	0.008	0.398	2.405	0.098	2.503		
DIRECT	RN1	8.474	1.138	0.070	0.046	0.325	0.023	1.602	9.681	0.395	10.076		
DIRECT	RN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
DIRECT	ENL2												
DIRECT	EN1	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695		
DIRECT	EN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
DIRECT	spare												
Total FTE equiv		36.874	4.459	0.222	0.148	1.283	0.155	6.247	41.554	1.566	43.120		

Estimate FTE by Classification											
Annual FTE summary	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Pool in	Annual	Check
Pro & Non Prod FTE	Prod	Annual L	PDL L	ManTrain	Peral	Other	FTE	FTE	FTE	FTE	Budget TMT
RN	R5										
RN	R43										
RN	R42										
RN	R42NP										
RN	R41										
RN	R3G2										
RN	R3G1										
RN	R2CDN	1.000	0.038				0.038	1.038		1.038	
RN	R2TL/S	4.716	0.633	0.039	0.026	0.181	0.013	0.891	5.388	0.220	5.607
RN	RN2	8.053	1.215	0.074	0.050	0.347	0.025	1.711	10.342	0.422	10.764
RN	R1	8.474	1.138	0.070	0.046	0.325	0.023	1.602	9.681	0.395	10.076
RN	R1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496
EN	ENL2										
EN	ENL1	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695
EN	ENL1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496
AIN	AIN	2.947							2.947		2.947
Other	spare										
FTE total		36.874	4.459	0.222	0.148	1.283	0.155	6.247	41.554	1.566	43.120

Notes: Team Leader indirect RN1.2 Indirect in the DLN RN1.2* is the Phase 1 unit	Unit Summary		Annual Cost Sal Calculation Est		\$ 87,596.96
	Prod FTE Sal base	FTE	\$	3,198,628	NHPPD /UGSS 80%
	Annual Leave FTE	4.46	\$	397,305	Per Unit of Service 18%
	Prof Develop FTE	0.22	\$	20,792	Direct 2%
	Mandatory FTE	0.15	\$	13,861	5.10 \$ 274 100%
	Personal Leave FTE	1.26	\$	112,369	Indirect
	Other FTE	0.15	\$	12,417	1.39 \$ 74
	Backfill/Relief Factor	1.57	\$	556,764	Prod
	Recruit FTE	41.55	\$	3,614,724	6.49 \$ 348
	Total EST Annual FTE	43.12	\$	3,753,391	Non Prod
Shift Penalty Cal		\$	727,725	1.10 \$ 59	
PH loading 50% PH (Exclude M-F)		\$	87,597	Av wly AV Fifty Rate \$ 87,596.96	
Prod FTE (incl Pen)	36.87	\$	4,011,951	\$ 53.72	
Est Daily \$\$ Cost Prod/Unit		\$	10,753	\$\$ per Uos \$ 408	

APPROVED BY: _____ Date _____

Comments:
Weekly prod FTE = the must have FTE

Projected FTE has been signed off? approved? Then, don't forget!
Please forward a copy of the template to NIMS Unit for updating of the Proact database

Shift Count including AIN Staffing guide report									
Direct+AIN	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct+AIN	Morn	8.0	9.0	8.0	8.0	9.0	9.0	9.0	61.0
Direct+AIN	Even	7.0	7.0	6.0	6.0	7.0	7.0	7.0	47.0
Direct+AIN	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0
Direct Total	Total	21.0	21.0	19.0	19.0	21.0	21.0	21.0	143.0

Note: AIN hours are INDIRECT hours
ProAct Staffing DEMAND use this figures
Contact NIMS if Demand to exclude AIN count
See below shift count
NHPPD - Direct hours (AIN hours are NOT included)
Ratio N:P AIN not included

Shift count Direct (not counting AIN)									
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct	Morn	8.0	8.0	7.0	7.0	8.0	8.0	8.0	54.0
Direct	Even	6.0	6.0	5.0	5.0	6.0	6.0	6.0	40.0
Direct	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0
Direct Total	Total	19.0	19.0	17.0	17.0	19.0	19.0	19.0	129.0

Note: ProAct system - Roster DEMAND Screen
Default screen
Demand Screen
Staffing guide set up

AIN shift count									
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Direct	Morn	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Even	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Night								
Direct Total	Total	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0

Attention: The Template projects:
the number of staffing requirement for each shift

This figures must be accurate and signed of as the Budget plan for this year.

Shift Count INDIRECT (include AIN)									
INDIRECT	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Indirect	Morn	4.0	4.0	2.0	2.0	4.0	4.0	4.0	24.0
Indirect	Even	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0
Indirect	Night								
Indirect Total	Total	6.0	6.0	4.0	4.0	6.0	6.0	6.0	38.0

Note: Update notes are available.

Total shift count									
Total	Shift	Thu	fri	sat	sun	mon	tue	wed	TOTAL
Total	Morn	12.0	12.0	9.0	9.0	12.0	12.0	12.0	78.0
Total	Even	8.0	8.0	7.0	7.0	8.0	8.0	8.0	54.0
Total	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0
Total	Total	25.0	25.0	21.0	21.0	25.0	25.0	25.0	167.0

Patient Ratio (AIN excluded)										Bed
Direct	Shift	Thu	fri	sat	sun	mon	tue	wed	Avgday	occupy
Direct	Morn	3.9	3.9	4.4	4.4	3.9	3.9	3.9	4.0	31
Direct	Even	5.1	5.1	6.2	6.2	5.1	5.1	5.1	5.4	31
Direct	Night	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	31
Direct P/N Ratio av DAY		5	5	6	6	5	5	5	5	31

Note: Nurse /Patient Ratio based on Full occupancy

check:	Weekly	Wkly Prod	Wk Annual L	Day PDL L	Day ManTrain	Day PersL	Day Other	Backfill FTE	Recruit FTE	Pool In FTE	Annual FTE
FTE total	38.67	4.46	0.22	0.15	1.26	0.15	6.25	41.55	1.57	43.12	
38 wkly Hour	1,401.20	169.43	8.44	5.63	47.99	5.88	237.37	1,579.07	59.50	1,636.57	
Count	Shift	Estimate number of shifts per week / 5 shift count / FTE									
7.60	Stand shift	184.4	22.3	1.1	0.7	6.3	0.8	31.2	207.6	7.6	215.6

The RIMS Template is used to estimate the Annual Nursing FTE requirements for the unit.

Nurse Manager Worksheet

Data entry - Only use the active cells to enter the number of shifts required

Unit Data Enter the following information on the worksheet:
 Division Enter the Service type
 N Manager Enter the Name of RN3 preparing the estimate - NM
 UNIT Enter the name of the Unit
 appn Enter the Appn code - salary costcentre
 costcentre Enter the Corres Cost Centre
 Bed open and Day open fields - data will be populated into these two fields

Save file instruction:

Save the file immediately after you have enter Unit data using the following preferred file name:
 [approved-costcentre][unitname]-[RN3-14]TCH NIMS FTE template [initials][date] [V1]

Data Entry Enter the shift count between the - Wed column

Shift count is based on the standard shift length of 8-8-10
 Shift length box is set up to calculate the Shift count per shift based on the current standard shift length
 Mom shift standard shift length is 8 hours 7:00am start
 Even shift standard shift length is 8 hours 12:00 pm start
 Night shift standard shift length is 10 hours 9:00pm start

If roster contains 12hr shift / 10 hr shift, use the appropriate shift count guidelines
 Note: 12hr shift - place Day 12h in Mom cell, place Night 12h in Night cell

Using the active cells highlighted in colour -

enter the Equivalent no of shift counts required for each classification
 use separate template for each sub-group if a separate ROSTER is required (Proact system)

For example - Postnatal ward and Midical program requires separate rosters

Use a separate template to calculate the shift/re requirements for subgroups under same cost centre
 add the shift count data together in a separate template for calculation of total FTE

Annual FTE Estimate section Relief Factor calculation section

Backfill/Relief Factor component set up:

Executive Decision - adjustment of relief factor reference in Column U,V,W,X,Y,Z (starting in row 120)

- check the No. of annual leave weeks - 4, 5, 6, or 7
 - Check the No. of days required for Personal leave provision - backfill factor stands at 14 days
 - Check the No. of days required for PDL/Education provision & PPT provision default 3 days
 - Check the No. of days required for Mandatory Training default 2 days
 - Check the No. of Other days required for Other relief types - usually for Graduate program eg Supervisory/Program Dev etc
- the number entered in the Backfill Relief Factor active cells would automatically be calculated to determine the weekly FTE requirements to complete a unit roster
 the weekly Annual Leave allocation for the unit / determine the backfill FTE
 the estimate relief factor - for backfilling of unscheduled leave:
 the estimate Education / PDL backfill

these fields contained formula that will calculate the Backfill/Relief component that form the Annual FTE requirement

annual leave requirement for Rec Leave relief factor

Mon-Fri Non shift workers +PH off	annual Leave entitlement	4
Mon-Fri Non shift workers +PH off +wk weekends	annual Leave entitlement	5
Shift workers +PH off + wk weekends	annual Leave entitlement	5
Shift workers + weekends +PH off	annual Leave entitlement	6
Shift workers +PH + weekends	annual Leave entitlement	7

Note: worked One PH, One weekend rule!

the worksheet will automatically calculate the annual FTE requirements once the correct shift count numbers are entered

Bed Unit activities per day for inpatients / day patients / no. estimation booked consultations / no. of staff working in the unit

Enter the BUDGETED beds number / shifts to the day
 Enter the number of projected beds available (OPEN) for each day
 for example, in some area, the available/staff beds may be reduced at the week ends
 Enter the day (equivalent to 1) that the unit is opened - ie day open count
 If the Unit is closed on Sat and Sun, then do not enter the figure (1) on the cell

the data must be entered accurately as this information is required to calculate the Nursing Hours per patient days is based on the average hours provided for the operational bed numbers & % bed Occup

Direct Nursing Hours Per Patient Day / Unit of Service estimate (Proact system)

The Template is set up with formula to clearly identify the estimated Direct FTE (direct patient care) hours required for the unit
 Estimated Indirect FTE hours (staff rostered to the Unit but not directly taking on patient care load)

Check agreed NPPD for units included in the Reasonable workload program

Unit of Service/Daily Average \$ cost

The template provides an estimate of Unit of Service cost estimate per patient hours provided.
 Note: Average Hry rate is calculated based on the total hours rostered to the unit (including shift penalties)
 This is an estimate of the hry rate based on the combination of skill mix required for the unit
 It also calculate the average Daily \$ cost - it gives an estimate of the \$/Daily cost required to run the unit

indirect nursing hours

calculated automatically to identify the nursing hours provided not directly related to individual patient care
 for example - Clinical Nurse consultant, GDN, Supervisory (team leader) not providing direct individual patient care

Annual FTE Estimate by Class Details:

When the shift counts have been entered into the worksheet, all the calculation will be done automatically to provide details of FTE estimate:
 the determined staffing requirement to roster the unit on an average weekly basis from Thu-Wed
 the determined annual leave FTE that can be released & estimate Backfill/Recruitable component factor
 the determined PDL leave component
 the determined Mandatory training hours component to estimate the backfill/RELIEF pool component
 the determined personal leave backfill/RELIEF pool component

The Class details can then be compared with the current FTE eq of staff employed in the Unit.

Space for notes and other comments that may affect the estimate.

Use this space to record specific anomalies / variance that may occur throughout the budget period.

FTE Dollar calculation

The template include the basic \$ cost based on the hry rate and shift penalty rate only.
 Project shift penalty for every shift count
 Project PHPenalty 50% loading
 Excluded from this template are:
 Project on call / close call hours payable for on/close call allowances
 Projected hours payable for responsibility allowance

For further details or explanation on the use of template, please contact Chin Wong K 42419
 This template is not to be reproduced without permission.

NIMS Template for NCH funding is available for calculation of other employment classifications/ individual position FTE.
 please contact Chin Wong if required.

Shift count calculation based on 8x8x10 pattern

AM Shift	default hour = 8	
Standard hr	shift hr	shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50
8	7,6	0.95 No ADO

PM Shift

Standard hr	shift hr	Shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50

Night Duty:
 The default ND hour = 10

Standard hr	shift hr	shift count
10	10	1.00
10	12	1.20
10	8	0.80
10	9,8	0.95

12 Hour shift
 Mom
 0700-1800 base penalty - Mom shift hours
 after 1800 22.5% penalty - Night shift hours
 Even start
 1200-1800 Even 12.5% - Even shift hours
 after 1800 22.5% penalty - Night shift hours
 Night
 1800 start till 0730
 22.5% penalty - Night shift hours
 Beyond 0730 revert base penalty

From: Bransgrove, Meagen
Sent: Monday, 29 August 2022 5:27 PM
To: ACT Health DLO
Subject: RE: OVERDUE: GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Importance: High

Categories: Tara

Thanks Tara, some comments on this one – both the Word document answering the QoN and Attachment A to be answered please. I have placed [here](#).

Thanks,

Meg

From: Gower, Tara (Health) <Tara.Gower@act.gov.au> **On Behalf Of** ACT Health DLO
Sent: Monday, 29 August 2022 3:59 PM
To: Bransgrove, Meagen <Meagen.Bransgrove@act.gov.au>
Subject: OVERDUE: GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Meg

Just sending a notification via email on this one.

This QON was listed in QON Paper 19 (10 June) and is overdue to Chamber support.

The response is in your folder [here](#)

Thank you

Tara

Tara Gower | A/g Directorate Liaison Officer | ACT Health Directorate

Mob [REDACTED] | Email: ACTHealthDLO@act.gov.au

Office of Rachel Stephen-Smith | Minister for Health

Officer of Emma Davidson | Minister for Mental Health

Level 2, Legislative Assembly Building, Civic Square



From: Gower, Tara (Health) on behalf of ACT Health DLO
Sent: Monday, 29 August 2022 8:55 PM
To: GovernmentBusinessHealth
Subject: RFA: GBC22/367 - Minister for Health - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Kylie

RFA to line area and CHS please.

Comments direct from MO is placed on the Final Response and Att A.

Thank you
Tara

Tara Gower | A/g Directorate Liaison Officer | ACT Health Directorate

Mob: [REDACTED] | Email: ACTHealthDLO@act.gov.au

Office of Rachel Stephen-Smith | Minister for Health

Office of Emma Davidson | Minister for Mental Health

Level 2, Legislative Assembly Building, Civic Square



From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Monday, 29 August 2022 3:32 PM
To: ACT Health DLO <ACTHealthDLO@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: FOR MO: GBC22/367 - Minister for Health - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Tara

Please progress the attached QON response to MO for review. The response includes:

- COR22/21749 Final Response - QoN 833 - Minister for Health - Ward Breakdowns
- COR22/21756 QON 833 - Attachment A - CHS Ward Map 24 June 2022
- COR22/21760 QON 833 - Attachment B - Rostering Template

This QON was listed in QON Paper 19 (10 June) and is overdue to Chamber support. MAGS apologises for the delay due to Calvary input and consultation with CHS.

Kind regards

Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:57 AM
To: HSPE
Cc: LHN Coord; Pini, Sallyanne (Health); GovernmentBusinessHealth; Ellis, Catherine (Health)
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital ~ Castley.tr5
Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the response at COR22/21749.

Can HSPE please review the answer to *i. how many treatment spaces are in each ward* **ASAP. MO have requested "Maternity and Medical be broken down into each ward."**

Can you please also review the answer to *iv. how many staff are scheduled for each ward including job title and classification*. **MO commented the response is an "inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please."**

MAGS will also RFA question *iv.* to CHS for review and will request a contact ASAP. It may be best to discuss a consistent response to *iv.* before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



Rachel Stephen-Smith MLA

Minister for Health
Minister for Families and Community Services
Minister for Aboriginal and Torres Strait Islander Affairs

Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE

Questions on Notice Paper No 19

10 June 2022

Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward,
- ii. how many beds are in each ward,
- iii. how many treatment spaces are in each ward,
- iv. how many staff are scheduled for each ward including job title and classification for
 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward.

Commented [CS(1): Last FY is interpreted as 2020-21 noting the question paper was taken on 10 June 2022.

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

- i. See Canberra Health Services (CHS) Ward Map at [Attachment A](#). Note that bed numbers/wards are dynamic and subject to change according to clinical need.

Deleted: . Further information can be provided about specific wards, however this list should be self-explanatory

Formatted: Indent: Left: -0.01 cm, Space Before: 12 pt

See the below table for information from Calvary Public Hospital Bruce (CPHB).

ACT Legislative Assembly London Circuit, GPO Box 1020, Canberra ACT 2601

+61 2 6205 2661 stephen-smith@act.gov.au

[@RachelSS_MLA](#)

[racheISSMLA](#)

[rachelss_mla](#)

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Intensive Care and Coronary care unit ²	14
Emergency Short Stay Unit ³	15
Hospital in the Home ⁴	18
Maternity Units	34
Medical	86
Acacia Ward (Mental Health services only)	21
Older Persons Mental Health Unit (Mental Health services only)	15
Surgical	28

Commented [BM2]: This is asking for each ward, can Maternity and Medical please be broken down into each ward

¹- Average number of beds operated throughout the year. Beds is the measure used for inpatient settings, treatment spaces not applicable. Note that bed numbers/wards are dynamic and subject to change according to clinical need.
²- ICU capacity depends on activity.
³- Excludes beds currently utilised for the COVID-19 Red zone
⁴- HITH beds are virtual beds as care is homebased

ii. See above response to Question ii.

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iii. See above response to Question ii.

iv. CHS nursing rostering templates are completed by the Nurse Manager for each ward to reflect respective staffing levels/classification for morning, evening and night shifts. Examples are provided at Attachment B.

Commented [BM3]: This is a very inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please.

See the below table for information from CPHB.

Calvary Public Hospital Bruce*			
	Morning	Afternoon	Night
Midwives	11	10	9
Nurses	70	80	55
Junior Medical Doctors (JMOs)	120 JMOs across a 24-hour shift roster JMOs are supplemented by specialist medical officers /consultants and visiting medical officers		
Allied Health professionals	100 (approx.) Allied Health Professionals across a variety of shifts, in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and 24/7 medical imaging.		

* This is a typical daily roster but can be subject to change due to demand

A complete list of all staff rostered for morning, afternoon and night shift for each ward at CHS and CPHB has not been provided as this would be an unreasonable diversion of resources to complete this request.

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 Deleted: due to
 Deleted: required
 Deleted: ¶

v. Neither CPHB nor CHS report at the ward level. Performance information for each hospital is available via the ACT Public Health Services Quarterly Performance Report.

<https://health.act.gov.au/about-our-health-system/act-public-health-services-quarterly-performance-report>

Deleted:
https://www.health.act.gov.au/sites/default/files/2022-05/Act%20A%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf

vi. Refer to response to Question v.

vii. CHS is unable report at the ward level and CPHB does not routinely collect data at ward level for staff recruitment. The ACT Health Directorate provided mental health ward level data for QON 830, however, to provide detailed staffing for each ward would be resource intensive and take key personnel away from their core functions which would be an unreasonable diversion of resources. I also refer the Member to QON 834 which provides overall staff exits.

Moved (insertion) [1]
Deleted:

viii. Refer to response to Question vii.

ix. CHS does not report Budget allocations at the Ward level. Please refer to *Budget Paper C*: https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf

Deleted: Data has been provided detailing the paid headcount on 24 June 2020 and corresponding headcount paid on 23 June 2021.

Moved up [1]: does not routinely collect data at ward level for staff recruitment. The ACT Health Directorate provided mental health ward level data for QON 830, however, to provide detailed staffing for each ward would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.

CPHB does not report budget allocation at the Ward level. Internal budgets are not representative of the costs as there are different treatments between hospitals as to the allocation of direct and indirect costs. National Weighted Activity Unit (NWAU) costs per patient episode are available through the Independent Hospital Pricing Authority (IHPA) benchmarking portal, the latest data publicly available is 2019-20. the system allows the user to filter by care type.

Deleted: Canberra Health Services ... [1]

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Deleted: CHS

Deleted:

<https://benchmarking.ihoa.gov.au/extensions/ihoanbp/index.html#/periodic-insights/overview>

Deleted: CPHB do not routinely collect data at ward level for staff separations. The ACT Health Directorate recently provided mental health staff exits in QON 829, however, to provide detailed staffing separations by all wards would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.

x. CHS does not report expenditure at the Ward level. CHS's 2021-22 Annual Report has yet to be finalised, however a comparison of CHS's financial position can be found within CHS' 2020-21 Annual Report - [Canberra Health Services Annual Report 2020-2021 \(act.gov.au\)](https://www.act.gov.au/canberra-health-services/annual-report-2020-2021).

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See CPHB response to Question ix.

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xi. Neither CHS nor CPHB report Length of Stay at the Ward level. Performance information is available via the ACT Public Health Services Quarterly Performance Reports.

<https://health.act.gov.au/about-our-health-system/act-public-health-services-quarterly-performance-report>

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Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
Minister for Health

Date:.....

This response required 26 hours and 50 minutes to complete, at an approximate cost of \$2741.61.



Legend

- WYC
- Medicine
- Surgery
- MHJHADS
- CAS
- RACS
- Empty
- COVID-19

Note:

See over page for abbreviations

Building 1 (Tower Block)

10A 32 beds General Surgery, Ophthalmology	Offices Care @ Home Program
9A 24 beds Gastroenterology	9B 23 beds – Neurosurgical 06 beds – Monitored beds Trache Ward
8A (No overnight beds) 10 – Dialysis day beds	8B 25 beds – Paediatrics
7A 32 beds Neurology & Infectious Diseases Stroke Unit Trache Ward	7B 32 beds General Medicine
6A 32 beds Respiratory/Cardiology Rheumatology / Endocrinology	6B 34 beds including 28 – Cardiothoracic, Thoracic surgery, Urology, Vascular 06 – Monitored beds
5A 30 beds – Orthopaedic/ Orthopaedic-Geriatrics	5B 24 – Plastic/Ortho/ENT 02 – flex beds Trache ward
4A (30) ASU – surgery – 16 beds ACDL – medicine 8 beds 6 – Flex beds	4B 20 – Renal + Medicine 0 – Discharge Lounge beds
CPEU/CCU 04 beds – CPEU 11 beds – CCU 04 beds – Subacute	CHS Outpatients Cardiology & Cardiothoracic
GROUND	N&M Office Outpatients

**University of Canberra
Hospital (UCH)**

Cotter 30 beds
Stromlo 30 beds Neurological
Majura 30 beds Older Persons
Namadgi 30 beds General
AMHRU 20 beds

Building 11

Centenary Hospital Women & Children

NICU 15 beds	SCN 14 beds	Birth Centre 5 beds Birth Suite 13 beds
PN 15 beds Cots 3	AN 15 beds	Ronald McDonald
PDS (15, funded 12)	COVID WARD 12 beds	PWA (12) Closed for expansion

Building 12

Operating Theatres 13 Theatres 14 – EDSU 18 – PACU	ICU (38 bed spaces) COVID: 5
ED - Emergency Medicine Unit (17) 12 – Beds 05 – Chairs	ED 58 treatment spaces including: 30 – Acute 05 – Resus 15 – FastTrack (3 procedure rooms) 06 – Paediatrics 02 – De-escalation
AMU 12 beds	MHSSU (6)

Building 3

14B (32) 28 – Oncology 4 – flex/clinical trials	14A 22 beds Haematology
12B 10 beds - Mental Health 4 beds – flex beds	
11B 26 beds Aged Care	11A 24 beds Aged Care

Building 7

Withdrawal Unit 10 beds

Building 25

AHMU PLD 30 beds PHD 10 beds

DMHU / GAW

DMHU 17 beds Gawangal 10 beds



Abbreviation Location	Abbreviation	
Legend	WYC	Women Youth & Children
	MHJHADS	Mental Health Justice Health Alcohol and Drug Services
	CAS	Cancer and Ambulatory Support
	RACS	Rehabilitation Aged and Community Services
Building 11	NICU	Neonatal Intensive Care Unit
	SCN	Special Care Nursery
	PN	Postnatal
	AN	Antenatal
	PWH	Paediatric Ward High care
	PWS	Paediatrics Ward Surgery
	PDS	Paediatric Day Stay
	PWA	Paediatric Ward Adolescent
Building 12	EDSU	Extended Day Surgery Unit
	PACU	Post Anaesthetic Care Unit
	ICU	Intensive Care Unit
	ED	Emergency Department
	AMU	Acute Medical Unit
	MHSSU / PSS	Mental Health Short Stay Unit / Psychiatric Short Stay Unit
Building 1	ASU	Acute Surgical Unit
	ENT	Ear Nose & Throat
	CPEU	Chest Pain Evaluation Unit
	CCU	Coronary Care Unit
	N&M	Nursing & Midwifery
	OPD	Outpatient Department
	SCP	Seasonal Capacity Plan, adult beds
	ACDL	All Care Discharge Lounge
University of Canberra Hospital	AMHRU	Adult Mental Health Rehabilitation Unit
Building 25	AMHU	Adult Mental Health Unit
	PLD	Psychiatric Low Dependency
	PHD	Psychiatric High Dependency
DMHU / GAW	DMHU	Dhulwa Mental Health Unit
	GAW	Gawanggal (Extended Care Unit)

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:59 AM
To: Canberra Health Services Ministerial
Cc: GovernmentBusinessHealth; Ellis, Catherine (Health); Hunter, Kerryn (Health)
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: Final Response - QoN 833 - Minister for Health - Ward Breakdowns.DOCX; QON 833 - Attachment B - Rostering Template.PDF
Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the attached response.

Can CHS please review the answer to *iv. how many staff are scheduled for each ward including job title and classification*. **MO commented the response is an "inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please."**

Could MAGS please request relevant contact officer details ASAP to pass onto our line area as it may be best to discuss a consistent response to *iv.* before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



Rachel Stephen-Smith MLA
 Minister for Health
 Minister for Families and Community Services
 Minister for Aboriginal and Torres Strait Islander Affairs
 Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE
Questions on Notice Paper No 19
10 June 2022
Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward,
- ii. how many beds are in each ward,
- iii. how many treatment spaces are in each ward,
- iv. how many staff are scheduled for each ward including job title and classification for
 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward.

Commented [CS(1): Last FY is interpreted as 2020-21 noting the question paper was taken on 10 June 2022.

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

- i. See Canberra Health Services (CHS) Ward Map at Attachment A. Note that bed numbers/wards are dynamic and subject to change according to clinical need.

Deleted: Further information can be provided about specific wards, however this list should be self-explanatory

See the below table for information from Calvary Public Hospital Bruce (CPHB).

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ACT Legislative Assembly London Circuit, GPO Box 1020, Canberra ACT 2601



+61 2 6205 2661



stephen-smith@act.gov.au



@RacheSS_MLA



racheSSMLA



rachelss_mla

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Intensive Care and Coronary care unit ²	14
Emergency Short Stay Unit ³	15
Hospital in the Home ⁴	18
Maternity Units	34
Medical	86
Acacia Ward (Mental Health services only)	21
Older Persons Mental Health Unit (Mental Health services only)	15
Surgical	28

¹ - Average number of beds operated throughout the year. Beds is the measure used for inpatient settings, treatment spaces not applicable. Note that bed numbers/wards are dynamic and subject to change according to clinical need.

² - ICU capacity depends on activity.

³ - Excludes beds currently utilised for the COVID-19 Red zone

⁴ - HITH beds are virtual beds as care is homebased

Commented [BM2]: This is asking for each ward, can Maternity and Medical please be broken down into each ward

ii. See above response to Question ii.

Deleted: ¶

iii. See above response to Question ii.

iv. CHS nursing rostering templates are completed by the Nurse Manager for each ward to reflect respective staffing levels/classification for morning, evening and night shifts. Examples are provided at Attachment B.

Commented [BM3]: This is a very inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please.

See the below table for information from CPHB.

Calvary Public Hospital Bruce*			
	Morning	Afternoon	Night
Midwives	11	10	9
Nurses	70	80	55
Junior Medical Doctors (JMOs)	120 JMOs across a 24-hour shift roster JMOs are supplemented by specialist medical officers /consultants and visiting medical officers		
Allied Health professionals	100 (approx.) Allied Health Professionals across a variety of shifts, in roles including occupational therapy, physiotherapy, speech pathology, nutrition, social work, pharmacy, dietetics and 24/7 medical imaging.		

* This is a typical daily roster but can be subject to change due to demand

A complete list of all staff rostered for morning, afternoon and night shift for each ward at CHS and CPHB has not been provided as this would be an unreasonable diversion of resources to complete this request.

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v. Neither CPHB nor CHS report at the ward level. Performance information for each hospital is available via the ACT Public Health Services Quarterly Performance Report.

<https://health.act.gov.au/about-our-health-system/act-public-health-services-quarterly-performance-report>

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https://www.health.act.gov.au/sites/default/files/2022-05/AM%20AQ%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf

vi. Refer to response to Question v.

vii. CHS is unable report at the ward level and CPHB does not routinely collect data at ward level for staff recruitment. The ACT Health Directorate provided mental health ward level data for QON 830, however, to provide detailed staffing for each ward would be resource intensive and take key personnel away from their core functions which would be an unreasonable diversion of resources. I also refer the Member to QON 834 which provides overall staff exits.

Moved (insertion) [1]
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viii. Refer to response to Question vii.

ix. CHS does not report Budget allocations at the Ward level. Please refer to *Budget Paper C: https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf*

Deleted: Data has been provided detailing the paid headcount on 24 June 2020 and corresponding headcount paid on 23 June 2021.

Moved up [1]: does not routinely collect data at ward level for staff recruitment. The ACT Health Directorate provided mental health ward level data for QON 830, however, to provide detailed staffing for each ward would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.

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CPHB does not report budget allocation at the Ward level. Internal budgets are not representative of the costs as there are different treatments between hospitals as to the allocation of direct and indirect costs. National Weighted Activity Unit (NWAU) costs per patient episode are available through the Independent Hospital Pricing Authority (IHPA) benchmarking portal, the latest data publicly available is 2019-20, the system allows the user to filter by care type.

<https://benchmarking.ihsa.gov.au/extensions/ihsanbp/index.html#/periodic-insights/overview>

CPHB do not routinely collect data at ward level for staff separations. The ACT Health Directorate recently provided mental health staff exits in QON 829, however, to provide detailed staffing separations by all wards would be resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.

x. CHS does not report expenditure at the Ward level. CHS's 2021-22 Annual Report has yet to be finalised, however a comparison of CHS's financial position can be found within CHS' 2020-21 Annual Report - [Canberra Health Services Annual Report 2020-2021 \(act.gov.au\)](https://www.chs.act.gov.au/annual-reports).

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See CPHB response to Question ix.

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xi. Neither CHS nor CPHB report Length of Stay at the Ward level. Performance information is available via the ACT Public Health Services Quarterly Performance Reports.

<https://health.act.gov.au/about-our-health-system/act-public-health-services-quarterly-performance-report>

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¶

Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
Minister for Health

Date:.....

This response required 26 hours and 50 minutes to complete, at an approximate cost of \$2741.61.

2021	Division	Medicine	Shift count	shift length	shift hour	shift count	shift hour	shift count	shift hour	updated	by who	enter date		
July	N Manager		Red Open 32	Morn & Even shift length 8.00	8.00	1.00	10.00	1.25		If ADO had diff less required, change shift length to 8.00		Comments		
2022	UNIT	7A	Day open 7	Night Duty shift length 16.00	16.00	1.00	8.00	0.80				TEMPLATE21		
June	appt	8850					8.00	1.20						
	cost/centre	61796												
Shift		shift count	8 hour shift length = 1.00				Morn shift from 0700 ends 1800	default	count 1=	8.00	7.6 (no backfill)	Shift Length	Wkly hrs	Shift length
MORN	Shift count	MORN	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv		ADO adjust to 8
Morn	INDIRECT	RN5											7.60	38.00
Morn	INDIRECT	RN4.3											7.60	38.00
Morn	INDIRECT	RN4.2											7.60	38.00
Morn	INDIRECT	RN4.1											8.00	38.00
Morn	INDIRECT	RN3G2	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053	8.00	38.00
Morn	INDIRECT	RN3G1	2.00	2.00			2.00	2.00	2.00	10.00	80.00	2.105	8.00	38.00
Morn	INDIRECT	RN2CON	1.00	1.00			1.00	1.00	1.00	5.00	38.00	1.000	7.60	38.00
Morn	INDIRECT	RN2TL			1.00	1.00				2.00	16.00	0.421	8.00	38.00
Morn	INDIRECT	RN2											8.00	38.00
Morn	INDIRECT	RN1											8.00	38.00
Morn	INDIRECT	EN2											8.00	38.00
Morn	INDIRECT	EN1											8.00	38.00
Morn	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00
Morn	DIRECT	RN4NP											8.00	38.00
Morn	DIRECT	RN3G2											8.00	38.00
Morn	DIRECT	RN3G1											8.00	38.00
Morn	DIRECT	RN2TL											8.00	38.00
Morn	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00
Morn	DIRECT	RN2*											8.00	38.00
Morn	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	168.00	4.421	8.00	38.00
Morn	DIRECT	RN1P	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00
Morn	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00
Morn	DIRECT	EN1											8.00	38.00
Morn	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00
Morn	DIRECT	spare											8.00	38.00
Morn	Morn Shift Count		14.00	14.00	11.00	11.00	14.00	14.00	14.00	92.00	734.00	19.32	7.94	
Shift		shift count	shift length = 1.00				Even from 1200 ends before 2400	default	count 1=	8.00	7.6 (no backfill)	Shift Length	Wkly hrs	Even
EVEN	Shift count	EVEN	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv		
Even	INDIRECT	RN5											7.60	38.00
Even	INDIRECT	RN4.3											7.60	38.00
Even	INDIRECT	RN4.2											7.60	38.00
Even	INDIRECT	RN4.1											7.60	38.00
Even	INDIRECT	RN3G2											7.60	38.00
Even	INDIRECT	RN3G1											7.60	38.00
Even	INDIRECT	RN2CON											7.60	38.00
Even	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	53.20	1.40	7.60	38.00
Even	INDIRECT	RN2											7.60	38.00
Even	INDIRECT	RN1											7.60	38.00
Even	INDIRECT	EN2											7.60	38.00
Even	INDIRECT	EN1											7.60	38.00
Even	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00
Even	DIRECT	RN4NP											8.00	38.00
Even	DIRECT	RN3G2											8.00	38.00
Even	DIRECT	RN3G1											8.00	38.00
Even	DIRECT	RN2TL											8.00	38.00
Even	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.95	8.00	38.00
Even	DIRECT	RN2*											8.00	38.00
Even	DIRECT	RN1	4.00	4.00	4.00	4.00	4.00	4.00	4.00	28.00	224.00	5.89	8.00	38.00
Even	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00
Even	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00
Even	DIRECT	EN1											8.00	38.00
Even	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00
Even	DIRECT	spare											8.00	38.00
Even	Even Shift Count		11.00	11.00	11.00	11.00	11.00	11.00	11.00	77.00	613.20	16.14		
Shift		shift count	shift length = 1.00				Night from 1800 ends 0730 2ndday	default	count 1=	10.00	9.5 (no backfill)	Shift Length	Wkly hrs	Night
NIGHT	Shift count	NIGHT	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv		10
Night	INDIRECT	RN5											10.00	38.00
Night	INDIRECT	RN4.3											10.00	38.00
Night	INDIRECT	RN4.2											10.00	38.00
Night	INDIRECT	RN4.1											10.00	38.00
Night	INDIRECT	RN3G2											10.00	38.00
Night	INDIRECT	RN3G1											10.00	38.00
Night	INDIRECT	RN2CON											10.00	38.00
Night	INDIRECT	RN2TL											10.00	38.00
Night	INDIRECT	RN2											10.00	38.00
Night	INDIRECT	RN1											10.00	38.00
Night	INDIRECT	EN2											10.00	38.00
Night	INDIRECT	EN1											10.00	38.00
Night	INDIRECT	AIN			1.00	1.00	1.00	1.00		4.00	40.00	1.05	10.00	38.00
Night	DIRECT	RN4NP											10.00	38.00
Night	DIRECT	RN3G2											10.00	38.00
Night	DIRECT	RN3G1											10.00	38.00
Night	DIRECT	RN2TL											10.00	38.00
Night	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	140.00	3.68	10.00	38.00
Night	DIRECT	RN2*											10.00	38.00
Night	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	210.00	5.53	10.00	38.00
Night	DIRECT	RN1P											10.00	38.00
Night	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00
Night	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00
Night	DIRECT	EN1P											10.00	38.00
Night	DIRECT	spare											10.00	38.00
Night	Night Shift Count		7.00	7.00	8.00	8.00	8.00	8.00	7.00	53.00	530.00	13.95		
TOTAL	Total M-E-N Shift Count		32.00	32.00	38.00	38.00	33.00	33.00	32.00	222.00				12
	Wkly FTE Summary		thu	fri	sat	sun	mon	tue	wed	Total	8h shift	Morn	9.000	4
Total	Total wkly shift/staff		32.00	32.00	30.00	30.00	33.00	33.00	32.00	222.00	8h shift	Even	9.000	4
Total	Total Wkly Hours		269.20	269.20	255.80	255.80	279.20	279.20	269.20	1877.20	10h shift	Night	7.000	5
Total	Total Wkly FTE		7.08	7.08	6.73	6.73	7.35	7.35	7.08	49.40	DR NP/PU		6.99	

UNIT	Bed/Unit Activities	ENTER budget beds and Daily available Open bed numbers							BUDGET	32	OPEN	32	NOTE: Enter Bed numbers 7 Unit as 1
ENTER	MNR complete this section	thu	fri	sat	sun	mon	tue	wed	TOTAL	Occup%		Type in total staff count if no NPPD required or 1	
	Budget BEDS/Staff	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0	100.0%		Type Nos Budgeted Beds for the Unit here	
	BEDS/Unit Staff OPEN	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0			Type Nos beds staff operating per day	
	DAY/NIT OPEN	1	1	1	1	1	1	1	7			Type 1=unit is open on the day. 0 if not open	

Enter Budget Bed Numbers
Project bed numbers open
day Unit open 5 or 7 day

	thu	fri	sat	sun	mon	tue	wed	TOTAL	Avg day	Fixed Targets:	FTEs
NPPD	214.00	214.00	214.00	214.00	214.00	214.00	214.00	1498.00	214.00	Direct FTE	39.82
Direct Hours	55.20	55.20	41.80	41.80	65.20	65.20	55.20	379.20	54.17	Indirect FTE	9.98
NPPD DIRECT	6.69	6.69	6.69	6.69	6.69	6.69	6.69		6.68	Non prod FTE	6.23
NPPD IND	1.73	1.73	1.30	1.30	2.04	2.04	1.73		1.693	Prod FTE	49.69
Prod NPPD	8.41	8.41	7.99	7.99	8.73	8.73	8.41		8.380	Total FTE	57.53
NONPROD NPPD	1.40	1.40	1.40	1.40	1.40	1.40	1.40		1.396		

UoS/NPPD Est	thu	fri	sat	sun	mon	tue	wed	\$/UoS	Tot/UoS	Dir	\$ 11,710
UoS NPPD Direct \$	\$ 331	\$ 331	\$ 428	\$ 500	\$ 327	\$ 327	\$ 331	\$ 366		Ind	\$ 2,984
UoS NPPD Indirect \$	\$ 85	\$ 85	\$ 83	\$ 97	\$ 100	\$ 100	\$ 85	\$ 93		NonProd	\$ 76
UoS NPPD PROD \$\$\$	\$ 416	\$ 416	\$ 512	\$ 597	\$ 427	\$ 427	\$ 416	\$ 459		Prod	\$ 14,674
UoS/NPPD NonProd\$\$\$	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 336	Total	\$ 14,750

Annual FTE POSITION class details:												
Annual FTE	WEEKLY	Wk FTE	Wk	Day	Day	Day	Day	Backfill	Recruit	Premium	Estimate	Recruit
FTE	Class	Prod (p)	Annual L	PDLL	ManTrain	PerL	Super	Factor FTE	FTE	FTE	Annual FTE	FTE adjust
INDIRECT	RNS											
INDIRECT	RN4.3											
INDIRECT	RN4.2											
INDIRECT	RN4.1											
INDIRECT	RN3G2	1.053	0.081	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191	
INDIRECT	RN3G1	2.105	0.161	0.017	0.012	0.081	0.006	0.277	2.284	0.098	2.382	
INDIRECT	RN2CDN	1.000	0.038					0.038	1.038		1.038	
INDIRECT	RN2TL	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.085	2.165	
INDIRECT	RN2											
INDIRECT	RN1											
INDIRECT	EN2											
INDIRECT	EN1											
INDIRECT	AIN	4.000							4.000		4.000	
DIRECT	R6NMP											
DIRECT	RN3G2											
DIRECT	RN3G1											
DIRECT	RN2TL											
DIRECT	RN2	9.579	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.446	11.390	
DIRECT	RN2											
DIRECT	RN1	15.842	2.127	0.130	0.087	0.608	0.043	2.995	18.099	0.738	18.637	
DIRECT	RN1P	4.421	0.584			0.170	0.061	0.824	5.015	0.230	5.245	
DIRECT	ENL2	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695	
DIRECT	EN1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.086	2.190	
DIRECT	EN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496	
DIRECT	spare											
Total FTE equiv		48.400	5.817	0.304	0.203	1.703	0.202	8.230	55.522	2.108	57.630	

Estimate FTE by Classification												
Annual FTE summary	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Pool in	Annual	Check	
Pro & Non Prod FTE	Prod	Annual L	PDLL	ManTrain	PerL	Other	FTE	FTE	FTE	FTE	Budget TM1	
RN	RS											
RN	R43											
RN	R42											
RN	R42NP											
RN	R41											
RN	R3G2	1.053	0.081	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191	
RN	R3G1	2.105	0.161	0.017	0.012	0.081	0.006	0.277	2.284	0.098	2.382	
RN	R2CDN	1.000	0.038					0.038	1.038		1.038	
RN	R2TL/S	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.085	2.165	
RN	RN2	9.579	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.446	11.390	
RN	R1	15.842	2.127	0.130	0.087	0.608	0.043	2.995	18.099	0.738	18.637	
RN	R1P	4.421	0.584			0.170	0.061	0.824	5.015	0.230	5.245	
EN	ENL2	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695	
EN	ENL1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.086	2.190	
EN	ENL1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496	
AIN	AIN	4.000							4.000		4.000	
Other	spare											
FTE total		48.400	5.817	0.304	0.203	1.703	0.202	8.230	55.522	2.108	57.630	

Notes:	Unit Summary	Annual Cost	Sal Calculation Est	\$ 121,151.84
Includes Stroke Liaison Nurse RN 3.1 Alignment to TM1 Budget 27/5/21 Added for Ratio:	Prod FTE Sal base	FTE	\$ 4,311,760	UoS 79%
	Annual Leave FTE	5.82	\$ 517,527	Per Unit of Service 19%
	Prof Develop FTE	0.30	\$ 28,598	Direct 2%
	Mandatory FTE	0.20	\$ 19,065	6.68 \$ 366 100%
	Personal Leave FTE	1.70	\$ 152,910	Indirect
	Other FTE	0.20	\$ 16,483	1.69 \$ 93
	Backfill/Relief Factor	2.11	\$ 734,592	Prod
	Recruit FTE	55.52	\$ 4,857,885	8.36 \$ 459
	Total Est Annual FTE	57.63	\$ 5,046,353	Non Prod
	SHR Penalty Cal		\$ 1,042,883	1.40 \$ 76 \$ 1,042,883.21
PH loading 50% PH (Exclude M-F)		\$ 121,152	Av wdy Av Hly Rate \$ 121,151.84	
Prod FTE (incl Pen)	49.40	\$ 5,475,795	\$ 54.72	
Est Daily \$\$ Cost Prod/Unit		\$ 14,674	\$ \$ per UoS \$ 636	

APPROVED BY: _____ Date _____

Comments:
Weekly prod FTE - the must have FTE

Projected FTE has been signed off? approved? Then, don't forget!
Please forward a copy of the template to NIMS Unit for updating of the Prod database

Shift Count including AIN		Staffing guide report							
Direct+AIN	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Direct+AIN	Morn	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0
Direct+AIN	Even	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0
Direct+AIN	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0
Direct Total	Total	27.0	27.0	28.0	28.0	28.0	28.0	27.0	193.0

Note: AIN hours are INDIRECT from ProAct Staffing DEMAND use this figures
Contact NIMS if Demand to exclude AIN count
See below shift count
WPPD - Direct hours (AIN hours are NOT included)
Ratio N/P AIN not included

Shift count Direct (not counting AIN)									
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Direct	Morn	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0
Direct	Even	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0
Direct	Night	7.0	7.0	7.0	7.0	7.0	7.0	7.0	49.0
Direct Total	Total	25.0	25.0	25.0	25.0	25.0	25.0	25.0	175.0

Note: ProAct system - Roclar DEMAND Screen
Default screen
Demand Screen
Staffing guide set up

AIN shift count									
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Direct	Morn	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Even	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Night				1.0	1.0	1.0		4.0
Direct Total	Total	2.0	2.0	3.0	3.0	3.0	3.0	2.0	18.0

Note: The Template projects the number of staffing requirements for each shift
This figures must be accurate and signed off as the Budget plan for this year.

Shift Count INDIRECT (include AIN)									
INDIRECT	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Indirect	Morn	5.0	5.0	2.0	2.0	5.0	5.0	5.0	29.0
Indirect	Even	2.0	2.0		2.0	2.0	2.0	2.0	14.0
Indirect	Night			1.0	1.0	1.0	1.0		4.0
Indirect Total	Total	7.0	7.0	5.0	5.0	8.0	8.0	7.0	47.0

Note: Urgedate notes are available.

Total shift count									
Total	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Total	Morn	14.0	14.0	11.0	11.0	14.0	14.0	14.0	92.0
Total	Even	11.0	11.0	11.0	11.0	11.0	11.0	11.0	77.0
Total	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0
Total	Total	32.0	32.0	30.0	30.0	33.0	33.0	32.0	222.0

Patient Ratio (AIN excluded)										Bed
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Avgday	occupy
Direct	Morn	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Even	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Night	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	32
Direct P/N Ratio av DAY		4	4	4	4	4	4	4	4	32

Note: Nurse /Patient Ratio based on Full occupancy

check:	Weekly	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Pool in	Annual
Shift count	Prof	Annual	L	PDL L	Man Train	Peral	Other	FTE	FTE	FTE	FTE
FTE total	49.40	5.82	0.30	0.20	1.70	0.20	8.23	55.52	2.11	57.63	
38 wldy Hour	1,877.20	221.05	11.57	7.71	64.71	7.69	312.74	2,108.82	80.12	2,189.94	
Count	Shift	Estimate number of shifts per week / S shift count / FTE									
7.69	Stand shift	247.8	29.1	1.5	1.9	8.5	1.0	41.1	277.6	46.5	288.1

The HIMS Template is used to estimate the Annual Nursing FTE requirements for the unit.

Home Manager (Workload)

Date entry Only use the active cells to enter the number of shifts required

Unit Data Enter the following information into the worksheet

- Division Enter the Division type
- Manager Enter the name of RN/ preparing the estimate - Unit
- Unit Enter the name of the Unit
- Appn Enter the Appn code - salary code/line
- CostCentre Enter the Correct Cost Centre

Save open and Day open fields - data will be populated into these two fields.

Save the template:

Save the file immediately after you have entered Unit data using the following preferred file name
 [Department Code\Nursing\Home] 2023 14 FTE HIMS Template [Unit\code] [V1]

Date Entry Enter the shift event between Thu - Wed columns

Shift count is based on the standard shift length of 8-8-10

Shift length box is set up to calculate the shift count per shift based on the current standard shift length

- Morn shift standard shift length is 8 hours 7:00am start
- Even shift standard shift length is 8 hours 12:00pm start
- Night shift standard shift length is 10 hours 9:00pm start

If roster contains 12hr shift / 10 hr shift, use the appropriate shift count guidelines

Note 12hr shift - place Day 12h in above cell place night 12h in night cell

Using the active cells highlighted in colour -

- enter the Equivalent no of shift counts required for each classification
- use separate template for each sub-group if a separate ROSTER is required (Project system)

For example: Personal event and Medical progress require separate estimates

- Use a separate template to calculate the shift requirements for charges under same cost centre
- add the shift count data together in a separate template for calculation of total FTE

Annual FTE Estimation Worksheet Home / Factor calculation section

Backsheet Factor component set up:

Backsheet Factor component set up:

Check the No. of annual leave weeks - 4, 5, 6, 07

Check the No. of days required for Personal leave provision - backsheet details at 14 days

Check the No. of days required for PDL/education provision & PPT provision default 3 days

Check the No. of days required for Mandatory Training default 2 days

Check the No. of other days available for other work type - history for available program eg Supplementary/Program Temp

The number entered in the Backsheet Factor active cells will automatically be calculated to determine

the weekly FTE requirements to complete a unit roster

the weekly Annual Leave allocation for the unit / determine the backsheet FTE

the estimate value factor - for backsheet of interrelated leave

the estimate Education / PDL provision

These fields contained formula that will calculate the Backsheet/Weight component that form the Annual FTE requirement

Check annual leave requirements for the Unit

- Non-FTE shift work out - PPT shift Annual Leave estimate 4
- Non-FTE shift work out - PPT shift + no weekends Annual Leave estimate 5
- Shift work out + weekends + PPT shift Annual Leave estimate 6
- Shift work out + PPT + weekends Annual Leave estimate 7

The worksheet will automatically calculate the annual FTE requirements once the count with count numbers are entered

Use Unit activities per day for beds/beds / day patients / no. of activities booked / no. of staff working in the unit

Enter the BUDGETED beds number / shifts in the day

Enter the number of projected beds available (OPEN) for each day

For example, in some area, the available staff beds may be reduced at the week ends

Enter the day (equivalent to 1) that the unit is opened - in day open count

If the Unit is closed on Sat and Sun, then do not enter the figure [1] on the cell

The data must be entered accurately as it is information is required to calculate the

Working hours per patient days to determine the average hours provided for the operational and numbers & % bed Occup

Used Working hours per Patient Day (total of services delivered) Project system

The Template is set up with formula to create identify the estimated Direct FTE (direct patient care) hours required for the unit

Estimated Annual FTE hours (staff entered to the Unit but not directly taking on patient care load)

Check Agree HIMS for units - account in the respective workload program

Unit of service/charge coverage & cost

The template provides an estimate of Unit of Service cost estimate per patient hours provided.

Note Average Unit rate is calculated based on the total hours (entered) to the unit (including shift penalties)

Unit is an estimate of the Unit rate based on the combination of shift rates required for the unit

It also calculate the average Daily\$ cost - it gives an estimate of the \$/Daily cost required to run the unit

Historical nursing hours

calculated automatically to identify the nursing hours provided not directly related to individual patient care

for example - Clinical Nurse consultant, CDN, Supplementary team leader not providing direct individual patient care

Annual FTE Estimate by Class Details:

When the shift counts have been entered into the worksheet, all the calculation will be done automatically to provide details of FTE estimate

the determined starting requirement to roster the unit on an average weekly basis from Thu-Wed

the determined annual leave FTE that can be released & estimate Backsheet Resourcing component factor

the determined PDL leave component

the determined Mandatory training hours component to estimate the backsheet/RELIEF pool component

the determined personal leave backsheet/RELIEF pool component

The Class details can then be compared with the current FTE eq of staff employed in the Unit.

Space for notes and other comments that may affect the estimate

Use this space to record specific anomalies / variance that may occur throughout the budget period.

FTE Dollar calculation

The template include the basic \$ cost based on the Unit rate and shift penalty rate only.

Project/shift penalty for every shift count

Project PhPenalty 50% loading

Excluded from this template are:

Project on call / close call hours payable for on/leave call allowances

Project/leave payable for responsibility allowance

For further details or explanation on the use of template, please contact Celine Wong K 42419

This template is not to be reproduced without permission.

HIMS Template for Unit Services is available for calculation of other employees' non-essential historical position FTE.

please contact Celine Wong if required.

Shift count calculation based on 8 shifts pattern

AM Shift	default hour	Shift count
Standard hr	8	0.50
8	8	0.63
8	8	0.75
8	7	0.68
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50
8	7.6	0.95 No ADG

PM Shift

Standard hr	Shift hr	Shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50

Night Shift

The default shift hour 10

Standard hr	Shift hr	Shift count
10	10	1.00
10	12	1.25
10	8	0.88
10	9.5	0.95

12 Hour shift

Shift	Shift hr	Shift count
Morn	0700-1600	base penalty - Morn shift hours
After	1600	22.5% penalty - Night shift hours
Even start	1200-1600	Even 12.5% - Even shift hours
After	1600	22.5% penalty - Night shift hours
Night	1600 start till 0700	22.5% penalty - Night shift hours
Beyond	0700	revert base penalty

2021	Division	CAS	Shift count							shift length	shift hour	shift count	shift hour	shift count	Updated	by who	enter date
July	W Managers		Bed Open							8.00	8.00	1.00	10.00	1.25	If ADO backfill hrs required, change shift length to 8.00		Comments TEMPLATE21
2022	UNIT	14B	Day open							10.00	10.00	1.00	8.00	0.80			
June	apppn costcentre	61739	Night Duty shift length							10.00	10.00	1.00	12.00	1.20			
Shift	Shift count	shift count	5 hour shift length = 1.00							Morn shift from 0700 ends 1800	default	count 1=	8.00	7.5 (nonackfill)	Shift Length	Wkly hrs	Shift length
MORN	MORN	MORN	thu	fri	sat	sun	mon	tue	wed	SHRC	Hours	FTE equiv					ADO adjust to 8
Morn	INDIRECT	RN5												7.60	38.00		1 ADO back change shift
Morn	INDIRECT	RN4.3												7.60	38.00		
Morn	INDIRECT	RN4.2												7.60	38.00		
Morn	INDIRECT	RN4.1												8.00	38.00		
Morn	INDIRECT	RN3G2												7.60	38.00		
Morn	INDIRECT	RN3G1												7.60	38.00		
Morn	INDIRECT	RN2CDN	1.00	1.00			1.00	1.00	1.00	5.00	38.00	1.000		7.60	38.00		
Morn	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474		8.00	38.00		
Morn	INDIRECT	RN2	1.00	1.00				1.00	1.00	5.00	40.00	1.053		8.00	38.00		
Morn	INDIRECT	RN1												8.00	38.00		
Morn	INDIRECT	EN2												8.00	38.00		
Morn	INDIRECT	EN1												8.00	38.00		
Morn	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474		8.00	38.00		
Morn	DIRECT	RN4NP												8.00	38.00		
Morn	DIRECT	RN3G2												8.00	38.00		
Morn	DIRECT	RN3G1												8.00	38.00		
Morn	DIRECT	RN2TL												8.00	38.00		
Morn	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947		8.00	38.00		
Morn	DIRECT	RN2*	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053		8.00	38.00		
Morn	DIRECT	RN1	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947		8.00	38.00		
Morn	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474		8.00	38.00		
Morn	DIRECT	ENL2												8.00	38.00		
Morn	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474		8.00	38.00		
Morn	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474		8.00	38.00		
Morn	DIRECT	spare												8.00	38.00		
Morn		Morn Shift Count	12.00	12.00	9.00	9.00	12.00	12.00	12.00	78.00	622.00	16.37		7.90			
Shift		shift count	shift length = 1.00							Even from 1200 ends before 2400	default	count 1=	8.00	7.6 (no backfill)	Shift Length	Wkly hrs	Even
EVEN	EVEN	EVEN	thu	fri	sat	sun	mon	tue	wed	SHRC	Hours	FTE equiv					
Even	INDIRECT	RN5												7.60	38.00		
Even	INDIRECT	RN4.3												7.60	38.00		
Even	INDIRECT	RN4.2												7.60	38.00		
Even	INDIRECT	RN4.1												7.60	38.00		
Even	INDIRECT	RN3G2												7.60	38.00		
Even	INDIRECT	RN3G1												7.60	38.00		
Even	INDIRECT	RN2CDN												7.60	38.00		
Even	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	53.20	1.40		7.60	38.00		
Even	INDIRECT	RN2												7.60	38.00		
Even	INDIRECT	RN1												7.60	38.00		
Even	INDIRECT	EN2												7.60	38.00		
Even	INDIRECT	EN1												7.60	38.00		
Even	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47		8.00	38.00		
Even	DIRECT	RN4NP												8.00	38.00		
Even	DIRECT	RN3G2												8.00	38.00		
Even	DIRECT	RN3G1												8.00	38.00		
Even	DIRECT	RN2TL												8.00	38.00		
Even	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.96		8.00	38.00		
Even	DIRECT	RN2*	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.05		8.00	38.00		
Even	DIRECT	RN1												8.00	38.00		
Even	DIRECT	RN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47		8.00	38.00		
Even	DIRECT	ENL2												8.00	38.00		
Even	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47		8.00	38.00		
Even	DIRECT	EN1P	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47		8.00	38.00		
Even	DIRECT	spare												8.00	38.00		
Even		Even Shift Count	8.00	8.00	7.00	7.00	8.00	8.00	8.00	54.00	429.20	11.29					
Shift		shift count	shift length = 1.00							Night from 1800 ends 0730 2nd day	default	count 1=	10.00	9.5 (no backfill)	Shift Length	Wkly hrs	Night
NIGHT	NIGHT	NIGHT	thu	fri	sat	sun	mon	tue	wed	SHRC	Hours	FTE equiv					
Night	INDIRECT	RN5												10.00	38.00		
Night	INDIRECT	RN4.3												10.00	38.00		
Night	INDIRECT	RN4.2												10.00	38.00		
Night	INDIRECT	RN4.1												10.00	38.00		
Night	INDIRECT	RN3G2												10.00	38.00		
Night	INDIRECT	RN3G1												10.00	38.00		
Night	INDIRECT	RN2CDN												10.00	38.00		
Night	INDIRECT	RN2TL												10.00	38.00		
Night	INDIRECT	RN2												10.00	38.00		
Night	INDIRECT	RN1												10.00	38.00		
Night	INDIRECT	EN2												10.00	38.00		
Night	INDIRECT	EN1												10.00	38.00		
Night	INDIRECT	AIN												10.00	38.00		
Night	DIRECT	RN4NP												10.00	38.00		
Night	DIRECT	RN3G2												10.00	38.00		
Night	DIRECT	RN3G1												10.00	38.00		
Night	DIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84		10.00	38.00		
Night	DIRECT	RN2												10.00	38.00		
Night	DIRECT	RN2*												10.00	38.00		
Night	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	210.00	5.53		10.00	38.00		
Night	DIRECT	RN1P												10.00	38.00		
Night	DIRECT	ENL2												10.00	38.00		
Night	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84		10.00	38.00		
Night	DIRECT	EN1P												10.00	38.00		
Night	DIRECT	spare												10.00	38.00		
Night		Night Shift Count	5.00	5.00	5.00	5.00	5.00	5.00	5.00	35.00	350.00	9.21					
TOTAL	Total W-E-N Shift Count		25.00	25.00	21.00	21.00	25.00	25.00	25.00	167.00		Nurse: patient Ratio		Bed beds	31		
	Wkly FTE Summary		thu	fri	sat	sun	mon	tue	wed	Total	shift length	shift	hr	1:1 ratio			
Total	Total waly shifts/shift		25.00	25.00	21.00	21.00	25.00	25.00	25.00	167.00	8h shift	Morn	7.714	4			
Total	Total Wkly Hours		209.20	209.20	177.60	177.60	209.20	209.20	209.20	1401.20	8h shift	Even	5.714	5			
Total	Total Wkly FTE		5.51	5.51	4.67	4.67	5.51	5.51	5.51	36.87	10h shift	Night	5.000	6			

UNIT	Bed/Unit Accounts	ENTER budget beds and Daily available Open bed numbers							BUDGET	31	OPEN	31	Note: Enter Bed numbers 7 Unit as 1	
ENTER	NHPPD complete this section	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Total	Occup%	Type in total shift work for the NHPPD regulator 1			
	Budget BEDS/State	32.0	32.0	28.0	28.0	32.0	32.0	32.0	216.0	100.0%	Type in total shift work for the Unit here			
	BEDS/Unit Staff OPEN	32.0	32.0	28.0	28.0	32.0	32.0	32.0	216.0		Type in beds staff operating per day			
	DAY/UNIT OPEN	1	1	1	1	1	1	1	7		Type 1=unit is open on the day, 0 if not open			
	NHPPD	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL	Avg day	Fixed targets: FTEs:			
	Direct Hours	162.00	162.00	146.00	146.00	162.00	162.00	162.00	1102.00	157.43	Direct FTE 28.00			
	Indirect Hours	47.20	47.20	31.60	31.60	47.20	47.20	47.20	289.20	42.74	Indirect FTE 7.87			
	NHPPD DIRCT	5.06	5.06	5.21	5.21	5.08	5.08	5.06		5.102	Non prod FTE 6.25			
	NHPPD IND	1.48	1.48	1.13	1.13	1.48	1.48	1.48		1.385	Prod FTE 36.87			
	Prod NHPPD	6.54	6.54	6.34	6.34	6.54	6.54	6.54		6.487	Total FTE 43.32			
	NONPROD NHPPD	1.10	1.10	1.10	1.10	1.10	1.10	1.10		1.099				
	UoS/NHPPD Est	Thu	Fri	Sat	Sun	Mon	Tue	Wed	\$/UoS	Total UoS	Daily \$ Cost			
	UoS NHPPD Direct \$	\$ 245	\$ 245	\$ 334	\$ 390	\$ 245	\$ 245	\$ 245	\$ 274		Dir \$ 8,457			
	UoS NHPPD Indirect \$	\$ 71	\$ 71	\$ 72	\$ 84	\$ 71	\$ 71	\$ 71	\$ 74		Ind \$ 2,286			
	UoS NHPPD PROD \$\$\$	\$ 316	\$ 316	\$ 406	\$ 474	\$ 316	\$ 316	\$ 316	\$ 348		NonProd \$ 59			
	UoS/NHPPD NonProd\$\$\$	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 59	\$ 408	Prod \$ 10,753			
											Total \$ 18,812			
	Annual FTE POSITION class details:												Office use only	
	Annual FTE:	WEEKLY	Wk FTE	Wk	Day	Day	Day	Day	Backfill	Recruit	Premium	Estimate	Recruit	
	FTE	Class	Prod (p)	Annual L	POL L	Man/Train	Pernt	Super	Factor FTE	FTE	FTE	Annual FTE	FTE adjust	
	INDIRECT	RN5												
	INDIRECT	RN4.3												
	INDIRECT	RN4.2												
	INDIRECT	RN4.1												
	INDIRECT	RN3G2												
	INDIRECT	RN3G1												
	INDIRECT	RZCDN	1.000	0.038					0.038	1.038		1.038		
	INDIRECT	RN2TL	2.874	0.366	0.024	0.016	0.110	0.008	0.543	3.283	0.134	3.417		
	INDIRECT	RN2	1.053	0.141	0.009	0.006	0.040	0.003	0.199	1.203	0.048	1.252		
	INDIRECT	RN1												
	INDIRECT	EN2												
	INDIRECT	EN1												
	INDIRECT	AIN	2.947							2.947		2.947		
	DIRECT	RN2NP												
	DIRECT	RN3G2												
	DIRECT	RN3G1												
	DIRECT	RN2TL	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.095	2.199		
	DIRECT	RN2	5.885	0.791	0.048	0.032	0.226	0.018	1.114	6.735	0.275	7.009		
	DIRECT	RN2*	2.195	0.283	0.017	0.012	0.081	0.006	0.398	2.405	0.098	2.503		
	DIRECT	RN1	8.474	1.138	0.070	0.048	0.325	0.025	1.602	9.681	0.385	10.076		
	DIRECT	RN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	DIRECT	ENL2												
	DIRECT	EN1	4.769	0.643	0.039	0.028	0.184	0.013	0.905	5.472	0.223	5.695		
	DIRECT	EN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	DIRECT	spare												
	Total FTE equiv		36.874	4.459	0.222	0.148	1.283	0.155	6.247	41.554	1.566	43.120		
	Estimate FTE by Classification												Check Budget Yr1	
	Annual FTE summary	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Pool in	Annual	Check		
	Pro & Non Prod FTE	Prod	Annual L	POL L	Man/Train	Pernt	Other	FTE	FTE	FTE	FTE	Budget Yr1		
	RN	R5												
	RN	R4.3												
	RN	R4.2												
	RN	R4.2NP												
	RN	R4.1												
	RN	R3G2												
	RN	R3G1												
	RN	RZCDN	1.000	0.038				0.038	1.038		1.038			
	RN	R2TL/S	4.716	0.633	0.039	0.026	0.161	0.013	0.891	5.388	0.220	5.607		
	RN	RN2	9.053	1.215	0.074	0.050	0.347	0.025	1.711	10.342	0.422	10.764		
	RN	R1	8.474	1.138	0.070	0.046	0.325	0.023	1.602	9.681	0.385	10.076		
	RN	R1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	EN	ENL2												
	EN	ENL1	4.769	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695		
	EN	ENL1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496		
	AIN	AIN	2.947						2.947		2.947			
	Other	spare												
	FTE total		36.874	4.459	0.222	0.148	1.283	0.155	6.247	41.554	1.566	43.120		
	Notes:												Annual Cost \$/Calculation Est \$ 87,598.96	
	Team Leader indirect	Unit Summary		Annual Cost \$/Calculation Est										
	RN1L2 Indirect in the DLN	Prod FTE Sal base	FTE	\$	NHPPD	UoS\$	80%							
	RN1L2* In the Phase 1 unit	Annual Leave FTE	4.46	\$ 397,305	Per Unit of Service	18%								
		Prof Develop FTE	0.22	\$ 20,792	Direct	2%								
		Mandatory FTE	0.15	\$ 13,661	5.18	\$ 274	100%							
		Personal Leave FTE	1.26	\$ 112,383	Indirect									
		Other FTE	0.16	\$ 12,417	1.39	\$ 74								
		Backfill/Relief Factor	1.57	\$ 556,764	Prod									
		Recruit FTE	41.55	\$ 3,614,724	6.48	\$ 348								
		Total EST Annual FTE	43.12	\$ 3,753,381	Non Prod									
		Shift Penalty Cal		\$ 727,728	1.10	\$ 59	\$ 727,725.95							
		PH loading 50% PH (Exclude M-F)		\$ 87,597	Average	Av Hdy Rate	\$ 87,598.96							
		Prod FTE (incl Pen)	36.87	\$ 4,011,951		\$ 63.72								
		Est Daily \$\$ Cost Prod/Unit		\$ 10,753	\$\$ per Uos	\$ 408								
	APPROVED BY:	Date												
	Comments:	Weekly prod FTE - the must have FTE												
	Projected FTE has been signed off? approved? Then, don't forget!													
	Please forward a copy of the template to NIMS Unit for updating of the Proact database.													

Shift Count including AIN Staffing guide report									
Direct+AIN	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Direct+AIN	Morn	9.0	9.0	8.0	8.0	9.0	9.0	9.0	81.0
Direct+AIN	Even	7.0	7.0	6.0	6.0	7.0	7.0	7.0	47.0
Direct+AIN	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0
Direct Total	Total	21.0	21.0	19.0	19.0	21.0	21.0	21.0	143.0

Note: AIN hours are INDIRECT hours
ProAct Staffing DEMAND use this figure:
Contact NIMS if Demand to exclude AIN count
See below shift count
NPPD - Direct hours (AIN hours are NOT included)
Ratio N/P AIN not included

Shift count Direct (not counting AIN)									
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Direct	Morn	8.0	8.0	7.0	7.0	8.0	8.0	8.0	54.0
Direct	Even	6.0	6.0	5.0	5.0	6.0	6.0	6.0	40.0
Direct	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0
Direct Total	Total	19.0	19.0	17.0	17.0	19.0	19.0	19.0	129.0

Note: ProAct system - Roster DEMAND Screen
Default screen
Demand Screen
Staffing guide set up

AIN shift count									
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Direct	Morn	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Even	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0
Direct	Night								
Direct Total	Total	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0

Attention: The Template projects the number of staffing equipment for each shift
This figures must be accurate and signed off as the Budget plan for this year.

Shift Count INDIRECT (include AIN)									
INDIRECT	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Indirect	Morn	4.0	4.0	2.0	2.0	4.0	4.0	4.0	24.0
Indirect	Even	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0
Indirect	Night								
Indirect Total	Total	6.0	6.0	4.0	4.0	6.0	6.0	6.0	36.0

Note: Update notes are available:

Total shift count									
Total	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL
Total	Morn	12.0	12.0	9.0	9.0	12.0	12.0	12.0	78.0
Total	Even	8.0	8.0	7.0	7.0	8.0	8.0	8.0	54.0
Total	Night	5.0	5.0	5.0	5.0	5.0	5.0	5.0	35.0
Total	Total	25.0	25.0	21.0	21.0	25.0	25.0	25.0	167.0

Patient Ratio (AIN excluded)										Bed
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Avgday	occupy
Direct	Morn	3.9	3.9	4.4	4.4	3.9	3.9	3.9	4.0	31
Direct	Even	5.1	5.1	6.2	6.2	5.1	5.1	5.1	5.4	31
Direct	Night	6.2	6.2	6.2	6.2	6.2	6.2	6.2	6.2	31
Direct P/N Ratio av DAY		5	5	6	6	5	5	5	5	31

Note: Nurse /Patient Ratio based on Full occupancy

check:	Wkly	Wk	Day	Day	Day	Day	Blackfill	Recruit	Pool in	Annual	
Shift count	Weekly	Prod	Annual L	PDL L	ManTrain	PenL	Other	FTE	FTE	FTE	
FTE total	36.87	4.46	0.22	0.15	1.26	0.15	0.25	41.55	1.57	43.12	
36 Wkly Hour	1,401.20	169.43	8.44	5.63	47.99	5.88	237.37	1,579.07	59.50	1,638.57	
Count	Shift	Estimate number of shifts per week / 5 shift count / FTE									
	7.50 Stand shift	184.4	22.3	1.1	0.7	6.3	0.8	31.2	207.8	7.8	215.6

City	Area	Area Code	Area Code
Alameda	Alameda	4 8	754400
	Alameda	4 8	675000
	Alameda	4 8	675000
	Alameda	4 8	675000
	Alameda	4 8	675000
	Alameda	4 8	675000
	Alameda	4 8	675000
	Alameda	4 8	675000
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	Alameda	4 8	675000
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	Alameda	Alameda	4 8
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Alameda		4 8	675000
Alameda		4 8	675000
Alameda		4 8	675000

The NRS Template is used to estimate the Annual Nursing FTE requirements for the unit.

Staff Manager Worksheet

Data Entry Only use the active cells to enter the number of shifts required

Unit Data Enter the following information on the worksheet
 Division: Enter the Service type
 N Manager: Enter the Name of RN3 preparing the estimate - NM
 UNIT: Enter the name of the Unit
 Appt: Enter the Appt code - salary coefficient
 costcenter: Enter the Correct Cost Centre
 End open and Day open fields - data will be populated into these two fields.

Save the instructions:
 Save the file immediately after you have entered Unit Data using the following preferred file name
 [department code] \ [unit name] \ 2013 14 TCH NRS FTE Template [unit name].xls

Data Entry Enter the shift count between Thu - Wed evenings

Shift count is based on the standard shift length of 8-8-10
 Shift length list is set up to calculate the Shift count per shift based on the current standard shift length
 Morning shift standard shift length is 8 hours 7:00am start
 Even shift standard shift length is 8 hours 12:00 pm start
 Night shift standard shift length is 10 hours 9:00pm start

If roster contains 12hr shift / 10 hr shift, use the appropriate shift count guidelines
 Note: 12hr shift - place Day 12h in Above cell place Night 12h in Night cell

Using the active cells highlighted in colour -
 enter the Equivalent no of shift counts required for each classification
 use separate template for each sub-group if a separate ROSTER is required (Phoned system)
 For example: Postgraduate ward and medical program requires separate rosters
 Use a separate template to calculate the shift requirements for subgroups enter same cost centre
 add the shift count data together in a separate template for calculation of total FTE

Annual FTE Estimate section Relief Factor calculation section

Backfill/Relief Factor component set up:
 Costable Indicator: adjustment of relief factor reference in Column U,V,W,X,Y (depending on row/row)
 Check the No. of annual leave weeks - 4, 5, 6, or 7
 Check the No. of days required for Personal leave provision - backfill factor status at 14 days
 Check the No. of days required for PDL/education provision & PPT provision (default 3 days)
 Check the No. of days required for Mandatory Training (default 2 days)

Check the No. of Other days required for Other relief type - mainly for Graduate program eg Supervisory/Program Dev
 The number entered in the Backfill Relief Factor active cell is used automatically to calculate to determine the weekly FTE requirements to complete a unit roster
 The weekly Annual Leave allocation for the unit / determine the Backfill FTE
 the estimate relief factor - for backfilling of unoccupied leave
 the estimate Education / PDL weekly

These fields contain formula that will calculate the Backfill/Relief component that form the Annual FTE requirement
Check annual leave requirement for TAC Leave cost factor
 Mon-Fri non shift workers +PH off Annual Leave entitlement 4
 Sat-Fri non shift workers +PH off +sat weekend Annual Leave entitlement 5
 Shift workers +PH off + no weekends Annual Leave entitlement 5
 Shift workers + weekends +PH off Annual Leave entitlement 5
 Shift workers +PH + weekends Annual Leave entitlement 7
 Note: worked One PH, One weekend rule

The worksheet will automatically calculate the annual FTE requirements once the correct shift count numbers are entered
Bad Unit calculation: per day for hospital / day patients / no. of patients based on occupancy / no. of staff working in the unit

Enter the BUDGETED beds / patient / shifts in the way
 Enter the number of projected beds - average per day for each day
 For example, in some areas, the projection of beds may be reported at the week ends
 Enter the day (equivalent to 1) that the unit is opened - in day open count
 If the unit is closed on Sat and Sun, then do not enter the figure [1] on the cell

The data must be entered accurately as this information is required to calculate the
Nursing Hours per patient days is based on the average hours provided for the operational bed numbers & % bed Occup
Direct Nursing Hours Per Patient Day / Unit of Service estimate (Project option)
 The Template is set up with formula to clearly identify the estimated Direct FTE (direct patient care) hours required for the unit
 Estimated indirect FTE hours (staff involved in the Unit but not directly taking on patient care loads)

Check Agreed NRPD for units included in the Reasonable workload program
Unit of Service/Daily Average \$ cost
 The template provides an estimate of Unit of Service cost estimate per patient hours provided.
 Note: Average daily rate is calculated based on the total hours required to the unit (including shift penalties)
 This is an estimate of the daily rate based on the combination of staff mix required for the unit
 It also calculates the average Daily \$ cost - it gives an estimate of the \$Daily cost required to run the unit

Indirect nursing hours
 calculated automatically to identify the nursing hours provided not directly related to individual patient care
 for example - Clinical Nurse consultant, CDN, Supervisory (team leader) not providing direct individual patient care

Annual FTE Estimate by Class Details
 When the shift counts have been entered into the worksheet, all the calculation will be done automatically to provide details of FTE estimate
 the determined staffing requirement to roster the unit on an average weekly basis from Thu-Wed
 the determined annual leave FTE that can be released & estimate Backfill/Relief component factor
 the determined PDL leave component
 the determined Mandatory training hours component to estimate the backfill/RELIEF part component
 the determined personal leave backfill/RELIEF part component
 The Class details can then be compared with the current FTE of staff employed in the unit.
 Space for notes and other comments that may affect the estimate
 Use this space to record specific anomalies / variance that may occur throughout the budget period.

FTE Dollar calculation
 The template include the basic \$ cost based on the entry rate and shift penalty rate only.
 Project shift penalty for every shift count
 Project PWP/penalty 50% loading
 Excluded from the template are
 Project on call / cause call hours payable for on-call allowances
 Projected hours payable for respectability allowance

For further details or explanation on the use of template, please contact Chris Wong K 42419
 This template is not to be reproduced without permission.

NOTE: Template for ROR Nursing is available for calculation of other employee classification categories FTE.
 please contact Chris Wong if required.

Shift count calculation based on 8-8-10 pattern

Standard hr	shift hr	shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50
8	7.5	0.95 No ADO

PH Shift

Standard hr	shift hr	Shift count
8	4	0.50
8	5	0.63
8	6	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50

Night Duty

Standard hr	shift hr	Shift count
10	10	1.00
10	12	1.20
10	8	0.80
10	9.5	0.95

12 Hour shift

Shift	base penalty - then shift hours
0700-1900	22.5% penalty - Night shift hours
after 1900	22.5% penalty - Night shift hours

Even start

Shift	base penalty - then shift hours
1200-1900	22.5% penalty - Night shift hours
after 1900	22.5% penalty - Night shift hours

Night

Shift	base penalty - then shift hours
1600 start till 0730	22.5% penalty - Night shift hours
Dayend 0730	revert base penalty

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 10:02 AM
To: GovernmentBusinessHealth; Canberra Health Services Ministerial
Cc: Ellis, Catherine (Health); Hunter, Kerryn (Health)
Subject: RE: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: QON 833 - Attachment A - CHS Ward Map 24 June 2022.PDF
Categories: 02. QoN

OFFICIAL

Sorry team,

Also – MO has made comments on Attachment A – CHS Ward Map for response/amendment.

Thank you
Kylie

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:59 AM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; Hunter, Kerryn (Health) <Kerryn.Hunter@act.gov.au>
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the attached response.

Can CHS please review the answer to *iv. how many staff are scheduled for each ward including job title and classification*. **MO commented the response is an “inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please.”**

Could MAGS please request relevant contact officer details ASAP to pass onto our line area as it may be best to discuss a consistent response to *iv.* before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business
Email: GovernmentBusinessHealth@act.gov.au
Ministerial and Government Services | ACT Health Directorate
Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au

Legend

Light Blue	WYC
Orange	Medicine
Teal	Surgery
Dark Purple	MH/HADS
Yellow	CAS
Dark Blue	RACS
Grey	Empty
Red	COVID-19

Note:
See over page for abbreviations

Building 1 (Tower Block)

10A 32 beds General Surgery, Ophthalmology	Offices Care @ Home Program
9A 24 beds Gastroenterology	9B 23 beds – Neurosurgical 06 beds – Monitored beds Trache Ward
8A (No overnight beds) 10 – Dialysis day beds	8B 25 beds Paediatrics
7A 32 beds Neurology & Infectious Diseases Stroke Unit Trache Ward	7B 32 beds General Medicine
6A 32 beds Respiratory/Cardiology Rheumatology / Endocrinology	6B 34 beds including 28 – Cardiothoracic, Thoracic surgery, Urology, Vascular 06 – Monitored beds
5A 30 beds – Orthopaedic/ Orthopaedic-Geriatrics	5B 24 – Plastic/Ortho/ENT 02 *Flux beds Trache ward
4A (30) ASU – surgery – 16 beds ACOL – medicine 8 beds 6 *Flux beds	4B 20 – Renal + Medicine 0 – Discharge lounge beds
CPEU/CCU 04 beds – CPEU 11 beds – CCU 04 beds – Sobacute	CHS Outpatients Cardiology & Cardiothoracic
GROUND	N&M Office Outpatients

**University of Canberra
Hospital (UCH)**

Cancer 30 beds
Stroke 30 beds Neurological
Major 30 beds Older Persons
Namaggi 30 beds General
AMHRU 20 beds

Building 11

Canterbury Hospital Women & Children

NICU 15 beds	SCM 4 beds	Birth Centre 5 beds Birth Suite 13 beds
PN 15 beds Class 3	AN 15 beds	Recovery Med Units
PDS (16, funded 12)	COVID WARD 17 beds	PWW (12) Closed for exploration

Building 12

Operating Theatres 13 Theatres 14 – EDSU 18 – PACU	ICU (38 beds space) COVID 5
ED-Emergency Medicine Unit (17) 12 – Beds 05 – Chairs	ED 58 treatment space including: 30 – Acute 05 – Resus 15 – FastTrack (3 procedure rooms) 06 – Paediatrics 02 – De-escalation
AMU 12 beds	MHSU (5)

Building 3

14B (32) 28 – Outpatient 4 *Flux/clinical trials	14A 22 beds Haematology
12B 10 beds – Mental Health 4 beds *Flux beds	
11B 26 beds Aged Care	11A 24 beds Aged Care

Building 7

Withdrawal Unit 10 beds

Building 25

AHMU PLD 30 beds PHD 10 beds

DMHU/ GAW

DMHU 17 beds Gawangal 10 beds



Abbreviation Location	Abbreviation	
Legend	WYC	Women Youth & Children
	MJHADS	Mental Health Justice Health Alcohol and Drug Services
	CAS	Cancer and Ambulatory Support
	RACS	Rehabilitation Aged and Community Services
Building 11	NICU	Neonatal Intensive Care Unit
	SCN	Special Care Nursery
	PN	Postnatal
	AN	Antenatal
	PWH	Paediatric Ward High care
	PWS	Paediatrics Ward Surgery
	PDS	Paediatric Day Stay
	PWA	Paediatric Ward Adolescent
Building 12	EDSU	Extended Day Surgery Unit
	PACU	Post Anaesthetic Care Unit
	ICU	Intensive Care Unit
	ED	Emergency Department
	AMU	Acute Medical Unit
	MHSSU / PSS	Mental Health Short Stay Unit / Psychiatric Short Stay Unit
Building 1	ASU	Acute Surgical Unit
	ENT	Ear Nose & Throat
	CPEU	Chest Pain Evaluation Unit
	CCU	Coronary Care Unit
	N&M	Nursing & Midwifery
	OPD	Outpatient Department
	SCP	Seasonal Capacity Plan, adult beds
	ACDL	All Care Discharge Lounge
University of Canberra Hospital	AMHRU	Adult Mental Health Rehabilitation Unit
Building 25	AMHU	Adult Mental Health Unit
	PLD	Psychiatric Low Dependency
	PHD	Psychiatric High Dependency
DMHU / GAW	DMHU	Dhulwa Mental Health Unit
	GAW	Gawanggal (Extended Care Unit)

From: Ramsay, Michelle (Health) on behalf of CHS COO
Sent: Wednesday, 31 August 2022 11:24 AM
To: Gstrein, Kylie (Health)
Subject: FW: RFA GBCHS22/172: GOVERNMENT & STAKEHOLDER RELATIONS - Government & Assembly Matters - Minister for Health - Assembly Sitting 7-9 June 2022 - Input to ACTHD - Question on Notice (QoN) 833 - Breakdown of Wards

Categories: 02. QoN

OFFICIAL

Hi Kylie

I'm seeking advice about the bed numbers on the ward map.

For question iv about staffing, we are happy to go with the wording about unreasonable diversion of resources.

I will come back to you about the bed numbers.

Kind regards

Michelle Ramsay | Executive Officer
 Phone: 02 5124 5804 | Email: michelle.ramsay@act.gov.au
Office of the Chief Operating Officer | Canberra Health Services | ACT Government
 Level 2, Building 28, Canberra Hospital
 PO Box 11, Woden ACT 2606 | health.act.gov.au
RELIABLE | PROGRESSIVE | RESPECTFUL | KIND

Our vision is creating exceptional healthcare together

Our role is to be a health service that is trusted by our community.

Our values are Reliable, Progressive, Respectful, Kind



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From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 10:02 AM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; Hunter, Kerryn (Health) <Kerryn.Hunter@act.gov.au>
Subject: RE: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Sorry team,

Also – MO has made comments on Attachment A – CHS Ward Map for response/amendment.

Thank you

Kylie

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:59 AM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; Hunter, Kerryn (Health) <Kerryn.Hunter@act.gov.au>
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the attached response.

Can CHS please review the answer to iv. *how many staff are scheduled for each ward including job title and classification. MO commented the response is an "inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please."*

Could MAGS please request relevant contact officer details ASAP to pass onto our line area as it may be best to discuss a consistent response to iv. before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 3:05 PM
To: HSPE
Cc: LHN Coord; Pini, Sallyanne (Health); Ellis, Catherine (Health); GovernmentBusinessHealth
Subject: CHS Input: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Importance: High

OFFICIAL

Hi Team

Further to the below email, CHS have advised they are happy to go with the wording that this is an unreasonable diversion of resources for question *iv. how many staff are scheduled for each ward including job title and classification.*

Thanks
Kylie

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:57 AM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the response at COR22/21749.

Can HSPE please review the answer to *i. how many treatment spaces are in each ward* **ASAP. MO have requested "Maternity and Medical be broken down into each ward."**

Can you please also review the answer to *iv. how many staff are scheduled for each ward including job title and classification.* **MO commented the response is an "inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please."**

MAGS will also RFA question *iv.* to CHS for review and will request a contact ASAP. It may be best to discuss a consistent response to *iv.* before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business
Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au

From: LHN Coord
Sent: Thursday, 1 September 2022 1:51 PM
To: GovernmentBusinessHealth
Cc: LHN Coord; Pini, Sallyanne (Health); Ellis, Catherine (Health); HSPE
Subject: RE: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Categories: 02. QoN

OFFICIAL

Hi Kylie,
We need to reach out to Calvary to respond to the questions posed by MO, I have no guarantee how long that may take (sorry).
Thanks
Sinead

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:57 AM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the response at COR22/21749.

Can HSPE please review the answer to *i. how many treatment spaces are in each ward* **ASAP. MO have requested "Maternity and Medical be broken down into each ward."**

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MAGS will also RFA question *iv.* to CHS for review and will request a contact ASAP. It may be best to discuss a consistent response to *iv.* before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business
Email: GovernmentBusinessHealth@act.gov.au
Ministerial and Government Services | ACT Health Directorate
Level 5, 2-6 Bowes Street, Woden ACT 2606

From: Webb, Jaimilee (Health) on behalf of LHN Coord
Sent: Wednesday, 14 September 2022 3:17 PM
To: Westcott, Natasha (Health)
Subject: FW: Minister Office request - ACTHEALTH 1214 - Further clarification - RE: QON 833

OFFICIAL

From: Kanta Toraskar [REDACTED]
Sent: Wednesday, 14 September 2022 1:06 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Lucy Shanny (Calvary) [REDACTED]
Subject: FW: Minister Office request - ACTHEALTH 1214 - Further clarification - RE: QON 833

Caution: This email originated from outside of the ACT Government. Do not click links or open attachments unless you recognise the sender and know the content is safe. [Learn why this is important](#)

See response from Jarrad below

Hope this closes the matter

Regards

Kanta Toraskar
Executive Assistant to General Manager and CFO



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: Jarrad Nuss [REDACTED]
Sent: Wednesday, 14 September 2022 1:04 PM
To: Kanta Toraskar [REDACTED]
Subject: RE: Minister Office request - ACTHEALTH 1214 - Further clarification - RE: QON 833

MAPU 28
4E 24
4W 28
Stroke 6

Jarrad Nuss
Chief Financial Officer & Director Corporate Services

171



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: LHN Coord <LHNCoord@act.gov.au>
Sent: Thursday, 1 September 2022 3:37 PM
To: Jarrad Nuss <[REDACTED]>
Cc: Elvira Nikolic <[REDACTED]>; Greg Bayliss <[REDACTED]>; LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne <Sallyanne.Pini@act.gov.au>
Subject: Minister Office request - ACTHEALTH 1214 - Further clarification - RE: QON 833

OFFICIAL: Sensitive

Dear Jarrad,

The Minister for Health's advisor has requested we provide a further breakdown in Q.i,ii,iii – for the medical category (86beds), can you provide individual ward x bed?

Thank you,

Sinead

From: Jarrad Nuss <[REDACTED]>
Sent: Friday, 26 August 2022 12:20 PM
To: LHN Coord <LHNCoord@act.gov.au>
Cc: Elvira Nikolic (Calvary) <[REDACTED]>; Greg Bayliss (Calvary) <[REDACTED]>
Subject: RE: Further clarification - RE: QON833

Caution: This email originated from outside of the ACT Government. Do not click links or open attachments unless you recognise the sender and know the content is safe. [Learn why this is important](#)

Hi LHN

Responses in Red below.

thanks

Jarrad Nuss
Chief Financial Officer & Director Corporate Services



Public Hospital Bruce
Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
PO Box 254 Jamison Centre ACT 2614

www.calvary-act.com.au

From: LHN Coord <LHNCoord@act.gov.au>
 Sent: Wednesday, 24 August 2022 1:58 PM
 To: Jarrad Nuss <[REDACTED]>
 Cc: Greg Bayliss <[REDACTED]>; Elvira Nikolic <[REDACTED]>; LHN Coord <LHNCoord@act.gov.au>; Stewart, Margaret <Margaret.Stewart@act.gov.au>
 Subject: Further clarification - RE: QON833

CAUTION: This email originated from outside of Calvary Public Hospital Bruce. Do not click links or open attachments unless you recognise the sender and know the content is safe.

OFFICIAL: Sensitive

Hi Jarrad,

Jacinta George has sought clarification on two items

1. Can you confirm the full title of the Critical Care unit noted as having 14 beds – is it the **Intensive Care and Coronary Care Unit – YES, that is correct**
2. Can you confirm the staff numbers provided at question iv. are across the hospital or only for the wards provided in the table at questions i,ii,iii. **The figures are staffing to cover the wards/services listed at i,ii and iii**

Thank you,

Sinead

From: Jarrad Nuss <[REDACTED]>
 Sent: Friday, 19 August 2022 2:50 PM
 To: LHN Coord <LHNCoord@act.gov.au>
 Cc: Greg Bayliss (Calvary) <[REDACTED]>; Elvira Nikolic (Calvary) <[REDACTED]>; Robin Haberecht (Calvary) <[REDACTED]>
 Subject: QON833

Caution: This email originated from outside of the ACT Government. Do not click links or open attachments unless you recognise the sender and know the content is safe. [Learn why this is important](#)

Hi LHN

We have pulled together all the information that we can at this stage. Please let me know if further information is required.

Thanks

Jarrad Nuss
 Chief Financial Officer & Director Corporate Services



Public Hospital Bruce
 Cnr Belconnen Way & Haydon Drive Bruce ACT 2617
 PO Box 254 Jamison Centre ACT 2614

www.calvary-act.gov.au

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From: Chicco, Dee (Health) on behalf of HSPE
Sent: Friday, 16 September 2022 5:10 PM
To: GovernmentBusinessHealth; HSPE
Cc: LHN Coord
Subject: RE: FOLLOW UP: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Categories: 02. QoN

OFFICIAL

Hi Cathy

This is with Jacinta for clearance, will aim to get this to you Monday morning.

Thanks
Dee

From: Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Friday, 16 September 2022 5:08 PM
To: HSPE <HSPE@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>
Subject: RE: FOLLOW UP: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Dee

Any updates on this as we are sitting next week and would be good to have to Minister for signing and close off before Wednesday question time if at all possible.

Thanks
Cathy

Catherine Ellis | A/g Senior Director | Ministerial and Government Services

Mobile: [REDACTED] Email: catherine.ellis@act.gov.au

Office of the Director-General | ACT Health Directorate

Level 5, 2-6 Bowes Street Phillip ACT 2606

health.act.gov.au



From: Chicco, Dee (Health) <Dee.Chicco@act.gov.au> **On Behalf Of** HSPE
Sent: Tuesday, 13 September 2022 3:44 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; HSPE <HSPE@act.gov.au>

Subject: RE: FOLLOW UP: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Cathy

LHN are seeking advice from Calvary to respond to the questions posed by the MO, will let you know as soon as we have this advice.

Many thanks
Dee

From: Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Tuesday, 13 September 2022 3:42 PM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: FOLLOW UP: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

Hi Team

Can I please follow up on the below RFA request for this QON.

Particularly in reference to highlighted query which can also be seen on COR22/21749 in this TRIM container.

I am also following up with CHS in regards to an updated Attachment A (ward map).

Thanks
Cathy

Catherine Ellis | A/g Senior Director
Ministerial and Government Services | ACT Health Directorate
Mob: [REDACTED] | Email: Catherine.Ellis@act.gov.au
Level 5, Bowes Street, Woden ACT



From: Gstrein, Kylie (Health) **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 3:05 PM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: CHS Input: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

Further to the below email, CHS have advised they are happy to go with the wording that this is an unreasonable diversion of resources for question *iv. how many staff are scheduled for each ward including job title and classification.*

Thanks
Kylie

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:57 AM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

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Can you please also review the answer to *iv. how many staff are scheduled for each ward including job title and classification.* **MO commented the response is an "inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please."**

MAGS will also RFA question *iv.* to CHS for review and will request a contact ASAP. It may be best to discuss a consistent response to *iv.* before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business
 Email: GovernmentBusinessHealth@act.gov.au
 Ministerial and Government Services | ACT Health Directorate
 Level 5, 2-6 Bowes Street, Woden ACT 2606
health.act.gov.au

From: Chicco, Dee (Health) on behalf of HSPE
Sent: Monday, 19 September 2022 9:29 AM
To: LHN Coord
Cc: Stewart, Margaret (Health); HSPE
Subject: RE: QON 833

Importance: High

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Completed

OFFICIAL

Hi team

Can I get the updated attachment as soon as possible please as I have MAGS chasing up for this QoN.

Thanks
Dee

From: George, Jacinta (Health) <Jacinta.George@act.gov.au>
Sent: Friday, 16 September 2022 5:26 PM
To: HSPE <HSPE@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>
Cc: Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>
Subject: QON 833

OFFICIAL

Please add a label for 3S, 4E, 4W eg, Map on web says 3S maternity, 4E Medical , 5 W Surgical. This is no longer correct but would be helpful to have detail – otherwise I think misleading if some of them are still med/surg
Have redirected through process but thought an email to get things started would expedite.

Jacinta George
Executive Group Manager
Ph: (02) 5324 0609

Email jacinta.george@act.gov.au
Health System Planning and Evaluation
Level 3, 2 Bowes Street Phillip ACT 2606
health.act.gov.au



From: LHN Coord
Sent: Monday, 19 September 2022 3:14 PM
To: George, Jacinta (Health); Stewart, Margaret (Health)
Cc: LHN Coord; HSPE
Subject: RE: FOR CLEARANCE - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Importance: High

OFFICIAL

Hi Jacinta and Margaret

Please see below link to QON 833 for concurrent clearance

<https://objective.act.gov.au/#/documents/A35907053>

Thank you

Tash

Natasha Westcott | Coordination and Support Officer
 Local Hospital Network Commissioning | Health System Planning and Evaluation | ACT Health Directorate
 Direct Email: Natasha.Westcott@act.gov.au
 Phone: Via Microsoft Teams
 Level 4, 6 Bowes Street Phillip ACT 2606 health.act.gov.au

From: George, Jacinta (Health) <Jacinta.George@act.gov.au>
Sent: Monday, 19 September 2022 1:46 PM
To: LHN Coord <LHNCoord@act.gov.au>; HSPE <HSPE@act.gov.au>
Cc: Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>
Subject: RE: FOR CLEARANCE - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

But the table in the QON doesn't do that

Jacinta George
 Executive Group Manager
 Ph: (02) 5124 9599

Email: jacinta.george@act.gov.au
 Health System Planning and Evaluation
 Level 3, 2 Bowes Street Phillip ACT 2606
health.act.gov.au



From: LHN Coord <LHNCoord@act.gov.au>
Sent: Monday, 19 September 2022 1:27 PM

To: George, Jacinta (Health) <Jacinta.George@act.gov.au>; LHN Coord <LHNCoord@act.gov.au>; HSPE <HSPE@act.gov.au>

Cc: Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>

Subject: RE: FOR CLEARANCE - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Jacinta

No, problem – I should have noted in the QON but we received an email via MAGS that MO requested "Maternity and Medical be broken down into each ward,"

Tash

From: George, Jacinta (Health) <Jacinta.George@act.gov.au>

Sent: Monday, 19 September 2022 12:37 PM

To: LHN Coord <LHNCoord@act.gov.au>; HSPE <HSPE@act.gov.au>

Cc: Stewart, Margaret (Health) <Margaret.Stewart@act.gov.au>

Subject: RE: FOR CLEARANCE - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

I know you guys always have thought of these questions first but why would we have 2 separate rows for eg:

Maternity and 3S Maternity

Medical and 4E Medical for eg.??

Just trying to make sure that we can defend what goes up

Jacinta George
Executive Group Manager

Ph: (02) 6201 0500

Email: jacinta.george@act.gov.au

Health System Planning and Evaluation

Level 3, 2 Bowes Street Phillip ACT 2606

health.act.gov.au



From: Webb, Jaimilee (Health) <Jaimilee.Webb@act.gov.au> On Behalf Of LHN Coord

Sent: Friday, 16 September 2022 3:17 PM

To: HSPE <HSPE@act.gov.au>

Cc: LHN Coord <LHNCoord@act.gov.au>

Subject: FOR CLEARANCE - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Team,

See attached QoN 833 for JG's clearance.

We have left some comments in there as FYI for JG – Can be deleted if you don't think it's necessary or before progression.

Cleared by M.

<https://objective.act.gov.au/#/documents/1A12277654>

Thanks,
JL

Jaimilee

Administrative Support Officer – LHN Commissioning
Health Services Planning & Evaluation Division | ACT Health Directorate
Phone: 5124 3143 | Direct Email: Jaimilee.Webb@act.gov.au

Level 4, 6 Bowes Street Phillip ACT 2606
health.act.gov.au



From: LHN Coord <LHNCoord@act.gov.au>
Sent: Tuesday, 13 September 2022 4:52 PM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>
Subject: RE: FOLLOW UP: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Dee

Thanks for that, I have taken over this one from Sinead. I have flagged to follow up with Calvary in the morning. I note that JL also followed up with Calvary last week Tuesday.

Cheers

Tash

From: Chicco, Dee (Health) <Dee.Chicco@act.gov.au> On Behalf Of HSPE
Sent: Tuesday, 13 September 2022 3:44 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; HSPE <HSPE@act.gov.au>
Subject: RE: FOLLOW UP: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Hi Cathy

LHN are seeking advice from Calvary to respond to the questions posed by the MO, will let you know as soon as we have this advice.

Many thanks
Dee

From: Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au> On Behalf Of GovernmentBusinessHealth
Sent: Tuesday, 13 September 2022 3:42 PM
To: HSPE <HSPE@act.gov.au>
Cc: LHN Coord <LHNCoord@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Subject: FOLLOW UP: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

Hi Team

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Particularly in reference to highlighted query which can also be seen on COR22/21749 in this TRIM container.

I am also following up with CHS in regards to an updated Attachment A (ward map).

Thanks
 Cathy

Catherine Ellis | A/g Senior Director

Ministerial and Government Services | ACT Health Directorate

Mob: [REDACTED] Email: Catherine.Ellis@act.gov.au

Level 5, Bowes Street, Woden ACT



From: Gstrein, Kylie (Health) **On Behalf Of** GovernmentBusinessHealth

Sent: Wednesday, 31 August 2022 3:05 PM

To: HSPE <HSPE@act.gov.au>

Cc: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Subject: CHS Input: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Importance: High

OFFICIAL

Hi Team

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Thanks
 Kylie

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth

Sent: Wednesday, 31 August 2022 9:57 AM

To: HSPE <HSPE@act.gov.au>

Cc: LHN Coord <LHNCoord@act.gov.au>; Pini, Sallyanne (Health) <Sallyanne.Pini@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>

Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the response at COR22/21749.

Can HSPE please review the answer to *i. how many treatment spaces are in each ward ASAP. MO have requested "Maternity and Medical be broken down into each ward."*

Can you please also review the answer to iv. *how many staff are scheduled for each ward including job title and classification.* *MO commented the response is an "inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please."*

MAGS will also RFA question iv. to CHS for review and will request a contact ASAP. It may be best to discuss a consistent response to iv. before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business
Email: GovernmentBusinessHealth@act.gov.au
Ministerial and Government Services | ACT Health Directorate
Level 5, 2-6 Bowes Street, Woden ACT 2605
health.act.gov.au

From: Chicco, Dee (Health) on behalf of HSPE
Sent: Monday, 19 September 2022 4:03 PM
To: GovernmentBusinessHealth
Cc: LHN Coord; HSPE
Subject: Ready to progress : GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and ~ Castley.tr5; QoN 833 - Minister for Health - Ward Breakdowns (A35907053).docx; EGM Clearance QoN 833.pdf
Importance: High
Categories: 02. QoN

OFFICIAL

Hi team

QoN 833 is attached with EGM clearance. I haven't added to the TRIM container as I wasn't sure how you life these types of documents handled in TRIM when it is RFA'd from the MO.

Many thanks
Dee



CORRESPONDENCE CLEARANCE

Subject: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

Number: GBC22/367

Date Due: _____

Director-General - ACT Health: _____ Date: _____

Deputy Director-General - Health Systems, Policy and Research: _____ Date: _____

Chief Health Officer: _____ Date: _____

Coordinator-General - Mental Health and Wellbeing: _____ Date: _____

Professional Leads: _____ Date: _____

Contextually Correct <input type="checkbox"/>	Grammatically Correct <input type="checkbox"/>	Spell Checked <input type="checkbox"/>
Executive Group Manager <u>Janita George</u>	Date: 19/09/2022	
Executive Branch Manager: _____	Date: _____	

Senior Director / Director - Area name: _____ Date: _____

Manager - Area name: _____ Date: _____

Communications - ACT Health Directorate: _____ Date: _____

Ministerial and Government Services - ACT Health Directorate: _____ Date: _____

Other: _____ Date: _____



Rachel Stephen-Smith MLA
 Minister for Health
 Minister for Families and Community Services
 Minister for Aboriginal and Torres Strait Islander Affairs
 Member for Kurrajong

Deleted:

RESPONSE TO QUESTION ON NOTICE
Questions on Notice Paper No 19
10 June 2022
Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward,
- ii. how many beds are in each ward,
- iii. how many treatment spaces are in each ward,
- iv. how many staff are scheduled for each ward including job title and classification for
 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward. FBI

Commented [CS(1)]: Last FY is interpreted as 2020-21 noting the question paper was taken on 10 June 2022.

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

Question i., ii., iii. - CHS

- i. See Canberra Health Services (CHS) [Ward Map, Attachment A](#). Further information can be provided about specific wards, however this list should be self-explanatory. Note that bed numbers/wards are dynamic and subject to change according to clinical need.
- ii. See above.

Commented [CS(2)]: All input from CHS has been cleared

ACT Legislative Assembly London Circuit, GPO Box 1020, Canberra ACT 2601



+61 2 6205 2661



stephen-smith@act.gov.au



@rachelss_mla



rachelssmla



rachelss_mla

iii. See above.

Question i., ii., iii. – Calvary Public Hospital Bruce

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Intensive Care and Coronary care unit	14
Emergency Department Short Stay Unit ²	15
Hospital in the Home ³	18
Maternity Units	34
<u>3S Maternity</u>	18
<u>Birth Suite</u>	6
<u>Birth Centre</u>	2
<u>Special Care Nursery</u>	8
Medical	86
<u>Medical Assessment and Planning Unit</u>	28
<u>4E Medical</u>	24
<u>4W Medical</u>	28
<u>Stroke Unit</u>	6
Acacia Ward (mental health services only)	21
Older Persons Mental Health Unit (mental health services only)	15
<u>5W Surgical</u>	28

Deleted: 4W

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1. Average number of beds operated throughout the year. Note that bed numbers/wards are dynamic and subject to change according to clinical need.
2. Excludes beds being utilised at the time of response for the COVID-19 Red zone.
3. HITH beds are virtual beds as care is homebased.

Deleted: 7
9
9

iv. CHS nursing rostering templates are completed by the Nurse Manager for each ward to reflect respective staffing levels/classification for morning, evening, and night shifts. Examples are provided at Attachment B. A complete list of all staff rostered for morning, afternoon, and night shift for each ward at CHS and CPHB has not been provided due to resources required to complete this request.

Calvary Public Hospital Bruce*			
	Morning	Afternoon	Night
Midwives	11	10	9
Nurses	70	80	55
Junior Medical Doctors (JMOs)	120 JMOs across a 24-hour shift roster JMOs are supplemented by specialist medical officers /consultants and visiting medical officers		
Allied Health professionals	100 (approx.) Allied Health Professionals across a variety of shifts, in roles including occupational therapy, physiotherapy, speech		

	pathology, nutrition, social work, pharmacy, dietetics and 24/7 medical imaging.
--	--

* This is a typical daily roster but can be subject to change due to demand

- v. Neither Calvary Public Hospital Bruce nor CHS report at the ward level. Performance information for each hospital is available via the ACT Public Health Services Quarterly Performance Report https://www.health.act.gov.au/sites/default/files/2022-05/Att%20A%20-%20QPR%20Q2%202021-22_Addendum%20Edit.pdf

Deleted:

- vi. Refer to response at v. above.

- vii. CHS is unable report at the ward level. Data has been provided detailing the paid headcount on 24 June 2020 and corresponding headcount paid on 23 June 2021.

Canberra Health Services			
Division	Headcount paid as of 24 June 2020	Headcount paid as of 23 June 2021	Difference
WYC	813	810	-3
UCH	306	323	17
Surgery	1020	1002	-18
RACS	530	523	-7
QSII	41	34	-7
P&C	90	90	0
ODCEO	34	49	15
OCEO	36	178	142
NMPSS	489	543	54
MHIHADS	818	836	18
MEDICINE	1098	1104	6
MEDICAL SERVICES	870	895	25
IHSS	335	363	28
FBI	194	194	0
CGO	142	53	-89
CAS	557	704	147
AH	218	216	-2
TOTAL	7591	7917	326

Calvary Public Hospital Bruce does not routinely collect data at ward level for staff recruitment. I provided mental health ward level data for QON 830, however, to provide detailed staffing for each ward would be unduly resource intensive and take key personnel away from their core functions. I also refer the Member to QON 834 which provides overall staff exits.

- viii. CHS response at vii

Calvary Public Hospital Bruce do not routinely collect data at ward level for staff separations. I recently provided mental health staff exits in QON 829, however, to provide detailed staffing separations by all wards would be unduly resource intensive and take key personnel away from

their core functions. I also refer the Member to QON 834 which provides overall staff exits.

ix. CHS does not report Budget allocations at the Ward level. Please refer to Budget Paper C: https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf

Deleted: 9

Calvary Public Hospital Bruce does not report budget allocations at the ward level. Internal budgets are not necessarily representative of the costs as there are different treatments between hospitals as to the allocation of direct and indirect costs. National Weighted Activity Unit (NWAU) costs per patient episode are available through the Independent Hospital and Aged Care Pricing Authority (IHACPA) National Benchmarking Portal, the latest data publicly available is 2019-20. the system allows the user to filter by care type.

x. <https://www.ihacpa.gov.au/health-care/data/national-benchmarking-portal>

xi. CHS does not report expenditure at the ward level. CHS's 2021-22 Annual Report has yet to be finalised, however a comparison of CHS's financial position can be found within CHS' 2021-21 Annual Report - [Canberra Health Services Annual Report 2020-2021 \(act.gov.au\)](#)

Deleted: 9

See response at question ix) for Calvary Public Hospital Bruce

xii. Neither CHS nor Calvary Public Hospital Bruce report Length of Stay at the ward level. Performance information is available via the ACT Public Health Services Quarterly Performance Reports <https://health.act.gov.au/about-our-health-system/act-public-health-services-quarterly-performance-report>

Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
Minister for Health

Date:.....

This response required 1160 minutes to complete, at an approximate cost of \$1,867.42.

Deleted: xxx

Deleted: xxx

From: Hoffmann, Cameron (Health) on behalf of Canberra Health Services Ministerial
Sent: Tuesday, 20 September 2022 8:03 AM
To: GovernmentBusinessHealth
Subject: RE: RFA GBCHS22/172: GOVERNMENT & STAKEHOLDER RELATIONS - Government & Assembly Matters - Minister for Health - Assembly Sitting 7-9 June 2022 - Input to ACTHD - Question on Notice (QoN) 833 - Breakdown of Wards
Attachments: CHS Ward Map Sept 2022.pdf
Categories: 02. QoN

OFFICIAL

Hi Catherine

Please see attached updated map.
 Apologise in the delay getting this to you.

Thanks,
 Cam

Cameron Hoffmann | Assistant Assembly Liaison Officer | Assembly and Ministerial Liaison
 Phone: 02 5124 6145 | Email: CHS.Ministerial@act.gov.au
Government Relations | Canberra Health Services | ACT Government
 Ground Floor, Building 28 Canberra Hospital, Garran ACT 2605 | health.act.gov.au
 RELIABLE | PROGRESSIVE | RESPECTFUL | KIND

From: Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Tuesday, 13 September 2022 3:41 PM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: FW: RFA GBCHS22/172: GOVERNMENT & STAKEHOLDER RELATIONS - Government & Assembly Matters - Minister for Health - Assembly Sitting 7-9 June 2022 - Input to ACTHD - Question on Notice (QoN) 833 - Breakdown of Wards

Hi Team

Are you able to follow up on the below as I cannot find a response providing the map as indicated in the email trail.

Thanks
 Cathy

Catherine Ellis | A/g Senior Director
Ministerial and Government Services | ACT Health Directorate
 Mob [REDACTED] | Email: Catherine.Ellis@act.gov.au
 Level 5, Bowes Street, Woden ACT



From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Thursday, 1 September 2022 6:13 PM

To: CHS COO <CHSCOO@act.gov.au>

Cc: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>; Hunter, Kerryn (Health) <Kerryn.Hunter@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>

Subject: RE: RFA GBCHS22/172: GOVERNMENT & STAKEHOLDER RELATIONS - Government & Assembly Matters - Minister for Health - Assembly Sitting 7-9 June 2022 - Input to ACTHD - Question on Notice (QoN) 833 - Breakdown of Wards

OFFICIAL

Hi Amanda

My apologies for missing your call and not getting back to you sooner.

Thank you for following up on the Attachment A – CHS Ward Map. ACTHD will await the updated map and will include it as part of the response once received.

Once ACTHD receives the map there will be NFA from CHS as I am advised by your Ministerial team that CHS were happy to use the 'unreasonable diversion of resources' to respond to question iv).

Many thanks

Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au

From: CHS COO <CHSCOO@act.gov.au>

Sent: Thursday, 1 September 2022 12:16 PM

To: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au>

Cc: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>; Hunter, Kerryn (Health) <Kerryn.Hunter@act.gov.au>; GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; CHS COO <CHSCOO@act.gov.au>

Subject: RE: RFA GBCHS22/172: GOVERNMENT & STAKEHOLDER RELATIONS - Government & Assembly Matters - Minister for Health - Assembly Sitting 7-9 June 2022 - Input to ACTHD - Question on Notice (QoN) 833 - Breakdown of Wards

OFFICIAL

Hi Kylie,

Sorry for delay in coming back to you on the ward map for GBCHS22/172.

The ward map is provided to hospital staff as a guide but is quite dynamic as the bed numbers and wards can change to meet the current demand and clinical need. I've asked the team to update and provide a revised ward map as at 31 August with inclusion of the disclaimer that bed numbers/wards can change according to clinical need. We will provide this update as soon as possible.

Please let me know if anything further required. I tried to call you and am happy to discuss if easier.

Kind regards,

Amanda

Amanda Bell | Business Manager

T: 02 5124 8688 | M: [REDACTED] | E: amanda.bell@act.gov.au

Office of the Chief Operating Officer | Canberra Health Services | ACT Government
 Level 2, Building 28, Canberra Hospital
 PO Box 11, Woden ACT 2606 | health.act.gov.au
 RELIABLE | PROGRESSIVE | RESPECTFUL | KIND

Our vision is creating exceptional healthcare together

Our role is to be a health service that is trusted by our community.

Our values are Reliable, Progressive, Respectful, Kind



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From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 10:02 AM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; Hunter, Kerryn (Health) <Kerryn.Hunter@act.gov.au>
Subject: RE: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley

OFFICIAL

Sorry team,

Also – MO has made comments on Attachment A – CHS Ward Map for response/amendment.

Thank you
 Kylie

From: Gstrein, Kylie (Health) <Kylie.Gstrein@act.gov.au> **On Behalf Of** GovernmentBusinessHealth
Sent: Wednesday, 31 August 2022 9:59 AM
To: Canberra Health Services Ministerial <CHS.Ministerial@act.gov.au>
Cc: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>; Ellis, Catherine (Health) <Catherine.Ellis@act.gov.au>; Hunter, Kerryn (Health) <Kerryn.Hunter@act.gov.au>
Subject: RFA - GBC22/367 : Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Importance: High

OFFICIAL

Hi Team

MO have returned the response to the above QON for amendment. MO comments are available in the attached response.

Can CHS please review the answer to *iv. how many staff are scheduled for each ward including job title and classification*. **MO commented the response is an “inconsistent way to answer this question. Should either be as per below that this is an unreasonable diversion of resources or provide a overall number consistent with please.”**

Could MAGS please request relevant contact officer details ASAP to pass onto our line area as it may be best to discuss a consistent response to *iv.* before progressing.

Thank you
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au

Legend	
	WYC
	Medicine
	Surgery
	MHJHADS
	CAS
	RACS
	Empty
	COVID-19

PLEASE NOTE: Bed numbers/wards are dynamic and subject to change according to clinical need.

Note:
See over page for abbreviations
Negative Pressure Room List – Page 3

Building 1 (Tower Block)

10A (32 bed spaces) 32 - General Surgery, Ophthalmology 8 x single rooms	Offices Care @ Home Program
9A (24 bed spaces) 24 - Gastroenterology 4 x single rooms	9B (29 bed spaces) 23 - Neurosurgical 06 - Monitored beds 00 - flex beds Trache ward 3 x single rooms
8A (No overnight beds) 10 - Dialysis day beds 4 single rooms 2 negative pressure	8B (29 bed spaces) 25 Beds - WYC 9 x single rooms 2 x negative pressure
7A (32 bed spaces) Neurology & ID (28 beds) Stroke Unit (4 beds) Trache ward 8 x single rooms 2x negative pressure	7B (32 bed spaces) General Medicine Ward 2x single rooms, 1x negative pressure
6A (32 bed spaces) 32 - Resp/Cardiology Rheum/Endocrine 6 x single rooms 2x negative pressure rooms	6B (34 bed spaces) 28 - Cardiothoracic, Thoracic surgery, Urology, Vascular 06 - Monitored beds (Total 34 beds)
5A (30 bed spaces) 30 - Orthopaedic Ortho-Geri 4 x single rooms 1x negative pressure room	5B (28 bed spaces) 24 - Plastic/Ortho/ENT 02 - flex beds Trache ward 4 x single rooms 1x negative pressure room
4A - C18 (28 beds) Covid respiratory symptoms 6 single beds	4B (20 bed spaces) 20 - Renal + Medicine 0 - Discharge Lounge beds 2 x single rooms
CPEU/CCU (19) 04 - CPEU 11 - CCU 04 - Subacute 2 x single rooms	QHS Outpatients Cardiology & cardiothoracic N&M Office OPD
GROUND	

University of Canberra Hospital (UCH)

UCH Negative Pressure Room = 1

Cotter (30 bed spaces) 30 - Beds 0 - Flex beds
Stromlo (30 bed spaces) 30 - Neurological 0 - Flex beds
Majura (30 bed spaces) 30 - Older Persons 00 - Flex beds
Namadgi (30 bed spaces) 30 - General 00 - Flex beds
AMHRU (20) 20 - MH beds 0 - Flex beds

Building 12

Operating Theatres 13 Theatres (1 negative pressure operating room) 14 - EDSU (12 funded) 18 - PACU	ICU (39 bed spaces) 3 x negative pressure rooms Brindabella South and Garvan is negative pressure area
Acute Surgical Unit 16 beds 2 single rooms	ED (58 treatment spaces) 30 - Acute 05 - Resus 15 - FastTrack (3 procedure rooms) 06 - Paeds 02 - De-escalation 4x negative pressure rooms
ED (12) - Emergency Medicine Unit 12 - Beds	MHSSU (6) 05 - MHSSU

Building 11

Centenary Hospital Women & Children

15 - NICU	14 - SCN	05 - Birth Centre 13 - Birth Suite
15 - PN 03 - cots	15 - AN	Ronald McDonald
16 - PDS (funded 12)	12 - MYE Medical COVID WARD (PACU) = 3 single beds	12 - PW11 12 beds

Negative pressure rooms WYC = 14 rooms
- PWA = 1, PWH = 2, PWM = 6, PWS = 1, AN = 1, PN = 1, BS = 1, NICU = 1, SCN = 1
Positive Pressure rooms: PWH = 2

Building 3

14B (32 bed spaces) 23 - Oncology 4 - flex/clinical trials	14A (22) 22 - Haematology 0 - Flex beds (Positive Pressure)
12B - Mental Health 12 beds	
11B (26 bed spaces) 26 - Aged Care 0 - Flex beds	11A (24 bed spaces) 24 - Aged Care 0 - Flex beds

Building 7

Withdrawal Unit (10 bed spaces) 10 beds
Building 25 AHMU (40 bed spaces) PLD 30 PHD 10
DMHU / GAW DMHU 17 beds Gawanggal 10 beds



Abbreviation Location	Abbreviation	
Legend	WYC	Women Youth & Children
	MHJHADS	Mental Health Justice Health Alcohol and Drug Services
	CAS	Cancer and Ambulatory Support
	RACS	Rehabilitation Aged and Community Services
Building 11	NICU	Neonatal Intensive Care Unit
	SCN	Special Care Nursery
	PN	Postnatal
	AN	Antenatal
	PWH	Paediatric Ward High care
	PWS	Paediatrics Ward Surgery
	PDS	Paediatric Day Stay
	PWA	Paediatric Ward Adolescent
Building 12	EDSU	Extended Day Surgery Unit
	PACU	Post Anaesthetic Care Unit
	ICU	Intensive Care Unit
	ED	Emergency Department
	MH	Mental Health
	MHSSU / PSS	Mental Health Short Stay Unit / Psychiatric Short Stay Unit
Building 1	ASU	Acute Surgical Unit
	ENT	Ear Nose & Throat
	CPEU	Chest Pain Evaluation Unit
	CCU	Coronary Care Unit
	N&M	Nursing & Midwifery
	OPD	Outpatient Department
	SCP	Seasonal Capacity Plan, adult beds
	ACDL	All Care Discharge Lounge
University of Canberra Hospital	AMHRU	Adult Mental Health Rehabilitation Unit
Building 25	AMHU	Adult Mental Health Unit
	PLD	Psychiatric Low Dependency
	PHD	Psychiatric High Dependency
DMHU / GAW	DMHU	Dhulwa Mental Health Unit
	GAW	Gawanggal (Extended Care Unit)



Negative Pressure Rooms - July 2020

Building	Ward	Negative Pressure Rooms
1	Ward 8A	2
1	Ward 8B	2
1	Ward 7A	2
1	Ward 7B	1
1	Ward 6A	2
1	Ward 5A	1
1	Ward 5B	1
12	Intensive Care Unit (ICU)	4
12	Intensive Care Unit Extension Brindabella South Level 3	Whole Ward
12	Emergency Department (ED)	4
12	Emergency Department Extension Level 2	Whole Ward
12	Peri-Operative Theatres	1
11	Anti-Natal	1
11	Post Natal	1
11	Neonatal ICU	1
11	Special Care Nursery	1
11	Paeds Adolescent	2
11	Paeds Medical Unit	6
11	Paeds Surgical Unit	1
11	Birthing Suite	1
UCH	University of Canberra Hospital	1
	Total <i>(in addition to whole wards above)</i>	35

UCH = Namadgi Room 1

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Tuesday, 20 September 2022 8:59 PM
To: ACT Health DLO
Cc: GovernmentBusinessHealth
Subject: RE: URGENT : GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital
Attachments: Final Response - QoN 833 - Minister for Health - Ward Breakdowns.DOCX

Importance: High

OFFICIAL

Hi Tara

Apologies, the table was missing an additional line. The attached and the version in TRIM (COR22/21749) have been corrected as below:

Maternity Units	34
3S Maternity	18
Birth Suite	6
Birth Centre	2
Special Care Nursery	8

Thank you
Kylie

From: Gower, Tara (Health) <Tara.Gower@act.gov.au> On Behalf Of ACT Health DLO
Sent: Tuesday, 20 September 2022 5:04 PM
To: GovernmentBusinessHealth <GovernmentBusinessHealth@act.gov.au>
Subject: FW: URGENT : GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital
Importance: High

OFFICIAL

Hi team

Urgent check on response to i. by email please:

Maternity Units total appears as 34, but the sub-units do not add up to 34 and I cannot work out where the other 8 beds come from?

Maternity Units	34
3S Maternity	18
Birth Suite	6
Birth Centre	2

Thank you
Tara

Tara Gower | A/g Directorate Liaison Officer | ACT Health Directorate
 Mob: [REDACTED] Email: ACTHealthDLO@act.gov.au
 Office of Rachel Stephen-Smith | Minister for Health



From: Gower, Tara (Health) <Tara.Gower@act.gov.au> On Behalf Of ACT Health DLO
Sent: Tuesday, 20 September 2022 11:37 AM
To: Bransgrove, Meagen <Meagen.Bransgrove@act.gov.au>
Subject: URGENT : GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital

OFFICIAL

Hi Meg

The revised QON response is back in your folder [here](#).

Please note Attachment B is now obsolete. The response **expired on 10 July 2022**.

Thank you

Tara

Tara Gower | A/e Directorate Liaison Officer | ACT Health Directorate

Mob [REDACTED] Email: ACTHealthDLO@act.gov.au

Office of Rachel Stephen-Smith | Minister for Health
Officer of Emma Davidson | Minister for Mental Health
Level 2, Legislative Assembly Building, Civic Square





Rachel Stephen-Smith MLA
 Minister for Health
 Minister for Families and Community Services
 Minister for Aboriginal and Torres Strait Islander Affairs
 Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE
Questions on Notice Paper No 19
10 June 2022
Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward,
- ii. how many beds are in each ward,
- iii. how many treatment spaces are in each ward,
- iv. how many staff are scheduled for each ward including job title and classification for
 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward.

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

- i. See Canberra Health Services (CHS) Ward Map at [Attachment A](#). Note that bed numbers/wards are dynamic and subject to change according to clinical need.

See the below table for information from Calvary Public Hospital Bruce (CPHB).

ACT Legislative Assembly London Circuit, GPO Box 1020, Canberra ACT 2601



+61 2 6205 2661



stephen-smith@act.gov.au



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[rachelSSMLA](https://www.facebook.com/rachelSSMLA)



[rachels_mla](https://www.instagram.com/rachels_mla)

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Intensive Care and Coronary care unit ²	14
Emergency Short Stay Unit ³	15
Hospital in the Home ⁴	18
Maternity Units	34
3S Maternity	18
Birth Suite	6
Birth Centre	2
Special Care Nursery	8
Medical	86
4E Medical	24
4W Medical	28
Stroke Unit	6
Acacia Ward (Mental Health services only)	21
Older Persons Mental Health Unit (Mental Health services only)	15
Surgical	28
5W Surgical	28

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- ix. CHS does not report Budget allocations at the Ward level. Please refer to *Budget Paper C*: https://www.treasury.act.gov.au/data/assets/pdf_file/0004/1698934/2020-21-Budget-Statements-C.pdf

CPHB does not report budget allocation at the Ward level. Internal budgets are not representative of the costs as there are different treatments between hospitals as to the allocation of direct and indirect costs. National Weighted Activity Unit (NWAU) costs per patient episode are available through the Independent Hospital Pricing Authority (IHPA) benchmarking portal, the latest data publicly available is 2019-20. the system allows the user to filter by care type.

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See CPHB response to Question ix.

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Approved for circulation to the Member and incorporation into Hansard.

Rachel Stephen-Smith MLA
Minister for Health

Date:.....

This response required 26 hours and 50 minutes to complete, at an approximate cost of \$2741.61.

From: Gstrein, Kylie (Health) on behalf of GovernmentBusinessHealth
Sent: Tuesday, 20 September 2022 11:31 AM
To: ACT Health DLO
Cc: GovernmentBusinessHealth
Subject: URGENT FOR MO - GBC22/367 - Minister for Health - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital - Castley
Attachments: Assembly - 10 June 2022 - Minister for Health - Question on Notice (QON) 833 - breakdown of all wards at the (a) Canberra Hospital and ~ Castley.tr5

Importance: High

Follow Up Flag: Follow up
Flag Status: Completed

Categories: WITH MEG / awaiting advice

OFFICIAL

Hi Tara

Please progress the attached amended response to *QON 833 breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital*.

The response at COR22/21749, and Attachment A at COR22/21756 have been updated to address MO comments. Please progress the response and Attachment A for MO review, noting Attachment B is now obsolete.

The response **expired on 10 July 2022**.

Kind regards
Kylie

Kylie Gstrein | A/g Director, Government Business

Email: GovernmentBusinessHealth@act.gov.au

Ministerial and Government Services | ACT Health Directorate

Level 5, 2-6 Bowes Street, Woden ACT 2606

health.act.gov.au



Rachel Stephen-Smith MLA
 Minister for Health
 Minister for Families and Community Services
 Minister for Aboriginal and Torres Strait Islander Affairs
 Member for Kurrajong

RESPONSE TO QUESTION ON NOTICE
Questions on Notice Paper No 19
10 June 2022
Question No. 833

Asked by **MS CASTLEY MLA** –

Can the Minister provide a breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital, including

- i. a brief description of each ward,
- ii. how many beds are in each ward,
- iii. how many treatment spaces are in each ward,
- iv. how many staff are scheduled for each ward including job title and classification for
 - A. morning,
 - B. afternoon and
 - C. night shift,
- v. how many patients have been admitted to each ward in the last financial year,
- vi. how many patients have been discharged from each ward in the last financial year,
- vii. how many staff (headcount) have been recruited for each ward in the last financial year,
- viii. how many staff (headcount) have separated from each ward in the last financial year,
- ix. what was the budget allocated for each ward in the last financial year;
- x. how much was spent by each ward in the last financial year;
- xi. what was the average length of stay for a patient in each ward.

MS STEPHEN-SMITH MLA - The answer to the Member's question is as follows:

- i. See Canberra Health Services (CHS) Ward Map at [Attachment A](#). Note that bed numbers/wards are dynamic and subject to change according to clinical need.

See the below table for information from Calvary Public Hospital Bruce (CPHB).

ACT Legislative Assembly London Circuit, GPO Box 1020, Canberra ACT 2601



+61 2 6205 2661



stephen-smith@act.gov.au



@RachelSS_MLA



rachelSSMLA



rachelss_mla

Calvary Public Hospital Bruce	
Name of Ward (Inpatient wards only)	Number of beds ¹
Calvary Respiratory Assessment Unit	12
Intensive Care and Coronary care unit ²	14
Emergency Short Stay Unit ³	15
Hospital in the Home ⁴	18
Maternity Units	34
3S Maternity	18
Birth Suite	6
Birth Centre	2
Special Care Nursery	8
Medical	86
4E Medical	24
4W Medical	28
Stroke Unit	6
Acacia Ward (Mental Health services only)	21
Older Persons Mental Health Unit (Mental Health services only)	15
Surgical	28
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Legend

Light Blue	WYC
Orange	Medicine
Teal	Surgery
Dark Blue	MHJHADS
Yellow	CAS
Dark Grey	RACS
Light Grey	Empty
Red	COVID-19

PLEASE NOTE: Bed numbers/wards are dynamic and subject to change according to clinical need.

Note:
See over page for abbreviations
Negative Pressure Room List – Page 3

University of Canberra Hospital (UCH)

UCH Negative Pressure Room = 1

Cotter (30 bed spaces) 30 – Beds 0 – Flex beds
Stromlo (30 bed spaces) 30 – Neurological 0 – Flex beds
Majura (30 bed spaces) 30 – Older Persons 00 – Flex beds
Namadg (30 bed spaces) 30 – General 00 – Flex beds
AMHRU (20) 20 – MH beds 0 – Flex beds

Building 1 (Tower Block)

10A (32 bed spaces) 32 - General Surgery, Ophthalmology 8 x single rooms	Offices Care @ Home Program
9A (24 bed spaces) 24 – Gastroenterology 4 x single rooms	9B (29 bed spaces) 23 – Neurosurgical 06 – Monitored beds 00 – Flex beds Trache ward 3 x single rooms
8A (No overnight beds) 10 – Dialysis day beds 4 single rooms 2 negative pressure	8B (29 bed spaces) 25 Beds – WYC 9 x single rooms 2 x negative pressure
7A (32 bed spaces) Neurology & ID (28 beds) Stroke Unit (4 beds) Trache ward 8 x single rooms 3x negative pressure	7B (32 bed spaces) General Medicine Ward 2x single rooms, 14 negative pressure
6A (32 bed spaces) 32 – Resp/Cardiology Rheum/Endocrine 6 x single rooms 2x negative pressure rooms	6B (34 bed spaces) 28 – Cardiothoracic, Thoracic surgery, Urology, Vascular 06 – Monitored beds (Total 34 beds)
5A (30 bed spaces) 30 – Orthopaedic Ortho-Geri 4 x single rooms 1x negative pressure room	5B (28 bed spaces) 24 – Plastic/Ortho/ENT 02 – flex beds Trache ward 4 x single rooms 1x negative pressure room
4A (28 beds) Covid respiratory symptoms 6 single beds	4B (20 bed spaces) 20 – Renal + Medicine 0 – Discharge Lounge beds 2 x single rooms
CPEU/CCU (19) 04 – CPEU 11 – CCU 04 – Subacute 2 x single rooms	CHS Outpatients Cardiology & cardiothoracic
GROUND	N&M Office OPD

Building 12

Operating Theatres 13 Theatres (1 negative pressure operating room) 14 – EDSU 18 – PACU	ICU (39 bed spaces) 3 x negative pressure rooms Brindabella South and Garran in negative pressure area
Acute Surgical Unit 16 beds 2 single rooms	ED (58 treatment spaces) 30 – Acute 05 – Resus 15 – FastTrack (3 procedure rooms) 06 – Paeds 02 - De-escalation 4x negative pressure rooms
ED (12) – Emergency Medicine Unit 12 – Beds	MHSSU (6) 06 - MHSSU

Building 11

Centenary Hospital Women & Children

15 – NICU	14 – SCN	05 – Birth Centre 13 – Birth Suite
15 – PN 03 – cots	15 – AN	Ronald McDonald
16 – PDS	12 – WYC Medical COVID WARD (PACU) + 3 single beds	12 – PW11 12 beds

Negative pressure rooms WYC = 14 rooms
- PWA = 1, PWH = 2, PWM = 6, PWS = 1, AN = 1, PN = 1, BS = 1, NICU = 1, SCN = 1
Positive Pressure rooms: PWH = 2

Building 3

14B (32 bed spaces) 28 – Oncology 4 – flex/clinical trials	14A (27) 22 – Haematology 0 – Flex beds (Positive Pressure)
12B – Mental Health 12 beds	
11B (26 bed spaces) 26 – Aged Care 0 – Flex beds	11A (24 bed spaces) 24 – Aged Care 0 – Flex beds

Building 7

Withdrawal Unit (10 bed spaces) 10 beds
Building 25 AHMU (40 bed spaces) PLD 30 PHD 10
DMHU / GAW DMHU 17 beds Gawanggal 10 beds



Abbreviation Location	Abbreviation	
Legend	WYC	Women Youth & Children
	MHJHADS	Mental Health Justice Health Alcohol and Drug Services
	CAS	Cancer and Ambulatory Support
	RACS	Rehabilitation Aged and Community Services
Building 11	NICU	Neonatal Intensive Care Unit
	SCN	Special Care Nursery
	PN	Postnatal
	AN	Antenatal
	PWH	Paediatric Ward High care
	PWS	Paediatrics Ward Surgery
	PDS	Paediatric Day Stay
	PWA	Paediatric Ward Adolescent
Building 12	EDSU	Extended Day Surgery Unit
	PACU	Post Anaesthetic Care Unit
	ICU	Intensive Care Unit
	ED	Emergency Department
	MH	Mental Health
	MHSSU / PSS	Mental Health Short Stay Unit / Psychiatric Short Stay Unit
Building 1	ASU	Acute Surgical Unit
	ENT	Ear Nose & Throat
	CPEU	Chest Pain Evaluation Unit
	CCU	Coronary Care Unit
	N&M	Nursing & Midwifery
	OPD	Outpatient Department
	SCP	Seasonal Capacity Plan, adult beds
	ACDL	All Care Discharge Lounge
University of Canberra Hospital	AMHRU	Adult Mental Health Rehabilitation Unit
Building 25	AMHU	Adult Mental Health Unit
	PLD	Psychiatric Low Dependency
	PHD	Psychiatric High Dependency
DMHU / CAW	DMHU	Dhulwa Mental Health Unit
	CAW	Gawanggal (Extended Care Unit)



Negative Pressure Rooms - July 2020

Building	Ward	Negative Pressure Rooms
1	Ward 8A	2
1	Ward 8B	2
1	Ward 7A	2
1	Ward 7B	1
1	Ward 6A	2
1	Ward 5A	1
1	Ward 5B	1
12	Intensive Care Unit (ICU)	4
12	Intensive Care Unit Extension Brindabella South Level 3	Whole Ward
12	Emergency Department (ED)	4
12	Emergency Department Extension Level 2	Whole Ward
12	Peri-Operative Theatres	1
11	Anti-Natal	1
11	Post Natal	1
11	Neonatal ICU	1
11	Special Care Nursery	1
11	Paeds Adolescent	2
11	Paeds Medical Unit	6
11	Paeds Surgical Unit	1
11	Birth Suite	1
UCH	University of Canberra Hospital	1
	Total (in addition to whole wards above)	35

UCH = Namadgi Room 1

2021	Division	Medicine	Shift count							shift length	shift hour	shift count	shift hour	shift count	Updated	by who	enter date		
July	H Manager		Bed Open	Morn & Even shift length							8.00	8.00	1.00	10.00	1.25			Comments	
2022	UNIT	7A	32	Night Duty shift length							10.00	10.00	1.00	8.00	0.80			TEMPLATE21	
June	appt	8850	Day open								7			12.00	1.20				
	costcentre	81795	7																
Shift	Shift count	MORN	8 hour shift length = 1.00							Morn shift from 0700 ends 1800	default	count 1=	8.00	7.5 (nonackill)					
MORN	Shift count	MORN	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	Shift Length	Wkly hrs	Shift length	ADO adjust to 8			
Morn	INDIRECT	RN5											7.60	38.00					
Morn	INDIRECT	RN4.3											7.60	38.00					
Morn	INDIRECT	RN4.2											7.80	38.00					
Morn	INDIRECT	RN4.1											8.00	38.00					
Morn	INDIRECT	RN3G2	1.00	1.00			1.00	1.00	1.00	5.00	40.00	1.053	8.00	38.00					
Morn	INDIRECT	RN3G1	2.00	2.00			2.00	2.00	2.00	10.00	80.00	2.105	8.00	38.00					
Morn	INDIRECT	RN2CON	1.00	1.00			1.00	1.00	1.00	5.00	38.00	1.000	7.60	38.00					
Morn	INDIRECT	RN2TL			1.00	1.00				2.00	16.00	0.421	8.00	38.00					
Morn	INDIRECT	RN2											8.00	38.00					
Morn	INDIRECT	RN1											8.00	38.00					
Morn	INDIRECT	EN2											8.00	38.00					
Morn	INDIRECT	EN1											8.00	38.00					
Morn	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00					
Morn	DIRECT	RN4NP											8.00	38.00					
Morn	DIRECT	RN3G2											8.00	38.00					
Morn	DIRECT	RN3G1											8.00	38.00					
Morn	DIRECT	RN2TL											8.00	38.00					
Morn	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00					
Morn	DIRECT	RN2*											8.00	38.00					
Morn	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	168.00	4.421	8.00	38.00					
Morn	DIRECT	RNHP	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.947	8.00	38.00					
Morn	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00					
Morn	DIRECT	EN1											8.00	38.00					
Morn	DIRECT	ENHP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.474	8.00	38.00					
Morn	DIRECT	spare											8.00	38.00					
Morn	Morn ShiftCount		14.00	14.00	11.00	11.00	14.00	14.00	14.00	92.00	734.00	19.32	7.94						
Shift	Shift count	EVEN	shift length = 1.00							Even from 1800 ends before 2400	default	count 1=	8.00	7.5 (no backfill)					
EVEN	Shift count	EVEN	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	Shift Length	Wkly hrs	Even				
Even	INDIRECT	RN5											7.60	38.00					
Even	INDIRECT	RN4.3											7.60	38.00					
Even	INDIRECT	RN4.2											7.60	38.00					
Even	INDIRECT	RN4.1											7.60	38.00					
Even	INDIRECT	RN3G2											7.60	38.00					
Even	INDIRECT	RN3G1											7.60	38.00					
Even	INDIRECT	RN2CON											7.80	38.00					
Even	INDIRECT	RN2TL	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	53.20	1.40	7.60	38.00					
Even	INDIRECT	RN2											7.60	38.00					
Even	INDIRECT	RN1											7.60	38.00					
Even	INDIRECT	EN2											7.60	38.00					
Even	INDIRECT	EN1											7.60	38.00					
Even	INDIRECT	AIN	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00					
Even	DIRECT	RN4NP											8.00	38.00					
Even	DIRECT	RN3G2											8.00	38.00					
Even	DIRECT	RN3G1											8.00	38.00					
Even	DIRECT	RN2TL											8.00	38.00					
Even	DIRECT	RN2	2.00	2.00	2.00	2.00	2.00	2.00	2.00	14.00	112.00	2.95	8.00	38.00					
Even	DIRECT	RN2*											8.00	38.00					
Even	DIRECT	RN1	4.00	4.00	4.00	4.00	4.00	4.00	4.00	28.00	224.00	5.89	8.00	38.00					
Even	DIRECT	RNHP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00					
Even	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00					
Even	DIRECT	EN1											8.00	38.00					
Even	DIRECT	ENHP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	56.00	1.47	8.00	38.00					
Even	DIRECT	spare											8.00	38.00					
Even	Even ShiftCount		11.00	11.00	11.00	11.00	11.00	11.00	11.00	77.00	613.20	16.14							
Shift	Shift count	NIGHT	shift length = 1.00							Night from 1800 ends 07.30 2ndday	default	count 1=	10.00	9.5 (no backfill)					
NIGHT	Shift count	NIGHT	thu	fri	sat	sun	mon	tue	wed	ShiftC	Hours	FTE equiv	Shift Length	Wkly hrs	Night				
Night	INDIRECT	RN5											10.00	38.00					
Night	INDIRECT	RN4.3											10.00	38.00					
Night	INDIRECT	RN4.2											10.00	38.00					
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Night	DIRECT	RN1	3.00	3.00	3.00	3.00	3.00	3.00	3.00	21.00	210.00	5.53	10.00	38.00					
Night	DIRECT	RNHP											10.00	38.00					
Night	DIRECT	ENL2	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00					
Night	DIRECT	EN1	1.00	1.00	1.00	1.00	1.00	1.00	1.00	7.00	70.00	1.84	10.00	38.00					
Night	DIRECT	ENHP											10.00	38.00					
Night	DIRECT	spare											10.00	38.00					
Night	Night ShiftCount		7.00	7.00	8.00	8.00	8.00	8.00	7.00	53.00	530.00	13.95							
TOTAL	Total M-E-N shift Count		32.00	32.00	30.00	30.00	33.00	33.00	32.00	222.00									
	Wkly FTE Summary		thu	fri	sat	sun	mon												

Unit	Activity	thru	fr	sat	sun	mon	tue	wed	total	Occup%	Notes	
ENTER	ENTER budget open and Daily activities Open bed numbers											
	Must Complete this section											
	Budget BEDS/Staff	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0	100.0%	Type No Budgeted Beds for the Unit here	
	BEDS/Unit Staff OPEN	32.0	32.0	32.0	32.0	32.0	32.0	32.0	224.0		Type Nos beds staff operating per day	
	DAY/UNIT OPEN	1	1	1	1	1	1	1	7		Type 1=unit is open on the day, 0=2 not open	
	NHPPD										Fixed targets: FTEs	
	Direct Hours	214.00	214.00	214.00	214.00	214.00	214.00	214.00	1498.00	214.00	Direct FTE 38.42	
	Indirect Hours	55.20	55.20	41.60	41.60	65.20	65.20	55.20	378.20	54.17	Indirect FTE 9.98	
	NHPPD BRCT	6.89	6.89	6.89	6.89	6.89	6.89	6.89		6.688	Non prod FTE 8.23	
	NHPPD BRD	1.73	1.73	1.30	1.30	2.04	2.04	1.73		1.693	Prod FTE 49.40	
	Prod NHPPD	8.41	8.41	7.99	7.99	8.73	8.73	8.41		8.380	Total FTE 57.63	
	NONPROD NHPPD	1.40	1.40	1.40	1.40	1.40	1.40			1.396		
	VoSNHPPD Est										Daily \$ Cost	
	VoS NHPPD Direct \$	\$ 331	\$ 331	\$ 426	\$ 500	\$ 327	\$ 327	\$ 331	\$ 366		Dir \$ 11,710	
	VoS NHPPD Indirect \$	\$ 85	\$ 85	\$ 83	\$ 97	\$ 100	\$ 100	\$ 85	\$ 93		Ind \$ 2,984	
	VoS NHPPD PROD \$\$\$	\$ 410	\$ 410	\$ 512	\$ 597	\$ 427	\$ 427	\$ 410	\$ 459		NonProd \$ 76	
	VoSNHPPD NonProd\$\$\$	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 76	\$ 535	Prod \$ 10,674	
											Total \$ 14,750	
	Annual FTE POSITION class details:										Officer use only	
	Annual FTE: WEEKLY	Wk FTE	Wk	Day	Day	Day	Day	Backfill	Recruit	Premium	Estimate	Recruit
	FTE	Prod (p)	Annual L	PDL L	ManTrain	Perct	Super	Factor FTE	FTE	FTE	Annual FTE	FTE adjat
	INDIRECT RN5											
	INDIRECT RN4.3											
	INDIRECT RN4.2											
	INDIRECT RN4.1											
	INDIRECT RN3G2	1.053	0.061	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191	
	INDIRECT RN3G1	2.105	0.161	0.017	0.012	0.091	0.006	0.277	2.284	0.098	2.382	
	INDIRECT RN3CDN	1.000	0.038					0.038	1.038		1.038	
	INDIRECT RN2TL	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.085	2.165	
	INDIRECT RN2											
	INDIRECT RN1											
	INDIRECT EN2											
	INDIRECT EN1											
	INDIRECT AIN	4.000							4.000		4.000	
	DIRECT RN4NP											
	DIRECT RN3G2											
	DIRECT RN3G1											
	DIRECT RN2TL											
	DIRECT RN2	9.570	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.448	11.390	
	DIRECT RN1	15.842	2.127	0.130	0.087	0.608	0.043	2.995	18.099	0.758	18.837	
	DIRECT RN1P	4.421	0.594			0.170	0.061	0.824	5.015	0.230	5.245	
	DIRECT ENL2	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695	
	DIRECT EN1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.086	2.190	
	DIRECT EN1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496	
	DIRECT spare											
	Total FTE equiv	48.400	5.617	0.304	0.203	1.703	0.202	8.230	55.522	2.108	57.630	
	Estimate FTE by Classification											
	Annual FTE summary	Wkly	Wk	Day	Day	Day	Day	Backfill	Recruit	Pool in	Annual	Check
	Pro & Non Prod FTE	Prod	Annual L	PDL L	ManTrain	Perct	Other	FTE	FTE	FTE	FTE	Budget TM1
	RN	R5										
	RN	R4.3										
	RN	R4.2										
	RN	R4.2NP										
	RN	R4.1										
	RN	R3G2	1.053	0.061	0.009	0.006	0.040	0.003	0.138	1.142	0.049	1.191
	RN	R3G1	2.105	0.161	0.017	0.012	0.091	0.006	0.277	2.284	0.098	2.382
	RN	R3CDN	1.000	0.038					0.038	1.038		1.038
	RN	R2TL/S	1.821	0.244	0.015	0.010	0.070	0.005	0.344	2.080	0.085	2.165
	RN	RN2	9.570	1.286	0.079	0.052	0.367	0.026	1.811	10.944	0.448	11.390
	RN	R1	15.842	2.127	0.130	0.087	0.608	0.043	2.995	18.099	0.758	18.837
	RN	R1P	4.421	0.594			0.170	0.061	0.824	5.015	0.230	5.245
	EN	ENL2	4.789	0.643	0.039	0.026	0.184	0.013	0.905	5.472	0.223	5.695
	EN	ENL1	1.842	0.247	0.015	0.010	0.071	0.005	0.348	2.105	0.086	2.190
	EN	ENL1P	2.947	0.396			0.113	0.040	0.549	3.343	0.153	3.496
	AIN	AIN	4.000						4.000		4.000	
	Other	spare										
	FTE total	48.400	5.617	0.304	0.203	1.703	0.202	8.230	55.522	2.108	57.630	
	Notes:											
	Includes Stroke Liaison Nurse RN 3.1											
	Alignment to TM1 Budget 27/5/21											
	Added for Rates											
	Unit Summary											
	Prod FTE Sal Issac	FTE	\$									\$ 121,151.84
	Annual Leave FTE	5.82	\$	517,527								79%
	Prod Develop FTE	0.30	\$	28,598								18%
	Mandatory FTE	0.20	\$	19,065								2%
	Personal Leave FTE	1.70	\$	152,819								100%
	Other FTE	0.20	\$	16,483								
	Backfill/Relief Factor	2.11	\$	734,582								
	Recruit FTE	55.52	\$	4,857,885								
	Total EST Annual FTE	57.63	\$	5,046,353								
	Shift Penalty Cal		\$	1,042,883								
	PH loading 50% PH (Exclude M.F)		\$	121,152								
	Prod FTE (incl Pen)	49.40	\$	5,475,795								
	Est Daily \$\$ Cost Prod/Unit		\$	14,674								\$ 536
	APPROVED BY:											
	Comments:											
	Weekly prod FTE - the must have FTE											
	Projected FTE has been signed off? approved? Then, don't forget!											
	Please forward a copy of the template to NIMS Unit for updating of the Proct database											

Enter Budget Bed Numbers
Projects bed numbers open
day Unit open 5 or 7 day

Shift Count including AIN Staffing guide report										
Direct+AIN	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL	
Direct+AIN	Morn	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0	
Direct+AIN	Even	10.0	10.0	10.0	10.0	10.0	10.0	10.0	70.0	
Direct+AIN	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0	
Direct Total	Total	27.0	27.0	28.0	28.0	28.0	28.0	27.0	193.0	

Note: AIN hours are INDIRECT hours
ProAct Staffing DEMAND use this figure
Contact NIMS if Demand to exclude AIN count
See below shift count
NS&PD - Direct hours (AIN hours are NOT included)
Ratio NP AIN not included

Shift count Direct (not counting AIN)										
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL	
Direct	Morn	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0	
Direct	Even	9.0	9.0	9.0	9.0	9.0	9.0	9.0	63.0	
Direct	Night	7.0	7.0	7.0	7.0	7.0	7.0	7.0	49.0	
Direct Total	Total	25.0	25.0	25.0	25.0	25.0	25.0	25.0	175.0	

Note: ProAct system - Roster DEMAND Screen
Default screen
Demand Screen
Staffing guide set up

AIN shift count										
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL	
Direct	Morn	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0	
Direct	Even	1.0	1.0	1.0	1.0	1.0	1.0	1.0	7.0	
Direct	Night			1.0	1.0	1.0	1.0		4.0	
Direct Total	Total	2.0	2.0	3.0	3.0	3.0	3.0	2.0	18.0	

Attention: The Template projects: the number of staffing requirement for each shift

This figure must be accurate and signed off as the Budget plan for this year.

Shift Count INDIRECT (include AIN)										
INDIRECT	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL	
Indirect	Morn	5.0	5.0	2.0	2.0	5.0	5.0	5.0	29.0	
Indirect	Even	2.0	2.0	2.0	2.0	2.0	2.0	2.0	14.0	
Indirect	Night			1.0	1.0	1.0	1.0		4.0	
Indirect Total	Total	7.0	7.0	5.0	5.0	8.0	8.0	7.0	47.0	

Note: Update notes are available.

Total shift count										
Total	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	TOTAL	
Total	Morn	14.0	14.0	11.0	11.0	14.0	14.0	14.0	62.0	
Total	Even	11.0	11.0	11.0	11.0	11.0	11.0	11.0	77.0	
Total	Night	7.0	7.0	8.0	8.0	8.0	8.0	7.0	53.0	
Total	Total	32.0	32.0	30.0	30.0	33.0	33.0	32.0	222.0	

Patient Ratio (AIN excluded)										
Direct	Shift	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Avg/day	Bed occupy
Direct	Morn	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Even	3.6	3.6	3.6	3.6	3.6	3.6	3.6	3.6	32
Direct	Night	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	32
Direct PUN Ratio av DAY		4	4	4	4	4	4	4	4	32

Note: Nurse /Patient Ratio based on Full occupancy

check:	Weekly	Wkly Prod	Wkly Annual L	Day PDL L	Day MonTrain	Day PerAL	Day Other	Backfill FTE	Recruit FTE	Pool in FTE	Annual FTE
FTE total	49.40	5.82	0.30	0.20	1.70	0.20	8.23	55.52	2.11	57.63	
38 wkly Hour	1,877.20	221.05	11.57	7.71	64.71	7.69	312.74	2,109.82	80.12	2,189.94	
Count	Shift	Estimate number of shifts per week / 5 shift count / FTE									
7.60	Stand shift	247.0	29.1	1.5	1.0	8.5	1.0	41.1	277.6	10.5	288.1

Unit	PA
Agri&Ag	000000
Child Care	000000
Community Dev	000000
Developmental	000000
Disability	000000
Education	000000
Health	000000
Homeless	000000
Human Resources	000000
Information Systems	000000
Intergovernmental	000000
International	000000
Legal	000000
Library	000000
Management	000000
Marketing	000000
Media	000000
Non-Profit	000000
Other	000000
Public Works	000000
Real Estate	000000
Research	000000
Security	000000
Small Business	000000
Special Services	000000
State	000000
Union	000000
Unemployment	000000
Veterans	000000
Welfare	000000
Workforce	000000
Writing	000000

The NIMS Template is used to estimate the Annual Nursing FTE requirements for the unit.

Who is Manager/ Worksheet

Data entry Only use for active units to enter the number of shifts required

Unit Data Enter the following information on the worksheet

- Division: Enter the Service type
- N Manager: Enter the Name of NIM preparing the estimate - NIM
- Unit: Enter the name of the Unit
- Appn: Enter the Appn code - salary code/centre
- costcentre: Enter the Correct Cost Centre
- Bed open and Day open dates - data will be populated into these two fields.

Save the instructions:

Save the file immediately after you have entered Unit data using the following preferred file name
 [yourname] [costcentre] [unitname] 2021 14 TCH NIMS FTE template [initials] [VF]

Data Entry Enter the shift count between Thu - Wed columns

Shift count is based on the standard shift length of 8-8-10
 Shift length box is set up to calculate the Shift count per shift based on the current standard shift length
 Min shift standard shift length is: 8 hours 7 items start
 Max shift standard shift length is: 10 hours 12 00 pm start
 Night shift standard shift length is: 10 hours 9 00pm start
 If your contains 12hr shift / 10 hr shift, use the appropriate shift count guidelines
 Note: 12hr shift - place Day 12h in item cell place Night 72h in Night cell

Using the active cells highlighted in colour -
 enter the Equivalent no of shift counts required for each classification
 use separate template for each sub-group if a separate ROSTER is required (Proact systems)
 For example: Postnatal ward and labour program requires separate rosters

Use a separate template to calculate the shiftcount requirements for subgroups under care unit centre
 add the shift count data together in a separate template for calculation of total FTE

Annual FTE Estimate section: NIMS Factor calculation section

Backfill/Relief Factor calculation set up:
 Escalative Database - adjustment of relief Factor reference in Column U,V,W,X,Y,Z (starting in row 120)

- check the No. of annual leave weeks - 4, 5, 6, or 7
- check the No. of days required for Personal leave provision - backfill factor stands at 14 days
- check the No. of days required for PDU/education provision & PPT provision - default 3 days
- check the No. of days required for Mandatory Training - default 2 days

Check the No. of Other days required for Other relief type - mainly for Graduate program eg Department/Program Dep

The number entered in the Backfill Relief Factor active cell would automatically be calculated to determine the weekly FTE requirements to complete a unit under the weekly Annual Leave provision for the unit / determine the Backfill FTE
 the estimate relief factor - for backfilling of unoccupied leave
 the estimate Escalative / PDU liability
 these fields combined formula that will calculate the Backfill/Relief component that form the Annual FTE requirement

check annual leave requirement for Non Leave week factor

Non-Full time shift workers +PH off	annual Leave entitlement	4
Non-Full time shift workers +PH off + sick leave	annual Leave entitlement	5
Shift workers +PH off + no sick leave	annual Leave entitlement	5
Shift workers + sick leave +PH off	annual Leave entitlement	6
Shift workers +PH + sick leave	annual Leave entitlement	7

Note: standard One PH, One sick leave rule

Use worksheet will automatically calculate the annual FTE requirements once the correct shift count numbers are entered

Best Unit estimate: per day for hospital/ day profile/ no. utilization based calculations / no. of staff working in the unit

Enter the UNDETERMINED best number / units in the way
 Enter the number of projected beds available (PDB) for each day
 For example, in some areas, the unoccupied beds may be reduced at the week ends
 Enter the day (equivalent to 1) that the unit is opened - ie day open count
 If the Units closed on Sat and Sun, then do not enter the figure [1] on the cell
 the data must be entered accurately as it is information it requires to calculate the
 Nursing Hours per patient days is based on the average hours provided for the operational bed numbers & % bed Occup

Direct Nursing Hours Per Patient Day / Unit of Service estimate/ Proact system

The Template is set up with formula to clearly identify the estimated Direct FTE (direct patient care) hours required for the unit
 Estimated indirect FTE hours (staff involved in the Unit but not directly taking on patient care load)

Check Agreed MRPD for units included in the Reasonable workload program

Unit of Service/Day/average \$ cost

The template provides an estimate of Unit of Service cost estimate per patient hours provided.
 Note: Average Hour rate is calculated based on the total hours required to the unit (including unit position)
 this is an estimate of the hourly rate based on the commission of staff rate required for the unit
 NIMS calculate the average Daily \$ cost - it gives an estimate of the \$Daily cost required to run the unit

Indirect nursing hours

calculated automatically to identify the nursing hours provided not directly related to individual patient care
 for example - Clinical Nurse consultant, CN, Supervisory (team leader) not providing direct individual patient care

Annual FTE Estimate by Case Details:

When the shift counts have been entered into the worksheet, all the calculations will be done automatically to provide details of FTE estimate
 the determined staffing requirement to staff the unit on an average weekly basis (non-Tue-Wed)
 the determined annual leave FTE that can be released & estimate Backfill/Relief component factor
 the determined PDU leave component
 the determined Mandatory training hours component to estimate the backfill/RELIEF post component
 the determined personal leave & backfill/RELIEF post component

The Case details can then be compared with the current FTE eq of staff employed in the Unit.

Space for notes and other comments that may affect the estimate

Use this space to record specific anomalies / variances that may occur throughout the budget period.

FTE Dollar calculation

The template include the basic \$ cost based on the hourly rate and shift penalty rate eq.

- Project shift penalty for every shift count
- Project PWP penalty 50% loading
- Essential Work time (variable cost)
- Project on call / short call hours payable for employee call allowances
- Projected hours payable for responsibility allowance

For further details or explanation on the use of template, please contact Chin Wong K 424 08
 This template is not to be reproduced without permission.

NIMS Template for NIM Meeting is available for consultation of other employees (standardized) individual unit/total FTE, please contact Chin Wong K request.

Shift count calculation based on 8x8-10 profile

AM Shift	default hour	8
Standard hr	shift hr	shift count
8	8	0.50
8	8	0.63
8	8	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50
8	7.6	0.95 No ADO

PM Shift

Standard hr	shift hr	shift count
8	8	0.50
8	8	0.63
8	8	0.75
8	7	0.88
8	8	1.00
8	9	1.13
8	10	1.25
8	12	1.50

Night Duty

The default shift hour: 10

Standard hr	shift hr	shift count
10	10	1.00
10	12	1.20
10	8	0.50
10	9.5	0.95

12 hour shift

Start
 0700-1800 base penalty - 12hr shift hours
 after 1800 22.5% penalty - night shift hours
 Even start
 1200-1800 Even 12.5% - Even shift hours
 after 1800 22.5% penalty - night shift hours
 Night
 1600 start till 0730
 22.5% penalty - night shift hours
 Beyond 0730 revert base penalty

From: Bransgrove, Meagen
Sent: Tuesday, 20 September 2022 5:01 PM
To: ACT Health DLO
Subject: RE: URGENT : GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital

Importance: High

Follow Up Flag: Follow up
Flag Status: Completed

Categories: Tara - awaiting advice

Thanks Tara, I need an urgent check on response to i. by email please:
 Maternity Units total appears as 34, but the sub-units do not add up to 34 and I cannot work out where the other 8 beds come from?

Maternity Units	34
3S Maternity	18
Birth Suite	6
Birth Centre	2

From: Gower, Tara (Health) <Tara.Gower@act.gov.au> **On Behalf Of** ACT Health DLO
Sent: Tuesday, 20 September 2022 11:37 AM
To: Bransgrove, Meagen <Meagen.Bransgrove@act.gov.au>
Subject: URGENT : GBC22/367 - QON 833 - breakdown of all wards at the (a) Canberra Hospital and (b) Calvary Public Hospital

OFFICIAL

Hi Meg

The revised QON response is back in your folder [here](#).

Please note Attachment B is now obsolete. The response **expired on 10 July 2022**.

Thank you
 Tara

Tara Gower | A/g Directorate Liaison Officer | ACT Health Directorate

Mob: [REDACTED] | Email: ACTHealthDLO@act.gov.au

Office of Rachel Stephen-Smith | Minister for Health

Office of Emma Davidson | Minister for Mental Health

Level 2, Legislative Assembly Building, Civic Square

