



ACT
Government
Health



Dear 

Freedom of Information (FOI) Request

I refer to your application received by ACT Health on 20 July 2018 in which you sought access to information under the *Freedom of Information Act 2016* (the FOI Act).

In your application you have requested a full copy of the report by Ms Jennifer Bennett from Spring Green Consulting entitled 'form and function review of ACT Health'.

As Interim Director-General I am an Information Officer able to deal with access applications made under Part 5 of the Act.

ACT Health is required to provide a decision on your access application by 17 August 2018.

Decision on access

I have decided to grant access, in full, to the document requested.

Charges

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

Online publishing – disclosure log

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 Your personal contact details will not be published.

You may view the ACT Health's disclosure log at <http://www.health.act.gov.au/public-information/consumers/freedom-information/disclosure-log>.

Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health'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: ombudsman@ombudsman.gov.au

ACT Civil and Administrative Tribunal (ACAT) review

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

Further information may be obtained from the ACAT at:

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

If you have any queries concerning the Directorate's processing of your request, or would like further information, please contact the Freedom of Information Coordinator on 6205 1340.

Yours sincerely



Michael De'Ath
Interim Director-General

16 August 2018



ACT Health
Form and Function Review and Recommendations
5 June 2018

ACT Health needs stability and strategic clarity

ACT Health needs clear functions and an organisational design that facilitates and enables:

- effective delivery of safe, quality, accessible and consistent health services
- health strategy and service planning to respond to changing needs of community
- proactive and broad health prevention and health promotion to decrease demand for acute services
- transparent accountabilities and patterns of information flow and governance
- engagement with patients and consumers in the health strategy and planning
- smooth transition to two organisations on 1 October

ACT Health current organisation model is unstable

Analysis of the current organisational model and findings from interviews has confirmed the following insights:

	People	Organisation	Transparency	Accountability	Governance
Observation	<ul style="list-style-type: none"> High proportion of officers in acting and temporary positions High turnover of senior staff Delays, and difficulties, in recruitment of clinical staff Significant resource stress in some areas 	<ul style="list-style-type: none"> Successive organisational models have been developed, however, none have been followed through to implementation over the last 12 months 	<ul style="list-style-type: none"> Lack of diversity of skills and experience, lack of trusted data and Staff engagement on changes has been limited and perceived to be after decisions have been made 	<ul style="list-style-type: none"> Accountability for policy held in several areas with lack of clarity of primacy and responsibility CHHS lacks leverage and accountability over support services that enable clinical outcomes such as those within the Business Support area or HR, finance, data and procurement 	<ul style="list-style-type: none"> Lack of clarity around Statutory roles Governance structures have not kept pace with the organisational re-structures and now do not reflect current roles or responsibilities
Outcome	Leading to under-resourced, inconsistent and unstable policy and leadership positions	Prolonged periods of instability that results in accountability shifting	Perceived lack of transparency of decision-making leading to suspicion and lack of confidence in decision-making	Difficult for clinical managers to access support to enable effective and efficient clinical delivery	Elevated organisational risk and lack of formalised decision-making leading to more challenging health service delivery and sustainability

Requirements and principles of interim structure

Requirements

The new organisational structure needs to:

- Clarify accountability and governance
- Stabilise roles and responsibilities
- Facilitate design and communication of strategy
- Allow implementation and evaluation
- Facilitate organisational agility
- Facilitate staff being able to bring feedback and be respected
- Resilience and sustainability
- Clarify statutory roles across the organisation and ensure appropriate accountability and resourcing
- Prepare for transition on 1 October – focus on Directorate with CHHS to remain largely stable in preparation for CEO.

Principles

The principles that this form and function review has observed are:

- Enable delivery of high quality, consistent, accessible health care
- Promote evidence-based decision making
- Promote appropriate distribution of accountabilities and patterns of governance
- To have equitable responsibilities across executive leadership
- Minimise disruption to organisational structures by keeping teams together where possible
- Lay foundations for strong governance and accountability in preparation for transition to two separate entities

Form and Function relationship with Transition

Form and Function

Streamline and define corporate accountabilities

Identify functions, processes and responsibilities facilitates process improvement prior to transition

Prepare teams to operate in more defined and separated manner prior to 1 Oct

Transition Project

Clear corporate accountabilities will support the separation to two organisations

Transition will require clean, efficient processes to allocate between strategic and operational entities

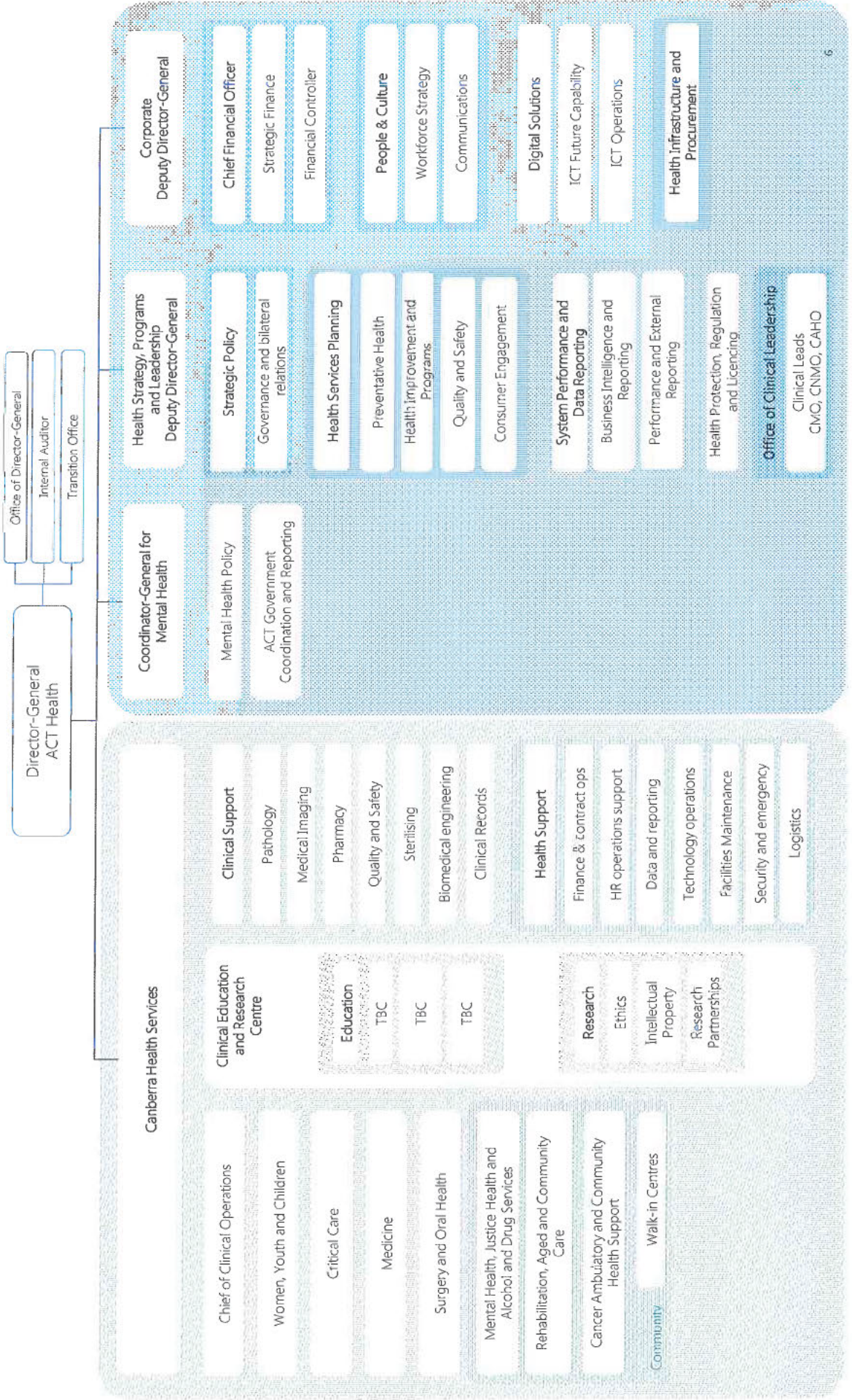
Facilitate smooth transition by bringing operating as two entities into organisational structures prior to 1 Oct

Strong engagement and feedback from staff

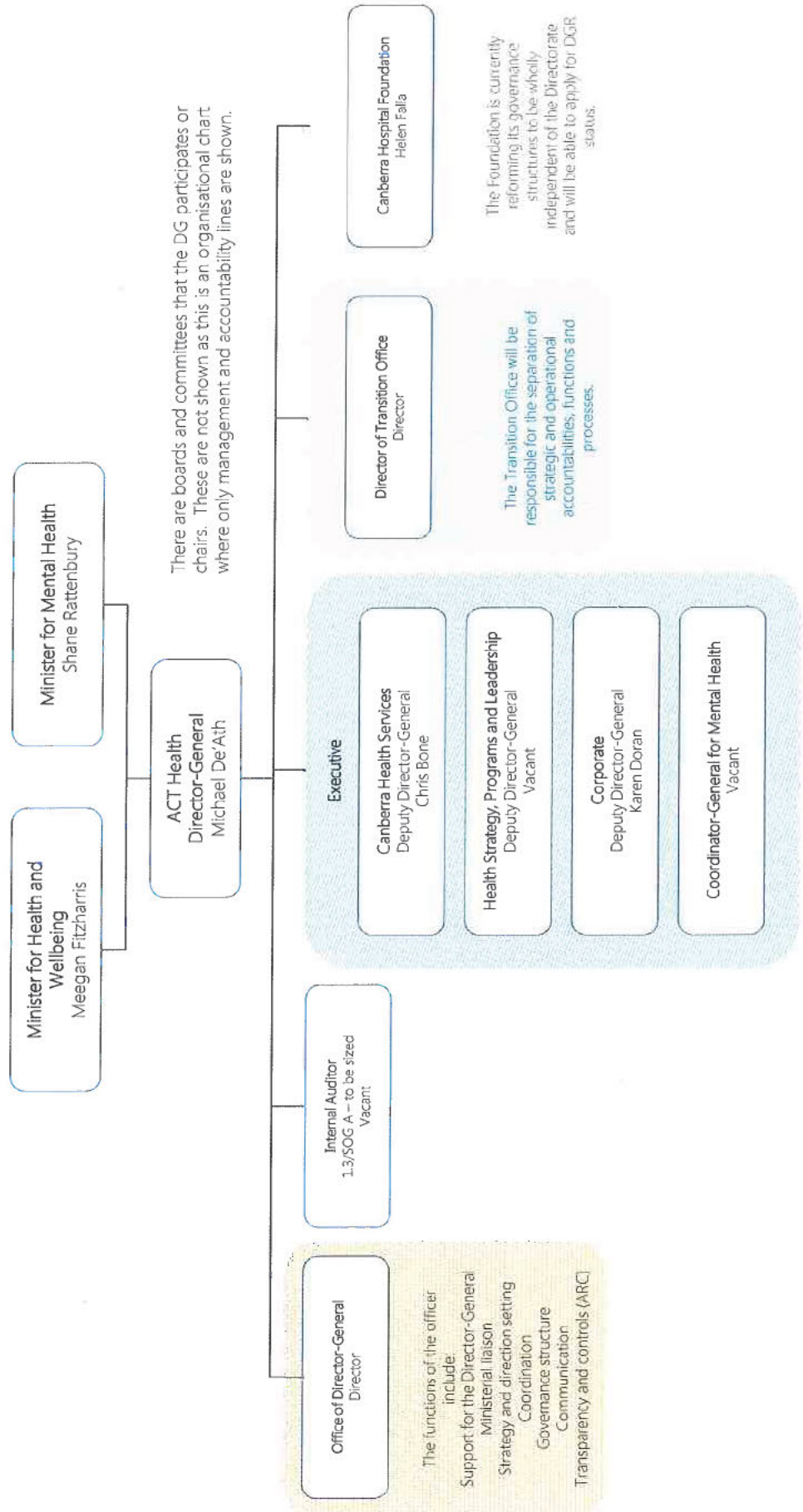
Staff of ACT Health were keen to be engaged in the discussions and consultations for the Form and Function Project. Many managers extended the invitation to their teams which enabled greater reach and broader discussions across the organisation. There are eight key themes that emerged from these discussions which informed revision of the principles and also contributed to elements of the functional design.

To be heard and respected	Stability	Strategy	Simplicity
<p>There is a strong desire to acknowledge the strength in the diversity of voices and skills of the entirety of the health workforce. We cannot operate the system as one individual, we need to work together and acknowledge each person's skill and contribution to the sound functioning of an integrated, safe and consistent health care service.</p>	<p>There have been a number of short term positions and a high turnover of staffing some areas leading to instability and confused accountabilities.</p> <p>A stable and resilient structure facilitates clear roles and responsibilities that in turn enables collaboration and innovation.</p> <p>A new organisational structure will create some short term disruption. This will be minimised by moving teams of people together wherever possible, thereby reducing the scale of disruption to changes in reporting lines, not roles.</p>	<p>We need to have a clear, articulated strategy across short, medium and long term objectives supported by a clear performance framework. A clear strategy will deliver clarity of direction, enable prioritisation and appropriately levels of engagement and consultation with internal and external stakeholders, including community representatives. An organisational form can support the creation of capacity to be responsible for health strategy and planning, design of performance frameworks and evaluation and organisational policy development.</p>	<p>The current form of ACT Health has a wide separation of duties and a complex organisational structure where some responsibilities are spread over multiple divisions within the Directorate – for example policy responsibilities are held in multiple areas with a lack of coordination and governance discipline.</p>
Transparency in decision making	Implementation discipline	Sustainability	Transition
<p>We need to engage a diversity of skills, experience and data to contribute to major decisions.</p> <p>Decisions need a place to reside within the system of governance and accountability.</p> <p>Governance committees need clear terms of reference, diversity of membership and communication protocols.</p>	<p>Many ideas for improvement and change have not found fertile ground to grow.</p> <p>Other ideas have been implemented without data or engagement with staff.</p> <p>Good ideas need a place to be objectively considered, prioritised and planned.</p>	<p>One of the key messages during Form and Function is that ACT Health is operating on the edge of sustainable organisational practices and eroding human capacity and endurance through poor transparency of decisions and lack of support.</p>	<p>Over the course of transition, ACT health will be working towards separating into two organisations with specific responsibilities and accountabilities.</p>

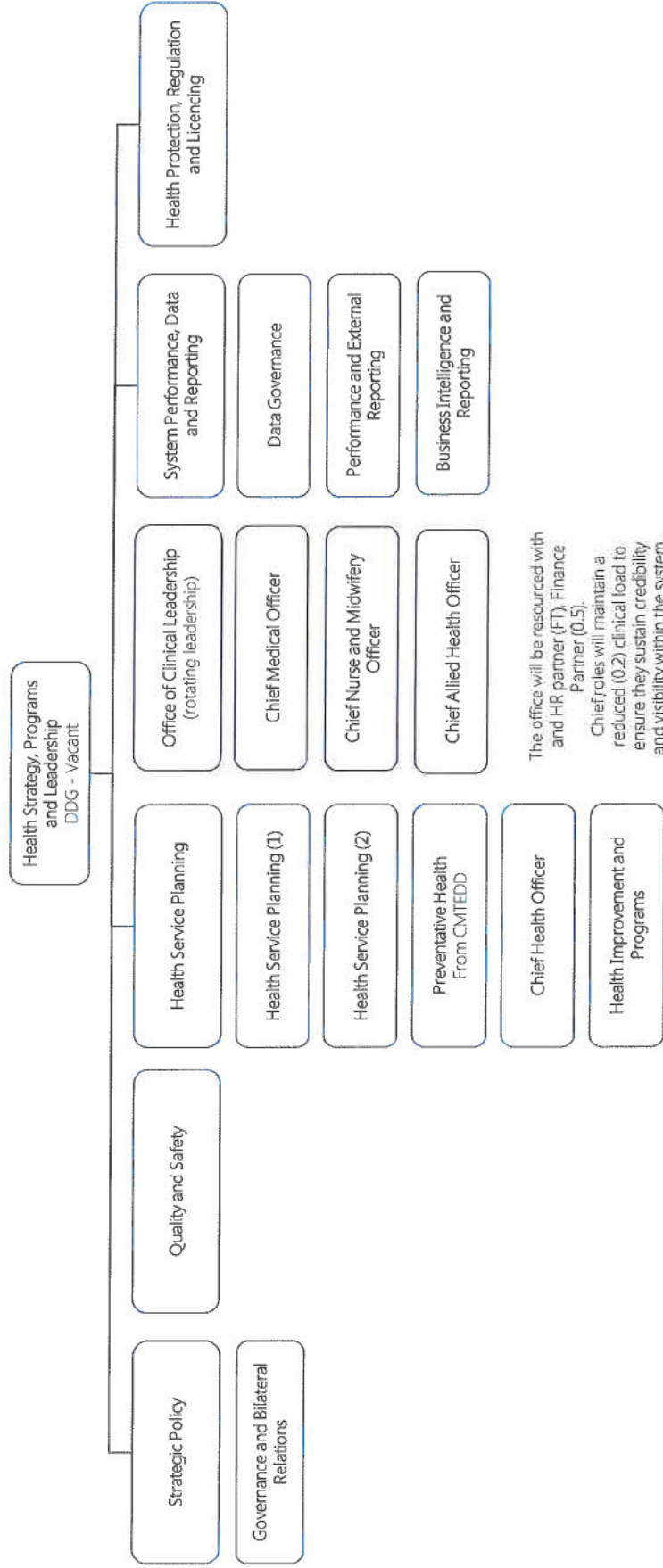
Proposed ACT Health functional design



Director-General's Office

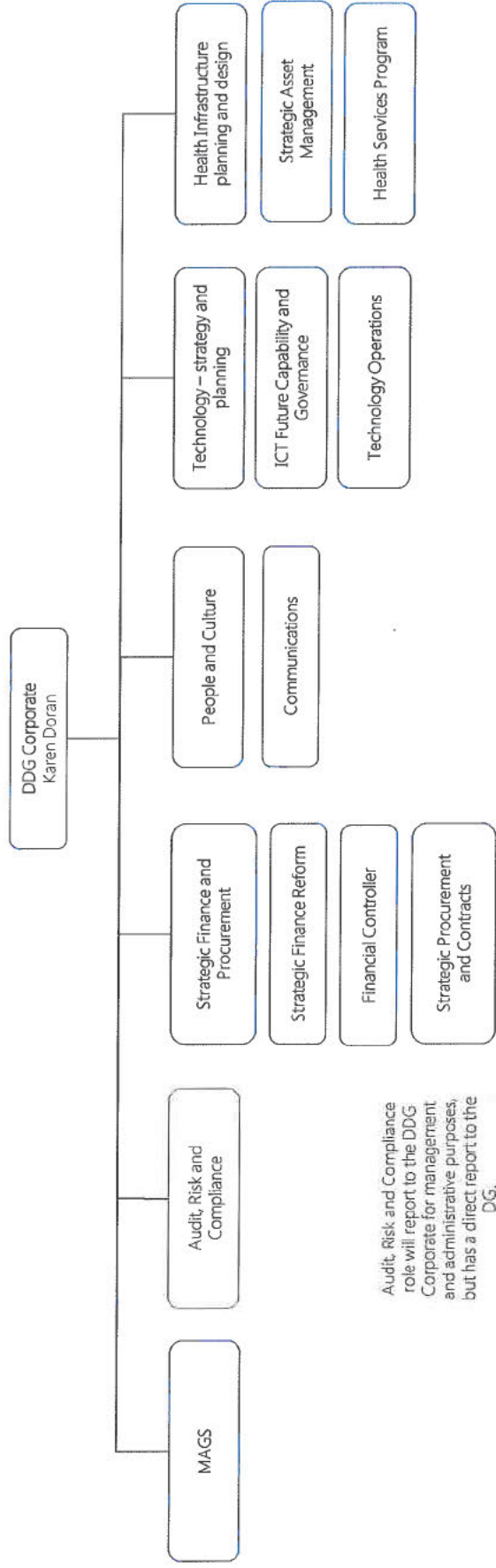


Health Strategy, Programs and Clinical Leadership Executive



Change in reporting line	New roles	Changed roles
Preventative Health to move from CMTEDD to Health	ED – Health Service Planning	DDG Performance, Reporting and Data abolished
CHO reporting through Health Service Planning	ED – System Performance, Data and Reporting	D - Data Governance
		Systems Innovation Group - abolished

Corporate Executive Structure

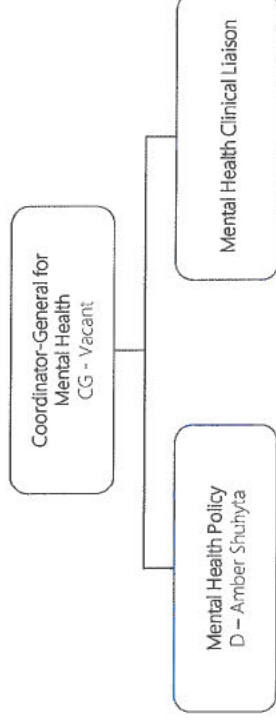


Change in reporting line	New roles	Changed roles
MAGS moves from reporting into DDG Innovation	Addition of Strategic Procurement and Contracts role	DDG Innovation abolished
Audit moves from reporting to DDG Quality, Governance and Risk		DDG Quality, Governance and Risk abolished
Communications moves from reporting to DDG Innovation		

Coordinator-General for Mental Health

The functions within the Office of the Coordinator-General for Mental Health may include:

- Mental health strategic policy
- Cross-government coordination for mental health program needs and delivery
- Formal policy and framework evaluation
- Inter-jurisdictional collaboration on innovative policy
- ACT government reporting on mental health
- Clinical liaison and support



Office of Clinical Leadership

