



ACT
Government

**Canberra Health
Services**

Ref FOI18-105



Dear 

Freedom of Information Request – FOI18-105

I refer to your revised application received by Canberra Health Services on 15 January 2019 in which you sought access to information under the *Freedom of Information Act 2016* (the FOI Act).

In your application you have requested:

“ (1) Tier 1 work health and safety reports, for the period 1 July 2017 – 30 June 2018, held or created by ACT Health.

(2) Workplace safety reports and/or briefings to the in relation to bullying and harassment for the past year”.

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

Canberra Health Services is required to provide a decision on your access application by 13 February 2019.

Decision on access

Searches were completed for relevant documents and 10 documents were identified that fall within the scope of your request.

I have included as Attachment A to this decision the schedule of relevant documents. This provides a description of each document that falls within the scope of your request and the access decision for each of those documents.

I have decided to grant full access to 7 documents. I have decided to grant partial access to 3 documents, with deletions applied to information that is outside the scope of your request.

Charges

I have decided that processing charges be waived in accordance with section 107 of the FOI Act.

Online publishing – disclosure log

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 Your personal contact details will not be published.

Ombudsman review

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

ACT Civil and Administrative Tribunal (ACAT) review

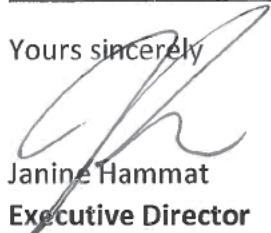
Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision.

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 ACT Health's processing of your request, or would like further information, please contact the FOI Coordinator on 6205 1340 or email HealthFOI@act.gov.au.

Yours sincerely



Janine Hammat
Executive Director
People and culture

4 February 2019

FREEDOM OF INFORMATION REQUEST SCHEDULE

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

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

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

NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	File No
[REDACTED]	(1) Tier 1 work health and safety reports, for the period 1 July 2017 – 30 June 2018, held or created by ACT Health. (2) Workplace safety reports and/or briefings to the executive in relation to bullying or harassment for the past past year.	FOI18-105

Ref No	No of Folios	Description	Date	Status	Reason for non-release or deferral	Open Access release status
1.	1-9	Director-General Minute – ACT Health Employee Advocacy model and addressing allegations of bullying and harassment	06/09/2018	Full release		Yes
2.	10-19	Director-General Minute – Fortnightly Reporting: Preliminary Assessments and staff complaints	08/10/2018	Partial release	Information not within the scope of the request.	Yes
3.	19-35	Email from Janine Hammat to Bernadette McDonald and Michael De'Ath. Including Attachment: Preliminary Assessment and	23/11/2018	Partial release	Information not within the scope of the request.	Yes

		Investigation Reports for September & October 2018				
4.	36-63	Brief to Chief executive Officer Canberra Health Services – Support Respectful Behaviours		Full release		Yes
5.	64-71	Preliminary Assessment and Investigation Report - November	01/11/2018 – 30/11/2018	Partial release	Information not within the scope of the request.	Yes
6.	72-85	Tier 1 Work Health and Safety Committee – Work Health and Safety Report	1/4/18-30/6/18	Full release		Yes
7.	86-101	Tier 1 Work Health and Safety Committee – Work Health and Safety Report	01/01/2017 – 30/04/2018	Full release		Yes
8.	102-116	Tier 1 Work Health and Safety Committee – Work Health and Safety Report	01/01/2017 – 31/01/2018	Full release		Yes
9.	117-132	Tier 1 Work Health and Safety Committee – Work Health and Safety Report	01/01/2016 – 31/10/2017	Full release		Yes
10.	133-149	HSEC Submission – Supporting Respectful Behaviours	26/11/2018	Full release		Yes
Total No of Docs						
10						



DIRECTOR-GENERAL MINUTE

TRIM Reference No. _____

SUBJECT:	ACT Health Employee Advocacy model and addressing allegations of bullying and harassment
From:	<i>Karen Doran, Deputy Director-General, Corporate</i>
Through:	<i>Janine Hammat, Executive Director, People and Culture</i>
Critical Date:	<i>7 September 2018</i>
Reason:	<i>Information from this minute is required to finalise advice to Minister for Health and Wellbeing regarding Bullying in ACT Health, which is due for completion and submission 10 September 2018</i>

Recommendations

That you:

Agree to the proposed Employee Advocacy model, inclusive of: <ul style="list-style-type: none"> ▪ The funding and appointment of a SOGA/B Employee Advocate; ▪ Modification of the existing Preliminary Assessment process for bullying matters, prioritising early intervention and alternative dispute mechanisms; ▪ The funding and appointment of a temporary SOGB Senior Advisor - Preliminary Assessments; 	AGREED NOT AGREED PLEASE DISCUSS
Agree to seek GSO advice on the role of the ACT Health Services Commissioner; and	AGREED NOT AGREED PLEASE DISCUSS
Agree to the commencement of discussions with the ACT Public Sector Standards Commissioner.	AGREED NOT AGREED PLEASE DISCUSS

*Excellent briefing!
 Thank you for your
 work on this.*

.....

 Michael De'Ath
 Interim Director-General
 ACT Health

6 September 2018



DIRECTOR-GENERAL MINUTE

Purpose

To propose an alternative model to resolving complaints and allegations of bullying and harassment, with a focus on expedient alternate dispute resolution.

Background and Issues

This minute proposes an approach to bullying and harassment allegations that places an emphasis on alternate dispute resolution.

Currently prescribed ACT Government processes, while anticipating the use of alternative dispute resolution mechanisms, can lead to an overly adversarial approach to complaints management and an emphasis on investigation. The complaints management approach is focused on establishing if misconduct has occurred and is not geared towards early intervention or the resolution of the issue itself.

While there are well-established processes, frameworks, and a network of Respect Equity and Diversity Contact Officers (REDCO's), these positions are intended to promote values and provide information, rather than actively assist in the resolution of matters:

*"REDCOs model and promote the ACTPS Values and Signature Behaviours to develop positive work cultures across the ACTPS. REDCOs provide information to staff seeking a solution to improve or resolve a workplace issue or situation, which may relate to inappropriate behaviour or misconduct."*¹

Existing staffing models within People and Culture, and ACT Health more broadly, focus resources on formal processes, and line managers will often seek assistance at a point where the matter has become largely intractable.

Where complaints result in investigations, both complainants and the respondents lose agency over the process, which by its nature results in findings of fact rather than a resolution to the satisfaction of all parties.

Where matters are handled through an investigation, for privacy reasons complainants are not advised of the outcome, only that the matter is finalised. This often compounds the feeling of disempowerment, or the feeling that the matter may not have been taken seriously.

Some staff, through various channels including their unions, have advised that they do not always trust the channels currently available to report an issue, those being predominantly their manager or the HR area.

This minute proposes a number of short and medium term strategies and actions to shift the focus to early intervention and alternative dispute resolution, and with the intention to recast existing frameworks in a way that results in a more connected approach to employee behavior and positive workplace culture, including:

- a. The introduction of an Employee Advocate function;
- b. Modifying existing Preliminary Assessment process for bullying and interpersonal disputes to

¹ 'Role of a REDCO', *GUIDELINES FOR ACT PUBLIC SERVICE RESPECT, EQUITY AND DIVERSITY CONTACT OFFICERS (REDCOS)*, ACT Government (2015):
https://www.cmtedd.act.gov.au/_data/assets/pdf_file/0005/824477/REDCO-Guidelines.pdf



DIRECTOR-GENERAL MINUTE

- i. prioritise early intervention and alternative dispute mechanisms, including;
 - ii. introduction of a Preliminary Assessment Advisor position and rapid access to resources for the purposes of mediation and dispute resolution; and
 - iii. Regular reporting to the Interim DG on the turnaround times for PA's and transparency of this information.
- c. Utilising the REDCO network to assist with the introduction of a. and b.;
 - d. An external and trusted avenue for employees of ACT Health on bullying matters;
 - e. The implementation of recommendations from the Auditor General;
 - f. The production of documents and materials to better explain complaints and other related processes to employees and managers; and
 - g. Post-transition People and Culture structure

Proposed approach

A. Employee Advocate

While the role of the REDCOs are recognised as critical in the promulgation of ACTPS Values and Signature Behaviors, these positions are limited to *"provide information to staff."* This limitation is sensible in context of the voluntary nature of the positions.

Whether founded or otherwise, some employees have expressed a reluctance to raise concerns with their line managers or with the Employee Relations function.

For the aforementioned reasons, it is therefore proposed that ACT Health introduce an Employee Advocate position, which plays an active role in providing advice, support, and active involvement in ADR processes aimed to resolve bullying and interpersonal matters to the satisfaction of all parties.

The role would be available for employees to access directly to raise issues and concerns. The Advocate would need to be seen as independent of the influence of managers and Employee Relations but would need work closely with them to ensure due process and the appropriate resolution of issues. It is likely that for a candidate to be viewed as independent they would not come from current management or employee relations areas within ACT Health.

The Advocate would be able to advise employees of the options available to them, the benefits of early resolution, and what a complaints process would entail. The Advocate would be able to directly refer cases to the appropriate avenue for further assessment or action and would provide advice regarding culture strategy in the organization.

To ensure that the Advocate is able to access ADR resources quickly and efficiently, a list/panel of preferred mediators to assist in any immediate need will need to be compiled. The cost of mediators is borne by the business unit within which the issue resides.

This proposed approach is focussed on positive outcomes for employees but is not without risk, however these risks can be appropriately mitigated. A table of risks and related mitigation strategies is at Attachment A.



DIRECTOR-GENERAL MINUTE

B. Modifying existing Preliminary Assessment process

The current enterprise agreement provisions, government-wide guidance material, and ACT Health's Preliminary Assessment training module all support the view that a Preliminary Assessment is intended to be an expedient means of gathering enough information in order to decide the most relevant course of management action required.

By way of example, the *Workplace Behaviors Toolkit* states:

"A preliminary assessment is not a formal investigation; it is an expedient means of determining if, and how, to proceed. The assessment should be conducted as soon as possible, be as short as is practical and should cease as soon as it becomes evident how best to handle the issue."

ACT Government Enterprise Agreements articulate six potential outcomes from a Preliminary Assessment, including "other remedial action", which has been read to include mediation, facilitated discussions, or any other alternate dispute resolution mechanisms.

Existing ACT Health Preliminary Assessment forms could provide the reader with the impression that equal weight should be given to all avenues in such circumstances, and have likely led to a more exhaustive process than initially intended.

It is proposed that the existing Preliminary Assessment forms be reviewed, and that for matters of alleged bullying or other interpersonal disagreements, the manager/supervisor or Employee Advocate must advise prior to completing relevant Preliminary Assessment forms:

- a) whether alternative dispute resolution (ADR) mechanisms have been attempted, and what the outcome was; or
- b) why ADR mechanisms were not appropriate in the circumstances.

As this proposal represents an addition to, rather than a replacement of, the Preliminary Assessment process, it is consistent with the existing enterprise agreements.

There are existing workload pressures within the Employee Services team. With the aforementioned approach being promulgated amongst employees of ACT Health, there will be an immediate and pressing need to assist line managers in undertaking expedient Preliminary Assessments (PA).

It is proposed that a temporary position is created at a SOGB level, reporting to the Senior Manager, Employee Services. This position would not be required post new structures in ACT Health after full transition has occurred, if an adequately resourced business partnership model is introduced.

The proposed role would have focus to complete PA's within a short timeframe (within a maximum of 2-3 working days), to ensure that those matters where ADR mechanisms either have not worked, are unlikely to, or are inappropriate in the context of more serious matters.

In the aforementioned contexts, an expedient PA to ensure a timely investigation referral, will result in a speedier resolution for the more intractable or serious matters.



DIRECTOR-GENERAL MINUTE

The Interim DG has initiated a regular report to him from People and Culture on the numbers of current Preliminary Assessments and the time it takes to resolve them. He will ensure the continuous improvement and transparency of this information.

C. Utilising the REDCO network to assist with the launch and sustainability of the program

It is proposed that the existing REDCO network could be utilised to communicate and promote the new approach to resolving bullying matters, consistent with their remit to “provide information to staff” on respect, equity and diversity matters.

Given the voluntary nature of these positions, the only costs required to utilize existing staff is on time release for further training/workshops, and the Organisational Development team.

D. External avenue for raising complaint

Important to the success of this program is a high level of trust from ACT Health employees, that their matter will be resolved with fairness and without bias.

To assist in building trust, ACT Health employees will be provided with an external avenue to raise a complaint, or concern that a complaint has not been managed appropriately.

There have been discussions between the Interim Director-General and the ACT Health Services Complaints Commissioner who has agreed that she could assist through providing this independent external avenue.

It is proposed that the Commissioner will utilize her current powers and mechanisms for notifying ACT Health to fulfill this important role. To ensure that there are no legal impediments to this it is recommended that ACT Health receive advice from the Government Solicitors Office.

An alternate avenue for an external, independent, statutory office holder with clear legislative responsibilities in this area, is the ACT Public Sector Standards Commissioner.

Section 144 of the *Public Sector Management Act 2009* articulates the role of the Commissioner as:

(1) The commissioner has the following functions:

(a) to conduct investigations—

(i) about a matter declared by the Chief Minister in the way prescribed; and

(ii) under an industrial instrument in accordance with subsection (2);

(b) to provide advice to the Chief Minister about matters arising from an investigation conducted by the commissioner;

(c) in connection with an investigation conducted by the commissioner—to promote and provide advice about the public sector values, the public sector principles and the conduct required under this Act;

As there is a clearer legislative power, it is proposed that the ACT Public Sector Standards Commissioner be approached to discuss their potential role in this program, as a direct employee avenue for bullying matters, as well.



DIRECTOR-GENERAL MINUTE

E. Auditor General's Report no. 9 of 2018

ACT Health has accepted all of the recommendations in the Auditor General's report No 9 of 2018, ACT Health's management of allegations of misconduct and complaints about inappropriate workplace behavior.

- Recommendation 1: ACT Health training for executives and managers. Current training programs are being reviewed and a training schedule will be developed to ensure that all managers and executives participate.
- Recommendation 2: Professional Standards Unit Guidance Material. People and Culture have regular meetings with the PSU and have reinforced the need for their focus on this recommendation.
- Recommendation 3: Receiving and managing allegations of inappropriate workplace behaviours. Awareness training will be incorporated into the training program at Recommendation 1. ACT Health will ensure that all executives, managers and other employees are aware of and embrace the new approaches detailed in 10 above.

F. The production of documents and materials to better explain complaints and other related processes to employees and managers

Documents are currently be reviewed and produced to enable better information for all parties including REDCOs, Employees, Managers, Complainants and Respondents.

G. Post-transition People & Culture structure

In the post-transition structure, further consideration could be given to the shift towards a strategic HR Business Partner approach where the focus is on providing responsive HR advice regarding all people matters. Business Partners, although reporting into People and Culture, will be closer in proximity to the business/clinical managers with a focus on early intervention.

Resourced appropriately, this team would work with the existing Employee Relations (ER) team, who would work on more complex ER matters where early intervention has failed.

Human Resource Business Partner (HRBP) team will spend most of their time in the "business" (largely clinical & health consumer serving areas) supporting and coaching managers in best practice people management, including dealing with bullying and interpersonal conflicts.

External Consultation

It is recommended that this approach is discussed and consulted with the Public Standards Commissioner and the Public Standards Unit in CMTEDD.



DIRECTOR-GENERAL MINUTE

Financial

Resources above current budget (salary plus oncosts) required for this model are:

- a) Employee Advocate (SOGA/B) for a minimum of 12 months
- b) Preliminary Assessment Adviser (SOGB) for a minimum of six months

Costs associated with ADR / mediation should be borne by the business unit within which the issue resides, as per current practice.

Media

Have relevant communications material to support this brief been attached (communications plan, draft media release, talking points etc)? Yes No N/A

Has the Communications Branch been consulted? Yes No N/A

Signed off by:	Janine Hammat	Phone:	6205 0006
Title:	Executive Director		
Branch/Division	People and Culture		
Date:	4 September 2018		

Action Officer:	Jim Tosh	Phone:	50006
Unit:	Employment Services		

ATTACHMENT A

Risk	Proposed risk mitigation strategy
Employee Advocate not understanding employment law obligations, or how Alternative Dispute Resolution (ADR) sits within the misconduct processes could lead to industrial and legal issues	The Duty Statement, and the recruitment and selection process will need to ensure that ACT Health select a candidate with the requisite skills in both ADR processes, and in best practice HR to mitigate against actions which may result in inadvertent breaches of Enterprise Agreement processes, or industrial disputation.
Employee Advocate role acting in isolation to other anti-bullying measures. ACT Health has a number of existing initiatives, such as the RED framework and contact officers, and PA training. The introduction of the Employee Advocate role could potentially result in a fragmented approach.	<p>To ensure that a "joined-up" approach to bullying allegations occurs, while maintaining a level of independence from the Employee Services team (which often provides advice to delegates in bullying /conduct matters), it is proposed that this role reports directly to the Executive Director, People & Culture. This would ensure that the position is considered in equal esteem to the Senior Manager Employee Services position, responsible for the provision of advice and support to line managers on such matters, whilst still maintaining an integrated approach to bullying and harassment allegations.</p> <p>The Advocate would also work closely with REDCOs to engender new approaches and impart knowledge.</p> <p>To assist in finding the right skills mix, it is proposed that this position be classified at the SOG B or SOG A grade.</p>
Existing ACT Health employees not having the requisite skills for the position	It is critical that existing P&C staff are exposed to, and gain experience in, ADR mechanisms. To ensure that this new position succeeds, the right candidate should not only have ADR and mediation knowledge but also a demonstrated record in building the capability of employees. It will also be critical that there are resources available to this role, the PA role and the Employee Relations team to provide for rapid access to mediation and dispute resolution
Employee Advocate providing advice on other	It is critical to clearly articulate, both to the Employee Advocate, and ACT Health employees more broadly, the

Risk	Proposed risk mitigation strategy
employment-related matters	parameters of this role as being strictly limited to interpersonal conflict. By clearly articulating the limited nature of the role, ACT Health will avoid having employees inundate the holder of the position with payroll or other HR matters outside of the scope of the position which should be dealt with through other appropriate avenues.
Employee Advocate being initially inundated with a high caseload	<p>Avoiding an initial "log-jam" of cases is important to the success of this proposed position. To avoid a bottle-neck in cases, and to deal with the initial work that the existence of such a position will create, the following strategies are proposed:</p> <ul style="list-style-type: none"> ▪ A dedicated 12 month contract position in the Employee Services Team to assist line managers, and the Employee Advocate, in undertaking expedient Preliminary Assessments on bullying related matters that cannot be mediated (see below); and ▪ A list/panel of preferred mediators to assist in any immediate need. Please note that the cost of mediators is borne by the business unit within which the issue resides.



CORRESPONDENCE COVER SHEET

Correspondent:

Record Number: **DGC18/1252**

Date Due:

Topic: Minute to Director-General - Fortnightly Reporting Preliminary Assessment and staff complaint

Action Required:	No	Reply Directly	No	Draft Response
	No	Brief to D-G	No	
		Action by Group	No	Info Only
	No	Action as Necessary	No	For Discussion
	No	Advice	No	Comments to D-G
	No		No	Full Speech
		Media	No	Ministerial Response

Assignee: Ritchie, Angela since 5/10/2018 at 3:32 PM

Comments for Cover Sheet:

5/10/18 - Bm to DG
 9/10/18 - Janine Hammat,




DIRECTOR-GENERAL MINUTE

TRIM Reference No. DGC18/1252

SUBJECT:	Fortnightly Reporting: Preliminary Assessments and staff complaints
From:	<i>Ms Janine Hammat, Executive Director of People & Culture</i>
Through:	
Critical Date:	<i>4 October 2018</i>
Reason:	<i>Information from this brief is required to ensure oversight of bullying, staff complaints, Preliminary Assessments, and other management processes, and to better inform Directorate responses to contentious staffing matters.</i>

Recommendations

That you:

Note the attached Preliminary Assessment and staff complaints data	 PLEASE DISCUSS
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*Please discuss with CEO, CHS,
Let requirement going forward.*



Michael De'Ath
 Interim Director-General
 ACT Health

8 October 2018

*Can I please have a report for
ACT Health, and as time passes,
trend analysis.*

Thank you.



DIRECTOR-GENERAL MINUTE

Purpose

1. To provide fortnightly data on Preliminary Assessments, and conduct related management processes, including staff complaints.

Some notes pertaining to the data in this report

2. The data in this report was compiled for the fortnight of 14 and 27 September 2018.
3. The next report, for the period between 28 September and 11 October 2018, is expected to be provided on Friday 12 October 2018.
4. Since the previous reporting period, People & Culture have attempted to focus the reporting only to Preliminary Assessments and conduct related matters (inclusive of bullying and harassment); whereas last fortnight was inclusive of matters such as performance management, overpayments and other Employee Services matters which appear to be outside of the scope of the initial request.

Further reporting

5. Due to the inaccuracies in data preceding this financial year, People and Culture intend to provide comparison data from next fortnight for the previous quarterly period.

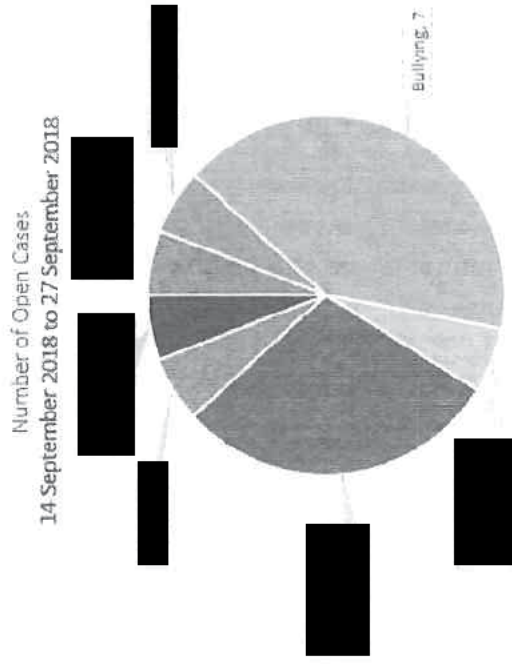
Financial

6. Save for the time associated with reviewing closed cases, there are no additional financial or related resource costs required for the ongoing maintenance of the database.

Signed off by:	Jim Tosh	Phone:	6205 0006
Title:	<i>Acting Senior Manager</i>		
Branch/Division	Employee Services, People & Culture		
Date:	3 October 2018		

Action Officer:	Jim Tosh	Phone:	
Unit:			

Number of open cases



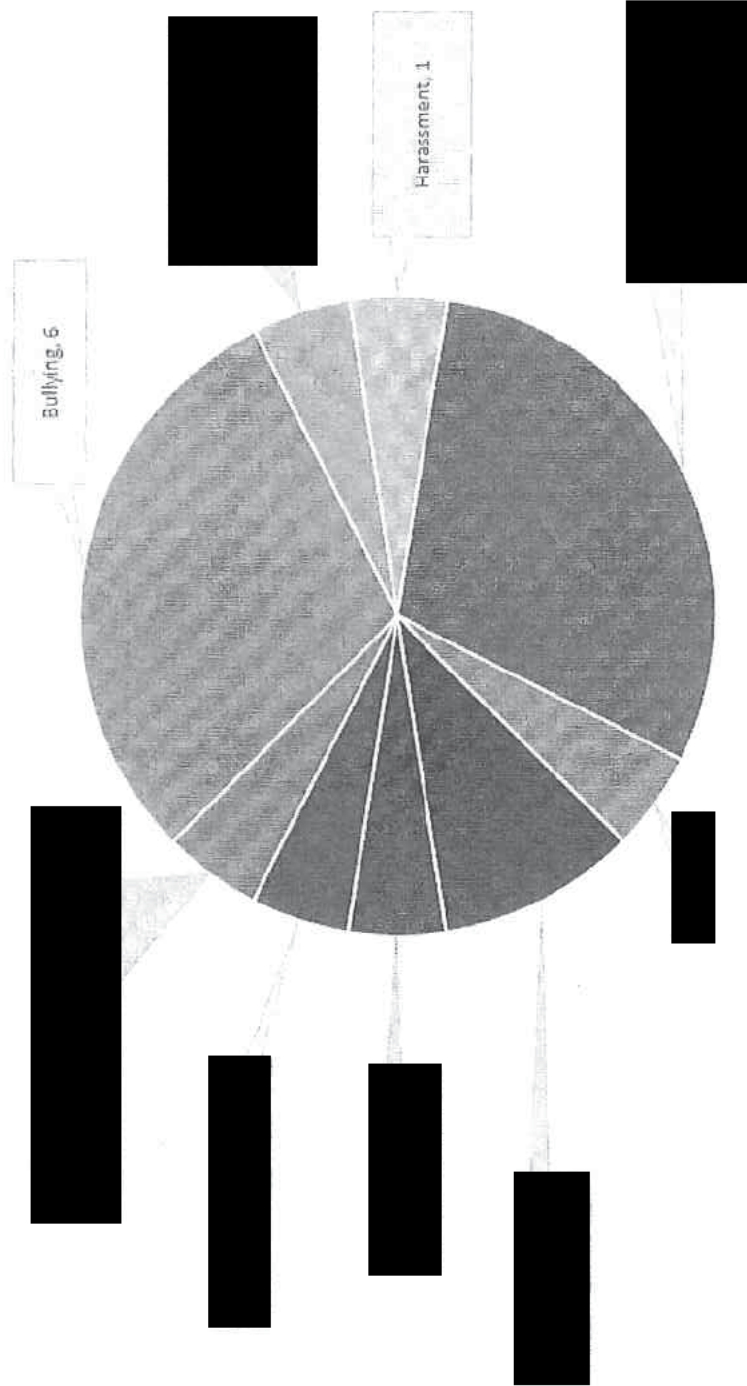
Please Note:

Workforce Relations has received and opened 17 allegations of inappropriate behaviour onto the database for the reporting period. These cases are broken down into the abovementioned categories.

It is important to note that some cases may have been managed at the local level and resolved without notification to Workforce Relations.

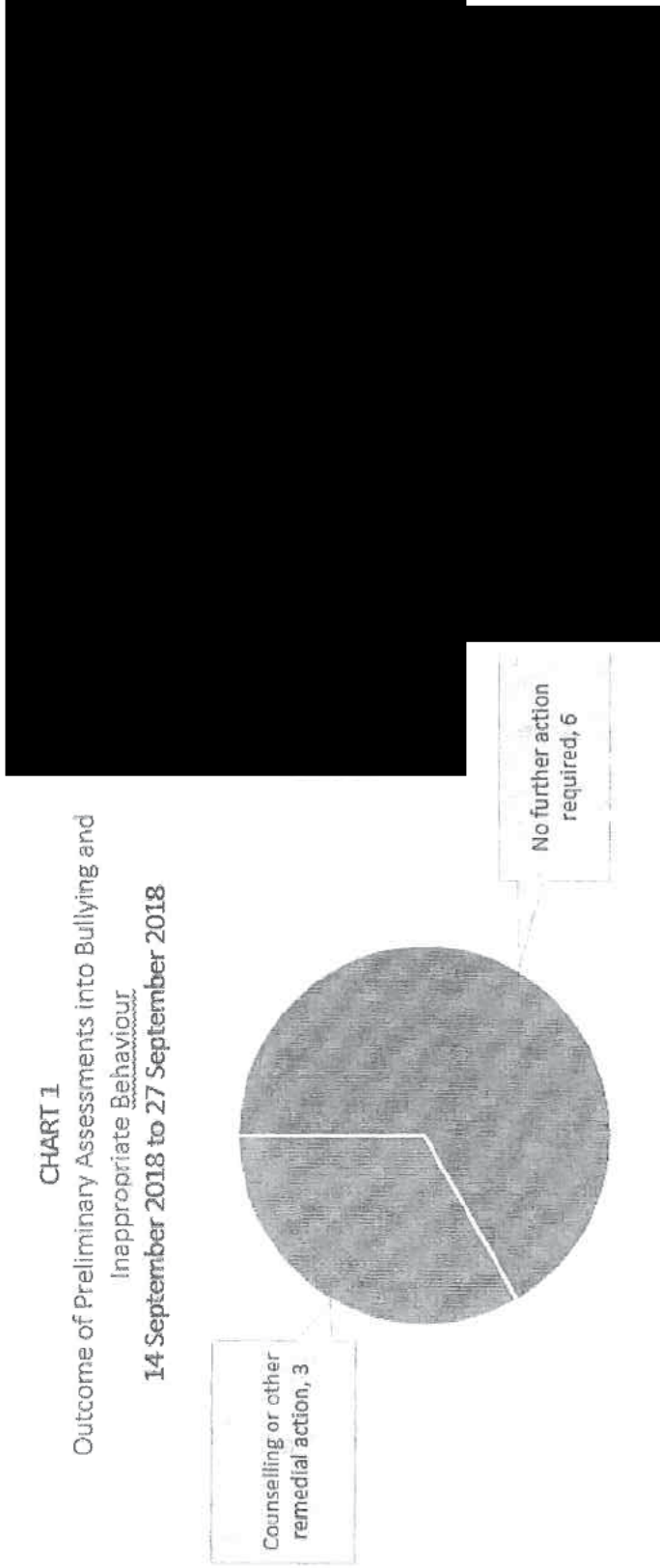
Number of Closed Cases

Number of Closed Cases
14 September 2018 to 27 September 2018



Outcome of PA's

CHART 1
Outcome of Preliminary Assessments into Bullying and
Inappropriate Behaviour
14 September 2018 to 27 September 2018



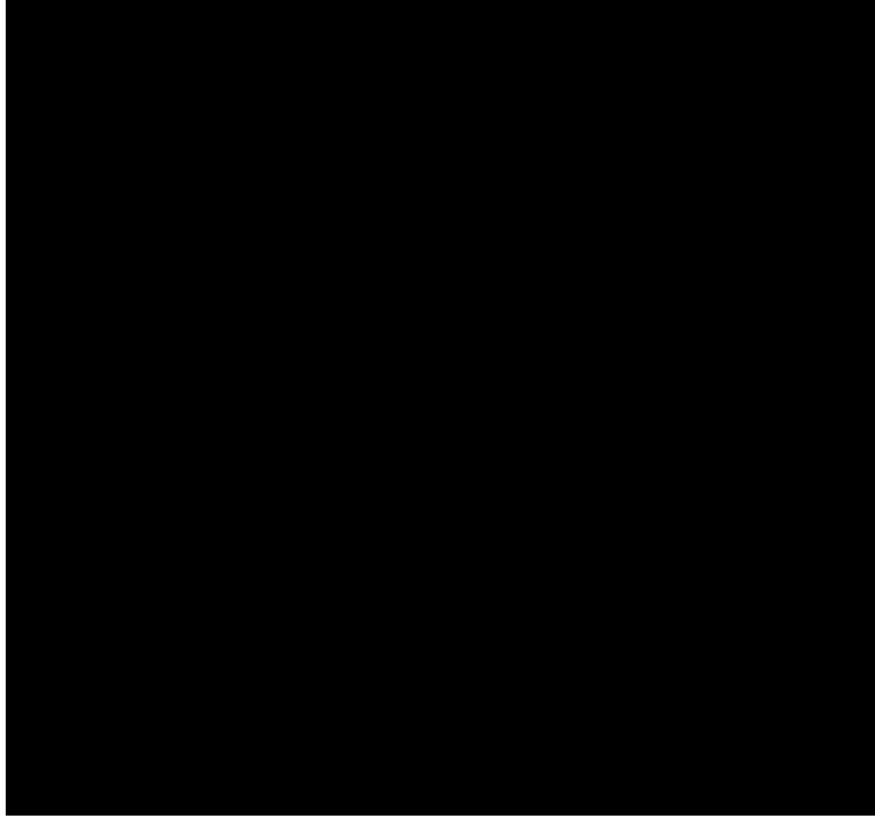
Please Note:

Workforce Relations has closed 19 PA's for the reporting period.
Chart 1: This chart below reflects cases that relate to Bullying or inappropriate behaviour
Chart 2: All other cases.

Outcome of Investigations

Outcome of investigations relating to Bullying and Harassment
14 September 2018 to 27 September 2018

***There were no investigations into Bullying and Harassment this reporting fortnight*



Cramond, Sarah (Health)

From: Hammat, Janine (Health)
Sent: Friday, 23 November 2018 1:05 PM
To: McDonald, Bernadette (Health); De'Ath, Michael (Health)
Cc: CEOHealth; DGACTIONHealth; ACT Health, EDPeopleandCulture; Tosh, Jim (Health); Nolan, Julie (Health)
Subject: PA and Investigation Reports [DLM=Sensitive]
Attachments: [PP] 01.09.2018 to 30.09.2018 for CEO Final.pdf; [PP] 01.10.2018 to 31.10.2018.pdf

Hi Bernadette and Michael,

Apologies for the delay in providing these reports but we have been trying to get them to the point where they can be easily understood and standardised. Attached is a report for September and a report for October. We intend to separate the CHS and ACTHD numbers in future but we need to separate databases first. We will now generate these reports monthly and try to have them to you by the beginning of the second week in the month after close (ie. November report by 10 December). Please let me know if you have any queries or concerns or whether you would like us to change the approach.

Regards,

Janine

Janine Hammat
Executive Director People and Culture
 Canberra Health Services

Phone: 02 6205 1086 | **Email:** janine.hammat@act.gov.au
 Level 3, 2-6 Bowes St, WODEN ACT 2606

Care | Excellence | Collaboration | Integrity



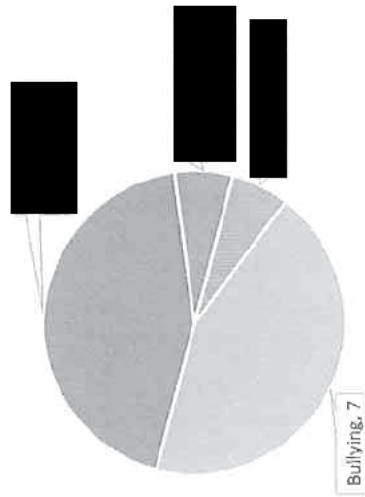
ACT
 Government

**Canberra Health
 Services**

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Number of Cases Opened in the Reporting Period 01/09/2018 to 30/09/2018

Number of Preliminary Assessments Opened
Total: 16

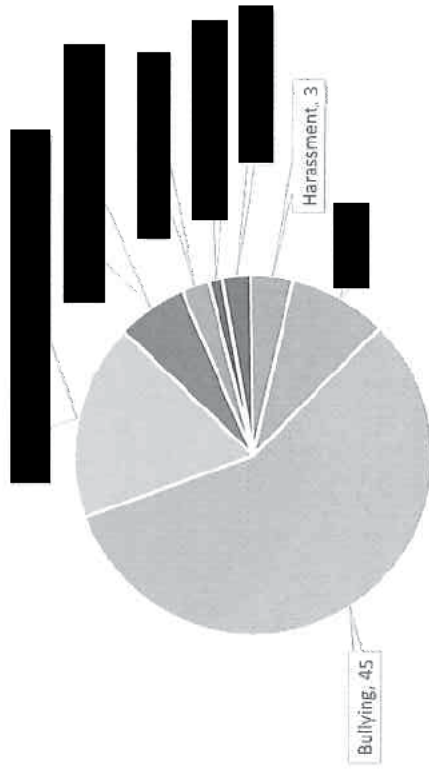


Please note:

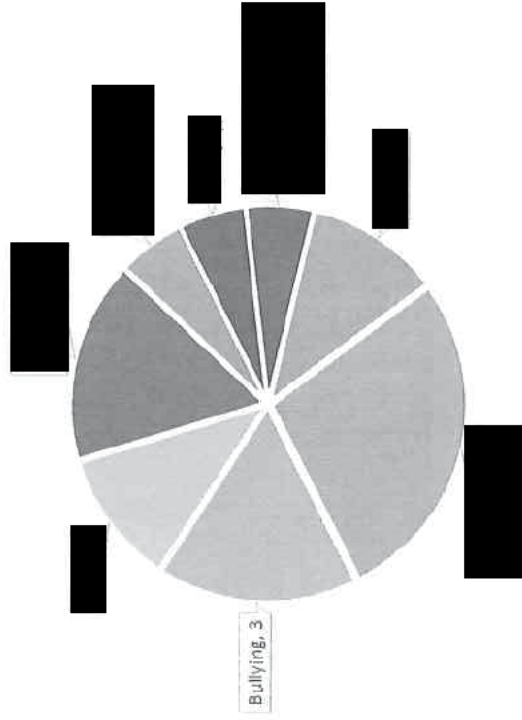
1. From the 19 cases that were opened, 16 are Preliminary Assessments and 3 are Investigations with the PSU.
2. Where a Preliminary Assessment is finalised, and results in an investigation, the system closes one case, and opens another, resulting in "double-counting."
3. Complaints are categorised as bullying by the complainant, and often do not fall within the definition following assessment.
4. 10 cases were received through the Riskman system.
5. Some cases may have been managed at the local level and resolved without notification to Workforce Relations and are therefore not reported.

Total Number of Cases Open in the Database as at 30/09/2018

Total Number of Preliminary Assessments - 79



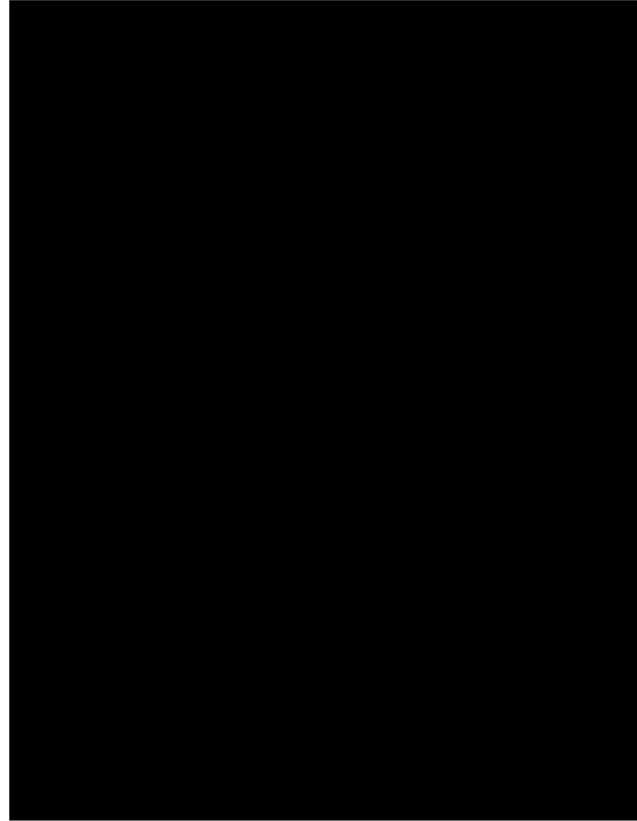
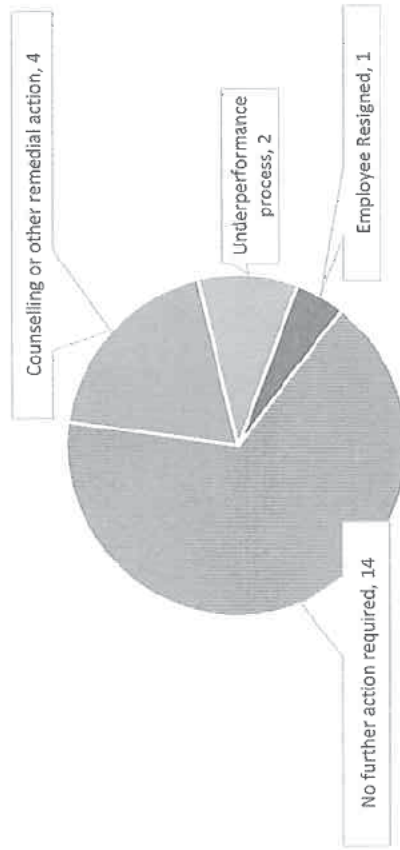
Total Number of Investigations at PSU - 18



Please note:
'Other' refers to a case that doesn't fit within the categories defined within the database.
Work is being undertaken to upgrade these categories.

Outcome of Completed Preliminary Assessments 01/09/2018 to 30/09/2018

Outcome of Preliminary Assessments into Bullying and Harassment
Total: 21



Please note:

Workforce Relations has closed 42 cases for the reporting period.

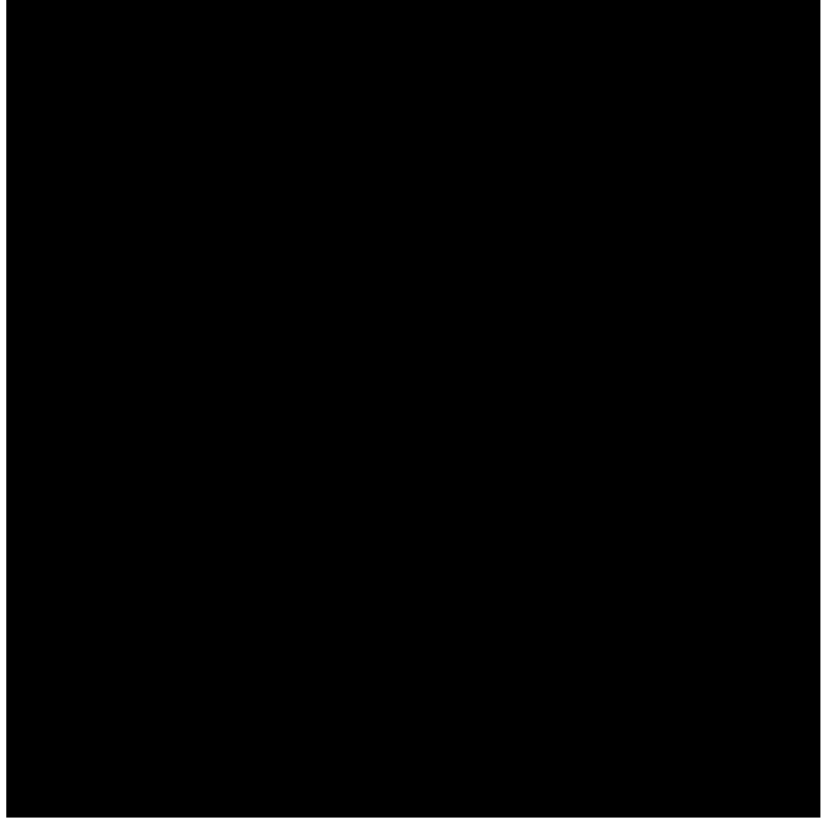
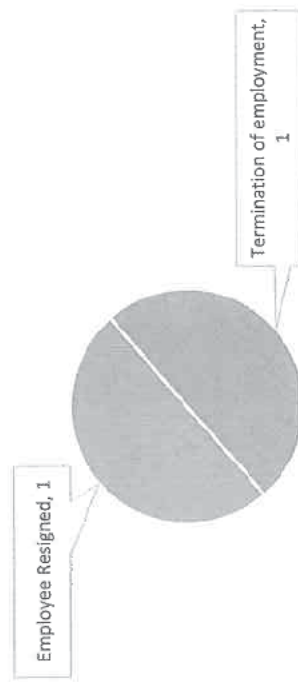
Chart 1: This chart below reflects cases that relate to Bullying or inappropriate behaviour

Chart 2: All other cases.

Outcome of Completed Investigations

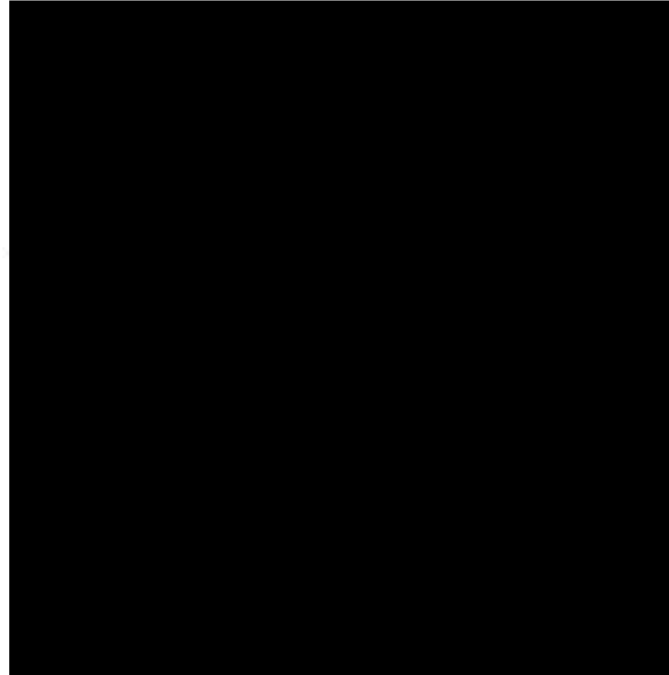
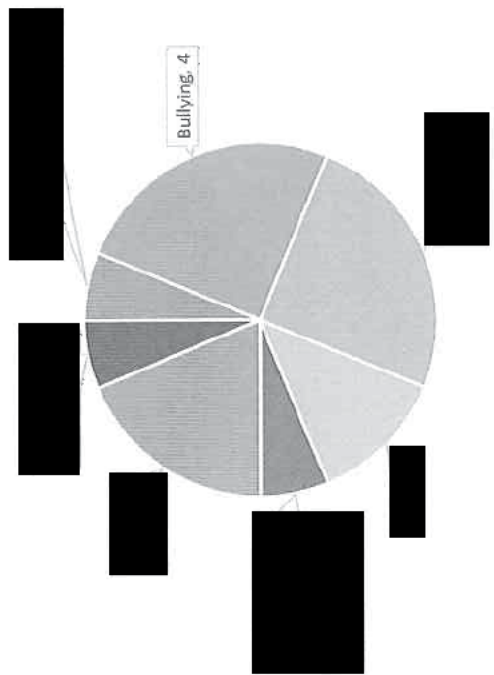
01/09/2018 to 30/09/2018

Outcome of Investigations Completed Relating to Bullying and Harassment
Total: 2



Number of Cases Opened in the Reporting Period 01/10/2018 to 31/10/2018

Number of Preliminary Assessments Opened
Total: 16

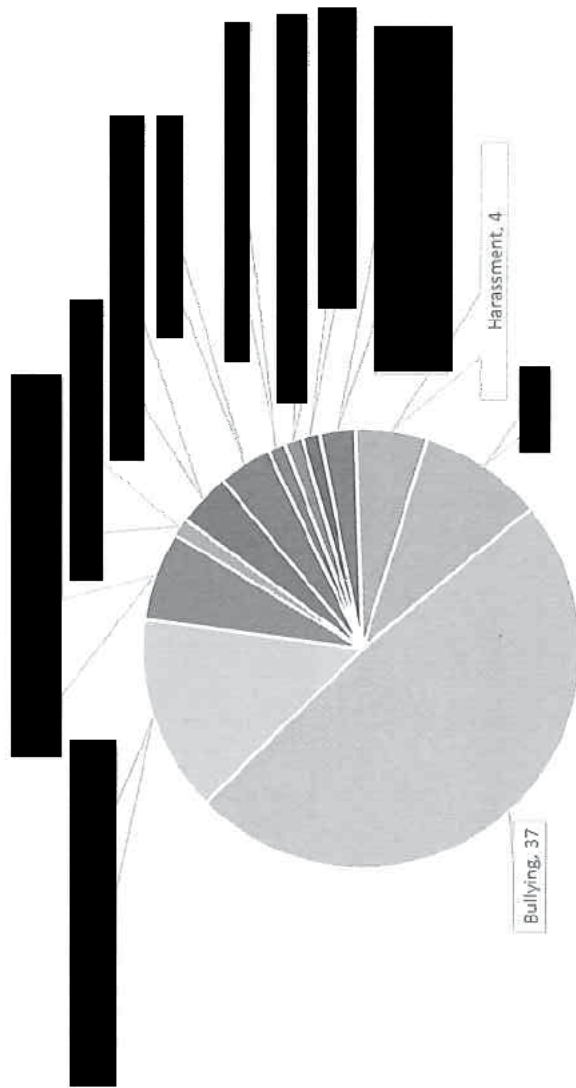


Please note:

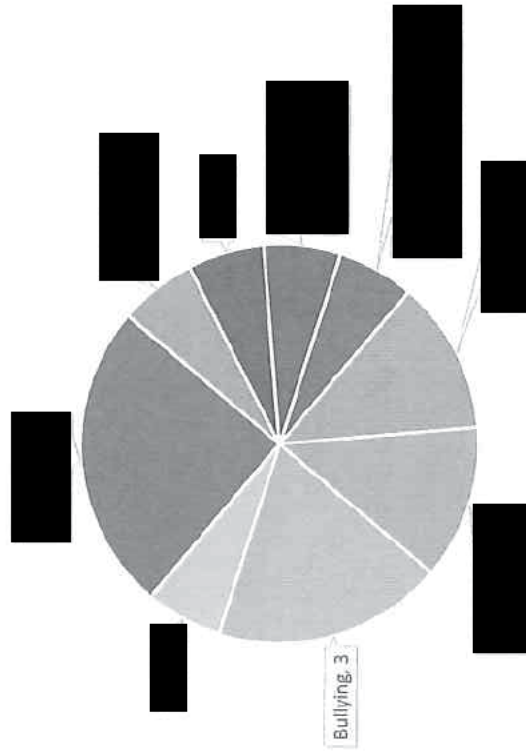
1. From the 22 cases that were opened, 16 are Preliminary Assessments and 6 are Investigations with the PSU.
2. Where a Preliminary Assessment is finalised, and results in an investigation, the system closes one case, and opens another, resulting in "double-counting."
3. Complaints are categorised as bullying by the complainant, and often do not fall within the definition following assessment.
4. 4 cases were received through the Riskman system.
5. Some cases may have been managed at the local level and resolved without notification to Workforce Relations and are therefore not reported.

Total Number of Cases Open in the Database as at 31/10/2018

Total number of Preliminary Assessments: 76



Total Number of Investigations: 16



Please note:

'Other' refers to a case that doesn't fit within the categories defined within the database.

Work is being undertaken to upgrade these categories.

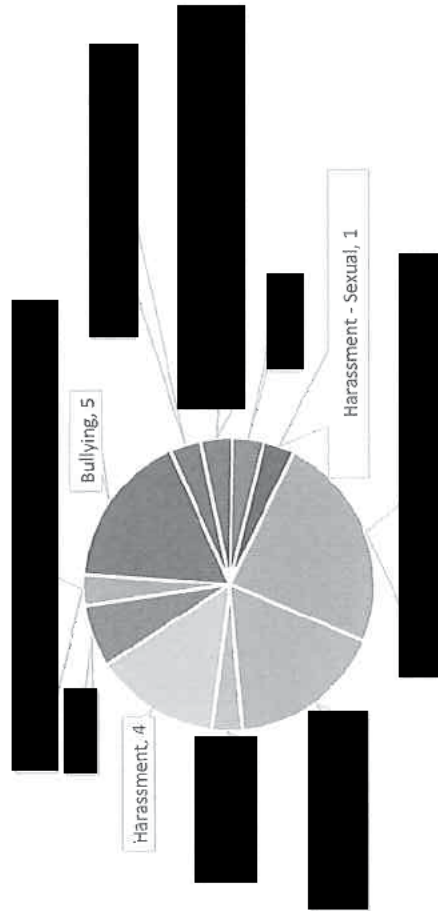
Please note that 12 of the open Preliminary Assessments relate to cases for the ACT Health Directorate.

The rest are with Canberra Health Services.

Number of Cases Closed in the Reporting Period 01/10/2018 to 31/10/2018



Number of Preliminary Assessments Completed
Total: 29

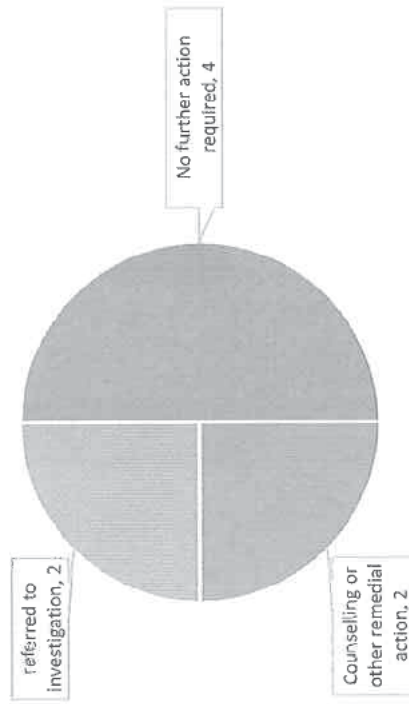


Please note:

1. Closed cases refer to any case, preliminary assessment or investigation that has been finalised and close off within the reporting period
2. 'Other' refers to a case that doesn't fit within the categories defined within the database. Work is being undertaken to upgrade these categories.
3. When a Preliminary Assessment is referred to PSU the case is closed a new case is reported as an investigation.

Outcome of Preliminary Assessments 01/10/2018 to 31/10/2018

Outcome of Completed Preliminary Assessments into Bullying & Harassment - 8

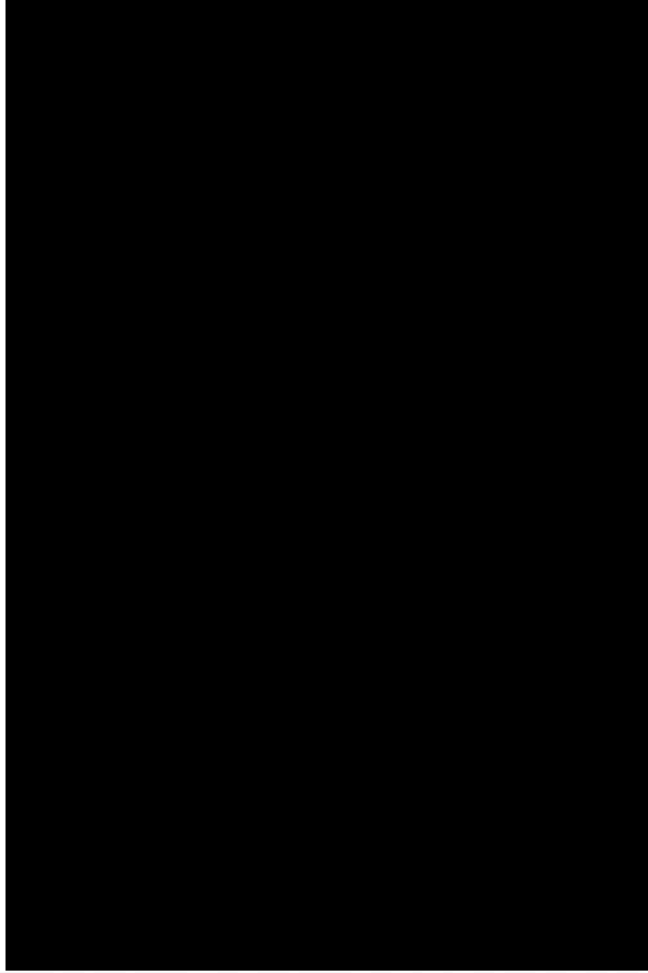


Please note:

Workforce Relations has closed a total of 29 cases for the reporting period.

Chart 1: This chart below reflects cases that relate to Bullying or inappropriate behaviour

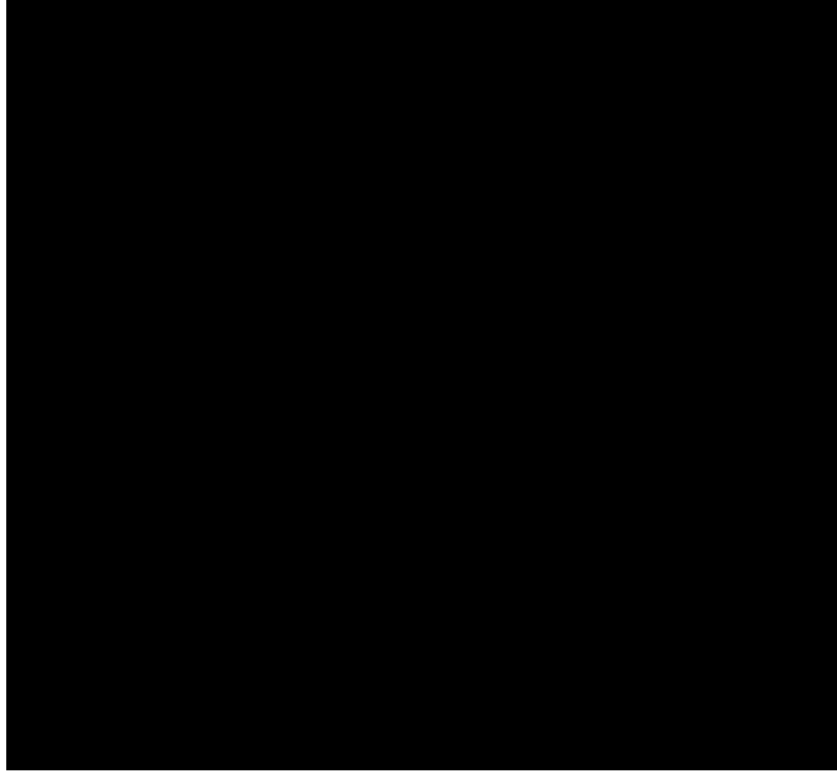
Chart 2: All other cases.



Outcome of Completed Investigations 01/10/2018 to 31/10/2018

Outcome of Completed Investigations into Bullying and Harassment

There were no completed investigations into Bullying or Harassment for the reporting period.





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**Canberra Health
Services**

TRIM Reference No. _____

SUBJECT:	Supporting Respectful Behaviours
From:	<i>Janine Hammat, Executive Director of People & Culture</i>
Critical Date:	<i>N/A</i>
Reason:	

It is recommended that HSEC:

1. Note the proposed Supporting Respectful Behaviours program, inclusive of:
 - A renewed focus on restorative processes (or alternative dispute resolution),
 - Modification of the existing Preliminary Assessment process for bullying matters, prioritising early intervention and alternative dispute mechanisms;
 - The appointment of a SOGA Employee Advocate for an initial period of 12 months;
 - The appointment of a SOGB Senior Advisor - Preliminary Assessments for a period of 6 months; and

.....
Bernadette McDonald
Interim Chief Executive Officer
 Canberra Health Service

November 2018



Purpose

1. To inform the Executive of an alternative model for the resolution of complaints and allegations of bullying and harassment, which focuses on expedient alternate dispute resolution.

Background & Issues

2. This Minute outlines a new approach to bullying allegations and other interpersonal disputes that places an emphasis on alternate dispute resolution.
3. Currently prescribed ACT Government processes, while anticipating the use of alternative dispute resolution mechanisms, can lead to an overly adversarial approach to complaints management and an emphasis on investigation.
4. While there are well-established processes, frameworks, and a network of 101 Respect Equity and Diversity Contact Officers (REDCO's), these roles are intended to promote values and provide information, rather than actively assist in the resolution of matters:

*"REDCOs model and promote the ACTPS Values and Signature Behaviours to develop positive work cultures across the ACTPS. REDCOs provide information to staff seeking a solution to improve or resolve a workplace issue or situation, which may relate to inappropriate behaviour or misconduct."*¹

5. Existing staffing models within People & Culture focus resources on the more resource intensive formal processes.
6. Where complaints result in investigations, both complainants and respondents lose agency over the process, which by its nature results in findings of fact rather than a resolution to the satisfaction of all parties.
7. Where matters are handled through an investigation, for privacy reasons complainants are not advised of the outcome, only that the matter is finalised. This often compounds the feeling of disempowerment, or the feeling that the matter may not have been taken seriously.
8. This Minute outlines a number of short and medium term strategies and actions being undertaken to shift the focus to early intervention and alternative dispute resolution, and with the intention to recast existing frameworks in a way that results in a more connected approach to employee behavior and positive workplace culture, including:
 - a. The introduction of an Employee Advocate position;
 - b. Restorative Processes (Alternative Dispute Resolution or ADR);
 - c. Modifying existing Preliminary Assessment process for bullying and interpersonal disputes, and the introduction of a Preliminary Assessment Advisor position;
 - d. Utilising the REDCO network to assist with the introduction of the aforementioned approach;
 - e. An external avenue for employees of ACT Health on bullying matters; and

¹ 'Role of a REDCO', *GUIDELINES FOR ACT PUBLIC SERVICE RESPECT, EQUITY AND DIVERSITY CONTACT OFFICERS (REDCOS)*, ACT Government (2015):

https://www.cmtedd.act.gov.au/_data/assets/pdf_file/0005/824477/REDCO-Guidelines.pdf



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f. Future People & Culture structure

Proposed approach

A. *Employee Advocate*

9. While the role of the REDCOs are recognised as critical in the promulgation of ACTPS Values and Signature Behaviors, these positions are limited to “provide information to staff.” This limitation is sensible in context of the voluntary nature of the positions.
10. Whether founded or otherwise, some employees have expressed a reluctance to raise concerns with their line managers or with the Employee Relations function.
11. For the aforementioned reasons, the Canberra Health Service will introduce an Employee Advocate position, which will play a crucial role in providing advice, support, and active involvement in restorative or ADR processes to resolve bullying and interpersonal matters to the satisfaction of all parties. This position will report directly to the CEO, with a ‘dotted line’ reporting relationship to the Director-General of the ACT Health Directorate.
12. This will be for an initial 12 month period after which a review will take place to see if the role should be permanently established.
13. The Employee Advocate will assist complainants in the resolution of bullying matters by coordinating required processes, and providing high level and considered advice to employees experiencing interpersonal difficulties in the workplace.
14. Further detail on this position can be found in the Duty Statement [Attachment A](#) and Fact Sheet [Attachment B](#).

B. *Restorative Processes (Alternative Dispute Resolution or ADR)*

What are Restorative processes? What is different to the current model?

15. Restorative Processes, or Alternative Dispute Resolution (ADR), seek to provide staff with an alternative model for resolving workplace conflict which focuses on addressing the underlying relationship breakdown. The two most utilised restorative processes are mediation and facilitated conversations, both of which are explained the attached Fact Sheet at [Attachment B](#).
16. This approach differs from the existing ACT Government processes, which tend to treat bullying matters in the same way as other matters of misconduct. As investigations seek to ‘find fact’ and disciplinary action seeks to reprimand, restorative processes aim to mend relationships and set ground rules for how participants engage with each other ongoing.
17. The Canberra Health Service will maintain a panel of preferred providers who will work to an expected standard, and a common approach.
18. Each complaint raised will need to be assessed as appropriate for restorative processes, and referrals will be made by People & Culture, the Employee Advocate, or the relevant Executive Director.
19. While the relevant line area will pay for the costs associated with restorative processes, the People & Culture team will be working to ensure consistency of approach and cost



containment by limiting the mediation/facilitated conversations to 2 or 3 sessions. This will be done through accessing a panel of 6 to 8 providers who will be available at short notice to provide services.

20. Any further sessions would indicate a level of seriousness that may require investigation to address the underlying issues.

C. Modifying existing Preliminary Assessment process, and Preliminary Assessment Advisor

21. The current enterprise agreement provisions, government-wide guidance material, and ACT Health's Preliminary Assessment training module all support the view that a Preliminary Assessment is intended to be an expedient means of gathering enough information in order to decide the most relevant course of management action required.

By way of example, the ACTPS *Workplace Behaviors Toolkit* states:

"A preliminary assessment is not a formal investigation; it is an expedient means of determining if, and how, to proceed. The assessment should be conducted as soon as possible, be as short as is practical and should cease as soon as it becomes evident how best to handle the issue."

22. ACT Government Enterprise Agreements articulate six potential outcomes from a Preliminary Assessment, including "other remedial action", which has been read to include mediation, facilitated discussions, or any other alternate dispute resolution mechanisms.
23. Existing ACT Health Preliminary Assessment forms provide the reader with the impression that equal weight should be given to all avenues in such circumstances, and have led to a more exhaustive process than initially intended.
24. The existing Preliminary Assessment forms are currently under review, and will mean for matters of alleged bullying or other interpersonal disagreements, the manager / supervisor or Employee Advocate must advise prior to completing relevant Preliminary Assessment forms:
- a. whether alternative dispute resolution (ADR) mechanisms have been attempted, and what the outcome was; or
 - b. why ADR mechanisms were not appropriate in the circumstances.
25. As this approach represents an addition to, rather than a replacement of, the Preliminary Assessment process, it remains consistent with the existing enterprise agreement framework.
26. With the new approach there will be an immediate and pressing need to assist in undertaking expedient Preliminary Assessments (PA). Also to support the notion of early intervention PA's will need to be undertaken as expediently as possible.
27. A Senior Adviser Preliminary Assessments position will be created and will assist line managers and Executives to complete PA's, relating to bullying complaints primarily, within a short timeframe (within a maximum of 2-3 working days), to ensure that those matters where restorative processes or ADR mechanisms either have not worked, are unlikely to, or are inappropriate, are referred for further appropriate action as early as possible.



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28. In the aforementioned contexts, an expedient PA to ensure a timely investigation referral will result in a speedier resolution for the more intractable or serious matters. Please see [Attachment C](#) for a Fact Sheet relating to Complaints processes.

29. This position will report directly to the Senior Manager, Employee Services, and will work closely with the Employee Advocate. See [Attachment D](#) for the role description.

D. Utilising the REDCO network to assist with the launch and sustainability of the program

30. Once the new approach is communicated, the existing REDCO network will be closely connected with the Employee Advocate and utilised to communicate and promote the new approach to resolving bullying matters, consistent with their remit to “provide information to staff” on respect, equity and diversity matters.

31. Given the voluntary nature of REDCOs, the only costs required to utilise existing staff is on time release for further training/workshops, and the Organisational Development team.

E. External avenue for raising complaint

32. Important to the success of this program that there is a high level of trust from ACT Health employees, that their matter will be resolved with fairness and without bias.

33. To assist in building trust, avenues have been explored to provide ACT Health employees with an external avenue to raise a complaint, or concern that a complaint has not been managed appropriately.

34. The Public Sector Standards Commissioner is legislatively charged with this role for the whole of ACTPS and contact details for the Commissioner will be provided to employees through fact sheets and other communications.

F. Post-transition People & Culture structure

35. Whilst the current structure in People and Culture will remain in place for the foreseeable future, further consideration will be given to the shift towards a strategic HR Business Partner approach where the focus is on providing responsive HR advice regarding all people matters. Business Partners, although reporting into People & Culture, will be closer in proximity to the business/clinical managers with a focus on early intervention.

36. Human Resource Business Partner (HRBP) team will spend most of their time in the “business” (largely clinical & health consumer serving areas) supporting and coaching managers in best practice people management, including dealing with bullying and interpersonal conflicts. This role would take on the role of the Senior Adviser Preliminary Assessments in the longer term and work to ensure early intervention in their area.



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Signed off by:	Jim Tosh	Phone:	50006
Title:	<i>Senior Manager</i>		
Branch/Division	<i>People & Culture</i>		
Date:			
Action Officer:		Phone:	
Unit:			



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**Canberra Health
Services**

Employee Advocate | People & Culture | Canberra Health Services | Full-time

Classification: Senior Officer Grade A
Position No: P28949
Directorate: Canberra Health Service

Approved Duty Statement Date: 14 November 2018

About us:

Canberra Health Services is a values-led Directorate. Our values guide our day-to-day actions, behaviours, decisions and communications to successfully deliver the best services to meet the needs of our community. They were developed by us, for us and are unique to our work.

Canberra Health Services provides acute, sub-acute, primary and community-based health services to the ACT and surrounding region.

Canberra Health Services is committed to the delivery of person and family centred, safe and high quality care in a sustainable health system. This will be achieved with key strategic priorities for CHS which includes ensuring the delivery of Canberra Health Service's Quality Strategy and government priorities, and aligning them with ACT Health's Territory Wide Services Framework.

The key strategic priority for acute services is to deliver timely access to effective and safe hospital care services. The hospital delivers a full range of medical, surgical and obstetric services, including complex procedures in areas such as cardiac surgery, neurosurgery and neonatal intensive care.

Strong links exist between hospital and community-based services, as many of the operational divisions deliver services across the continuum of care to ensure continuity of care for patients. The community based services of Canberra Health Services include early childhood, youth and women's health; dental services, rehabilitation and community care; mental health and alcohol and drug services. In addition, justice health services are provided within the Territory's' detention facilities.

Canberra Health Services is a partner in teaching with the Australian National University, the University of Canberra and the Australian Catholic University.

Overview of the work area and position:

The Employee Advocate will report directly to the CEO of the Health Service, and will work directly with the Director-General of the ACT Health Directorate. This position will play a key role in providing sound and considered information and advice to employees within Canberra Health Services whilst contributing to the Health Service's compliance with the legislative requirements in relation to employment frameworks.

While the Employee Advocate role is an autonomous role it will work with all areas of the Health Service leadership, including the People and Culture Branch and the Employee Services team who provide employee relations services, support and advice to employees within Canberra Health Services.

The main responsibilities of the role of Employee Advocate will be to;

- Provide high level and considered advice to employees who are experiencing bullying or interpersonal issues in the workplace in accordance with relevant legislation,
- Support staff to achieve the early and informal resolution of conflict, concerns and complaints,
- Empower staff to understand their options for addressing inappropriate behaviour in the workplace and to make informed choices;
- Provide information to staff about internal and external avenues for complaints and support, including external agencies/groups that may be engaged to resolve workplace issues or conflict,
- Report to the CEO and / or DG on any trends or systemic issues which should be addressed, and provide recommendations to achieve improvements, while preserving the confidentiality of individual employees;
- Contribute to positive outcomes through leadership and accountability.

The Employee Advocate does not act for individual employees or represent them in workplace-related processes run by the Health Service or external regulators. The Employee Advocate can assist with organising restorative processes or mediation between staff members, but they do not conduct preliminary assessments or investigations of misconduct.

This is a unique opportunity for a high energy professional interested in playing a key role within Canberra Health Services.

Duties:

1. Act as a contact point, and neutral and independent adviser, for employees experiencing bullying or interpersonal issues in the workplace, to help employees understand the situations they are facing, what their options are (formal and informal), and what resources are available to them to achieve early resolution;
2. Ensure that all conversations with individual employees are kept strictly confidential, with the only exceptions being (1) if the visiting employee discloses an imminent risk of serious harm to themselves or someone else, or (2) if the Employee Advocate is obliged by law to disclose (eg corruption).
3. Coordinate mediations or facilitated discussions to assist employees with resolving their issues with managers, People and Culture and other relevant parties.
4. Exercise independent professional judgement in empowering employees to solve problems and to understand policy, processes and legislative requirements.
5. Provide advice and insights to employees on policies, and processes involved in the resolution of workplace conflict, and help the employee build and practice skills which will help them navigate the processes (such as coaching to have difficult conversations or reviewing draft letters).
6. With the consent of the employee, propose a way forward to resolve complex interpersonal issues, matters and disputes to the Executive Director People and Culture, including coaching, training or the input of a relevant Mediator/ADR practitioner.
7. Coordinate appropriate education and information with the REDCO network in partnership with the Organisational Development Branch.
8. Provide insight into the systems, and data capturing of workplace conflict matters, and the outcomes of dispute resolution, preserving confidentiality of individual cases.
9. Identify and report to the CEO on systemic issues and opportunities for improvement of the Health Service as a safe, fair, positive and respectful workplace, and provide recommendations to achieve improvements.
10. Undertake other duties appropriate to this level of classification which contribute to the operation of the section with the delivery of high quality person and family centred, safe and high quality patient care.

Personal Attributes:

To be successful in this position, it is expected that the successful candidate will have the following attributes:

- Well-developed emotional intelligence and interpersonal skills with the ability to effectively communicate with staff at all levels as well as with individuals from diverse cultural backgrounds, and with external providers, including the ability to listen and communicate in a confidential and sensitive manner.
- Strong organisational skills with a high degree of drive.
- Adaptability and flexibility to accommodate change and provide responsive services to meet clients' needs.
- The ability to work respectfully in partnership with a range of stakeholders.
- A sound understanding of employees' experience of large organisations, conflict-resolution and complaints-handling systems, as well as the regulation of workplace relations, occupational health and safety, equal opportunity and integrity in government agencies.
- The ability to maintain confidentiality, neutrality and withhold judgments with respect to individuals and issues.

Qualifications and experience:

Desirable:

- A tertiary qualification in organisational development, psychology, social work, alternative dispute resolution or workplace relations
- Knowledge of and experience in the application of human resources policy and procedure as it relates to behaviour in the workplace
- Knowledge of and experience in conflict resolution

Please note prior to commencement successful candidates will be required to:

- Undergo a pre-employment Police check.

Selection Criteria

These are the key criteria for how you will be assessed in conjunction with your resume and experience. Your statement of claims against the selection criteria should summarise how your skills and experiences would enable you to fulfil the responsibilities of the position. It is therefore in the interests of candidates to present their application in a way that demonstrates significant outcomes associated with each of the criteria, as well as the capabilities and behaviours that underpin them.

(Please note that it is not necessary to address the capabilities and behaviours individually).

1. Proven ability to provide high level advice and support to employees and managers on issues relating to workplace and/or interpersonal issues, including a good understanding of and extensive experience in the use of alternative dispute resolutions and methodologies.
2. Understanding of and experience in the application of the principles of confidentiality, procedural fairness, and independence.
3. Problem solving skills and the ability to collate and analyse information from various sources to identify key issues and trends.
4. Highly developed communication skills with the ability to communicate complex information in writing, logically and persuasively, and support the negotiation of fair and reasonable outcomes for all parties.
5. Demonstrated commitment to work, health and safety (WH&S) and the positive patient experience and displays behaviour consistent with Canberra Health Service's values of Care, Excellence, Collaboration and Integrity.

Performance Expectations: SOG A

The **Performance Expectations** outlines the capability needs of employees to enable them to achieve organisational outcomes in an increasingly complex and changing environment. The performance expectations guide consistent performance at each classification, regardless of the nature of an employees work. The Performance Expectations do not replace, but are aligned to the **ACTPS Work Level Standards (WLS)**.

Creates Solutions	Demonstrates Agility	Communicates Effectively	Leads with Commitment	Collaborates with Purpose	Accountable for Quality Outcomes
<ul style="list-style-type: none"> Champions better ways of doing business. Develops and communicates long-term organisational vision, interpreting political and economic trends to identify opportunities. Anticipates and pre-empt problems from a holistic perspective, considering systemic as well as local impact. Identifies and pursues solutions that align with strategic objectives. Encourages others to question traditional assumptions, supporting them to look for more efficient approaches, then ensuring uptake. Anticipates and acknowledges the risks inherent in creating new ways of doing business, supporting innovation while demonstrating effective leadership in managing risk. Understands and promotes organisational strategy as it relates to the achievement of team, Directorate and government objectives. 	<ul style="list-style-type: none"> Anticipates and translates strategy into operational goals and creates a shared sense of purpose. Fosters agility by demonstrating willingness to relinquish existing approaches and roles to motivate others to do the same. Responds constructively to setbacks. Anticipates future organisational priorities when setting short-, medium- and long-term goals. Seeks new information, approaches and ideas. Sustains high levels of productivity in a dynamic environment by championing the benefits of new approaches and securing stakeholder support. Motivates others to maintain focus and productivity by communicating a clear and compelling rationale for leadership decisions. Develops an agile workforce by applying skills in a range of situations and coaching others to use skills flexibly. Maintains and models composure under pressure. 	<ul style="list-style-type: none"> Approaches discussions and negotiations with an understanding of key issues to deliver successful outcomes. Positively presents messages in a clear and articulate manner, translating strategic vision to suit the audience. Delivers high quality, fit-for-purpose communication that achieves organisational objectives. Prepares and participates constructively in discussions and negotiations, demonstrating a strong grasp of key issues, stakeholders and strategic objectives. Listens and responds to others' verbal and non-verbal cues, checking understanding by asking probing questions. Builds morale by communicating leadership decisions effectively. Anticipates the perspectives of others in discussions and negotiations, and is prepared to engage. 	<ul style="list-style-type: none"> Builds organisational capability, anticipating future needs and ensuring the organisation is ready to respond. Actively manages succession by coaching and mentoring others to share knowledge and build capability. Displays awareness of self and others by adjusting leadership style to suit the environment. Manages a group of teams carrying out diverse tasks in the same general type of work or a group of teams where skills are similar and tasks related. Embraces responsibility for actions and decisions. Takes responsibility for direct reports and teams, and invests in their development. Sets clear performance expectations, and provides timely, constructive feedback. Addresses performance shortfalls in an appropriate, constructive and timely manner. Supports other leaders, including direct reports, to manage performance. Acknowledges and rewards the contributions of others. Upholds and models the APS Values, Code of Conduct and Employment Principles. 	<ul style="list-style-type: none"> Anticipates stakeholder perspectives and needs, and pre-empt problems, and responds effectively to stakeholder issues. Resolves conflict with diplomacy. Champions the benefits of a workforce with diverse experience, education and backgrounds, encouraging others to work together. Manages competing stakeholder interests and viewpoints. Creates and sustains internal and external networks that align with strategy and enhance organisational performance. Brings together diverse expertise where appropriate to deliver outcomes and improve productivity. Actively seeks input from relevant stakeholders to build relationships. Demonstrates and promotes collaborative work practices. Anticipates and pre-empt barriers to collaboration, managing them effectively. 	<ul style="list-style-type: none"> Promotes and models a culture of achievement, delivering high quality outcomes on time and on budget. Understands staff capacity and makes decisions in a timely manner to allow staff to progress work. Manages risk without compromising deliverables. Actively contributes to strategic workforce planning, managing resources effectively to ensure achievement of organisational objectives. Accepts responsibility for business planning, risk management and corporate outcomes. Maintains a continuous improvement approach reflecting on own performance and striving to improve outcomes. Makes sound judgements about priorities, balancing short-, medium- and long-term goals.

Job Demands Checklist

For frequency, choose from: frequent, occasional or not applicable (N/A)

Physical Demands	Frequency
Sitting - remaining in a seated position to perform tasks	Frequent
Standing - remaining standing without moving about to perform tasks	Occasional
Walking - Floor type: even / uneven / slippery, indoors / outdoors, slopes	Occasional
Running - Floor type: even / uneven / slippery, indoors / outdoors, slopes	N/A
Bend/Lean Forward from Waist - Forward bending from the waist to perform tasks	N/A
Trunk Twisting - Turning from the waist while sitting or standing to perform tasks	N/A
Kneeling - remaining in a kneeling posture to perform tasks	N/A
Squatting / Crouching - Adopting a squatting or crouching posture to perform tasks	N/A
Leg / Foot Movement - Use of leg and / or foot to operate machinery	N/A
Climbing (stairs/ladders) - Ascend / descend stairs, ladders, steps	N/A
Lifting / Carrying - Light lifting & carrying: 0 - 9 kg	N/A
Lifting / Carrying - Moderate lifting & carrying: 10 - 15 kg	N/A
Lifting / Carrying - Heavy lifting & carrying: 16kg & above	N/A
Reaching - Arms fully extended forward or raised above shoulder	N/A
Pushing / Pulling / Restraining - Using force to hold / restrain or move objects toward or away from the body	N/A
Head / Neck Postures - Holding head in a position other than neutral (facing forward)	N/A
Hand & Arm Movements - Repetitive movements of hands and arms	N/A
Grasping / Fine Manipulation - Gripping, holding, clasping with fingers or hands	N/A
Driving - Operating any motor powered vehicle	N/A

Sensory Demands	Frequency
Sight - Use of sight is an integral part of work performance e.g. Viewing of X-Rays, computer screens	N/A
Smell - Use of smell is an integral part of work performance e.g. Working with chemicals	N/A
Touch - Use of touch is an integral part of work performance	N/A

Psychosocial Demands	Frequency
Distressed People - e.g. Emergency or grief situations	N/A
Aggressive & Uncooperative People - e.g. drug / alcohol, dementia, mental illness	N/A
Unpredictable People - e.g. Dementia, mental illness, head injuries	N/A
Restraining - involvement in physical containment of clients/consumers	N/A
Exposure to Distressing Situations - e.g. Child abuse, viewing dead / mutilated bodies; verbal abuse; domestic violence; suicide	N/A

Environment Demands	Frequency
Gases - Working with explosive or flammable gases requiring precautionary measures	N/A
Liquids - Working with corrosive, toxic or poisonous liquids or chemicals requiring PPE	N/A
Hazardous substances - e.g. Dry chemicals, glues	N/A
Noise - Environmental / background noise necessitates people raise their voice to be heard	N/A
Sunlight - Risk of sunburn exists from spending more than 10 minutes per day in sunlight	N/A
Confined Spaces - areas where only one egress (escape route) exists	N/A
Slippery or Uneven Surfaces - Greasy or wet floor surfaces, ramps, uneven ground	N/A
Inadequate Housekeeping - Obstructions to walkways and work areas cause trips and falls	N/A
Biological Hazards - e.g. exposure to body fluids, bacteria, infectious diseases	N/A

Supporting Respectful Behaviours

What is Supporting Respectful Behaviours?

The *Supporting Respectful Behaviours* program is aimed at approaching bullying and harassment and other workplace conflicts in a different way. Bullying allegations and complaints relating to interpersonal conflict are generally treated in the same way as other misconduct allegations where an employee fails to meet their obligations outlined in Section 9 of the *Public Sector Management Act 1994*. Existing processes can often lead to an overly adversarial complaints management process, and an emphasis on preliminary assessments and investigations which aim to establish fact, and could result in disciplinary action. While this process is important to ensure that we are dealing with complaints appropriately, it rarely resolves the source of conflicts or relationship breakdowns.

The Supporting Respectful Behaviours program:

- Provides staff an alternative avenue for getting advice, and addressing issues regarding workplace issues, to a source independent of their direct line of management or the People and Culture function. This will be done through the introduction of the new role of **Employee Advocate**. The Employee Advocate is confidential, impartial, independent and neutral, and promotes the early and informal resolution of disputes where possible. This role will report directly to the CEO;
- Seeks to resolve workplace conflict issues early and to focus our approach on providing **restorative processes** aimed at addressing underlying relationship breakdowns wherever possible;
- Provides assistance (through People and Culture) to managers to conduct **preliminary assessments** as quickly as possible to ascertain the appropriate action to take; and
- Connects **REDCOs** to the Employee Advocate to ensure our approach is successful, sustainable and that it is embedded within the organisations already existing processes.

What is a restorative process?

Restorative processes are designed to repair relationships that have been damaged. Not all situations can be dealt with through a restorative process. A lot of situations start with a report or complaint. When someone makes a complaint, it is handled through the processes set out in the relevant enterprise agreement. As complainants (the person who makes the complaint) are not informed of the process of assessment, investigation or the outcome, this often compounds the feeling of disempowerment or the feeling that the matter may not have been taken seriously. Conversely, respondents (the person the complaint is about) often raise concern that they were not aware of the impacts of their

behaviour on others, and that no one had ever raised concern with them. Restorative processes aim to provide all parties with the tools to resolve conflict at the early stages, and establish future expectations relating to interactions.

Two restorative processes used are facilitated conversations, and mediation;

Facilitated conversations

Facilitated conversations provide a process in which a facilitator guides participants in reaching acceptable solutions to the issues they face, and are particularly useful as an 'early intervention' step prior to serious breakdown's in relationships. It provides individuals with an opportunity to engage in a respectful and confidential discussion where they can, for example:

Mediation

In some cases, for example where matters have been unaddressed for some time, mediation may be necessary. While Facilitators and Mediators apply many of the same techniques, mediation is a more formal process where parties have been unable or unwilling to resolve their dispute previously. The objective in mediation is usually to achieve a binding and enforceable agreement settling all matters in dispute, and any expectations ongoing.

Additional information

If after undertaking a restorative process and interpersonal conflicts are still present and causing issues within the workplace, please review the following resources for advice on the next steps for the process:

- [Complaints Processes](#)

Further information and support

For any further information or support regarding workplace issues and interpersonal conflict, please contact;

Workforce Relations Unit 620 51445 –or- HealthEmployeeRelations@act.gov.au

ACCESSIBILITY

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Complaints Processes

Avenues to raise an issue or concern include:

- Discuss the matter with your **supervisor or line manager**, who has responsibility to take the concern seriously and act with procedural fairness and natural justice. It is their role to remain neutral and maintain confidentiality and to have a discussion with all parties which will determine if further action is required.
- Approach the **Employee Advocate**. Their role is to provide sound, considered and consistent information and guidance to employees within Canberra Health Services whilst actively supporting staff consistent with the legislative requirements and the employment framework. These conversations are kept strictly confidential, except where there is an imminent risk to someone's health or safety, or the law requires the Employee Advocate to escalate or report the issue (eg corruption allegations)
- Talk to a **Respect, Equity and Diversity (RED) Contact Officer**. They can offer you support and information in managing and preventing bullying, harassment and discrimination in the workplace. Their role is to provide objective and accurate information and support all staff.
- Lodge a complaint through the **Workforce Relations Unit**; report through RISKMAN (which is primarily an accident and injury reporting system) are generally redirected to the Workforce Relations Unit for further advice and management.
- An alternate avenue for employees to raise complaints is through the **Public Sector Standards (PSS) Commissioner**. The PSS Commissioner is independent of the ACT Public Service, reporting directly to the Chief Minister.

How are bullying allegations managed?

Appendix A outlines the Preliminary Assessment (PA) processes that are contained within each of the [ACT Public Service Enterprise Agreements](#).

Due to the nature of government investigations, and our obligations to maintain confidentiality, complainants do not receive any information regarding the outcome of such a process, particularly any action taken against the respondent.

Enterprise Agreement (EA)	Clause	Sub-section
<u>Medical Practitioners</u>	Workplace Values and Behaviours	N
<u>Nursing and Midwifery</u>	Workplace Values and Behaviours	O
<u>Administrative and Related Classifications</u> <u>Support Services</u> <u>Health Professionals</u> <u>Technical and Other Professional</u> <u>Infrastructure Services</u>	Workplace Values and Behaviours	H



What is Misconduct?

Misconduct occurs when an employee fails to meet the obligations outlined in Section 9 of the *Public Sector Management (PSM) Act 1994* or engages in conduct that has brought, or is likely to bring the Directorate or the ACTPS into disrepute.

Examples of misconduct include:

- bullying and harassment
- discrimination
- improper use of territory resources
- unauthorised absence without satisfactory reason
- failure to notify / disclose
- making knowingly false (vexatious) allegations
- failure to comply with lawful and reasonable direction
- taking improper advantage of their position

NOTE: The list of examples above is not exhaustive. Please contact **Workforce Relations** on **620 51646** for further advice regarding specific instances of alleged misconduct in the workplace.

Investigations Process

Following a PA being completed, if there are concerns of a potential breach of Section 9 of the PSM Act this will warrant further investigation, conducted by the Professional Standards Unit (PSU) within CMTEDD. **Appendix B** outlines the Investigations Process.

Investigations are conducted in accordance with the core principles of **natural justice** and **procedural fairness**;

Natural Justice

Ensuring that fairness is provided to all parties. Principles include;

- Allegation should be investigated promptly;
- Person who is alleged to have committed the bullying should be treated as innocent, unless allegations are proven to be true;
- All allegations need to be put to the person they are made against;
- Both parties must be given the opportunity to respond and explain their version of the events, and provide all information to ensure their response is complete; and
- Any disciplinary action needs to be commensurate with the seriousness of the offence

Procedural Fairness

Following a process that is neutral, unbiased and respectful to the rights of all parties involved in the investigation. Principles include;

- Right to be heard;
- Right to be treated without prejudice;
- Right to be informed of all allegations being made;
- Opportunity to respond; and
- Right to enquire about the status of the grievance.

Definitions

Complainant – The individual, or group of people that initiate the complaint/allegation.

Respondent – The individual, or group of people that respond to the complaint/allegation.

Employee representative – A person chosen by an employee, or a group of employees to represent the employee(s) and includes a Delegate or official of the union, a friend, a colleague or any employee member of a workplace consultative forum established under the Enterprise Agreement.

Bullying – is repeated, unwelcome behaviour of a person/s which has the potential to cause harm to a person's wellbeing (eg. verbal abuse, spreading rumours or innuendo, making vexatious allegations, exclusion, interfering with personal property or work equipment).

- Bullying behaviour can be characterised by continued aggressive behaviour that intimidates, humiliates or undermines a person/s;
- Bullying can involve the deliberate misuse of power, and can come from people at level, above or below the recipient in the organisational hierarchy;
- Bullying can also occur outside of work location and hours and still affect the employees work performance or well-being.
- Bullying is not reasonable and appropriately handled management action, eg. Addressing unacceptable behaviour at work. If in doubt please get advice from your manager, the Employee Advocate, your REDCO or People and Culture.

Further information and support

For any further information or support regarding workplace issues and interpersonal conflict, please contact;

Workforce Relations Unit 620 51445 –or- HealthEmployeeRelations@act.gov.au

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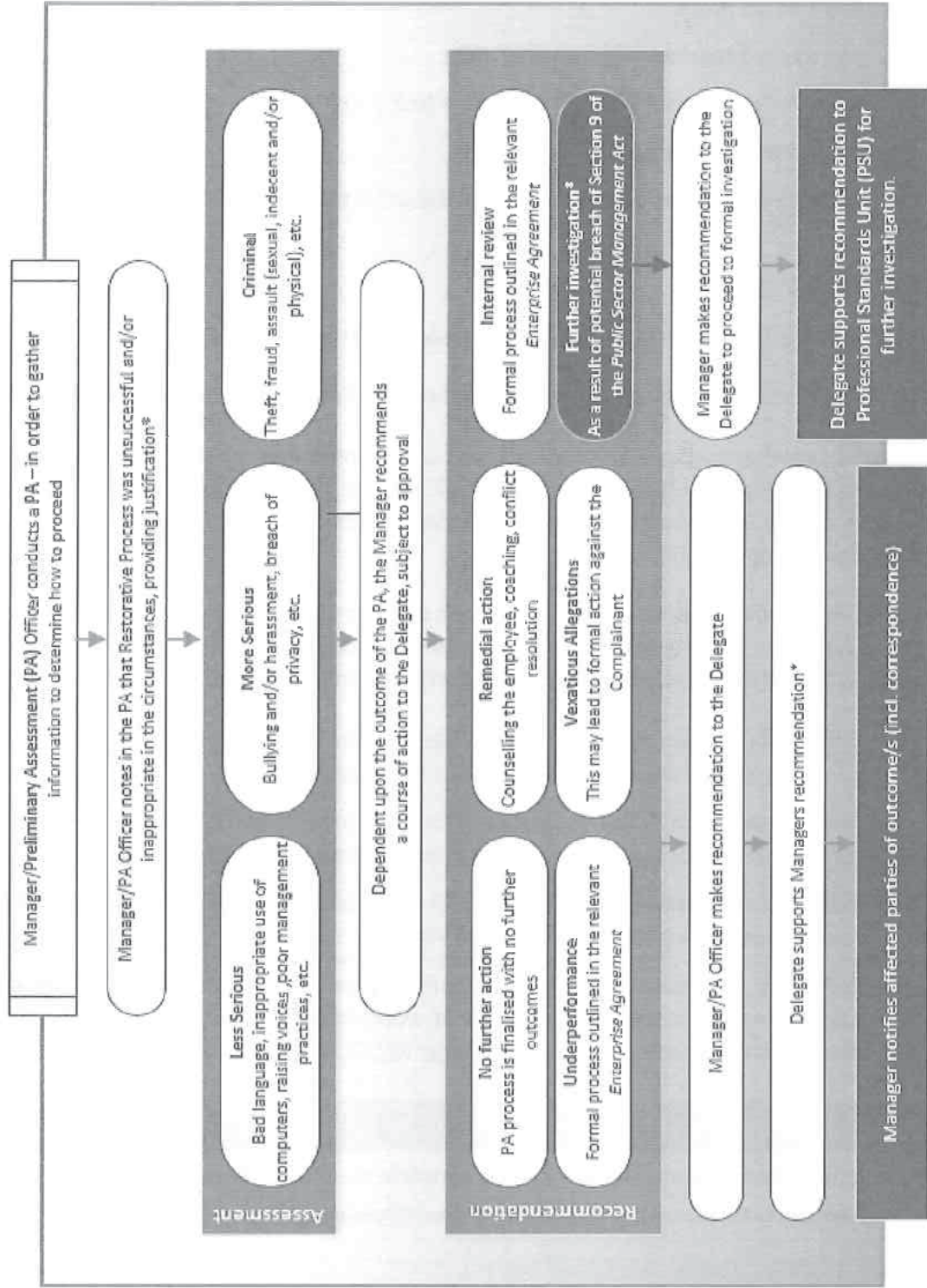
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Preliminary Assessment Process



* PLEASE NOTE – The outcome of a PA process and/or investigation is deemed private information relating to the Respondent, therefore, the outcome of a PA and/or investigation is not communicated to the Complainant