

# **Agenda**

5 May 2020 9:00am-12:00pm Via Webex

		Sponsor
Item 1	Welcome and apologies	
	1.1 Introductions	Chair
Item 2	Minutes of the previous meeting	
	2.1 Minutes from 27 February 2020	Chair
	2.2 Actions Arising – for discussion	Chair
Item 3	Presentations	Chair
	3.1 Annual Review of Culture Review Implementation – Mr Mick Reid	Chair
	3.2 Application of the Workplace Change Framework for the ACT public health system – Ms Jodie Junk-Gibson	D-G, ACTHD
Item 4	Decision and discussion items	
	4.1 Organisation Progress Updates	Regional CEO, Calvary
	4.2 Culture Review Implementation Program Risk	D-G, ACTHD
Item 5	Updates	
	5.1 Member Updates – verbal	All members
Item 6	Information Items	
	6.1 Open Access	EBM, CRI
	6.2 Culture Review Implementation Program Plan	EBM, CRI
	6.3 Implementation of Recommendations and Project Plan and Dashboard	EBM, CRI
Item 7	Other Business	
	7.1 Oversight Group Communique	Chair
	7.2 Oversight Group Key Messages	Chair

### Next meeting:

22 June 2020, 2.00pm-5.00pm

### **Upcoming meetings:**

19 August 2020, 9.00am-12.00pm



### **Minutes**

27 February 2020 9:00am to 12:00pm Building 24, The Canberra Hospital

#### Members:

- Ms Rachel Stephen-Smith MLA, Minister for Health (Chair)
- Mr Shane Rattenbury MLA, Minister for Mental Health (Deputy Chair)
- Mr Michael De'Ath, Director-General, ACT Health Directorate (ACTHD)
- Ms Bernadette McDonald, Chief Executive Officer, Canberra Health Services (CHS)
- Ms Barbara Reid, ACT Regional Chief Executive Officer, Calvary, ACT (CH)
- Ms Madeline Northam, Regional Secretary, Community and Public Sector Union (CPSU)
- Mr Matthew Daniel, Branch Secretary, Australian Nursing and Midwifery Federation ACT (ANMF)
- Dr Antonio Di Dio, President, Australian Medical Association ACT Limited (AMA)
- Ms Wendy Armstrong, Health Care Consumers Association ACT (HCCA), proxy for Ms Darlene Cox, Executive Director, HCCA
- Mr Steve Ross, Australian Salaried Medical Officers' Federation ACT (ASMOF), proxy for Dr Richard Singer, President ASMOF
- Dr Peter Hughes AOM, President, Visiting Medical Officers Association ACT (VMOA)
- Professor Russell Gruen, Dean, College of Health and Medicine, Australian National University (ANU)

#### **Apologies:**

• Professor Michelle Lincoln, Executive Dean, Faculty of Health, University of Canberra (UC)

#### **Staff present:**

- Ms Jodie Junk-Gibson, Executive Branch Manager, Culture Review Implementation Branch (CRI), Office of the Director-General, ACTHD (Adviser)
- Ms Suze Rogashoff, Project and Evaluation Officer, CRI Branch, Office of the Director-General, ACTHD (Secretariat)
- Mr Ash van Dijk, Senior Adviser, Office of Minister Rachel Stephen-Smith MLA
- Ms Sandra Cappuccio, Advisor, Office of Minister Shane Rattenbury MLA

#### Item 1 Welcome

The Chair welcomed members and formally opened the meeting through an Acknowledgement of Country.

The Chair noted the apology from Professor Michelle Lincoln from UC, and acknowledged that there were two proxies for the meeting:

- Ms Wendy Armstrong representing Ms Darlene Cox for the HCCA, ACT; and
- Mr Steve Ross representing Dr Richard Singer for the ASMOF ACT.

The Chair noted that this was the fifth meeting of the Oversight Group and that the meetings continued to be a good opportunity for discussion on how the extensive work on building positive workplaces is being progressed across the ACT public health system.

She reminded members that the role of the Group is to provide high-level governance of the implementation of the twenty recommendations of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Review), and that the Group provides strong and transparent governance to ensure that implementation is efficient and effective, and that staff and stakeholders are appropriately engaged.

She confirmed that the meeting had an interesting and varied agenda, including a presentation from Ms Jacqui Parle from Best Practice Australia to talk about the methodology of the staff surveys recently conducted at CHS and ACTHD. Associate Professor Alessandra Capezio from the ANU would be providing a further update on the findings being used to support the development of the Workplace Change Framework.

The Chair confirmed that the Chief Executive Officer of CHS, Ms McDonald, would provide members with an update on the progress of referrals at Agenda Item 4.1.

The Chair noted that she had reflected on the length of previous meetings, and that to ensure that the Group has sufficient time to enable respectful discussion on agenda items, the duration had been increased by one hour.

The Chair also advised that the Secretariat will seek feedback from members, when the meeting papers are distributed, of agenda items that may be assessed as high priority to ensure enough time is allocated for discussion.

The Chair asked if any member had any actual or perceived conflicts of interest to declare. Noting no comments, she opened the meeting.

#### Item 2 Minutes of the previous meeting

#### 2.1 Approval of minutes

The Chair noted the minutes from the meeting of 19 November 2019 and requested any comments before she asked the Group for their endorsement.

The Chair also noted that members had been provided a copy of the letter from the AMA (ACT) after the November Oversight Group meeting and the Minister's response to that letter.

The Chair also noted that Agenda Item 6.1 provided the Group with an update on the consideration of a Vanderbilt-like model.

No further comments were raised, and the minutes were accepted and endorsed by the Group.

#### 2.2 Actions arising

The Chair noted that most action items had been completed and that those that had not were to be discussed at this meeting. Members agreed.

#### Item 3

# 3.1 Presentation from Best Practice Australia – Background of Staff Surveying in ACT Health, Survey Design and Methodology.

The Chair noted that CHS and ACTHD had conducted their staff surveys in November 2019 and that this had been the first staff survey undertaken since the transition to two separate organisations and the first survey since 2015. The surveys are an opportunity to gain insights from the workforce, an opportunity to hear what our employees have to say and serves as an important baseline measure for each organisation.

The Chair welcomed and introduced Ms Jacqui Parle, Director and Social Researcher from Best Practice Australia (BPA).

Ms Parle provided a high-level overview of BPA who have been facilitating organisational staff surveys since 1992. BPA's research expertise is predominantly in health, aged care and community service organisations.

Ms Parle outlined BPA's survey methodology consisting of seven interlocking elements of organisation culture: Engaging Our People, Identity and Direction, Values, Risk at Work, Leadership Landscape, Organisational Change and Client Engagement. She also defined the six types of culture used in BPA's Model of Engagement: Blame +, Blame, Reaction, Consolidation, Ambition and Success.

Ms Parle explained BPAs engagement cycles: Disengagement Cycle, Swing Voters and Engagement Cycle, and the behaviours displayed by employees in each cycle. She also provided the Group with benchmarking perspectives of the engagement cycles across a number of groups including Public Health Services, Health & Community Services in Queensland and Victoria, and ACT Government Directorates.

Ms Parle reported that the 2019 staff survey results placed both CHS and ACTHD in a culture of Consolidation and that this was reflective of the major organisational change that has occurred since late 2018. She provided an example of change in another health organisation and noted that cultural and organisational change takes time.

Ms McDonald provided the group with information about the 'Message in a Bottle' portion of the survey which provided an avenue for employees to write a message directly to the CEO or D-G and Ms McDonald talked about the value of these messages.

The Chair thanked Ms Parle for the useful and insightful background on survey design and methodology, stating that measuring the health systems progress and gaining an effective baseline is integral to understanding our workforce.

#### 3.2 Presentation from ANU Research School of Management – Workplace Change Framework

Mr De'Ath welcomed and introduced Associate Professor Capezio.

Mr De'Ath reminded the Group that ANU had presented twice previously on the work undertaken, and that at the November 2019 meeting they had identified a number of priority areas for further work including management and leadership skills, psychological safety, workplace civility and organisation-wide workforce metrics.

Mr De'Ath advised that the research team has completed the rapid evidence assessments and are finalising the Workplace Change Framework (Framework), what the assessments have established and then provided one example of how this work will apply in the Framework.

Associate Professor Capezio advised that the Framework would be delivered within the next month and that she has a high level of confidence that the Framework will work if properly implemented. She commented on the strong level of commitment by the leaders of the three organisations in the ACT public health system and the political bipartisan support for the project.

Associate Professor Capezio explained the research team's approach, the evidence-based methodology and the process for workplace change. This process for workplace change involved five steps:

- 1. Problem Clarification Clarify problems and identify priority outcomes;
- 2. Develop Change Framework Conduct Rapid Evidence Assessments on priority outcomes and develop change framework;
- 3. Pilot Interventions and conduct impact evaluations;
- 4. System-Wide Approach Implement adapted interventions across the system; and
- 5. Evaluations and Sustainment system-wide impact evaluation.

Associate Professor Capezio talked to the need to balance urgency with rigour when developing and implementing interventions.

Associate Professor Capezio explained the evidence-based methodology used, describing how all information gained through the consultation process was distilled to key issues, which were then translated into validated academic constructs to enable scientific evidence to be assessed to identify drivers, risk factors and intervention. This information was then translated into the Framework.

Associate Professor Capezio advised of the key change priorities for the ACT public health system:

- System-wide transparency and measurement of work behaviours and outcomes;
- Leadership skills and people skills at work;
- Psychological Safety;
- Workplace Civility;
- Managing individual performance and growth;
- Team effectiveness; and
- Medical and Clinical involvement and representation in strategic decisions.

Associate Professor Capezio provided an example for 'team effectiveness', explaining the approach to undertaking the rapid evidence assessment, the key evidence-based drivers of effective teams, and suggested targeted evidence-based interventions.

**Next steps:** Associate Professor Capezio advised that once the draft Framework was finalised consultation will occur with key stakeholders to finalise the Framework which was expected in March 2020. Planning for the implementation of the interventions in the Framework would then progress.

Mr De'Ath thanked Associate Professor Capezio for her informative presentation and asked the Group if there were any questions.

The Chair acknowledged the work that CHS and ACTHD have undertaken in embedding the values and behaviours in their organisations. She talked about the alignment of the presentations from the staff surveys and the Framework which draws together evidence and research.

There was discussion about the involvement of clinicians in strategic decision making, particularly for Visiting Medical Officers. The Chair stated that all stakeholders need to be involved in solving the problems. It was agreed that issues are not simple and easy, and that collaboration and conversation was needed. It was acknowledged that trust was critical, and members talked about frameworks and fora that provided opportunities for participation in decision making.

There was discussion about staff that do not have the tools or skills to communicate effectively with other staff. Associate Professor Capezio stated that the Framework would identify the skills that were required and the most appropriate way to learn. The Framework would include evidence-based guidelines on how to train staff.

It was acknowledged that the evidence-based approach provided an opportunity to learn from other jurisdictions, but it was also noted that it was important to localise interventions.

Mr De'Ath reiterated that the Framework would be socialised through a workshop with leaders and heads of HR of all three ACT public health system organisations. This will provide an opportunity to test and talk through scenarios and link to staff survey results.

#### Item 4 Discussion and decision Items

#### **4.1 Organisation Progress Update**

Ms McDonald provided a comprehensive presentation to the Group on the progress of referrals at CHS.

Ms McDonald also talked about the CHS Climate Survey results and advised that CHS are unpacking what is happening in areas that are in a Culture of Success with a view to sharing that with areas who are in a Culture of Blame to improve culture.

The Chair thanked Ms McDonald for her update.

The Chair noted that there was a recommendation to remove reporting of referral updates from future meeting, but she stated that she would prefer to keep the updates for the next

couple of meetings as it provided concrete demonstration of work being undertaken. There was general agreement that the updates continue.

#### **ACTION:**

#### ACTHD and CPHB provide comprehensive updates at the April 2020 meeting.

#### 4.2 ACT Health Clinical Advisory Committee (Professional Colleges) – Feedback

The Chair noted that there has been significant interest by a range of stakeholders about being involved and engaged with the Oversight Group.

Ms Junk-Gibson advised that the name of this committee would be changed to ACT Professional Colleges Advisory Committee.

#### 4.3 Annual Review - Terms of Reference

The Chair noted that feedback received from the AMA regarding the Terms of Reference had been considered and some changes had been made to it.

The Chair requested any comments before she asked the Group for their endorsement.

No further comments were raised, and the Terms of Reference were endorsed by the Group.

Ms Junk-Gibson advised that an initial meeting with Mr Mick Reid had been scheduled for 3 March 2020 to discuss logistics and other arrangements. Further information will be provided to members.

#### 4.4 Culture Review Implementation Program Risk

The Chair acknowledged the significant risk that exists across the ACT public health system in approaching culture reform. The Culture Review Implementation Branch continues to work, monitor and manage the risks across the ACT public health system.

The Chair noted the program risks for the Culture Review Implementation program and acknowledged that these will be managed and reported on at regular intervals to the Oversight Group.

#### 4.5 ACT NSW Memorandum of Understanding (MOU) for Regional Collaboration

Mr De'Ath provided an update on the work underway towards the discussions in developing an MOU for improved collaboration between the ACT and NSW health systems for joint Ministerial consideration.

He noted that significant collaboration has been underway between ACT and NSW health systems in keeping with Recommendation 8 from the Review. Recommendation 8 relates to the development of an MOU for improved collaboration between the two health systems for ministerial consideration.

The purpose of the current discussions is to offer further opportunities in clinical and executive experience with the NSW health system.

The MOU will define the guiding principles and overall framework under which the ACT and NSW governments will work together to enhance service delivery for its cross-border communities.

On 16 September 2019, the ACT and NSW Cross Border Senior Officials Working Group was established to progress actions under the MOU and to advance strategic partnerships. A workplan has been agreed upon.

This working group is also working in collaboration with the ACT and Southern NSW Joint Operations Committee to develop the business plan and priority actions that support the improved integration of the ACT and Southern NSW hospital systems.

There was discussion on the HealthANSWERS initiative and the Chair indicated that the MOU would facilitate leveraging partnerships to support HealthANSWERS.

#### 4.6 Culture Review Implementation Program Plan

Mr De'Ath noted the significant work happening across the ACT public health system in implementing the recommendations of the Review. The Program Plan provides a view of the strategic approach in addressing culture and developing positive workplaces across the System.

The Program Plan is a working document and once the Steering Group has undertaken a workshop on the Workplace Change Framework, the Program Plan will be updated to reflect the key initiatives and timeframes for implementation.

#### 4.7 Implementation of Recommendations and Project Plan

Ms Junk-Gibson advised the Group of the significant work happening in the background to support the implementation of the Recommendations. She noted that future meetings would be provided with a dashboard that would provide a view 'on a page' of the status of the implementation and would be supported by the detailed project plan.

The Chair noted the progress made in implementing the recommendations and reminded members that feedback should be provided to the Secretariat.

There was discussion about 'At Risk' items in the project plan with a preference for these items to be highlighted.

#### 4.8 Culture Review Implementation Communications and Engagement Strategy – Action Plan

The Chair noted the importance of communicating information about the Culture Review Implementation to staff.

Ms Junk-Gibson spoke about the complexity of communications due to the system-wide communication and local organisation communications. She stated that each organisation is best placed to communicate with their staff but noted the need for consistency of system-wide messages.

The Chair noted the Action Plan and requested that any feedback from the Members be forwarded through to the Secretariat.

It was also agreed that the Secretariat would provide key messages from each meeting in addition to the minutes and the Communique.

#### Item 5 Member Updates

#### 5.1.a Calvary Public Hospital Bruce

Ms Reid noted that there has been a focus on onboarding new employees through a monthly orientation program, supplemented by a 'Ready Set Go' session for employees who commence on a day other than the day of orientation.

Ms Reid advised that the Speaking Up for Safety program was being launched on Friday 28 February. Nine 'train the trainers' have been accredited by the Cognitive Institute to deliver the program.

The Chair asked Ms Reid to provide a presentation to the Group in the 'Speaking Up for Safety' program at the April Oversight Group meeting.

#### 5.1.b Health Care Consumers Association ACT

Ms Armstrong noted that more emphasis needed to be placed on communicating with consumers, with a focus on the positive things happening in the health system.

#### 5.1.c. Australian Medical Association ACT (AMA)

The Chair acknowledged the balanced response Dr Di Dio had recently provided to the media.

Dr Di Dio acknowledged the work underway, although expressed difficulty in managing members when there is an acknowledgement that particular individuals have a pattern of poor interpersonal behaviour and limited awareness of desire to change.

Conversation amongst the members encouraged Dr Di Dio and other organisations to work in partnership with organisations in devising an approach that supports building positive workplaces and reinforces the expected behaviour of all people within the ACT public health system rather than supporting divisive and fragmented outcomes. There was acknowledgement that there was a desire by the leaders of the three organisations to work with members and other organisations to hear solutions and build shared solutions.

#### 5.1.d. Visiting Medical Officers Association (VMOA)

Dr Hughes noted an article in the press in December 2019 about the Neurology Department at CHS. The Chair noted that things are going to come up in the press and that this can't be controlled.

#### 5.1.e. Community and Public Sector Union (CPSU)

Ms Northam spoke about the political will to change culture across the ACT public health system. She noted that recruitment practices are not ideal with the issues tending to be at the middle manager level. Ms Northam also mentioned the lack of closure around complaints, noting that this was mainly due to privacy issues.

#### 5.1.f. Australian Salaried Medical Officers' Federation (ASMOF-ACT)

Mr Ross commented that he had recently attended preliminary investigation training and noted there were a number of issues with this. Mr Ross also raised concerns about the mental health issues associated with the management of complaints.

#### 5.1.g. College of Health and Medicine, ANU

Professor Gruen noted that the ANU are currently developing their 2020-2025 Strategy that will have a focus on culture, wellbeing and engagement.

He also noted the recent appointment of an Associate Dean for Culture and Wellbeing.

The Chair thanked everyone for their updates.

#### **ACTION:**

Mr De'Ath and Ms Reid to present an update at the next meeting.

#### Item 6 Noting

#### 6.1 Recommendation 3: Promotion of Healthier Culture

The Chair advised that a discussion item is scheduled to be on the agenda for April in providing an update and progress related to recommendation 3.

#### **ACTION:**

Ms Reid will present to the Group on the implementation of the 'Speaking Up for Safety' pilot in CH.

#### Item 7 Other Business

#### 7.1 Oversight Group Communique

The Chair advised that, due to time constraints at the meeting, the Secretariat would distribute the Communique to members for feedback before publishing.

#### **ACTION:**

Secretariat to distribute draft Communique to members with feedback due in one week.

The Chair also advised that the next meeting would also be three hours in duration to ensure that we have sufficient time to enable respectful discussion on the agenda items.

The Chair thanked members for their ongoing contribution and commitment to ensuring that there is enduring and sustainable cultural change and acknowledged the level of respect demonstrated and the willingness to support the work underway.

Next Meeting: 22 April 2020

10:00am – 12.00pm Calvary Hospital

O'Shannassy Building



# **Action Items Register**

Meeting Date	Agenda Item	Action Required	Officer Resp	Due Date	Status
11/06/2019	5.3	Members seeking clarification or updates on referrals to speak directly with D-G ACTHD, CEO CHS and Regional CEO Calvary.	Members	Ongoing	Ongoing
19/11/2019	4.1.l.	Member updates - Ms McDonald to present an update at the next meeting	CEO, CHS	27/02/2020	Refer to Item 4.1 Completed 27/02/2020
19/11/2019	5.3	Measures of success - Secretariat to meet with Health Care Consumers Association to discuss how perceptions and responses from health consumers would be assessed.	Secretariat	27/02/2020	Completed 14/04/2020
19/11/2019	5.3	Measures of success - Revisit at April meeting to confirm alignment with Workplace Change Framework.	Secretariat	22/04/2020	To be included in Agenda for June meeting
19/11/2019	5.4	Annual Review – Terms of Reference - Members to refer to Mr Somerville's feedback to the Terms of Reference.	Members	27/02/2020	Refer to Item 4.3 Completed 27/02/2020

Meeting Date	Agenda Item	Action Required	Officer Resp	Due Date	Status
19/11/2019	5.4	Annual Review – Terms of Reference - Updated Terms of Reference will be presented to the next meeting for endorsement.	Members	27/02/2020	Refer to Item 4.3 Completed 27/02/2020
19/11/2019	5.6	Culture Review Implementation Program Risk - Secretariat to list agenda item earlier in the next meeting's agenda.	Secretariat	27/02/2020	Refer to Item 4.4. 27 Feb 20 Meeting Ongoing
19/11/2019	5.9	Culture Review Implementation Communications and Engagement Strategy - Action Plan 1 to be presented at the February 2020 meeting.	Secretariat	27/02/2020	Refer to Agenda Item 4.8, 27 Feb 20 Meeting Completed
					27/02/2020
27/02/2020	4.1	Organisation progress update – Mr De'Ath and Ms Reid to provide comprehensive updates at the April 2020 meeting	Mr De'Ath Ms Reid	22/04/2020	
27/02/2020	6.1	Ms Reid to present to the Oversight Group in April 2020 on the implementation of the 'Speaking up for Safety' pilot in Calvary Hospital	Ms Reid	22/04/2020	Deferred to later in 2020 meeting due to staff availability
27/02/2020	7.1	Oversight Group Communique - Secretariat to distribute draft Communique to members with feedback due in one week	Secretariat	03/03/2020	Completed



### **Meeting Paper**

Agenda Item:	3.1
Topic:	Presentation: Annual Review of Culture Review Implementation
Meeting Date:	5 May 2020
Action Required:	Noting
Cleared by:	Director-General, ACT Health Directorate

#### **Purpose**

1. Mr Mick Reid will provide the Culture Review Oversight Group (Oversight Group) with a verbal update on the initial findings of the Annual Review of the Culture Review Implementation.

#### **Background**

- Recommendation 19 of the Final Report: Independent Review into the Workplace Culture within
   ACT Public Health Services (the Review) states "That the 'Culture Review Oversight Group' auspice
   for the next three years, an annual, independent and external review of the extent of
   implementation of the recommendations of the Review and consequent impact on cultural
   changes within the ACT Public Health System".
- 3. At the Oversight Group meeting on 4 September 2019, the Minister for Health proposed that the inaugural annual review be conducted in March 2020.
- 4. The Terms of Reference for the Annual Review (<u>Attachment A</u>) were endorsed by the Oversight Group on 27 February 2020.
- 5. Mr Mick Reid from Michael Reid and Associates was contracted to conduct the annual independent and external review. Contractual arrangements were finalised in January 2020 and project initiation commenced in March 2020.

#### **Issues**

- 6. Mr Reid was provided with documentation to support the review including:
  - Oversight Group meeting papers;
  - Steering Group meeting papers; and
  - Program and Project documentation.
- 7. Interviews were conducted with a range of key stakeholders including:
  - Minister for Health;

- Minister for Mental Health;
- Director-General ACT Health Directorate;
- Chief Executive Officer, Canberra Health Services;
- Regional Chief Executive Officer Calvary ACT;
- Members of the Oversight Group;
- Members of the Steering Group; and
- Ms Vicki Dunne, Shadow Minister for Health.

#### Presentation

8. Mr Reid's verbal presentation will enable discussion of the initial findings from the Annual Review.

#### Recommendation

That the Oversight Group:

- Note the verbal presentation provided by Mr Mick Reid from Michael Reid and Associates.



# Culture Review Implementation: Inaugural Annual Review Terms of Reference

#### **Purpose**

1. To outline the scope and terms of reference of the inaugural annual review of the Culture Review Implementation program in support of achieving the 20 recommendations as outlined in the Final Report – Independent Review into the Workplace Culture within ACT Public Health Services (the Final Report).

#### **Background**

- 2. On 10 September 2018, the former Minister for Health and Wellbeing announced the establishment of an Independent Review into the Workplace Culture within ACT Public Health Services.
- 3. The Final Report was released by the former Minister for Health and Wellbeing on 7 March 2019.
- 4. The former Minister for Health and Wellbeing; Minister for Mental Health; Director-General, ACT Health Directorate; Chief Executive Officer, Canberra Health Services; and Regional Chief Executive Officer, Calvary Hospital jointly and publicly committed to implement the 20 recommendations in the Final Report. This was further supported by a Public Commitment Statement released on 4 September 2019 by leaders of the organisations represented on the Culture Review Oversight Group (Oversight Group).
- 5. The Oversight Group is commissioning an annual review of the culture review implementation process and progress, in line with Recommendation 19, in the Final Report which states:
  - 'That the 'Culture Review Oversight Group' auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT Public Health Services'.
- 6. The annual review process is an important independent assessment of the culture review implementation process and its progress in implementing the 20 recommendations in the Final Report. It represents an important learning opportunity and transparent accountability mechanism.

#### Scope

- 7. The scope and focus of this inaugural annual review will be to examine, and make findings and recommendations in relation to the following:
  - a. Record any changes or amendments to the recommendations of the Independent Review of a not insubstantial nature and the reasons for making such changes or amendments.
  - b. The extent of the progress made with the culture review implementation process against the original plans outlined in the Final Report;
  - c. The impact on the workforce culture of the changes introduced to date; and
  - d. The effectiveness of the initiation and planning phase of the culture review process undertaken, including:
    - i. What has worked well and why, and has there been any early impact?
    - ii. What has not worked well and why, and has there been any impact?
    - iii. What may therefore need to change or be improved?
    - iv. What has been learned so far and how can these insights and experiences be leveraged to improve the process and outcomes/impact of the culture review implementation process?

#### Methodology

- 8. The annual review process will draw upon information from a range of sources across the three arms of the ACT public health system, to strengthen its analysis and avoid duplication of effort.
- 9. It is proposed that the annual review include:
  - a. A desktop review of key documentation produced as part of the culture review implementation process across the three organisations. This will include:
    - public statements, documentation from the governance and stakeholder engagement bodies (i.e. the Culture Review Oversight Group, Culture Review Implementation Steering Group, Clinical Leadership Forum, and Health and Wellbeing Partnership Board) as well as from the leadership and staff within each of the three public health organisations;
    - ii. information generated by key initiatives occurring under the banner of the culture review implementation process (e.g. the ANU partnership to develop a Culture Change Framework, and the HR Functions Review); and
    - iii. access to staff climate surveys.

- b. One-on-one interviews with a cross-section of key stakeholders:
  - i. Minister for Health;
  - ii. Minister for Mental Health;
  - iii. Director-General, ACT Health Directorate;
  - iv. Chief Executive Officer, Canberra Health Services;
  - v. Regional Chief Executive Officer, Calvary ACT;
  - vi. select members of the Culture Review Oversight Group and Culture Review Implementation Steering Group; and
  - vii. other nominated key stakeholders;
- 10. Development of a draft Annual Review Report containing findings and initial recommendations for discussion with key leaders; and
- 11. Finalisation and submission of an Annual Review Report by 30 April 2020.

#### Structure, Process and Timing

- 12. The Reviewer will commence work on this review in March 2020 and will provide an Annual Review Report to the Minister for Health and the Minister for Mental Health by 30 April 2020.
- 13. The Minister for Health will table the Annual Review Report in the ACT Legislative Assembly at the earliest opportunity, and thereafter publicly release the Report.
- 14. The Reviewer will determine if some material needs to be anonymised to protect individuals from harm, to the extent that it contains personal information or material provided in confidence.
- 15. The Oversight Group will ensure that the management response to the Annual Review Report guides the next phase of the culture review implementation process and associated initiatives.



### **Meeting Paper**

3.2  Presentation: Application of the Workplace Change Framework for the ACT public health system  5 May 2020
the ACT public health system
5 May 2020
Noting
Director-General, ACT Health Directorate
Ms Jodie Junk-Gibson, Executive Branch Manager, Culture Review Implementation Branch

#### **Purpose**

1. The Culture Review Oversight Group (Oversight Group) will be provided with a presentation on the Workplace Change Framework (Framework) and its application across the ACT public health system.

#### **Background**

- 2. Several of the recommendations from the Final Report: Independent Review into the Workplace Culture within ACT Public Health Services (the Review) are directly linked to organisational behaviour, leadership and workforce. A partnership was established between ACT Health and the Australia National University Research School of Management (ANU-RSM) to develop an evidenced-based Framework. The overarching purpose of the Framework being to provide identification and prioritisation of targeted areas to ensure alignment with the program plan to guide and inform future cultural change initiatives across the ACT public health system.
- 3. The development of the Workplace Change Framework has ensured that:
  - the model and required behavioural change is informed by the recommendations from the Review and through consultation with key stakeholders;
  - measures will be developed to support the Culture Change Framework and an approach to evaluating the impact of interventions using rigorous methods;
  - there is an assessment of available evidence (including literature reviews, rapid evidence
    assessments, critical appraised topics and engagement with professionals through
    facilitated conversations) to understand ACT-specific factors and inform development of
    individual action plans to address recommendations outlined in the Review to effect
    sustainable change; and

- a system-wide approach is developed, involving stakeholder engagement, drawing on expertise in the area of organisational behaviour, to support the incremental development of the ACT public health system approach.
- 4. The presentation by Ms Junk-Gibson will build on discussions and earlier presentations by ANU-RSM to the Oversight Group in September and November of 2019 and February 2020.

#### **Issues**

- 5. Several key themes were identified as a result of stakeholder interviews resulting in ANU-RSM progressing a number of Rapid Evidence Assessments (REA) and Critically Appraised Topics (CAT). Rapid Evidence Assessments (REA's) have been developed on the following topics:
  - The Effectiveness of Leadership Training;
  - Knowledge Worker Performance;
  - The Impact of Line and/or Middle Managers of Workplace Performance;
  - The Effect of Feedback on Workplace Performance;
  - The Effect of Employee Recognition and Non-Financial Awards on Workplace Performance;
  - The Attributes of Effective Teams and Interventions Increasing Team Effectiveness;
  - The Impact and Antecedents of Psychological Safety; and
  - The Antecedents of Workplace Incivility.
- 6. In March 2020, a draft Interim Report, *ACT Public Health System: Investing in Our People: A System-Wide, Evidence-Based Approach to Workplace Change* was also provided to the ACT Health Directorate (ACTHD) by ANU-RSM. This report presented findings for exploratory research involving in-depth interviews, workshops and an online questionnaire of stakeholders from across the health system, alongside findings from a number of REAs.
- 7. ANU-RSM also provided ACTHD with a draft of the ACT public health system: Evidence-Based Workplace Change Framework (Attachment A) and the ACT public health system: Evidence Based Workplace Skills Development Model (Attachment B).
- 8. These documents have been provided to the Heads of HR in the three organisations in the ACT public health system, all members of the Culture Review Implementation Steering Group. This was followed by a meeting to:
  - Provide feedback on the Workplace Change Framework and identify strengths and weakness;
  - Identify aspects of the Framework that can be approached from a system-wide perspective and the aspects that should be organisation nuanced; and
  - Discuss the translation of the Framework into interventions.
- 9. Further meetings have been scheduled on 22 April and 6 May 2020 involving organisation HR and 'people' members who would be directly involved in the translation and application of the Framework.

#### Presentation

- 10. The presentation will provide information on the:
  - Workplace Change Framework; and
  - Workplace Skills Development Model.

#### Recommendation

That the Oversight Group:

- Note the presentation and the work being undertaken to progress the implementation of the Workplace Change Framework and Workplace Skills Development Model.

### ACT public health system: Evidence-Based Workplace Change Framework

Current Situation: There are examples of safe and high performing workplaces across the ACT public health system, however, we are not confident that there is consistency in workplace safety and performance across the system.

Mea:

mediate

#### Our five workplace change priorities

#### **Set Expectations** System-Wide

#### **Build knowledge** through education

#### **Develop People** & Leadership Skills

#### Measure outcomes

- Workplace change framework mapped to and data strategy developed to support
- existing data & priorities, measurement.
- ▶ All leaders educated about the importance of workplace data and metrics in decision-making.
- Alian current training against evidence-based training guidelines. ▶ **Leaders** trained in people
- ▶ Organisational trust. ▶ Trust in decision-making.
- ▶ Behavioural integrity.
- ▶ Perceptions of fairness.

#### **TRANSPARENCY & MEASUREMENT**

- Baseline measurement tool in place.
- Evidence-based guidelines are created for motivating individual performance and growth.
- ▶ All staff educated on evidence-based psychological safety quidelines.
- ▶ Leaders educated about the roles and responsibilities related to facilitating employee performance and growth.

All staff educated about:

Evidence-based workplace

the roles and responsibilities

All staff and leaders educated

▶ Leaders educated about roles

related to psychological safety.

educated on evidence-based

team effectiveness guidelines

▶ **Leaders** educated about roles

and responsibilities related to

psychological safety guidelines

Standards of workplace

▶ **Leaders** educated about

in managing incivility.

on evidence-based

and responsibilities

All staff and leaders

and desired indicators.

team effectiveness.

and desired behaviours.

incivility guidelines.

behaviour.

All staff and leaders trained in: goal setting, communication; and giving/receiving feedback.

and decision-making skills.

▶ **Leaders** trained in: fair and evidence-based decision-making; goal setting (individual and team); & giving and receiving feedback.

#### & information. ▶ Supervisory support.

Access to resources

- Work engagement.
- Perceptions of fairness.

Ouality of co-worker

▶ Perceptions of fairness.

Supervisory support.

▶ Climate for inclusion.

▶ Climate for learning and

Team and social cohesion.

▶ Team psychological safety.

▶ Information sharing and

Ouality of leader/employee

▶ Ethical leadership.

relationships.

▶ Role clarity.

Speaking up.

relationship.

innovation.

Intra-team trust.

Goal setting.

integration.

ᢐ

Role clarity.

#### **WORKPLACE CIVILITY**

**MOTIVATING** 

**INDIVIDUAL** 

& GROWTH

**PERFORMANCE** 

- Baseline measurement tool in place.
- Evidence-based guidelines are created for workplace civility.

- ▶ All staff and leaders trained in: conflict management; communication; and stress
- ▶ Leaders to receive training in: fair & evidence-based decision-making; role clarity; & goal setting.

#### ▶ All staff and leaders trained in: goal setting, conflict

- ▶ Leaders trained in: participative and empowering leadership style; setting climates for learning; role
- ▶ All staff and leaders trained in conflict management.
- ▶ Leaders trained in: psychological safety: providing positive feedback; team goal-setting; inclusive leadership: teambuilding; & facilitation for team learning.

# management.

- management; & communication.
- clarity; and goal setting.



**Our Vision** 

By 2025, employees take pride and have confidence in working in a safe and supportive **ACT** public health system. This will be achieved through effective leadership, transparent decisionmaking, continuous learning and development that will lead to a safer and high performing

workforce.

and higher performing workforce

Safer

#### **PSYCHOLOGICAL** SAFETY

- Baseline measurement tool in place.
- ▶ Evidence-based guidelines are created for psychological safety.

#### **TEAM EFFECTIVENESS**

- ▶ Baseline measurement tool
- Evidence-based guidelines are created for drivers of team performance.

#### 1. System leaders support system-wide approach and measurement of progress.

Σ

2. Organisational values support and align with the workplace change priorities.

- 3. Leaders role model expected behaviours and skills.
- Knowledge and skills development follows evidence-based principles of training design and delivery.
- 5. Employees attend training and leaders enable this to occur.

#### Supporting **Conditions**

### ACT public health system: Evidence-Based Workplace Skills Development Model

#### **FOR EVERYONE FOR LEADERS** Level 4 People skills at work Increase team Level 3 effectiveness Manage conflict collaboratively. Foster Level 2 ▶ Enable reflection ▶ Show recognition. psychological of team processes safety and outcomes. Giving and receiving Level 1 Prevent workplace feedback. ▶ Fnhance team incivility knowledge and Set and clarify goals. Foster and information enhance Leadership skills to ▶ Interpersonal fairness. integration and Safeguard fair inclusion. motivate individual Actively listen and sharing. processes, outcomes performance and growth Set mastery take turns in and interactions. Set team goals. (learning) goals. communication. Cognitive & Manage (co-worker) Enhance Apply an **Decision-**▶ Effectively People skills conflicts. social cohesion empowering making skills communicate. through Minimise work leadership Information Integration of team-building. constraints. style. sharing and information Manage team Encourage Reduce work stress access to and knowledge. diversity. and high job people to resources. Set and clarify speak up and demands. Provide feedback goals for teams ask questions. and individuals. Apply a supportive, to increase participative performance Strategic and growth. leadership style. thinking. Provide role Systems clarity, reduce role thinking. ambiguity and solve task conflict. ▶ Fair and evidence-Provide based supervisory decisionsupport. making Promote external (process and communication. outcomes). Foster social cohesion.



### **Meeting Paper**

Agenda Item:	4.1
Topic:	Organisation Progress Updates – Report from Calvary Public Hospital Bruce
Meeting Date:	5 May 2020
Action Required:	Discussion
Cleared by:	Regional CEO, Calvary ACT
Presenter:	Regional CEO, Calvary ACT

#### **Purpose**

1. That members note the presentations from the Regional Chief Executive Officer, Calvary ACT, to provide an update on the management of referrals from the Panel conducting the Independent Review in the two organisations.

#### **Background**

- 2. The Culture Review Oversight Group (Oversight Group) is briefed at every meeting by the Leadership Team on progress made in each area referred by the Panel.
- 3. At the Oversight Group meeting on 27 February 2020 the Chief Executive Officer, Canberra Health Services presented the organisation's progress in managing the referrals and proactively investing in broader workplace environments.
- 4. It was agreed at that meeting that a presentation would be provided by ACTHD and Calvary Public Hospital Bruce at the next Oversight Group meeting on their progress in managing referrals from the Panel.
- 5. In the meeting, Ms Barb Reid, Regional CEO of Calvary ACT will provide an update of the progress made to date.
- 6. Ms Kylie Jonasson, Director-General Act health Directorate will provide an update of the progress made to date on 22 June 2020.

#### Recommendation

That the Oversight Group:

 Note the information provided by the Regional Chief Executive Officer, Calvary Hospital about progress made in addressing the referrals from the Panel.



### **Meeting Paper**

Agenda Item:	4.2
Topic:	Culture Review Implementation Program Risk
Meeting Date:	5 May 2020
Action Required:	Discussion
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Executive Branch Manager, Culture Review Implementation Branch

1. To provide the Culture Review Oversight Group (Oversight Group) with an update of key program risks identified for the culture review implementation, incorporating the impact of COVID-19 on the program.

#### **Background**

- 2. The Program Risk Register identifies the key risks associated with the culture review implementation.
- 3. It is acknowledged that COVID-19 has had significant impact on international and domestic health sectors, and that this has impacted on the ACT jurisdiction.
- 4. Project risk and issues management is proactive throughout the life of the program. The early consideration of risks at the outset and as an iterative process will have significant implications for the overall success of the Culture Review Implementation program.
- 5. Failure to undertake effective project risk and issues management will result in cost overruns, schedule slippage and shortfalls in capability and resourcing. Effective project risk and issues management is essential to anticipate, understand and manage risks.

#### **Issues**

- 6. There are 45 program risks identified in the Program Risk Register. An Executive Overview of the key risks, their current levels and controls are listed in priority order in Attachment A.
- 7. The Executive Overview has been updated to include risks associated with COVID-19.
- 8. The register is intended to be a living document that will be reviewed and updated as required.

#### Recommendation

That the Oversight Group:

Note the key program risks identified for the Culture Review Implementation.

# **Culture Review Implementation Oversight Group**



## **Executive Overview of the Culture Implementation Program Risk Register as at April 2020**

Risk Rating	Risk	Source	Impact	Controls (best of)
High	Ref46: Unable to deliver program within agreed tolerances due to impact of COVID-19.	<ul> <li>Governance mechanisms and availability of members;</li> <li>Reduced engagement with key stakeholders;</li> <li>Key program and project resources are redeployed to areas of need;</li> <li>Changes to ACT Government/ACT public health system priorities;</li> <li>Extensive program delays resulting from postponement of critical activities due to the impacts of COVID-19.</li> </ul>	<ul> <li>Delayed decisions impact program schedule, budget and quality;</li> <li>Project activities unable to commence without appropriate resourcing and engagement;</li> <li>Loss of knowledge and inefficiencies due to redeployment of key resources;</li> <li>Quality of program is compromised;</li> <li>Negative impact on momentum across System;</li> <li>Negative impact on workforce trust;</li> <li>Additional funding may be required to support the extension of program resources beyond FY 2022-23.</li> </ul>	<ul> <li>CRI Branch continues to progress foundation work;</li> <li>Out of session meetings with Steering Group members/key stakeholders to progress work on the critical path;</li> <li>CRI Branch to assess impact of COVID-19 on program delivery (resourcing, contract commitments, schedule and budget) and provide recommendations to the Steering Group for discussion and decision (May 2020);</li> <li>Program Plan to be re-baselined following Steering Group consideration of program impacts.</li> </ul>
High	<u>Ref36:</u> Loss of key personnel.	<ul> <li>Redeployment of key personnel due to COVID-19;</li> <li>Insufficient support;</li> <li>Unclear or change in team/individual role;</li> <li>No succession planning or workload sharing across teams.</li> </ul>	<ul> <li>Quality of program is compromised;</li> <li>Lack of continuity of project/program resources and SMEs may lead to loss of background knowledge and inefficiencies;</li> <li>Potential impact to program schedule and budget.</li> </ul>	<ul> <li>Regular team meetings to share knowledge and information;</li> <li>Documentation;</li> <li>Upskilling and staff training.</li> </ul>
High	<u>Ref15:</u> Resources failure.	<ul> <li>Lack of skill or expertise across system to deliver initiatives effectively;</li> <li>Resourcing provided by organisation to support change;</li> <li>Capability deficits;</li> <li>Competing BAU responsibilities;</li> <li>Budget constraints.</li> </ul>	<ul> <li>Unable to deliver change interventions;</li> <li>Interventions do not achieve the expected benefit across system or in isolated areas;</li> <li>Inconsistent improvement of workplace culture across the system;</li> <li>Impacts to program schedule and budget.</li> </ul>	<ul> <li>Organisations submit funding requests to the Steering Group for consideration, where resourcing is required for implementation activities;</li> <li>Training for project resources to ensure that a standard project methodology is applied across system.</li> </ul>
High	Ref40: Governance mechanisms may not provide sufficient oversight and control, or speed of decision making to enable delivery of projects within the agreed scope, schedule, quality or cost tolerances.	<ul> <li>Poorly defined responsibilities for governance committees;</li> <li>Quality of reporting to governance committees;</li> <li>Reporting mechanisms between system and organisation governance groups;</li> <li>Culture Review Implementation Branch not made aware of relevant governance mechanisms that may decide upon cultural improvements across system;</li> <li>Impact of COVID-19 on key stakeholders and decision makers.</li> </ul>	<ul> <li>Impact to quality of project, schedule or budget;</li> <li>Benefits not realised;</li> <li>Continued reporting of issues identified in Review.</li> </ul>	<ul> <li>Terms of Reference for governance committees including role and responsibilities;</li> <li>Quality of papers and information provided to governance committees;</li> <li>Allow for review of information and decisions out of session.</li> </ul>

Risk Rating	Risk	Source	Impact	Controls (best of)
High	Ref 2: The Recommendations of the Culture Review and the associated implementation schedule are not delivered.	<ul> <li>Governance and oversight of program;</li> <li>Misalignment on strategic direction;</li> <li>Program and project management capability and capacity across system;</li> <li>Change management, stakeholder engagement and communication - capability and capacity across System;</li> <li>Siloed approaches to implementation, communication and change management;</li> <li>Stakeholder engagement and availability;</li> <li>Competing Government/organisational priorities or changes to Government/organisational priorities;</li> <li>Operational requirements in response to COVID-19;</li> <li>Staffing impacts due to COVID-19;</li> <li>Decisions delayed due to impact of COVID-19.</li> </ul>	<ul> <li>Inability to retain or attract capable workforce;</li> <li>Harm to staff resulting from poor workplace culture, bullying and harassment;</li> <li>Culture Review Implementation budget impacted due to program schedule delays;</li> <li>Loss of productivity and service delivery capacity;</li> <li>Loss of trust and reputational damage.</li> </ul>	<ul> <li>A strong governance framework has been established to oversight and direct the program;</li> <li>Culture Review Implementation Branch established to facilitate the implementation of the program across the System;</li> <li>Agreed program strategy - Program Planning, Communications and Stakeholder Engagement Strategy, Workplace Change Framework;</li> <li>Formal mechanisms have been established by the CRI Branch for engaging with stakeholders and support the delivery of the program of work across each organisation;</li> <li>Monitoring and reporting on progress to governance groups and the community;</li> <li>Annual Report, Biannual Updates and Annual Independent Review;</li> <li>Record keeping and documentation of decision making;</li> <li>Action plans, delivery timelines and responsibility to be agreed by Steering Group.</li> </ul>
High	Ref 35: The cost of Culture Review Implementation will be higher than estimated.	<ul> <li>Budget required to implement and embed sustainable change across the system underestimated in approved business case;</li> <li>Resourcing required to implement and embed change across system;</li> <li>Siloed rather than strategic approach to delivering the recommendations of the Review;</li> <li>Agreement on strategic direction and key priorities;</li> <li>Resourcing and schedule impacted due to impacts of COVID-19.</li> </ul>	<ul> <li>Program quality may be compromised in order to meet budget/schedule/ resourcing constraints;</li> <li>May be required to find or request additional budget to support implementation;</li> <li>Benefits may not be realised.</li> </ul>	<ul> <li>Steering Group to approve the strategic approach and priorities;</li> <li>CRI Branch responsible for administration of budget, Steering Group responsible for monitoring financial performance;</li> <li>Budget governance and administration review;</li> <li>5% contingency built into budget;</li> <li>Planning underway to understand impacts of current contracts and resourcing on program due to the COVID-19 pandemic;</li> <li>Recommendations to be provided by Culture Review Implementation Branch to Steering Group for discussion and decision.</li> </ul>
High	Ref 27: Insufficient engagement with key stakeholders	<ul> <li>Key stakeholders not identified;</li> <li>Representation on governance groups;</li> <li>Consultation and engagement on key issues;</li> <li>Willingness to engage;</li> <li>Capacity to engage due to conflicting priorities such as COVID-19 or other operational requirements.</li> </ul>	<ul> <li>Lack of support for Culture Review Implementation;</li> <li>Lack of understanding on strategic direction and progress of activities;</li> <li>Missed opportunity to facilitate information through stakeholder groups to members/staff;</li> <li>Disenfranchised stakeholders;</li> <li>Delays in decision making impact schedule and budget.</li> </ul>	<ul> <li>Strong Governance structure has been established;</li> <li>Consultation outside of governance groups on key issues;</li> <li>Communications through various channels, as defined in the Communications and Engagement Strategy and action plans.</li> </ul>

Risk Rating	Risk	Source	Impact	Controls (best of)
High	Ref14: Inconsistent approach to delivering interventions for positive workplace culture across the system.	<ul> <li>Lack of agreement for the implementation approach;</li> <li>Individual services undertake projects or initiate interventions independently of the Culture Review Implementation without adequate analysis of systemwide inter-dependencies and risk;</li> <li>Implementation planning;</li> <li>Inconsistent processes across the system;</li> <li>Resourcing capacity and capability across system;</li> <li>Roles and responsibilities inadequately defined;</li> <li>Project management.</li> </ul>	<ul> <li>Interventions do not achieve the expected benefit;</li> <li>Inconsistent improvement of workforce culture across some areas of the System.</li> </ul>	Steering Group is responsible for endorsing the strategic approach and monitoring the progress of the implementation across the system.
High	Ref 20 Capability deficits across the health system for addressing organisational behaviour, workforce and leadership issues.	Staff do not have the required training, skills or experience to undertake a strategic, evidence-based approach to addressing the issues.	<ul> <li>Siloed approach to addressing issues limits opportunity for system-wide, sustained change;</li> <li>Negative perception of Health System due to inability to implement and measure sustained change;</li> <li>Continued reporting of poor workforce culture within the ACT Health System.</li> </ul>	<ul> <li>System-wide HR Functions Review is currently in progress.</li> <li>Workplace Change Framework will further support identification of capabilities required across the system to effect sustainable culture change.</li> </ul>
High	Ref44: Project risks are not identified within each organisation or documented on the Program Risk Register.	<ul> <li>Culture Review Implementation projects managed by different teams across each organisation;</li> <li>Project methodology not applied consistently across system;</li> <li>Project resource expertise, capability and capacity;</li> <li>Program coordination and project reporting;</li> <li>Non-compliance with program risk framework.</li> </ul>	<ul> <li>Project risks are not visible to governance committees for ongoing monitoring and management;</li> <li>Impacts of risk to other organisations are not recognised or managed;</li> <li>Restrict early intervention of issues.</li> </ul>	<ul> <li>SharePoint site developed for organisations to share risks and review risks;</li> <li>Training for all project staff on standard ACT Government risk management.</li> </ul>



## **Meeting Paper**

Presenter:	All members
Cleared by:	Chair
Action Required:	Noting
Meeting Date:	5 May 2020
Topic:	Member Updates
Agenda Item:	5.1

#### **Purpose**

1. Members to provide an update to the meeting on progress and issues relevant to their culture review implementation process.

#### Background/Issues

- 2. The update for Director-General, ACT Health Directorate and the Regional Chief Executive Officer, Calvary ACT will be provided in agenda item 4.1.
- 3. The written update for the Calvary Public Hospital Bruce and Culture Review Implementation Branch, ACT Health Directorate are provided at <u>Attachment A</u>.

#### Recommendation

That the Oversight Group:

Note the updates provided by members.



## Calvary Public Hospital Bruce Report

Meeting Date: 5 May 2020

Progress against recommendations from The Final Report:

The Great Workplaces Program (Program) of work has been launched to implement the Recommendations from the Culture Review at Calvary Public Hospital Bruce (CPHB). The Program of work is being developed against an e3 model: Engage, Enable and Empower which is the over-arching framework for CPHB's response to all relevant recommendations. Workplace culture will play an integral role in each concept and professional development resources are being developed to empower staff to work in new ways.

The ANU has also provided the draft Interim Report Investing in Our People: A System –Wide, Evidence-Based Approach to Workplace Change which includes the Workplace Change framework and Workplace Skills Development Model. The Great Workplaces Program has been reviewed to include key initiatives from the Interim Report.

#### **Recommendation 1:**

CPHB's redesign and implementation of their Performance Development Plan (PDP) Framework and template has resulted in 94%+ staff developing their PDP and having a conversation with their manager about their objectives and future development. An analysis of the completed PDP's has been undertaken and has identified some further training areas which will include developing guides for managers to assist with having PDP discussions.

Scope has begun to develop an online PDP tool for staff. This will include embedding the Values In Action Framework (VIAF) to assist with demonstrating our values through our work. Work has also commenced to map learning and development activities against the VIAF to assist with identifying development opportunities. Training sessions will be organised for staff to introduce the VIAF, its components, how to utilise the tool and how it aligns with CPHB's Values and their roles.

#### **Recommendation 2:**

Calvary National will be conducting an employee survey to be delivered by Gallup. Gallup will provide post-survey analysis and tools to address issues and will provide a baseline for employee engagement. This has been placed on hold due to COVID-19.

#### **Recommendation 3:**

The Speaking Up for Safety programme was launched on Friday 28 Feb 2020. Five CPHB staff have now been accredited by The Cognitive Institute (under licence by Vanderbilt) to deliver this programme. The programme was scheduled to commence rollout after the NSQHS accreditation survey at CPHB in late March 2020 however has been put on hold due to COVID-19 and the restrictions to key stakeholder's availability. Options are currently being investigated to deliver this training via virtual platform.

CPHB have been participating in mapping the application of the Respect, Equity and Diversity (RED) Framework and the complaints and grievance processes. This work is currently being undertaken by a Business Analyst who has been engaged by the Culture Review Implementation Branch. Process Maps and SWOT analysis have been developed as part of this piece of work and are currently being reviewed.

#### **Recommendation 13:**

Initiatives to increase Managers' capabilities across CPHB has commenced. The initiatives include design of a web presence to host tools and resources to assist managers at all stages of an employee cycle. This includes cascaded scripted conversation starters to assist managers to talk to their teams aimed at embedding the fundamental elements of positive workplace culture (i.e. Engagement, Performance, and Feedback etc.), a reporting suite along with a dashboard with key data and analytics, workforce planning tools, performance and development templates and other related resources.

#### **Recommendation 16:**

To ensure we create a Safe Working Environment, a comprehensive framework on Workplace Violence and Aggression has been developed for CPHB. The Framework focuses on four key elements; (i) Governance, (ii) Awareness, (iii) Training and (iv) Support. A training matrix, local policy and procedure for staff has been developed and is now out for consultation. The finalisation of a customised e-Learning and face to face training package for the organisation is in progress and the reporting mechanism(s) are currently under review.

Overall the project plan and its rollout has been hindered due to COVID-19 and change in business priorities. Work is progressing where possible to continue to develop resources and tools and alternative avenues are being considered as to how to roll out the material in the current climate.

Risks/ Issues: Nil currently

**Recommendation:** Constant monitoring of activity through CRISG.

**Presenter:** Barbara Reid



### Report

### **Culture Review Implementation Branch Update**

Meeting Date: 22 April 2020

Summary of Overarching Strategic approach to facilitating cultural change across Activity: the ACT public health system:

> **Recommendation 2:** ANU-RSM has provided the draft Interim Report Investing in Our People: A System-Wide, Evidence-Based Approach to Workplace Change (Interim Report) which includes the Workplace Change Framework and Workplace Skills Development Model. In addition to the ongoing analysis of workforce data and development of workforce reports to inform the Workplace Change Framework, an initial meeting with the Heads of Human Resource (HR) in all three organisations has occurred to discuss the application and implementation of the Workplace Change Framework. Consolidated feedback of the Interim Report has been provided to ANU-RSM to enable the Final Report to be completed.

> A draft Action Plan has been developed to support the implementation of the recommendations from the Interim Report and to identify initiatives that apply to the entire health system and those that are organisation specific. Consultation regarding the Action Plan is progressing with members from the Culture Review Implementation Steering Group. Further meetings have been scheduled with the Heads of HR across the three arms of the ACT public health system and identified HR staff to plan the application of the Framework across the system.

The Culture Review Implementation Program Plan has also been reviewed to include key initiatives from the Interim Report.

Recommendation 3: Ongoing investigation and due diligence regarding implementation of a Vanderbilt-style model; and undertaking a range of foundation work prior to the finalisation of the Workplace Change Framework. Due to the impact of COVID-19 on workloads and key stakeholder availability, engagement within ACTHD and CHS to progress this initiative has temporarily been placed on hold.

The focus of work in mapping the application of the Respect, Equity and Diversity (RED) Framework in each organisation across the ACT public health system has progressed to considering implementation of evaluation points. Evaluation is absent in the Framework. The CRI Branch is partnering with the People Strategy Section in the ACTHD to develop tools to facilitate measuring the effectiveness of RED Contact Officer contacts.

Mapping of the complaints and grievances process has commenced in both the ACTHD and Calvary. The initial consultation process has identified the complexity and variety of complaints and grievances received and the multitude of avenues to progress matters. The project has identified a number of strengths, opportunities and risks. This was scheduled to have commenced at Canberra Health Services in March, however, has been placed on hold due to resourcing challenges as a result of COVID-19. This will resume in due course.

**Recommendation 14:** The HR Functions Review has also been placed on hold due to COVID-19. Prior to the project ceasing, all consultation within the ACTHD had been undertaken. Consultation with HR professionals in Calvary has occurred, and initial meetings in CHS have been undertaken. Once the situation changes, the consultation process will resume.

**Recommendation 19:** Mick Reid from Michael Reid and Associates commenced work on the Annual Review in March 2020. One-on-one meetings are being conducted using videoconferencing facilities and are expected to be completed by mid-April 2020.

The Biannual Update on the Implementation of the Recommendations of the Final Report: Independent Review into the Workplace Culture within ACT Public Health Services was tabled in the Legislative Assembly on 2 April 2020. This update also included a response to Recommendation 75 of the Select Committee on Estimates 2019-20 Report: Health Culture Survey.

Work has commenced on developing a Benefits Management Approach defining the action and benefits reviews that will be put in place to ensure that the program outcomes are evaluated and achieved and that program benefits are realised.

**Recommendation 20:** A change management strategy is also under development with research undertaken to identify potential change models. A draft 'Organisational Change Scaffold' has been developed which draws together all related initiatives to provide a picture of the scope of the change to enable action plans to be developed to support the change process.

There has been a focus on developing a 'visual identity' for the culture review program of work. A distinct culture review design has been developed to enhance our workforce's recognition of the work being undertaken to effect positive workplace change. An extensive consultation process has been undertaken and the new Culture Review Visual Identity has been incorporated into the Oversight Group Communique document.

**Risks/ Issues:** There has been a delay in some work as a result of reprioritisation of

resourcing due to COVID-19.

Recommendation: Noting

Attachments: Nil

**Presenter:** Director-General, ACT Health Directorate



## Report

## **ACT Health Directorate Progress Report**

Meeting Date: 5 May 2020

Summary of Recommendation 2: Climate Survey results have been released with

**Activity:** high level results provided to the Legislative Assembly.

**Recommendation 3:** 263 staff have attended Conscious Interactions workshops, 76 staff have attended Being a Conscious Leader, 25 staff have attended the Respect Equity and Diversity rebooted programs.

**Recommendation 6:** The Non-Government Organisation Leadership Group (NGOLG) is well established with meetings held on 24 February 2020 and 30 April 2020.

**Recommendation 8:** ACT and NSW have commenced drafting the Cross-Border agreement for consideration at the Senior Officials Working Group meeting on 4 May 2020, prior to submitting the draft agreement to the ACT and NSW Health Ministers.

Progress against recommendations from The Final Report:

**Recommendation 1:** Values Champion Masterclasses have been embedded and will continue to be scheduled on an ongoing basis.

**Recommendation 2:** Culture improvement activities identified from the Workplace Climate Survey will be identified and embedded within Division business plans.

**Recommendation 3:** The Directorate has been working with a business analysist to explore and provide recommendations to improve the management of misconduct processes. A draft process map has been developed, describing the current Directorate process, consistent with legislation, policies and contemporary HR practices.

**Recommendation 4:** A summit of senior clinicians and administrators has been placed on hold due to the current COVID-19 pandemic.

**Recommendation 6:** Continued engagement with peak NGOs to develop a joint response to COVID-19. For the immediate future, the NGOLG will continue to meet weekly to consider priority matters related to supporting NGOs in providing health services to the most vulnerable during the COVID-19 pandemic.

Recommendation 8: ACT and NSW officers have commenced drafting the ACT/NSW Cross Border agreement for Ministers to review. Initial plans were to provide a draft for Ministerial consideration in March 2020 but the current COVID-19 situation has delayed senior official's consideration of the draft Agreement. The draft agreement includes several schedules and specific actions to better integrate ACT and Southern NSW health services e.g. data system integration, revised referral pathways, joint planning initiatives etc. The agreement will also include detailed governance arrangements to ensure accountability for agreed actions. All actions have been grouped according to a 1-5 year implementation schedule.

**Recommendation 13:** Leadership and mentoring are identified foundational priorities in the Workplace Change Framework. Initial discussions to inform concept development related to leadership and mentoring are underway from a system-wide perspective by members of the Steering Group.

Recommendation 14: The health system has engaged a consultant to undertake the HR Functions Review. In the Directorate, the consultant has met with key stakeholders and has conducted a workshop with the HR team and one of two workshops with internal clients of HR. Information gathered through the consultation process will be used to inform the HR Review. The HR Review was placed temporarily on hold in response to reprioritisation of resources to manage COVID-19, however it is likely that the HR Functions Review will resume in coming weeks.

**Recommendation 15:** Over 60 staff have attended Better Practice Recruitment training sessions with training to continue to be scheduled on an ongoing basis. The revised recruitment policy has been completed.

**Recommendation 16:** Core learning programs have been reviewed and aligned with the ACTPS Core Learning Framework.

Risks/ Issues:	A paper will be considered at the next Steering Group meeting in relation to the delay in implementing Recommendation 4.
Recommendation:	Noting
Attachments:	Nil
Presenter:	Kylie Jonasson, Director-General, ACT Health Directorate



# **Meeting Paper**

Agenda Item:	6.1
Topic:	Open Access Information Scheme
_	5 May 2020
Action Required:	Noting
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Executive Branch Manager, Culture Review Implementation Branch

#### **Purpose**

1. To provide the Culture Review Oversight Group (Oversight Group) members with information on the proposed approach to release meeting papers from Oversight Group meetings under the Open Access Information Scheme.

### **Background**

- 2. The *Freedom of Information Act 2016* (the FOI Act 2016) declares certain categories of government-held information as publicly available information, or open access information. The Open Access Information Scheme (OAIS) represents stages that describe the process of assessment and proactive release of open access information on the web.
- 3. The mandatory proactive public release of open access information ensures the democratic principle that government information is a national resource that should be available for the members of the ACT community.
- 4. Section 23 of the FOI Act 2016 specifies 12 categories of information that agencies will generally be expected to publish, unless it would be contrary to the public interest to make that information publicly available. This information includes (among others) agencies' functional information; policy documents; budgetary papers; agency's disclosure log; information declared by Ombudsman and information prescribed by regulation. As well, from 1 January 2023, some categories of ministerial briefs will be subjected for publication under the OAIS.

#### **Issues**

- 5. In May 2019, an FOI application (FOI 19/22) was received which requested copies of documents relating to the Independent Culture Review. This request included all documents relating to the initial meeting of the Culture Review Oversight Group on 28 March 2019.
- 6. Following release of the documentation, the applicant submitted an application for Ombudsman review and as a result of this review, the information that had been redacted was reduced to **only** include the list of clusters or referral areas referred by the Review.

- 7. It is proposed to apply the same approach and consideration to all Oversight Group meeting papers.
- 8. A following review and approval process has been developed:
  - a. PDF all meeting documents into a single document and file in Open Access folder on the ACT Health Directorate network drive;
  - b. Undertaken an initial review of document to identify any content that should be redacted as referred to in point 6;
  - c. Identify any contentious or ambiguous content that may be redacted and seek guidance and advice from the ACTHD FOI Coordinator;
  - d. Final review of documents to ensure content to be redacted complies with the previous decision made by Ombudsman (re FOI19/22) and seek approval of EBM CRI Branch (including any advice received from the FOI Coordinator if applicable);
  - e. Seek Minister approval to publish the Oversight Group meeting papers from each meeting, including a summary of any information to be redacted; and
  - f. On receipt of approval to publish from Minister, arrange for document to be published on website.

#### Recommendation

That the Oversight Group:

- Note the proposed approach to the release of meeting papers from Oversight Group meetings under the Open Access Information Scheme.



# **Meeting Paper**

Agenda Item:	6.2
Topic:	Culture Review Implementation Program Plan
Meeting Date:	5 May 2020
Action Required:	Noting and feedback
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Executive Branch Manager, Culture Review Implementation Branch

#### **Purpose**

1. To seek feedback from the Culture Review Oversight Group (Oversight Group) on the evolving Culture Review Implementation Program Plan 2019-2022 (Program Plan).

### **Background**

- 2. The aim of the Program Plan is to provide an overarching strategic framework for the Culture Review Implementation program.
- 3. The draft Program Plan 2019-2022 on-a-page is at Attachment A
- 4. Feedback on the Program Plan is invited from the Oversight Group members. Members are encouraged to provide ongoing feedback to the Secretariat as the Program Plan evolves.
- 5. Agenda Item 6.3, Implementation of Recommendations and Project Plan, nests beneath the Program Plan.

#### Issues

- 6. Since the last Oversight Group meeting of 22 February 2020, the Program Plan has been updated and changed from four domains to three.
- 7. Governance and Oversight is placed over the three domains. The three domains of the revised Program Plan are:
  - a. Organisational Behaviour, Workforce and Leadership;
  - b. Education and Research; and
  - c. Structure and Engagement.
- 8. The Program Plan 2019-2022 has also been updated to reflect the implementation plan for initiatives commencing in Phase One of the program.

- 9. The Program Plan 2019-2022 outlines how health services across the ACT public health system and the community will work together to lay the groundwork for the future. With a strong focus on organisational behaviour, workforce and leadership change and building a solid evidence-base, this Program Plan will put in place strategic projects and actions which will provide the foundations to drive long-term results while also implementing priority actions in the short-term.
- 10. The Program Plan is intended to be a living document that will be developed in phases. The first phase of the Program Plan (July 2019 to June 2020) will build the foundation for future years.
- 11. Strategies in Phase One include:
  - Partnering with stakeholders across the ACT health sector in all levels of planning, delivery and evaluation;
  - Ensuring that an evidence-based methodology is applied to intervention design and evaluation;
  - Identifying, mapping and responding to core issues, recognising idiosyncrasies of the ACT Public Health Service and adapting interventions for each individual organisation as required;
  - Defining the capabilities that are required to flexibly respond to the identified issues and increase workforce capability where required; and
  - Investing in capability development of the workforce to support organisational behaviour, workforce and leadership change.
- 12. Over time the Program Plan will be revised to reflect:
  - New challenges and priorities;
  - Emerging evidence and opportunities; and
  - Complementary strategic interventions and responses on workplace culture across the ACT public health system.

### Recommendation

That the Oversight Group:

- Note the Program Plan for the Culture Review Implementation.

### **VISION**

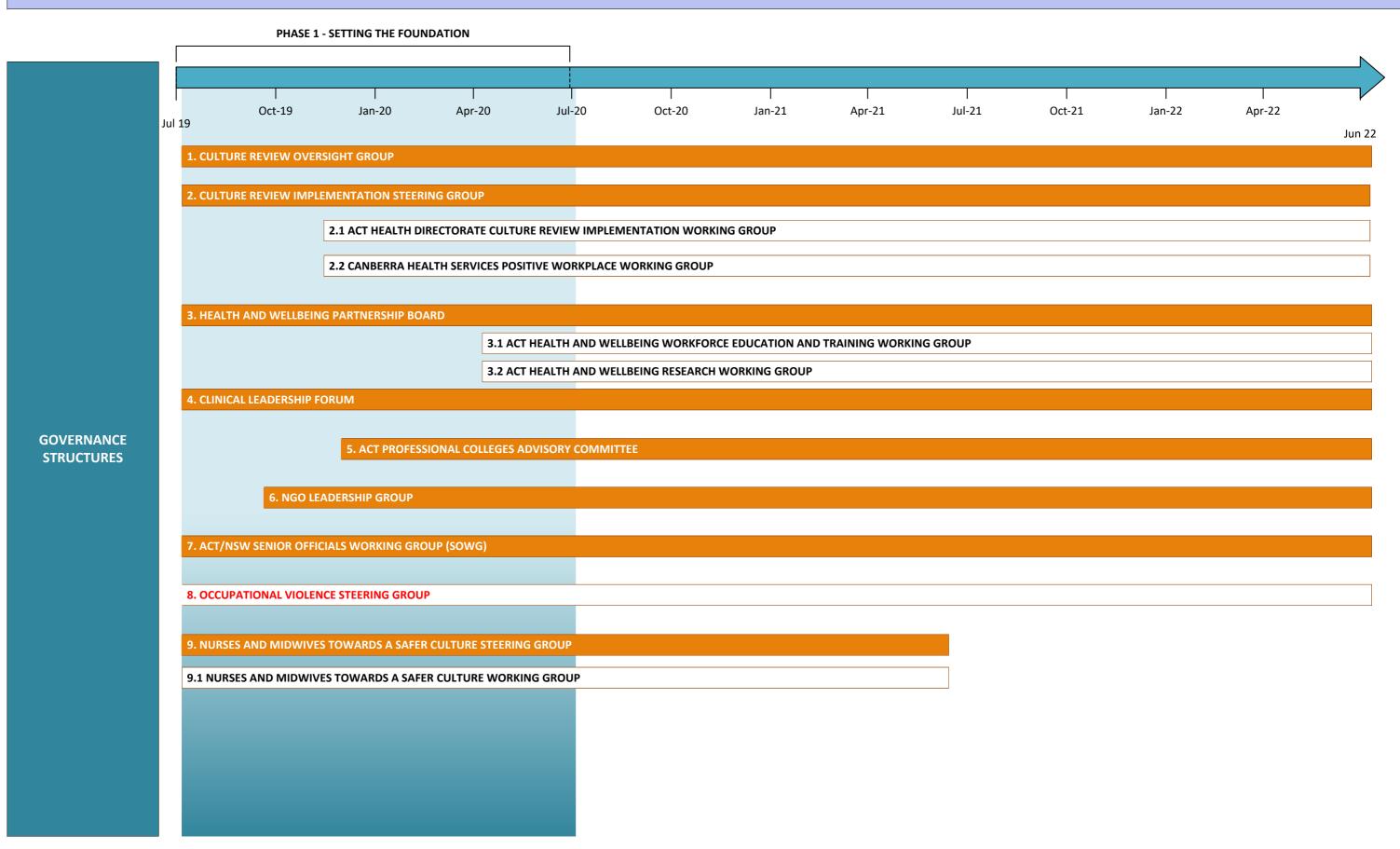
> Invest in a values-based public health system to achieve enduring and sustainable positive workplaces

## **GOVERNANCE & OVERSIGHT**

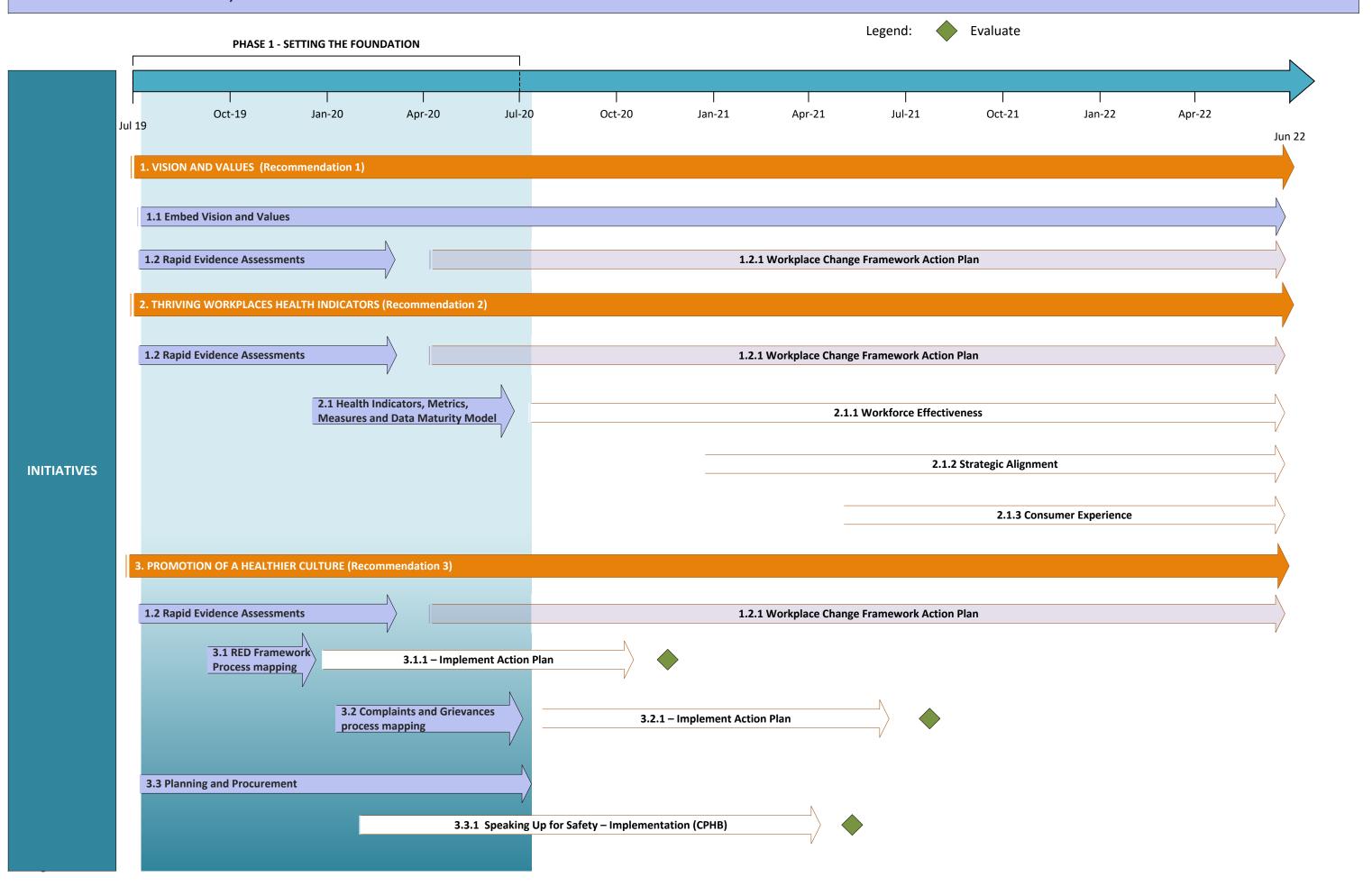
**GOAL** > Ensure governance and oversight structures are transparent and accountable across the System

THEMES	ORGANISATIONAL BEHAVIOUR, WORKFORCE & LEADERSHIP	EDUCATION & RESEARCH	STRUCTURE & ENGAGEMENT
RECOMMENDATIONS	1, 2, 3, 11, 13, 14, 15, 16	7	4, 5, 6, 8, 9, 10, 12, 17, 18, 19, 20
GOAL	> We will invest in our people and processes to build safe and positive workplaces across the System	> Through strong collaboration, partnership and engagement we will develop and shape a learning mindset across the System	> Encourage and embed a two-way discourse with our staff, our stakeholders and our partners to evolve our System
KEY ACHIEVEMENTS (July 2019 to April 2020)	<ul> <li>Rejuvenation of organisational visions and values within each arm of the ACT public health system.</li> <li>Analysis and mapping of the application of the Respect, Equity and Diversity (RED) Framework within each organisation to identify opportunities for enhancing its application across the ACT public health system.</li> <li>Review of recruitment processes within ACT Health Directorate and Canberra Health Services.</li> <li>Communications and Engagement Strategy developed through consultation with key stakeholders, supported by Action Plan for Phase One.</li> </ul>	<ul> <li>Established Health and Wellbeing Partnership Board to drive collaborative relationships across education, research and health service sectors.</li> <li>Committee Chairs selected for Research Working Group and Workforce Education and Training Working Group.</li> </ul>	<ul> <li>Established Culture Review Oversight Group</li> <li>Established Culture Review Implementation Steering Group.</li> <li>Established ACT Clinical Leadership Forum (Professional Colleges).</li> <li>Established NGO Leadership Group.</li> <li>Established ACT Health Clinical Advisory Committee (Professional Colleges)</li> </ul>
KEY INITIATIVES IN PROGRESS	<ul> <li>Development of ACT Public Health System Workplace Change Framework and Action Plan.</li> <li>Development of organisational health indicators and metrics.</li> <li>Conducting HR Functions Review across the three organisations to assess current state and recommendations for maturation of HR models within each organisation.</li> <li>Mapping of Complaints and Grievances process and related roles across the System to identify strengths, risks and opportunities.</li> </ul>	Continue to work in partnership with the tertiary sector to identify new opportunities to enhance curriculum development for nursing, midwifery, allied health and medicine.	<ul> <li>Planning underway to conduct a Senior Clinicians and Administrators Summit in mid-2020.</li> <li>Development of the NGO Leadership Group, Forward Work Plan.</li> </ul>
NEXT 6 MONTHS	<ul> <li>Maturity of organisational health indicators (Thriving Workplaces Indicators).</li> <li>Translation of Workplace Change Framework.</li> <li>Development of Workplace Change Framework Action Plan, including agreement on system-wide responsibilities for facilitating work; and establishing the 'rules of engagement through governance mechanisms'.</li> <li>Agreement on priorities.</li> <li>Commence implementation of Workplace Change Framework Action Plan.</li> </ul>	Engage with the two Working Groups as appropriate to support systemwide discussions	<ul> <li>Feedback from first annual review on Implementation (Mick Reid).</li> <li>Independent Review of Culture Review funding governance.</li> </ul>

### **GOVERNANCE & OVERSIGHT**

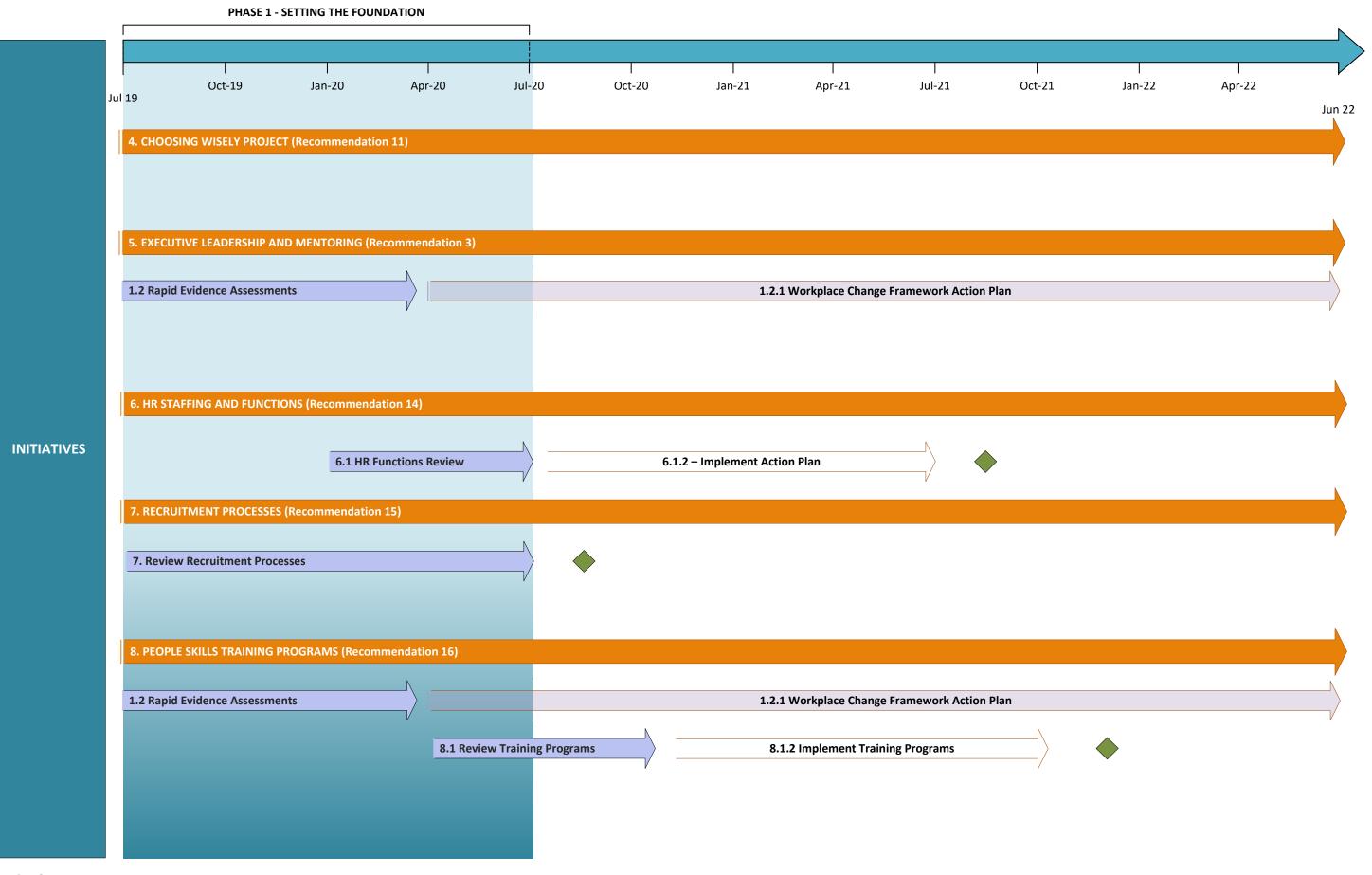


### ORGANISATIONAL BEHAVIOUR, WORKFORCE AND LEADERSHIP



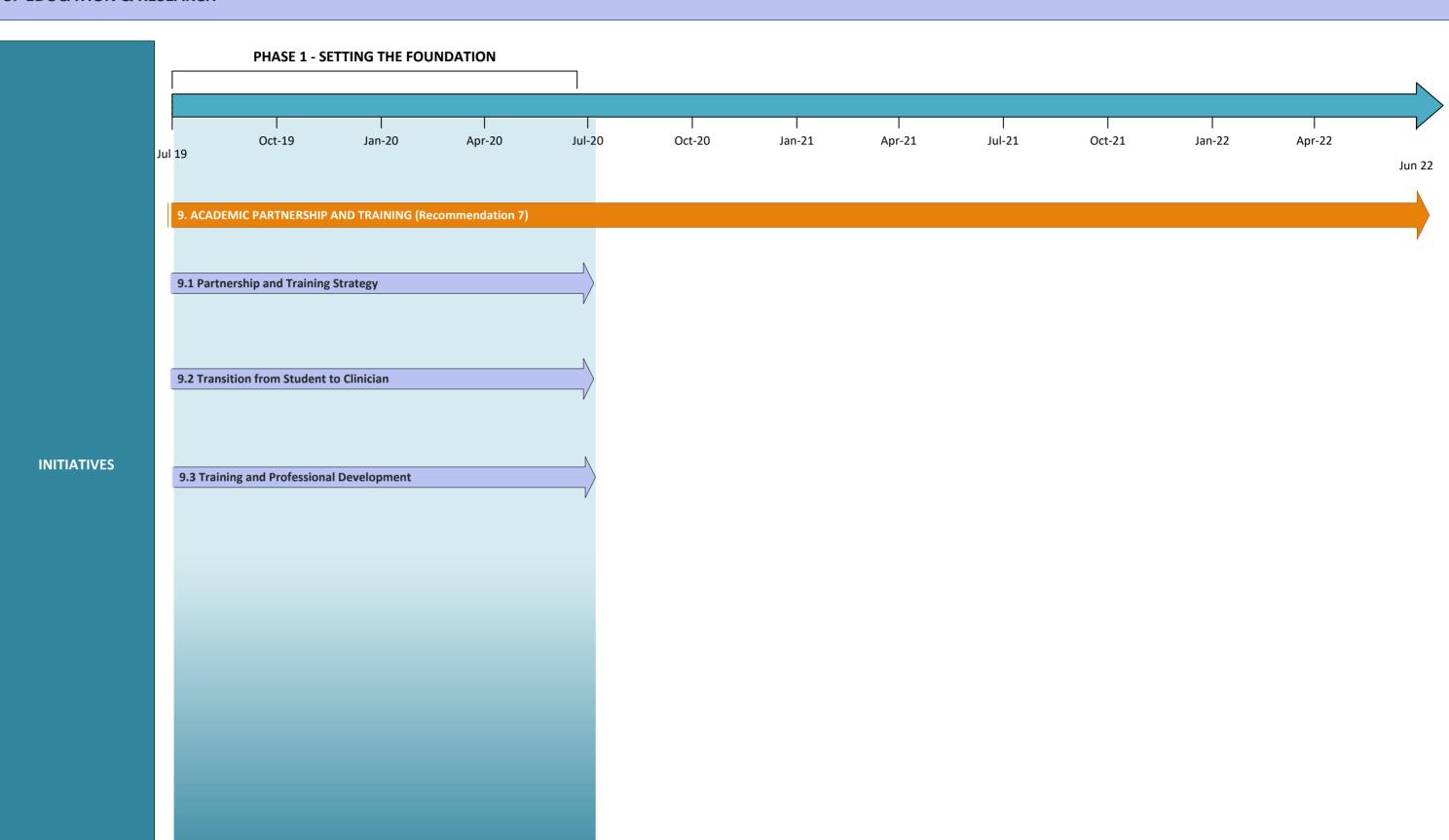
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## ORGANISATIONAL BEHAVIOUR, WORKFORCE AND LEADERSHIP

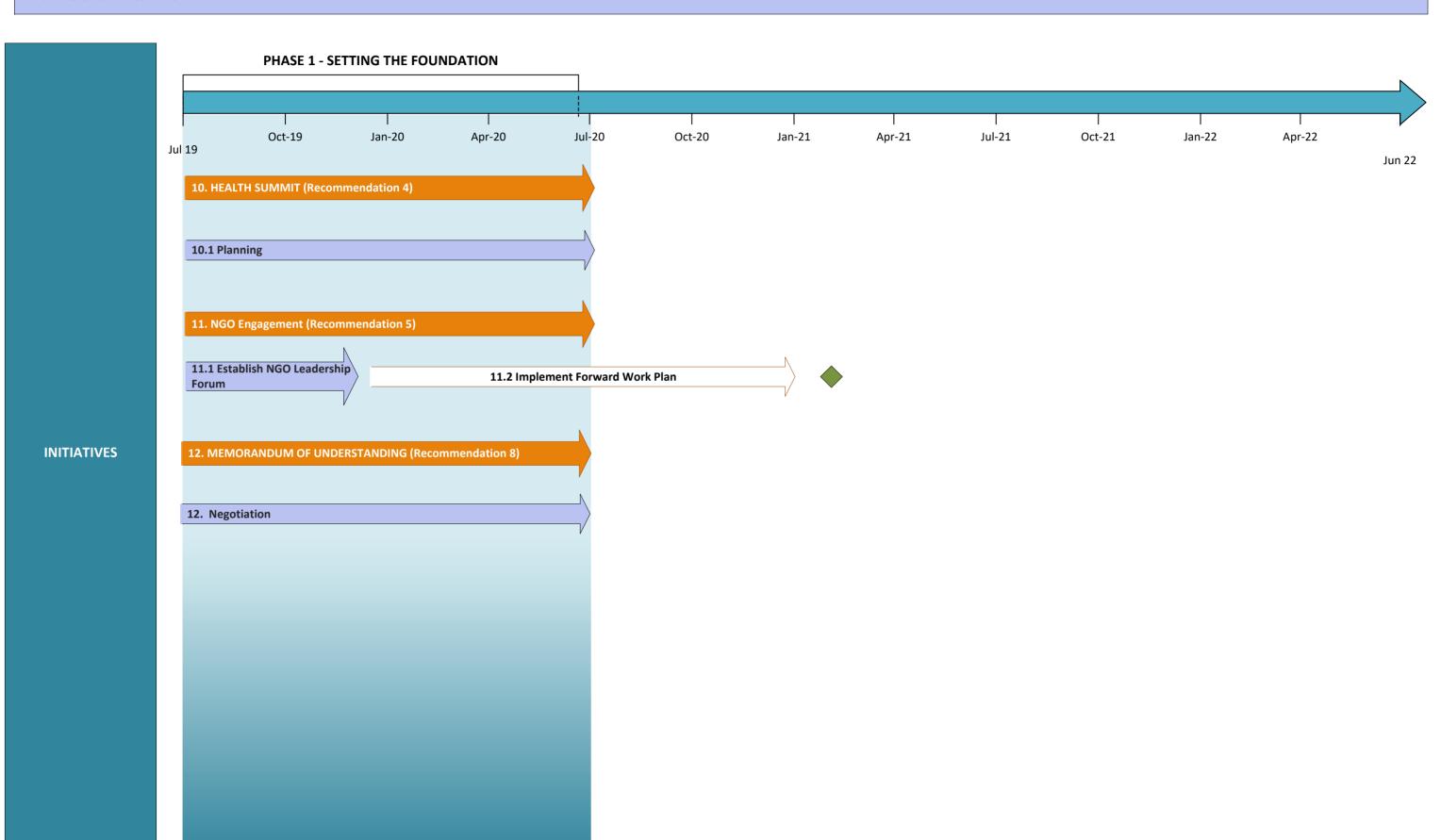


Page 3

### 3. EDUCATION & RESEARCH



### 4. STRUCTURE & ENGAGEMENT





# **Meeting Paper**

Agenda Item:	6.3
Topic:	Implementation of Recommendations and Project Plan and Dashboard
Meeting Date:	5 May 2020
Action Required:	Noting and feedback
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Executive Branch Manager, Culture Review Implementation Branch

### **Purpose**

1. To note the progress made in implementing the recommendations of the *Final Report:*\*\*Independent Review into the Workplace Culture within ACT Public Health Services (the Review).

### **Background**

- 2. This is a standing agenda item to provide an ongoing status update on the progress of work being undertaken to implement the Review recommendations.
- 3. Project planning documentation to support the mapping and reporting of progress made in addressing the recommendations was tabled at the Culture Review Oversight Group (Oversight Group) meeting on 4 September 2019. The documentation has continued to evolve since this time.
- 4. Feedback on the implementation planning documentation was invited from the Oversight Group members. To date no feedback has been received, however members are encouraged to provide feedback to the Secretariat as the planning documentation evolves.

#### **Issues**

- 5. At each meeting in the past, the Oversight Group has been provided with an updated Implementation of Recommendation Status report (<u>Attachment A</u>). This report provides information on system-wide and organisation specific activities against each of the recommendations in the Review.
- 6. Across the health system there is an increase on resource demand as a result of COVID-19 being the most significant priority at this time. As a result of this workload, the project plan document has not been updated since the February meeting.

- 7. A Culture Review Implementation Dashboard (Dashboard) has been developed to improve visibility of progress against the recommendations. The summary view of this Dashboard is provided at <u>Attachment B</u>.
- 8. The Dashboard will be made available more broadly across the health system including:
  - Summary view provided to Oversight Group bi-monthly;
  - Culture Review Implementation Steering Group members on a monthly basis; and
  - Summary published bi-monthly on the ACT Health intranet to enable staff to see the progress of the implementation.

#### Recommendation

That the Oversight Group:

- Note the information provided in this paper; and
- Provide feedback on the Culture Review Implementation Dashboard to the Secretariat.



# Implementation of Recommendations – Progress Update at 31 January 2020



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RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	STAT
Recommendation 1 of the Final Report, March 2019 That the three arms of the ACT public health system should commence a comprehensive process to re-	Directorate	I	New ACT Health Directorate values were launched on 1 October 2019 including an ongoing communications plan of activities. The rollout of the new values were supported by the Values Champions, who are		A1	.1												
engage with staff in ensuring the vision and values	(Executive Group		volunteers to support ongoing values based conversations in local			A1.1												
are lived, embraced at all levels, integrated with	Manager, Corporate		workplaces. The second Masterclass session for Champions was held					<b>T</b>										ON TRA
strategy and constantly reflected in leadership. To	and Governance		on 25 November 2019. The Director-General Awards, based on new															
achieve this the ACT Health Directorate should take	Division)		values were launched on 1 October 2019.															
the lead in providing the necessary tools and																		
guidelines and coordinate the implementation by Canberra Health Services, Calvary Public Hospital and																		
the ACT Health Directorate.		A1.2: Embed vision and	Revised performance development plans are now available in the online	:							_							
		values	learning system. The Culture Uplift training program was launched in					, , ,	A1.2									
			October 2019. This program will assist staff to have higher quality															
Government Response (May 2019)			values based conversations and interactions in the workplace.				A1.2											ON T
Recognising the territory-wide focus re-engagement								Ī										
with staff will occur across each of the three arms of																		
the ACT public health system.																		
Canberra Health Services and the ACT Health Directorate are embarking on projects to review their		A1.3: Evaluate	Not yet commenced.							1	Λ	1.3						
vision, values, role and behaviours. These projects											A	1.3						
will seek to ensure that, with the recent transition of																		То
ACT Health to two organisations, the vision and																		sched
values of the new organisations are appropriate and																		
clearly understood. This work will be completed by										1								
September 2019. There will be significant staff	Canberra Health	A1.1. Commence	This action has been implemented. A brief was tabled at the 29 January															
engagement as these projects are rolled out with a	Services	values and vision work	2020 Culture Review Implementation Steering Group confirming		A1													
view to embedding the vision and values from			progress including ongoing maintenance of the Values in the workplace															СОМР
November 2019.	(Executive Group		and communication. Members noted that Action1.1 from the Review		A1	1												COMP
Calvary Public Hospital's values and vision are in line with the Little Company of Mary. As a key partner in	Manager, People and		has been implemented within Canberra Health Services.															
the delivery of territory-wide services, Calvary will	Culture)																	
undergo re-engagement with staff to ensure the			Preparation of the next Value to be focused on this quarter is			(												
vision and values are embedded.		values	underway.					A	1.2		J							
								L										
										1								ON TR
								T										
		A1.3: Evaluate	Evaluation will be through the 2019 Workplace Culture Survey. Results															_
		A1.3. Evaluate	from the Workplace Culture Survey are expected end January/beginning	,							A							
			February 2020.	2									7					
			, '															То
										1								sched
	Calvary Public		The new performance planning and development process (PDP) has															
	Hospital Bruce	values and vision work	been rolled out with over 50 training sessions for staff. The process		A1	.1												
			embeds the values into the performance framework. Agreements are					L										
	(Regional CEO,		now in place for 85% of staff within Calvary Public Hospital Bruce							1								ON T
	General Manager)		(СРНВ).					T		1								
		44.2. Such . 1.11	The conversal control of the conversal conversal conversal control of the conversal conversal conversal control of the conversal control of the conversal co					<u> </u>	<u></u>	<del>_</del>						-	1	
			The new performance process utilises the Values in Action Framework					_A	1.2									
		values	as the guide for development and behavioural discussions.							T	1							
			Scoping work is being undertaken for creation of a web platform to				A1.2											
			integrate PDPs and Values in Action Framework.				A1.2			1								ON T
		·	•						1		1					-	1	
										1								

RECOMMENDATION & RESPONSE		ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	019 Q3	Q4	Q1	Q2	020 Q3	Q4	Q1	Q2	2021 Q3	Q4	Q1	2022 Q2	STA
		A1.3: Evaluate	Not yet commenced.								А	1.3						To sched
Recommendation 2 of the Final Report, March 2019 That Canberra Health Services and Calvary Public Hospital in conjunction with the ACT Health Directorate, develop an appropriate suite of measures that:  • reflect on elements of a great health service - both culture and strategy;  • monitor patient/client perspectives of outcomes/experience; and  • engage clinicians in their development.  Government Response (May 2019) Commencement of the development of the suite of measures will occur from July 2019 and it is anticipated that this will take at least six months to finalise phase one. The development and maturity of the measures will be iterative and ongoing to reflect the contemporary culture of the ACT public health system.	(Executive Branch Manager, Culture Review Implementation Branch	A2.1: Commence developing suite of measures	Significant progress has occurred in the development of a 'system-wide organisational health indicators' model incorporating measuring and reporting on three key elements: strategic alignment; workforce effectiveness; and patient/consumer outcomes. There has been broad consultation across the ACT public health system in seeking feedback and expertise to build the model. All elements of the model will be supported through evidence-informed thinking.  The Workforce Data Working Group will be dissolved and superseded by a new working group, which will provide a forum to develop a suite of measures in consultation with each organisation. The suite of measures will establish a system-wide approach to evaluating the linkages between workforce effectiveness, strategic alignment and patient/consumer outcomes. Reporting these three components in one model will provide better visibility over the impact that workforce interventions may have on patient experience.  The Culture Review Implementation Branch is currently undertaking coordination and analysis of workforce data and developing workforce reports on all three organisations to inform the Workplace Change Framework. This will serve to further mature and develop the 'workforce effectiveness' element of the 'Organisational Health Model' measure.				A2.1	A2.1										ONI
		A2.2: Implement and monitor suite of measures	Planning is being undertaken in parallel with the development of the Workplace Change Framework.				A2.2		A2.7	2								ON
			The 2019 Staff Climate Survey closed on 26 November 2019 with a response rate of 82%. Results from the Climate Survey are expected in February 2020.				A2.3											ON
		A2.4: Conduct 2022 staff survey (evaluate)	Not yet commenced.														A2.4	sch
	Canberra Health Services (Executive Group Manager, People and Culture)		Results from the 2019 Workplace Culture Survey are expected end January/beginning February 2020. Analysis will be undertaken of result followed by development and implementation of relevant action plans.				A2.3											ON
		<b>A2.4:</b> Conduct 2022 staff survey (evaluate)	Not yet commenced.														A2.4	scl
			Little Company of Mary will conduct a national employee engagement survey. The Provider will provide post-survey analysis and tools to address issues. Work continues on the development of a manager toolkit to centralise reporting analysis and planning of workforce. Employee engagement survey has been delayed until April 2020.				A2.3											А

EF RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	019 Q3	Q4	Q1	Q2	020 Q3	Q4	Q1	Q2	2021 Q3	Q4	Q1	2022 Q2	STATUS
		A2.4: Conduct 2022 staff survey (evaluate)	Not yet commenced.														A2.4	To be scheduled
Recommendation 3 of the Final Report, March 201 That a program designed to promote a healthier culture to reduce inappropriate workplace behaviou and bullying and harassment be implemented across the ACT public health system. The model adopted should be based on the Vanderbilt University Medic Center Patient Advocacy Reporting System (PARS) and Co-worker Observation Reporting System (CORS).  Government Response (May 2019) The planning, procurement and foundational work for implementation of a program to promote a healthier culture will commence in July 2019. This will be a program based on the Vanderbilt system and the implementation model will be required to be consistent across the three arms of the ACT public health system.	r (Executive Branch Manager, Culture Review	A3.1: Planning, procurement and foundation work	It has been identified through ACT Health's partnership with the ANU-RSM to develop the Workplace Change Framework that there needs to be a baseline of sound management capability across the public health system in order to implement a Vanderbilt-style program. Further, previous engagement by CHS in 2017 and 2018 reinforced the requirement by the Cognitive Institute that a number of factors required addressing before the ACT public health system would be at a readiness level to consider implementation of a Vanderbilt-type model.  Through the Workplace Change Framework there will be identification of a range of initiatives that will build management and leadership capability. Investigation by CHS and the CRI Branch has been underway in exploring the most appropriate model for the ACT public health system that will align with the Workplace Change Framework and the operating models of CHS and ACTHD.  A range of foundational work is being undertaken across the public health system before the Workplace Change Framework is finalised. This includes:  • Mapping the application of the Respect, Equity and Diversity (RED) Framework in the three public health organisations with a view to strengthening the use of the RED Contact Officer network by staff; and • Mapping the complaints and grievance process to ensure there is consistent application of relevant policies, processes and procedures.				A3.1											ON TRACK
	ACT Health Directorate  (Executive Group Manager, Corporate and Governance Division)	A3.1: Planning, procurement and foundation work	The Culture Uplift program released for the Directorate will contribute to this initiative. The program aims to achieve holistic cultural change through skill building, awareness raising and development of shared goals, norms and language. The Conscious Interactions Program (all staff) focuses on providing baseline language and skills for engaging positively and collaboratively in the workplace, and includes principles of the Vanderbilt model including the importance of raising concerns while they are small and innocuous; and exploring the neuroscience of tough conversations.  Being a Conscious Leader (for managers) contains additional content to equip managers and leaders within practical tools to strategically lead and model the desired culture and provide strategies to lead people through change. The programs commenced in November and will continue through 2020.			A3.1	A3.1											ON TRACK
		A3.2: Implementation								А	3.2							To be scheduled
		A3.3: Program delivery													A	3.3		To be scheduled
	Canberra Health Services  Executive Group Manager, People and Culture)	A3.1: Planning, procurement and foundation work	The Employee Advocate role continues to support staff from both Canberra Health Services and ACT Health Directorate.  The HR Business Partner model now has 4 Business Partners in place with a further role currently being filled. These roles continue to support cultural change and skill development for our managers. The model is being monitored to confirm best practices.  The Occupational Violence Strategy will be launched in February 2020. The policy and procedures have been endorsed and will be published following the Strategy.			A3.1	A3.1											ON TRACK

REF RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	19 Q3	Q4	Q1	Q2	020 Q3	Q4	Q1	Q2	Q3	Q4	Q1	022 Q2	STATUS
		A3.2: Implementation	Not yet commenced.							А	3.2							
													1					T- b-
																		To be scheduled
		A3.3: Program delivery	Not yet commenced															
		A3.3. Program delivery	Not yet commenced.												A	3.3		
																		To be
																		scheduled
	Calvary Public	A3.1: Planning,	This action has been completed.											-		_		
	Hospital Bruce	procurement and foundation work	Calvary Public Hospital Bruce (CPHB) is a pilot site for the Little				A3.1		J									
	(Chief Human	Touridation work	Company of Mary (LCM) Speak Up for Safety program which is run by		A:	3.1												COMPLETED
	Resource Officer, Regional CEO, Genera		the Cognitive Institute under licence from Vanderbilt.															
	Manager)	A3.2: Implementation	Facilitators have received training and will undergo accreditation in February 2020, after which program rollout will commence.							A3.	2							
																		ON TRACK
							A3.2											
		A3.3: Program delivery	Not yet commenced					-	-					-				
		restriction delivery	, and yet commenced.											ļ	\3.3			
																		To be scheduled
Recommendation 4 of the Final Report, March 2	019 ACT Health	A4.1: Plan and conduct	The inaugural meeting of the Project Steering Group (PSG) will be held (	i .														
The ACT Health Directorate convene a summit of senior clinicians and administrators of both Canb	<b>Directorate</b>	first summit	February 2020. The PSG will comprise of one senior clinician and one non-clinical senior health executive from ACT Health Directorate		A <sup>2</sup>	.1		Ţ										
Health Services and Calvary Public Hospital to ma plan of improved clinical services coordination a	a (Chief Medical Officer		(ACTHD), Canberra Health Services (CHS) and Calvary Public Hospital Bruch (CPHB) to oversight the content and format for the summit.			A4.1	1											
collaboration.	Leadership and		Face-to-face consultation forums with CHS and CPHB staff will be															
Government Response (May 2019)	Education)		conducted to provide feedback on the proposed scope, format and core topics to be discussed for the summit.	•														
The Health Summit of senior clinicians and administrators from across the ACT public health			At the Culture Review Implementation Steering Group meeting of 29															
system is planned for the second half of 2019.			January 2020 it was agreed that the Health Summit would be held May 2020 with the goal to map a plan for improved clinical services															
			coordination and collaboration.															ON TRACK
			ACT Health is developing a Territory-wide Health Service Plan (TWHSP).															
			The plan will identify priorities for health service development and redesign across the ACT. It will consider the range of public health															
			services provided by the ACT public health system and other organisations in the community. Strong engagement with clinical staff															
			is a key part of clinical service planning activities. From November -															
			December 2019, as part of the development of the TWHSP and the CHS Clinical Services Plan, over 60 consultation sessions were held with															
			clinicians at CHS. Further consultations with clinical staff at CPHB are currently being planned for early 2020. The TWHSP is expected to be															
			completed by mid-2020.															
Recommendation 5 of the Final Report, March 2 The CEO of Canberra Health Services should revie		A5.1: Review mechanisms and	Organisational structure continues to be monitored to ensure best alignment. Chief Executive Officer, Canberra Health Services continues							A5	.1							
mechanisms to better integrate clinical streams of the community health services within the Clinical	f	integrate Community Health Services	to engage with staff through various site visits, regular communication, face to face and forum opportunities.		,	4.1												
Divisional Structures.	Manager, People and							Ī										
Government Response (May 2019)	Culture)		Clinical Services Plans are being developed and will provide strategic direction in relation to clinical work streams.															ON TRACK
			EBM CRI Branch has requested the Director Positive Workplace write a															
This work has commenced to better integrate the clinical streams of the community health services		1	summary minute on the recommendation following a meeting with the															
This work has commenced to better integrate the clinical streams of the community health services This is reflected in the new organisational structu																		
This work has commenced to better integrate the clinical streams of the community health services			Deputy CEO Strategy policy & Planning and ED, CAS held on 5 November 2019.															
This work has commenced to better integrate the clinical streams of the community health services This is reflected in the new organisational structu		A5.2: Evaluate	Deputy CEO Strategy policy & Planning and ED, CAS held on 5					AS	5.2									
This work has commenced to better integrate the clinical streams of the community health services This is reflected in the new organisational structu		A5.2: Evaluate	Deputy CEO Strategy policy & Planning and ED, CAS held on 5 November 2019.					AS	5.2									
This work has commenced to better integrate the clinical streams of the community health services This is reflected in the new organisational structu		A5.2: Evaluate	Deputy CEO Strategy policy & Planning and ED, CAS held on 5 November 2019.					AS	5.2									To be scheduled
This work has commenced to better integrate the clinical streams of the community health services This is reflected in the new organisational structu		A5.2: Evaluate	Deputy CEO Strategy policy & Planning and ED, CAS held on 5 November 2019.					AS	55.2									

EF RECOMMENDATION & RESPONSE R	ESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1		019 Q3	Q4	Q1	Q2	020 Q3	Q4	Q1	Q2	2021 Q3	Q4	Q1	2022 Q2	STATUS
Recommendation 8 of the Final Report, March 2019  That discussions occur between ACT and NSW with a view to developing a Memorandum of Understanding (MoU) for improved collaboration between the two health systems for joint Ministerial consideration.	CT Health	A8.1: Commence negotiations	The ACT Health and NSW Ministry of Health Senior Officials Working Group (SOWG) has developed a draft work plan to enhance cross border collaboration and to implement actions arising from the MoU for Regional Collaboration.  To identify opportunities for greater collaboration between the ACT and NSW health systems, an interjurisdictional workshop has been scheduled for the 4 February 2020 with policy and operational stakeholders across ACT Health, Canberra Health Services, NSW Ministry of Health and the Southern NSW Local Hospital Districts.  The workshop will enable Senior Officials to engage with operational staff from both jurisdictions to further develop the agreed list of joint priority areas and progress cross-border initiatives in both the Southern NSW Joint Operations Committee (JOC) and SOWG workplan, including, how the JOC and SOWG can support each other in the development and implementation of a clinical leadership framework. The objective of the workshop will be to advance the Territory's partnership approach with NSW to deliver joint planning initiatives and promotion of better health pathways for ACT and NSW residents. Outcomes from the interjurisdictional workshop will inform the final development of the SOWG workplan for implementation over the course of 2020.  On 18 December 2019, Cabinet agreed to a new set of negotiation parameters to finalise the reconciliation of outstanding cross border			A8.1 A8.1	Q#	Ų.			<u>V</u> 4	Ų.		43		Ų.	· C	ON TRACK
			payments between the ACT and NSW for the period 2016-17 to 2019- 20. Officials from the NSW Ministry of Health and the ACT Health Directorate have begun work to conclude the reconciliation of outstanding payments on the basis of these terms. This process is expected to conclude by the end of March 2020.  Not yet commenced.					A8.2	)									To be scheduled
health system, particularly by the medical profession, needs to be significantly improved. Agreed measures (of monitoring such improvement needs to be developed through consensus by both clinicians and executives. Such measures should include participation in safety, quality and improvement	ervices  Executive Group  Manager, People and	A9.1: Agree measures	Not yet commenced.			A9.1												To be scheduled
meetings, reviews and other strategy and policy related initiatives.  Government Response (May 2019)  Canberra Health Services and Calvary Public Hospital have begun work on measures to monitor the improvement in clinical engagement across the ACT public health system. It is proposed that the measures be finalised and agreed by December 2019.		A9.2: Ongoing monitoring and reporting	Not yet commenced.									А9.	2					To be scheduled
H	alvary Public lospital Bruce Regional CEO)	A9.1: Agree measures	Review of contracts, position descriptions and performance expectations. This will be covered in review of governance and committee structure at CPHB.			A9.1 A10.1												ON TRACK
		A9.2: Ongoing monitoring and reporting	Not yet commenced.									A9.	2					To be scheduled
2019  There should be a clear requirement for senior clinicians to collaboratively participate in clinical (I	anberra Health ervices Executive Group Manager, People and	A10.1: Develop governance participation plan	Continue to review governance processes.	A:	10.1	A10.1												ON TRACK

REF	RECOMMENDATION & RESPONSE are developing governance participation plans to	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	019 Q3	Q4	Q1	Q2	020 Q3	Q4	Q1	Q2	2021 Q3	Q4	Q1	2022 Q2	STATUS
	ensure senior clinicians are collaboratively participating in clinical governance activities. These plans will be finalised by end of June 2019 with a view to commencement in July 2019.		A10.2: Commence participation	Not yet commenced.			A10	.2											To be schedule
			A10.3: Monitor	Not yet commenced.									246	\2					_
			participation								Г		A10		Т		Γ		To be schedule
		Calvary Public Hospital Bruce	A10.1: Develop governance	The Clinical Governance Committee has been revamped and integrated into the formal business governance hierarchy with clear terms of	А	10.1													
		(General Manager)	participation plan	reference and reporting lines through to the Executive.  The updated Clinical Governance Framework has been completed.			A10.1												ON TRACE
			A10.2: Commence participation	Implementation has commenced.			A10.	A10.2											ON TRACE
			A10.3: Monitor participation	Not yet commenced.									A10	0.3					_
																			To be scheduled
	2019 Canberra Health Services and Calvary Public Hospital should assess the appropriateness of the Choosing Wisely initiative as a mechanism for improving safety	Canberra Health Services (Executive Group Manager, People and Culture)	A11.1: Assess Program	Agreement to implement the Choosing Wisely program has been provided. Recruitment process for a Project Officer role within Canberra Health Services is underway.		A1	1.1	A11.1											ON TRACI
	Government Response (May 2019)		A11.2: Implement and monitor	Not yet commenced.									A11	2					_
	The Choosing Wisely Program will be assessed, and recommendations made to the CEO Canberra Health Services and Regional CEO Calvary ACT by October 2019.																		To be scheduled
		Calvary Public Hospital Bruce (Chief Human Resource Officer, Regional CEO, General Manager)		Options are being explored within broader business strategy.		A1	1.1	A11.1											ON TRACE
			A11.2: Implement and	Not yet commenced.															
			monitor										A11	2					
	2019 That Canberra Health Services adopt the progressive evolution of clinically qualified Divisional Directors across each Clinical Division with Business Manager	Canberra Health Services  (Executive Group Manager, People and Culture)	A12.1: Conduct pilot	All Divisional Directors are clinically qualified.  HR Business Partners model continues to support positive workplace culture and support personnel management development.  Financial delegations are under review.			A12	.1 A12.1											ON TRACE

B==	DECOMMENDATION & DECOMME	DECDONICION 1774	ACTION	PROGRESS THIS REPORTING PERIOD	01		)19	04	01		020	04	01		2021	04		022 Q2	CTATUC
KEF	RECOMMENDATION & RESPONSE  GOVERNMENT RESPONSE (IVIA)  The production of Conference United Services Divisions	RESPONSIBILITY	A12.2: Rollout full	Not yet commenced.	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Ųζ	STATUS
	The restructure of Canberra Health Services Divisions is complete. The progressive evolution of clinically qualified Divisional Directors across each Clinical Division with Business Manager support and earned autonomy in financial and personnel management will be piloted from May 2019.		recommendations								П		A12.2			П	J		To be scheduled
13	Recommendation 13 of the Final Report, March 2019 That an executive leadership and mentoring program be introduced across the ACT public health system specifically designed to develop current and future leaders. This program should include both current	System-wide (Executive Branch Manager, Culture Review Implementation	A13.1: Planning	Canberra Health Services has conducted Executive leadership workshops from October 2018.  Human Resources training programs are progressively being reviewed.			A13	A13.1											ON TRACK
		Branch)	A13.2: Implementation	Not yet commenced.									A13.2						
	<b>Government Response (May 2019)</b> The early planning for an executive leadership and mentoring program is underway.																		To be scheduled
14	Recommendation 14 of the Final Report, March	System-wide	A14.1: Conduct initial	The CRI Branch conducted a procurement process to engage Workplace	e						-				+				
	The three arms of the ACT public health system should review their HR staffing numbers and functions in response to the concerns staff have expressed regarding timeliness and confidence in current HR procedures, and the future needs for HR, as proposed in this Review.  Government Response (May 2019)  The initial review began with the transition to three organisations within the ACT public health system. Now that transition has settled, the HR resourcing and functions will be reassessed in line with this recommendation. Implementation of any findings will take place in the later part of 2019.	(Executive Branch Manager, Culture Review Implementation Branch)	review  A14.2: Implement	Research Associates Pty Ltd to undertake a system-wide HR Functions Review. The HR Functions Review project commenced January 2020.  The CRI Branch is facilitating a number of meetings with a range of key stakeholders across all three organisations including the Director-General ACTHD, Chief Executive Officers of CHS and CPHB and Executiv Group Managers and Heads of HR. This initial consultation will be followed by workshops in February/March with HR Teams, a range of key internal clients of HR, and Shared Services at Chief Minister's, Treasury and Economic Development Directorate to gather further information to inform the Review.  Communications material has been developed to support the project including information for HR Teams and material for internal clients of HR.  The HR Functions Review will assist with identifying issues and in		A14.		A14.1											ON TRACK
		Canberra Health Services (Executive Group Manager, People and Culture)	changes	the HR Functions Review will assist with identifying issues and in establishing relevant action plans.						14.2									To be scheduled
			A14.3: Evaluate	Not yet commenced.															
			A4-3. Evaluate	not yet commenced.								A14.3							To be scheduled
		Calvary Public	A14.2: Implement	The HR Functions Review will assist with identifying issues and in						14.2									
		Hospital Bruce (Chief Human Resource Officer)	changes	establishing relevant action plans.															To be scheduled
			A14.3: Evaluate	Not yet commenced.								A14.3							To be scheduled
	_																		

REF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	2019 Q3	Q4	Q1	Q2	2020 Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	STATU
15	Recommendation 15 of the Final Report, March 2019 The recruitment processes in the ACT public health system should follow principles outlined in the		advice including intranet material and implement changes as	Full transition to Shared Services supported recruitment process in place 1 July. Directorate recruitment policy reviewed in accordance with ACTPS Better Practice Recruitment Guidelines; released for consultation in November. Consultant engaged to review position			A15.1												
	Enterprise Agreements, Public Sector Management Act 1994 and relevant standards and procedures.  Government Response (May 2019)	Strategy)	required	description format to include values based content. Recruitment and Selection Training for selection panel chairs and delegates commenced in November.															COMPLET
	In line with the transition to three organisations, the advice to staff is being reviewed.			Two sessions of Best Practice Recruitment and Selection training have been delivered by ACT Health Directorate during November and December 2019. A half-day session for Executive is scheduled in February 2020, and a further Best Practice Recruitment and Selection session is planned in March 2020.															
			A15.2: Continually monitor/evaluate recruitment activity	Intention to Recruit quality assurance check implemented to ensure legislative and policy compliance for Directorate recruitment implemented.				A15.2	<b>—</b>				A15.2						ON TRA
		Canberra Health Services (Executive Group	advice including intranet material and implement changes as	An action plan is being developed to implement the next phase of process improvements and initiatives.			A15.1 A15.1												ON TRA
		Manager, People and Culture)	required																ONTRA
			A15.2: Continually monitor/evaluate recruitment activity	Not yet commenced.									A15.2						
								A15.2											ON TRA
		Calvary Public Hospital Bruce	A15.1: Review staff advice including intranet material and	Governance review of recruitment has commenced.		A1	5.1 A15.1												
		(Chief Human Resource Officer)	implement changes as required				AIS.I												ON TRA
			A15.2: Continually monitor/evaluate recruitment activity	Not yet commenced.									A15.2						
																			To be schedul
16	Recommendation 16 of the Final Report, March 2019	ACT Health Directorate		Establishment of ACTHD specific presence on Capabiliti (e-learning system) in place October 2019. Core learning programs for the			A16.1												
	The range of training programs for staff offered by the ACT public health system should be reviewed with respect to their purpose, target audience,	(Executive Group Manager, Corporate	review	Directorate have been reviewed and aligned with the ACT Public Service (ACTPS) Core Learning Framework.			A16.1												
	curriculum, training styles and outcomes so that they address the issues raised in this Review.  Government Response (May 2019)	and Governance Division)		ACTHD intranet updated with further information about Core Learning, and all eLearning programs that are available are updated.  Work commenced in partnership with Aboriginal and Torres Strait Islander Health Partnerships Team and Digital Solutions Division to															
	The range of training programs is being reviewed. This is expected to be completed by October 2019. Training Programs, particularly focused on resolving			develop a revised Cultural Awareness eLearning package.  To date (20 January 2020) the Core Learning completion statistics are as	5														
	workplace conflicts swiftly are being considered within the three organisations.			follows:  • 85 staff have fully completed the Domestic Family Violence suite of eLearning programs  • 81 staff have completed the ACTPS Induction program  • 49 have completed Record Keeping and Freedom Of Information															ON TRA
				77 have completed Information Privacy     31 have completed Work Health and Safety     96 staff have completed the Performance & Development in the ACTPS program.															
				An ACT Health Directorate-wide needs analysis is planned for early 2020, and may commence in the next reporting period. The purpose of this will be to identify the capability requirements of positions across the Directorate. This information will be used to identify capability gaps															

REF RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	019 Q3	Q4	Q1	Q2	2020 Q3	Q4	Q1	Q2	2021 Q3	Q4	Q1	2022 Q2	STATUS
		A16.2: Implement changes	Not yet commenced.				А	16.2										To be scheduled
	Canberra Health Services (Executive Group Manager, People and Culture)	A16.1: Conduct training program review	A review of HR training programs and training needs analysis is to be undertaken.		A16	5.1	A16.1											ON TRAC
		A16.2: Implement changes	Not yet commenced.				А	16.2										To be scheduled
	Calvary Public Hospital Bruce (Chief Human Resource Officer)	A16.1: Conduct training program review	Requirement for additional training has been identified and scoping commenced for topics such as: Responding to Occupational Violence and Aggression; Change Management; Issues Management; Issues Resolution; and Restorative Practice.  Two new project positions will be recruited to commence this work in February 2020.		A16	5.1 A16.	.1											ON TRAC
		A16.2: Implement changes	Not yet commenced.				A16.2											ON TRAC
	Minister and Executive	A17.1: Deliver public commitment	A public commitment was made by Ministers and Health Leaders on 16 May 2019.  At the September meeting, the Oversight Group pledged their commitment in supporting and driving a positive workforce culture across the ACT public health system.		A17.1 A17.1													COMPLETE
	Health Directorate	A18.1: Commence group activities	The inaugural meeting of the Culture Review Oversight Group was held 28 March 2019.	A18	.1					<i>A</i>	A18.1							COMPLETE
Health Services, the General Manager Calvary Public Hospital, Senior Executives across the ACT public health system, the Executive Director Health Care Consumers Association of the ACT, President of the AMA (ACT), Branch Secretary ANMF (ACT), and Regional Secretary CPSU.  Government Response (May 2019)		A18.2: Quarterly group meetings	The Oversight Group continues to meet bi-monthly.			A18.	.2				A18.2							ON TRAC

EF	RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	2019 Q3	Q4	Q1	Q2	2020 Q3	Q4	Q1	Q2	2021 Q3	Q4	Q1	2022 Q2	STATU
	Culture Review Oversight Group). The Culture Review Oversight Group has been established and the inaugural meeting was held on 28 March 2019. Members include the: Minister for Health and Wellbeing (Chair), Minister for Mental Health (Deputy Chair), Director-General Health Directorate, Chief Executive Officer Canberra Health Services, Regional Chief Executive Officer Calvary ACT, Regional Secretary CPSU, Branch Secretary ANMF ACT, President AMA ACT, Executive Officer Health Care Consumers Association (ACT), Executive Branch Manager Culture Review Implementation Team [ex-		A18.3: Evaluation of Oversight Group Measures of Success	Existing tools and measures that may assess the success of the Oversight Group include:  Overarching Program Planning documentation; Project Implementation Planning documentation; Control and management of budget; Tracking and reporting against the phases in the Communications and Engagement Strategy; Benefits realisation; Management of work priorities and indicators across the ACT public health system, informed by the Culture Change Framework; and Reporting on return on investment in evolving a positive culture across the ACT public health system.			A18.3						A18.3						ON TRA
	Recommendation 19 of the Final Report, March 2019  That the 'Cultural Review Oversight Group' auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT public health system.	Review	A19.1: Commence Annual Review (2020)	Procurement is being finalised to engage Michael Reid & Associates to undertake the Annual Review of the Culture Review Implementation. It is anticipated that the contract will be executed in February with the review to occur in March 2020 and the report received in April/May 2020.			,	x19.1	A19.1										ON TR
	Government Response (May 2019) The Culture Review Oversight Group will auspice the next independent review commencing around November 2019.		A19.2: Release Annual Review (2020)	Annual Review scheduled to be released May 2020.						A19.2									To l sched
			A19.3: Commence Annual Review (2021)	Annual Review scheduled to commence March 2021.									A19.3						To sched
			A19.4: Release Annual Review (2021)	Annual Review scheduled to be released May 2021.										A19.4					To schec
			A19.5: Commence Annual Review (2022)	Annual Review scheduled to commence March 2022.													A19.5		To sched
			A19.6: Release Annual Review (2022)	Annual Review scheduled to be released May 2022.														A19.6	To
	Recommendation 20 of the Final Report, March 2019 That the 'Cultural Review Oversight Group' auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT public health system.  Government Response (May 2019) The Culture Review Oversight Group will auspice the next independent review commencing around	Review Implementation Branch)	A20.1a: With staff, collaboratively develop a communication strategy	A Culture Review Implementation Communications and Engagement Strategy (Communications Strategy) has been developed through consultation with the Communications teams at CHS, ACTHD and CPHB The Communications Strategy was endorsed at the Culture Review Implementation Steering Group meeting in December 2019.  A system-wide Culture Review Intranet site was launched on 20 December 2019 providing information on work underway, infographics on the system journey to date, links to support networks, and will in time recognise areas across the system that are demonstrating positive and values-based work practices.			A2	0.1a				A20.1a							СОМР

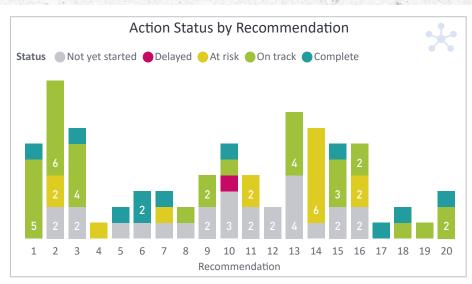
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RECOMMENDATION & RESPONSE	RESPONSIBILITY	ACTION	PROGRESS THIS REPORTING PERIOD	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	STATUS
November 2019.		collaboratively develop	A change management plan will be developed separately from the Communications and Engagement Strategy. This is being developed in line with the ACT Public Health System Workplace Change Framework.				0.1b A20.1b											ON TRACK
		A20.2: Phase One to commence	The Action Plan for phase one is under development and is expected to be finalised in February 2020. The key aim of phase one is to foster engagement with employees and increase awareness of the rationale and motivation for developing positive workplaces and culture.				A20.2	A20.2										ON TRACK
		A20.3: Phase Two to commence	Not yet commenced - scheduled to commence July 2020.								A2	20.3						
																		To be schedule
		A20.3: Phase Three to commence	Not yet commenced - scheduled to commence July 2021.												A.	20.2		)
																		To be schedule

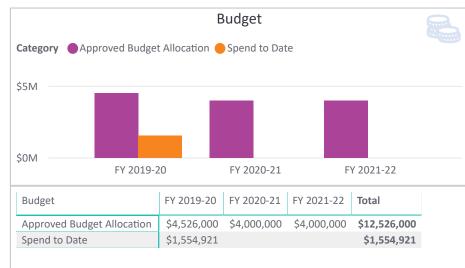
Implementation of Recommendations - Status Update - Template Version 3

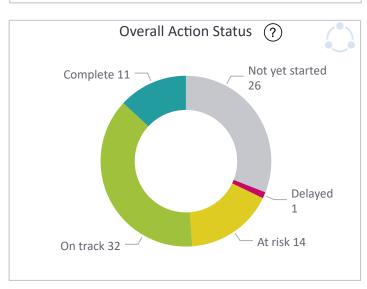


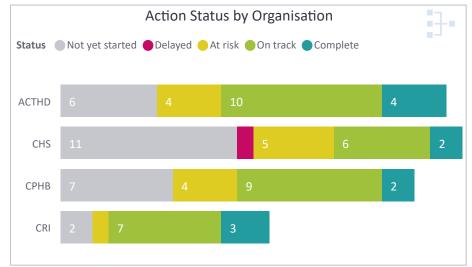


2 of 20
Recommendations
Completed





















# **Culture Review Oversight Group DRAFT Communique of meeting on 5 May 2020**

The sixth meeting of the Cultural Review Oversight Group (the Oversight Group) was held on Tuesday, 5 May 2020.

The meeting was Chaired by Rachel Stephen-Smith MLA, Minister for Health.

Significant items discussed by the Oversight Group today included:

### **Annual Review**

Mr Mick Reid from Michael Reid and Associates was contracted to undertake the inaugural annual review of the Culture Review Implementation to report on the progress and early impact of implementing the 20 recommendations from the Review. Mr Reid met with a range of key stakeholders in March and April of 2020 including the Minister for Health, Minister for Mental Health, members of the Oversight Group and Culture Review Implementation Steering Group to gain insights to inform the annual review.

Mr Mick Reid provided a verbal presentation of his initial findings and recommendations for discussion. The Annual Review Report will be provided to the Minister for Health, as Chair of the Oversight Group on Monday 11 May 2020.

## **ACT public health system Workplace Change Framework**

A presentation was provided to the Oversight Group by Ms Jodie Junk-Gibson on the translation and application of the Workplace Change Framework that has been developed through a partnership between ACT Health and the research team from the Australian National University, Research School of Management (ANU-RSM).

ANU-RSM completed the draft Interim Report, *ACT Public Health System: Investing in Our People: A System-Wide, Evidence-Based Approach to Workplace Change* (Interim Report). This report presented findings from the exploratory research from in-depth interviews, workshops and an online questionnaire of stakeholders from across the health system, alongside findings from a number of Rapid Evidence Assessments. The Interim Report also included a draft *ACT public health system: Evidence-Based Workplace Change Framework* and the *ACT public health system: Evidence-Based Workplace Skills Development Model.* 

Discussions are underway with the Human Resource teams of the three organisations across the ACT public health system to progress implementation.

## **Implementation of Recommendations**

ACT Health Directorate and Calvary Public Hospital Bruce and Canberra Health Services provided an update of the progress in implementing the recommendations from the Review.











Ms Barb Reid, Regional Chief Executive Officer, Calvary ACT provided a comprehensive briefing on the significant work in progress to improve and evolve a positive workplace culture in the organisation.

## Meeting schedule

The Oversight Group meets bi-monthly and its next meeting is scheduled for 16 June 2020.

Media contacts:

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Canberra Health Services: M 0466 948 935 E <a href="mailto:chsmedia@act.gov.au">chsmedia@act.gov.au</a>

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**Minister Stephen-Smith Media contact:** 

Caitlin Cook: M 0434 702 827 E caitlin.cook@act.gov.au

**Minister Rattenbury Media contact:** 

Lisa Wills: M 0481 035 764 E Lisa.Wills@act.gov.au







# **Meeting Paper**

Agenda Item:	7.2
Topic:	Key Messages for Represented Groups from the Oversight Group Meeting
Meeting Date:	5 May 2020
Action Required:	Noting and feedback
Cleared by:	Acting Director-General ACT Health Directorate
Presenter:	Executive Branch Manager, Culture Review Implementation Branch

#### **Purpose**

1. The purpose of the 'Oversight Group Key Messages' document to is to provide information to represented members of the Culture Review Oversight Group (Oversight Group) to support communications to their members about the progress in delivering initiatives associated with the culture review program.

### **Background**

- 2. There has been acknowledgement that communication across the ACT public health system has been challenging and fragmented.
- 3. This document is serves to provide consistent information across the ACT public health system about initiatives already underway and those planned to enable more effective communication and understanding.

#### **Issues**

- 4. Consistent and timely communication is identified as a priority to provide information about work underway across the system.
- 5. At the February meeting of the Oversight Group it was agreed that members would be provided with key messages from each meeting, in addition to the minutes and Communique, to support communications with members and employees. The draft Oversight Group Key Messages document for the May Oversight Group meeting is at <a href="Attachment A">Attachment A</a>.
- 6. Feedback is sought from Oversight Group members and the individuals being represented as to the relevance of the information being messaged and information being sought in future key message documents.

- 7. In addition to the 'Oversight Group Meeting Key Messages' document, each month a 'Managers Key Messages' document will be developed and distributed across the health system to support managers in communicating with their staff about the work occurring across the system in the culture review space.
- 8. The Culture Review Implementation Branch will draft this document each month and then provide the document to each organisation to update with information regarding organisation specific initiates being implemented or progressed. The Managers Key Messages will have both a current and future focus. An example of the Managers Key Messages document will be provided at the June Oversight Group meeting.

#### Recommendation

That the Oversight Group:

- Note the initial Oversight Group Key Messages document;
- Provide feedback to the Secretariat about information to be included in future editions; and
- Note that an example of the 'Managers Key Messages' document will be provided at the June Oversight Group meeting.









# Key Messages from the Sixth Culture Review Oversight Group Meeting held on 5 May 2020.

Welcome to the first 'Key Messages' document, which has been created to facilitate ongoing communication from you, our Oversight Group members, to our workforce, your members and employees about progress in delivering culture review program activities across the system.

### What was discussed at the Oversight Group meeting?

#### **Annual Review**

The Inaugural Annual Review of the Culture Review Implementation undertaken by Mick Reid from Michal Reid and Associates. Interviews occurred with key stakeholders from across the system in March and April 2020. Mick led the Independent Review into the culture in the health system in 2018 and has a deep and nuanced understanding of the ACT public health system, the nature of the cultural challenges and the opportunities that may be optimised. Mick provided a verbal presentation on his findings from the annual review to the Oversight Group. The report for the annual review is expected to be provided in May 2020.

### Workplace Change Framework

The research team from ANU Research School of Management has submitted the draft Interim Report, ACT Public Health System: Investing in Our People: A System-Wide, Evidence-Based Approach to Workplace Change to the ACT Health Directorate. The research team also provided a draft of the:

- ACT public health system: Evidence-Based Workplace Change Framework; and
- ACT public health system: Evidence-based Workplace Skills Development Model.

There are discussions underway involving members of the Culture Review Implementation Steering Group and HR personnel from the three organisations of the ACT public health system to plan the implementation of the Workplace Change Framework. To date, two meetings have occurred with a forward work plan to implement the Framework expected to be developed in the coming weeks.

### Information on discussions progressed at the Oversight Group available via Open Access

The Oversight Group has endorsed the publishing of meeting papers and minutes from all Oversight Group meetings held to date, with the documents made available on the ACT Health internet. This information is being made available to reinforce the transparency and accountability of the oversight of the considerable work underway across the ACT public health system.

### Respect, Equity and Diversity (RED) Framework Mapping

In November and December 2019, the three organisations of the ACT public health system undertook a mapping process of the application of the RED Framework. As an outcome from the process, each organisation was provided with a process map, a SWOT analysis and process description document. Each organisation is currently developing an Action Plan and will report on progress against their action plan to the RED Working Group on a quarterly basis.









# What are we focusing on in coming months?

Our focus for work over the next two months includes:

- Considering the Report of the inaugural Annual Review of the Culture Review Implementation;
- Finalising the mapping of the Complaints and Grievance process in the three organisations of the ACT public health system;
- Planning for an implementing the Workplace Change Framework; and
- Recommencing the HR Functions Review which has been temporarily placed on hold due to COVID-19.