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# Culture Reform Oversight Group Agenda

18 July 2022

2.00pm - 5.00pm

Meeting Room DG Conference Room, Level 5, Bowes St / Via WebEx

	Speaker	Time
<b>Item 1 Welcome and apologies</b>		
1.1 Introductions	Chair	5 min
<b>Item 2 Decision and discussion items</b>		
2.1 Third Independent Annual Review	Chair	30 mins
2.2 Workforce and the ACT public health system	EBM PSC	15 mins
2.3 Culture Review Implementation Update	EBM PSC	45 mins
2.4 Leadership Development Program – Evaluation	EBM PSC	15 mins
2.5 NGO Leadership Group - Evaluation	EGM HSPE	15 mins
<b>Item 3 Updates</b>		
3.1 Member Updates (Verbal)	All Members	30 min
<b>Item 4 Noting Items</b>	Chair	15 min
4.1 Culture Reform Oversight Group Terms of Reference		
4.2 Working group progress		
4.3 System wide dashboard and analysis		
4.4 Implementation of Recommendations		
4.5 Culture Review Implementation Program Risk		
4.6 Minutes and actions arising from previous meeting		
<b>Item 5 Other Business</b>		
5.1 Oversight Group Communique	Chair	

**Next meeting:**

- To be confirmed



# Culture Reform Oversight Group Meeting Paper

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Agenda Item:	2.1
Topic:	Third Independent Annual Review - Update
Meeting Date:	18 July 2022
Action Required:	Noting
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

## Purpose

1. To note that Ms Glenys Beauchamp PSM has been engaged to undertake the third and final annual, independent and external review (Annual Review) of the ACT public health system Culture Review Implementation Program.

## Background

2. In 2018, the former Minister for Health and Wellbeing appointed an independent panel to undertake a review into workplace culture within the ACT public health system. The *Final Report of the Independent Review into Workplace Culture within the ACT Public Health Services* (Culture Review) was tabled in the ACT Legislative Assembly in March 2019.
3. Recommendation 19 of the Culture Review states that an independent external review be conducted once a year to review the extent of the implementation of the recommendations of the Culture Review and consequent impact on cultural changes within the ACT public health system.
4. Mr Mick Reid from Michael Reid and Associates was contracted to conduct the first Annual Review, which was tabled in the ACT Legislative Assembly on 4 June 2020.
5. Ms Renee Leon undertook the second Annual Review, with the findings of the review tabled in the ACT Legislative Assembly on 11 November 2021.
6. The Annual Review process is an accountability mechanism for how comprehensively the three arms of the ACT public health system have engaged with the Culture Review Implementation Program.

## Issues

7. Four potential candidates were identified to undertake the third and final Annual Review. These candidates were all approached, however only one, Ms Glenys Beauchamp PSM, has both the availability and expertise to undertake the review during the timeframe required.
8. Ms Beauchamp PSM has 35 years of public sector experience and was Secretary of three Australian Government departments, including the Department of Health. She is on a range of boards for the Australian Government and non-for-profit organisations and has significant experience managing transformational change within government.
9. As part of undertaking the third Annual Review, Ms Beauchamp PSM will meet with key stakeholders, including the Chief Executive Officers of each organisation and select members of the Culture Reform Oversight Group.
10. The draft terms of reference (TOR) for the third Annual Review were discussed by the Culture Reform Oversight Group at its 14 February 2022 meeting.
11. Adjustments have subsequently been made to the TOR ([Attachment A](#)) to reflect the dates for commencement and conclusion of the review, as agreed by the Culture Reform Oversight Group at the February meeting.
12. The third and final Annual Review is expected to be completed in November 2022.

## Recommendation

That the Oversight Group:

- *Note that Ms Glenys Beauchamp PSM has been appointed to undertake the third and final Annual Review.*
- *Note that the third Annual Review is expected to be completed in November 2022.*
- *Endorse the final TOR for the 2022 Annual Review ([Attachment A](#))*

## Attachments

Attachment A	TOR for Third Annual Review – Final
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## Culture Reform Oversight Group

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### Culture Review Implementation: Third Annual Review Terms of Reference

#### Purpose

1. To outline the scope and terms of reference of the third and final 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 Review).

#### 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 Culture Review 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 Culture Review 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 Culture Review 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 Culture Review Report. It represents an important learning opportunity and transparent accountability mechanism.

#### Scope

7. The scope and focus of the third and final 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 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 Report;
- c. The impact on the workforce culture from the changes introduced to date;
- d. The effectiveness of the initiation and planning phase of the Culture Review Implementation process, given that the focus is now on implementation phase, 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 learnt so far and how can these insights and experiences be leveraged to improve the process and outcomes/impact of the Culture Review Implementation process? and
- e. Examine the infrastructure, governance and accountability processes established to support the transition of culture reform being a business-as-usual function within each organisation, and as a system-wide approach.

## 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:
    - i. 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. internal strategies developed by each of the three public health organisations that link to the overarching Culture Review Implementation strategy; and
    - iii. information generated by key initiatives occurring under the banner of the Culture Review Implementation process.
  - b. access to staff climate surveys, and any work progressed as a result of the surveys, including actions plans and monitoring of progress against the action plans;
  - c. access to workforce data and metrics relevant to assessing the impact of the Culture Review Implementation (although negotiations with provider seeking permission in line with IP rights about survey design may be required), including system-wide dashboards;
  - d. access to organisation Workforce Profile Dashboards;
  - e. access to Organisation Culture Improvement Model baseline 2019, 2020, 2021 and 2022 assessments;
  - f. 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.
- g. Opportunity for focus groups or discussions including:
- i. From a cross-section of the workforce across the ACT public health system;
  - ii. with members from the Clinical Leadership Forum; and
  - iii. members from the Professional Colleges Advisory Group.
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 11 November 2022.

### **Structure, Process and Timing**

12. The Reviewer will commence work on this review in August 2022 and will provide an Annual Review Report to the Minister for Health and the Minister for Mental Health by 11 November 2022.
13. The Minister for Health will table the Annual Review Report in the ACT Legislative Assembly during the week of 1 December 2022, 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.





# Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

Agenda Item:	2.2
Topic:	Workforce and the ACT public health system
Meeting Date:	18 July 2022
Action Required:	Discussion
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Chair

## Purpose

1. To facilitate a discussion at the Culture Reform Oversight Group (Oversight Group) on some initiatives underway to support the workforce of the ACT public health system.

## Background

2. There is acknowledgement that the workforce, in particular the health workforce of the ACT jurisdiction is experiencing significant pressure as a result of:
  - a. bushfires of January 2020,
  - b. COVID-19 pandemic commencing March 2020,
  - c. significant culture reform program and associated initiatives, and
  - d. implementation and roll-out of the DHR program.
3. Across the ACT public health system there are conversations underway to gather ideas and develop and invest in initiatives that will support the wellbeing and recovery of our workforce.

## Issues

4. There will be a brief presentation by Deb Anton, Acting Director-General ACT Health Directorate, Dave Pepper, Chief Executive Officer, Canberra Health Services, and Ross Hawkins, Regional Chief Executive Officer on workforce initiatives that are underway within each of the organisations.
5. This will support a discussion by the Oversight Group to explore further opportunities to invest in and support our workforce.

## **Recommendation**

That the Oversight Group:

- *Discuss opportunities to support and invest in the ACT public health system workforce.*





# Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

Agenda Item:	2.3
Topic:	Culture Review Implementation Update
Meeting Date:	18 July 2022
Action Required:	Presentation and Discussion
Cleared by:	Director-General, ACT Health Directorate (ACTHD)
Presenter:	Executive Branch Manager, People Strategy and Culture, ACTHD

## Purpose

1. To present members with an update on the status of the 20 recommendations of the *Independent Review into the Workplace Culture within ACT public health services* (Independent Review).

## Background

2. In 2018, the former Minister for Health and Wellbeing appointed an independent panel to undertake a review into workplace culture within the ACT public health system (Health System). The [Final Report of the Independent Review into Workplace Culture within the ACT Public Health Services](#) (Culture Review) was tabled in the ACT Legislative Assembly in March 2019.
3. The Culture Review highlighted a range of cultural issues across the ACT public health system, which included:
  - a. Inappropriate behaviours, bullying and harassment in the workplace.
  - b. Inefficient procedures and processes, including complaints handling, and inadequate training in dealing with inappropriate work practices.
  - c. Poor leadership and management at many levels throughout the ACT public health system.
  - d. Inefficient and inappropriate Human Resource (HR) practices, including recruitment.
  - e. Tensions in relationships between the three organisations and lack of coordinated planning between the two hospitals in clinical services planning and provision.
  - f. Insufficient coordination and collaboration with NGOs and peak bodies to reduce avoidable demand for health services, facilitate better care coordination and enable broader range of views to be incorporated into strategic development.

- g. Lack of coordinated research strategy to improve reputation, offer opportunities for research and to attract and retain the best health workers in the ACT.
  - h. Need for greater collaboration with NSW Health to give clinicians greater exposure to the clinical experience, research opportunities, professional development, and more mature culture of the larger NSW health system.
4. The Culture Review Implementation (CRI) program team was established in the ACT Health Directorate from April 2019 to lead the planning and support the implementation of all 20 recommendations of the Culture Review across the ACT public health system.
  5. The Culture Reform Oversight Group (Oversight Group) was established in March 2019 to oversight the implementation of the recommendations. The Culture Review Implementation Steering Group (Steering Group) supports the Oversight Group, managing the implementation plans for the various recommendations and coordinating efforts across the health system.
  6. There are 20 recommendations identified to address the findings of the Culture Review, for implementation within each organisation and across the ACT public health system.
  7. The three-year formal Culture Review Implementation program ended on 30 June 2022.

## **Issues**

8. The Culture Review Implementation Steering Group (Steering Group) has endorsed the closure of all 20 recommendations having determined that the intent of each recommendation has been met, or has been sufficiently embedded into business as usual processes across the Health System.
9. Representatives from each organisation will present to the committee on the implementation of the Culture Review recommendations.

## **Recommendation**

That the Oversight Group:

- Note the progress made in implementing the recommendations of the Independent Review into Workplace Culture within ACT public health services.



# Culture Reform Oversight Group Meeting Paper

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<b>Agenda Item:</b>	<b>2.4</b>
<b>Topic:</b>	<b>Leadership Development</b>
<b>Meeting Date:</b>	<b>18 July 2022</b>
<b>Action Required:</b>	<b>Noting</b>
<b>Cleared by:</b>	<b>Director-General, ACT Health Directorate (ACTHD)</b>
<b>Presenter:</b>	<b>Executive Branch Manager, People Strategy and Culture, ACTHD</b>

## Purpose

1. To present the results from the evaluation of the Leadership Development Program piloted across the ACT public health system from December 2021 to June 2022.

## Background

2. The 2019 Culture Review highlighted poor leadership as being a significant contributor to culture issues within the ACT public health system and recommended that a leadership program be introduced across the ACT public health system, specifically designed to develop current and emerging leaders.
3. In August 2020 the Culture Review Implementation (CRI) Steering Group (Steering Group) endorsed a system-wide approach for the development of management and leadership training.
4. Design for the System-wide Leadership Development Program was informed by extensive consultation and is backed by evidence, including:
  - consideration of findings from the Independent Review into Workplace Culture;
  - extensive exploratory research undertaken by the Australian National University Research School of Management (ANU-RSM) and the Centre for Evidence Based Management (CEBMA) to develop the ACT Public Health System Workplace Culture Framework. This included analysis of relevant workforce data and staff feedback, and review of trustworthy scientific research;
  - analysis of needs and opportunities across the ACT public health system, including identification of existing gaps in leadership capability and skill;
  - analysis of learning and development offerings currently available for managers and leaders at all levels across the health system;
  - results of Organisational Culture Improvement Model (OCIM) assessments; and

- feedback from targeted focus group sessions with Senior Officers, grades A and B and equivalent levels from across the ACT Health Directorate and Canberra Health Services.
5. Bendelta Pty Ltd was contracted on 17 November 2021 to design and deliver the first component of the leadership development program.
  6. The program has been piloted with 252 staff from across the ACT Health Directorate, Canberra Health Services and Calvary Public Hospital Bruce participating from 8 December 2021 to 30 June 2022.

## Issues

### *Program design*

7. The Leadership Development Program that was launched on 8 December 2021 has been designed as a first level of leadership training for senior people managers working across the ACT public health system in both clinical and non-clinical roles.
8. The program focuses on how leaders create effective and safe team environments by setting clear expectations of positive workplace behaviour.
9. The program consists of one full day, offsite workshop and two virtual coaching sessions held approximately two and four months after the workshop.
10. The program was designed for existing and emerging leaders at Senior Officer and equivalent classifications from ACTHD, Canberra Health Services and Calvary Public Hospital Bruce, in both clinical and non-clinical roles.
11. To date there have been 14 cohorts and 252 attendees:
  - 52 from ACT Health Directorate
  - 136 from Canberra Health Services
  - 64 from Calvary Public Hospital Bruce.
12. Training cohorts are mixed, with attendees including senior leaders from ACT Health Directorate, Canberra Health Services and Calvary Public Hospital Bruce. This approach was taken to provide more opportunities for our leaders to build relationships that support collaboration, engagement, and partnerships across the health system.
13. Feedback provided by the first two training cohorts was reviewed by the Culture Review Implementation program team and the training provider, and some adjustments were made to further enhance the leadership program for the ACT public health system before rolling out the program to additional pilot cohorts.
14. An evaluation of the pilot has been undertaken to establish where we may improve the program further, and whether to continue the program within each organisation.

### *Evaluation*

15. Participant and manager surveys were used to evaluate the pilot program.
16. Participant surveys were conducted by the training provider at the conclusion of each workshop. These surveys measured participant views on the relevancy and usefulness of each workshop topic. Surveys also sought participant views on the pace of the course and level of course content.

17. A subsequent survey was developed and sent to participants by the Culture Review Implementation team to gain an understanding of how participants viewed the program in terms of applicability in the workplace. Participants were asked to provide feedback on the topics covered by the program, as well as the extent to which the learnings could be applied to their daily work.
18. A survey was also developed for the direct managers of program participants. Managers were asked to provide feedback on how elements of the program had been applied by the participant in the workplace since completing the program.
19. Some key findings from the evaluation are:
  - a. The opportunity to network and collaborate with colleagues from other organisations was identified as a major strength of the program.
  - b. Most attendees (95%) reported that the program was relevant to their current work and would likely, or very likely, recommend the program to other leaders (87%).
  - c. There were suggestions from some attendees to modify the delivery of the program from one full day to two half-days to have more time to absorb the information. In addition, particularly for those working in clinical settings, it was acknowledged that it is difficult to take a full day out of the workplace.
  - d. Feedback for both attendees and managers indicated that, due to the timing of the survey, they or their staff members had not yet had an opportunity to apply what was learned in the workplace.
20. Due to the short timeframe between participation in the pilot and the evaluation, it is not possible to establish the effectiveness and impact of the leadership program within each organisation at this early stage. It is recommended that participants and their managers be surveyed again in 12 months, and a subsequent evaluation activity undertaken to establish the impact of the program.
21. The next evaluation should also reassess alignment of the program with organisational objectives and examine whether there has been an increase in knowledge, skills and changed attitudes, as well as changes in practice and behaviour. Additional data that may be examined in the future to evaluate program effectiveness may include employee survey results, as well as metrics relating to workforce effectiveness, organisational performance, service delivery and clinical outcomes.
22. The Culture Review Implementation Steering Group committed to delivering the Leadership Development Program for Senior Officers (and equivalent classifications) staff throughout 2022. Planning is underway to deliver the training to an additional 12 cohorts (approximately 250 staff) between July and December 2022.
23. ACTHD is also working with Bendelta to develop a second level for the leadership development program for ACTHD leaders. It is anticipated that the second level program will be delivered to staff from early 2023.

#### *Funding arrangements*

24. Attendance at the Leadership Development Program is currently being funded from the CRI budget. Continuation of the program after the cessation of the CRI Program will require each organisation to consider ongoing funding arrangements.

25. At the Culture Review Implementation Steering Group meeting of 23 June 2022, ACTHD, CHS and CPHB committed to the ongoing delivery of the Leadership Development Program through to December 2022, noting that each organisation will be required to self-fund costs associated with the training program for their respective staff.
26. The financial contribution for each organisation for continued delivery of the Leadership Development Program from July to December 2022 will be based on a pro rata arrangement for each training cohort, with each organisation contributing funding equivalent to the number of staff from their organisation participating in each cohort.

### **Recommendation**

That the Oversight Group:

- *Note the evaluation results from the six-month pilot of the Leadership Development Program.*



# Culture Reform Oversight Group Meeting Paper

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Agenda Item:	2.5
Topic:	NGO Leadership Group- Evaluation
Meeting Date:	18 July 2022
Action Required:	Presentation
Cleared by:	Director-General, ACT Health Directorate
Presenter:	Ms Jacinta George, ACT Health Directorate, Executive Group Manager, HSPE

## Purpose

1. To provide the Culture Reform Oversight Group (Oversight Group) with an outline of the findings from the NGO Leadership Group evaluation.

## Background

2. Recommendation 6 of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Culture Review) states:

*That the ACT Health Directorate re-establish open lines of communication with the NGO sector and other external stakeholders. The proposal by the Alcohol, Tobacco and Other Drug Association (ATODA) and the Mental Health Community Coalition ACT (MHCC) to establish a peak NGO Leadership Group to facilitate this new partnership is supported.*

3. ACT Health Directorate (ACTHD) established the NGO Leadership Group (NGOLG) in response to the recommendation. The inaugural meeting of the NGOLG was held on 23 October 2019.

## Issues

4. The NGOLG work plan provides immediate opportunities for collaboration and engagement between the parties, including advice to ACTHD on engaging NGOs in the development of the Territory-wide Health Service Plan (the key health service planning strategy for the ACT) and the project to commission health services in the community upon the expiry of current service funding agreements in June 2022. The latter has close links to CHS' integrated care project.
5. The NGOLG has also provided significant advice on engaging with NGOs to address matters related to supporting NGOs funded by ACTHD during the COVID-19 public health emergency.
6. The formal evaluation of the NGOLG was undertaken during 2022 and has now been finalised. The findings will be presented to the Oversight Group.



## **Recommendation**

That the Oversight Group:

- *Note the presentation on the findings from the NGO Leadership Evaluation.*



# Culture Reform Oversight Group Meeting Paper

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Agenda Item:	3.1
Topic:	Member Updates
Meeting Date:	18 July 2022
Action Required:	Discussion
Cleared by:	Director-General, ACT Health Directorate
Presenter:	All members

## Purpose

1. An opportunity for members to provide an update on progress being made including initiatives, identified themes, collaboration and risks related to the implementation and progression of culture reform across the ACT public health system.

## Background

2. The Culture Reform Oversight Group (Oversight Group) provides opportunity at each meeting for members to talk about progress, themes, and challenges in progressing culture reform across the ACT public health system.

## Recommendation

That the Oversight Group:

- *Note the information provided by members about progress, themes, and challenges in culture reform across the ACT public health system.*



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## Culture Reform Oversight Group Meeting Paper

Agenda Item:	4.1
Topic:	Culture Reform Oversight Terms of Reference - Review
Meeting Date:	18 July 2022
Action Required:	Endorsement
Cleared by:	Director-General, ACT Health Directorate (ACTHD)
Presenter:	Executive Branch Manager, People Strategy and Culture, ACTHD

### Purpose

1. To review and update the Culture Reform Oversight Group (Oversight Group) Terms of Reference (ToR).

### Background

2. The ToR for the Oversight Group at Attachment A were developed in line with the recommendations of the *'Final Report of the Independent Review into the Workplace Culture within ACT Public Health Services'* in 2019 and were endorsed by the Culture Reform Oversight Group at the June 2019 meeting.

### Issues

3. A discussion of the proposed ToR took place at the April Oversight Group. There was general acceptance of the redrafted TOR, however some minor edits were required. The amendments have been completed and are at Attachment A for endorsement.

### Recommendation

That the Oversight Group:

- *Endorse the attached ToR for the Oversight Group.*



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## Culture Reform Oversight Group

### TERMS OF REFERENCE

<b>Role</b>	<p>The Culture Reform Oversight Group (Oversight Group) is responsible for overseeing the transition of the Culture Review Implementation Program, developed in response to the Final Report of the Review into the Workplace Culture in ACT Public Health Services (Culture Review) (March 2019), to a sustainable model where culture is regarded as core business. This will include:</p> <ul style="list-style-type: none"><li>• finalising actions resulting from the Culture Review,</li><li>• overseeing and implementing the Third Annual Review, scheduled to take place from August through November 2022,</li><li>• embedding the findings from the Third Annual Review into core business across the ACT public health system,</li><li>• planning for the transition of governance for residual functions of the Oversight Group and Working Groups, to ensure initiatives supporting culture reform are embedded into core business, and</li><li>• responding to issues arising during the transition phase.</li></ul> <p>The intent of the group, through progressing the above work is to ensure that there continues to be a transparent and accountable avenue to oversee and guide culture improvement for the ACT public health system.</p>
<b>Values and Behaviours</b>	<p>Participation and engagement in the Oversight Group will reflect organisational values and the commitment to collaborate within strong governance frameworks. Members will display signature behaviours such as:</p> <ul style="list-style-type: none"><li>• being accountable and transparent in decision-making;</li><li>• genuine and respectful engagement with colleagues within the Directorates, across the ACT Public Service and the health system;</li><li>• open sharing of information to improve the exploration of ideas and concepts, linked to early productive discussion, that supports solution-focussed discussion on resolving people related concerns; and</li><li>• innovative thinking to support improvement and development on matters impacting the ACT public health system workforce.</li></ul>
<b>Membership</b>	<ul style="list-style-type: none"><li>• Minister for Health (Chair)</li><li>• Minister for Mental Health (Deputy Chair)</li><li>• Director-General, Health Directorate</li><li>• Chief Executive Officer, Canberra Health Services</li></ul>

	<ul style="list-style-type: none"> <li>• Regional Chief Executive Officer, Calvary ACT</li> <li>• Regional Secretary, CPSU</li> <li>• President, AMA ACT</li> <li>• Executive Officer, Health Care Consumers Association (ACT)</li> <li>• President, ASMOF ACT</li> <li>• President, VMOA ACT</li> <li>• Dean, College of Health and Medicine ANU</li> <li>• Executive Dean, Faculty of Health, University of Canberra</li> <li>• Executive Branch Manager, Culture Review Implementation Team [ex-officio]</li> </ul> <p>The Oversight Group may also invite other individuals or representatives of organisations from time to time where special expertise or experience is required to assist the Group in its work.</p> <p>Members will be asked to declare any actual, potential, or perceived conflicts of interest, at each meeting.</p> <p>There will be no sitting fees provided for meetings.</p>
<b>Secretariat</b>	Secretariat support will be provided by ACTHD People Strategy and Culture and will end on finalisation of the Third Annual Review.
<b>Meeting Frequency</b>	Meetings are to be held quarterly, or as required by the Chair.
<b>Absences from Meetings and Proxy Attendance</b>	<p>All Members are strongly encouraged to prioritise meetings.</p> <p>The Oversight Group supports a process of proxies however it is strongly encouraged that a commitment is made by individuals to maintain the momentum of discussions and work being progressed by the Oversight Group.</p>
<b>Functions</b>	The function of the Oversight Group going forward is to facilitate the transition from overseeing the delivery of the 20 recommendations of the Culture Review, to overseeing the finalisation of the Third Annual Review, and ensuring culture improvement is embedded as core business across the ACT public health system.
<b>Reporting Mechanisms</b>	The Oversight Group is the peak governance committee for the Culture Review Implementation. The Oversight Group will receive information, regular reports and issues for escalation from members, through the Secretariat.

<b>Meetings and Agenda Requests</b>	<p>Meeting papers and the agenda will be cleared by the Chair and circulated one week in advance of meetings.</p> <p>Meeting papers will be considered in-confidence by all members. Any other material that is made available to Oversight Group members, which is by its nature confidential, marked as confidential or that the member ought to know is confidential, will be kept secret and confidential and not disclosed to anyone outside the Oversight Group.</p> <p>Papers will be distributed to members electronically five working days prior to the meeting taking place.</p>
<b>Standing Agenda Items</b>	A summary of standing agenda items is at <u>Attachment A</u> .
<b>Minutes</b>	The Secretariat will prepare minutes of each meeting and record actions items. Minutes and action items will be distributed within two weeks of the meeting taking place.
<b>TOR Review Frequency</b>	The Terms of Reference will be reviewed annually, or as required to ensure alignment with governance arrangements.
<b>TOR Approval</b>	

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# Culture Reform Oversight Group- Transition Group

## Agenda

Date, XXXX 2021

Time

		Sponsor
<b>Item 1</b>	<b>Welcome and apologies and Conflict of Interest</b>	
	1.1 Introductions	Chair
<b>Item 2</b>	<b>Brief Notes from previous meeting</b>	
	2.1 Notes from X XXXX 2022	Chair
	2.2 Actions Arising – for discussion	Chair
<b>Item 3</b>	<b>Discussion items</b>	
	3.1 Update of agreed actions to work plan	Chair
	<ul style="list-style-type: none"><li>• System-wide people functions and engagement</li><li>• HR capability and capacity</li><li>• </li></ul>	
	3.2 Additions to work plans	
	3.3 Discussion	
	3.4	
<b>Item 4</b>	<b>Other Business</b>	
	4.1	

Next meetings:

XX XXXX 2022





# Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

<b>Agenda Item:</b>	4.2
<b>Topic:</b>	<b>Oversight Group – Working Group progress</b>
<b>Meeting Date:</b>	18 July 2022
<b>Action Required:</b>	<b>For Noting and Discussion</b>
<b>Cleared by:</b>	<b>Director-General, ACT Health Directorates (ACTHD)</b>
<b>Presenter:</b>	Working Group (WG) Representatives

## Purpose

1. To provide the Culture Reform Oversight Group (Oversight Group) with an update of progress made by its three WGs.

## Background

2. As an outcome from the Oversight Group workshop on 18 March 2021, it was agreed that three WGs would be established to focus on system-wide issues. These are:
  - a. System-wide Human Resources (HR) Matters WG,
  - b. Early Intervention WG, and
  - c. Professional Transition to Work WG.
3. Inaugural meetings of the three WGs were held in June 2021. Subsequent meetings of the three WGs have been held during August, October, December 2021 and February, April, June 2022.

## Issues

4. At the Early Intervention WG held on 1 June 2022 and HR Matters WG held 7 June 2022 a proposal was discussed to amalgamate the two working groups. There was unanimous agreement by members from both WGs that this occur with the following points noted. That:
  - a. representation from the two groups is reviewed to form an amalgamated WG,
  - b. the Terms of Reference (TOR) of both WGs be reviewed and a revised TOR is developed capturing the intent of both groups, such as identifying an early intervention focus on matters to support culture reform, industrial related matters, and people and workforce themes,

- c. the outstanding action items from the Early Intervention and HR Matters WGs be transferred to the amalgamated group and progressed, and
- d. the name of the amalgamated WG is reviewed and changed to reflect the purpose of the group.

#### Professional Transition to Work WG

- 5. The seventh meeting of the Professional Transition to Work WG was held on 5 April 2022.
- 6. It continues to focus on the two research projects. These projects will examine existing supports and graduate and early career programs and will involve a review of available evidence (including academic literature) to provide evidence-based recommendations to support health professionals during their early career.
- 7. Two research projects have been agreed by the working group:
  - a) Project 1 will focus on the transition from being a student to becoming a health professional. This project will examine the programs, mechanisms and experiences that support students in their transition from being a student to being a health professional within the ACT public health system.
  - b) Project 2 will focus on the first two years as a professional within the health system. This project will examine the programs and support offered to graduates or new starters in the first two years of working in the health service in the ACT, as well as the experiences of early career professionals.

#### Update on Project 1

- 8. Data has been collected from the universities and key stakeholders across the ACT public health system to gain an understanding of existing programs and supports that are in place. An external Research Officer has been engaged for a (estimated 4-week engagement) to analyse and synthesis this data, to gain an understanding on programs and supports that are in place. Next steps are for the Research Officer to draft a preliminary report for the WG to consider and help understand where there may be gaps and opportunities.

#### Update on Project 2

- 9. A research protocol will be shared with members of the WG at next meeting. This will include the research methodology, what is in scope and what is not in scope for the research project.
- 10. Funding for both research projects will be provided through budget allocated for WG projects, under the Culture Review Implementation budget.

#### Early Intervention WG

- 11. The seventh meeting of the Early Intervention WG was held on 1 June 2022.
- 12. The Early Intervention WG is focused on system-wide issues that have or are likely to have an impact on culture across the ACT public health system. This includes identifying and monitoring culture issues that may arise from the implementation of significant change programs being delivered across the health system.
- 13. The following Items were discussed at the June meeting:

- a. The chair welcomed members thoughts on the proposal of an amalgamation of the Early Intervention and HR Matters WGs. There was unanimous agreement by members that this occur.
- b. The Acting Executive Branch Manager, HRIMS, CMTEDD provided members with a briefing on the progress of the HRIMS project since the last WG meeting in February 2022.

#### System-wide HR Matters WG

14. The seventh meeting of the System-wide HR Matters WG was held on 7 June 2022.
15. The group discussed a range of system-wide matters, including proposals for quarterly System-wide Innovation Workshops, union engagement and best practice consultation, and the establishment of a WHS Community of Practice.
16. System-wide Innovation Workshops provide a forum for stakeholders to collaborate and genuinely consult on system wide industrial relation issues, with a focus on developing evidence based innovative solutions and improvement.
17. The first System-wide Innovation Workshop was held on 31 March 2022 on the topic of union encouragement policy and consultation. A follow-up workshop focussed on understanding consultation and with an agreed action to develop a consultation artefact, which will include guidance material for managers.
18. It was proposed to amalgamate the Early Intervention and HR Matters WG. There was unanimous agreement by members that this occur.

#### **Recommendation**

That the Oversight Group:

- Discuss the amalgamation of the HR Matters and Early Intervention WG.
- Note and consider the draft Terms of Reference at **Attachment A** of the amalgamation of the two WGs.



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## Culture Reform Oversight Group Early Intervention/ HR Matters Working Group TERMS OF REFERENCE (DRAFT)

<b>Role</b>	<p>The <b>(Insert new name of Working Group)</b> (Working Group) is responsible for identifying system-wide issues that have or are likely to have an impact on culture across the ACT public health system.</p> <p>This will entail identifying issues early, describing and quantifying the issues and identifying strategies to address or mitigate the issues. This might result in a matter being referred to another group or being escalated to the Culture Reform Oversight Group (Oversight Group).</p> <p>The Working Group will act as a conduit for consultation and feedback with its member networks and stakeholders – both to identify emerging issues, and to communicate strategies that have been agreed.</p> <p>The Working Group will report back to the Oversight Group on:</p> <ul style="list-style-type: none"><li>• addressing the key system-wide issues from the HR Function Review where working together will achieve greater consistency, efficiency, and lead to better outcomes for the ACT public health system;</li><li>• matters that will benefit from an early intervention focus, and through the emphasis will ensure more positive outcomes for our workforce and culture;</li><li>• assessing the HR capability in each organisation and across the system; and work underway to build capability and culture, and identifying metrics that will demonstrate the impact of these changes; and</li><li>• developing best practice approaches and establishing models to deal with industrial issues in a way that complies with Enterprise Agreements and focusses on early intervention and avoids escalation.</li></ul> <p>The intent of the group through progressing the above work is to tackle issues that have been enduring and remain unresolved across the ACT public health system.</p>
<b>Values and Behaviours</b>	<p>Participation and engagement in the Working Group will reflect organisational values and the commitment to collaborate within strong governance frameworks. Members will display signature behaviours such as:</p> <ul style="list-style-type: none"><li>• Being accountable and transparent in decision-making;</li><li>• Genuine and respectful engagement with colleagues within the Directorates, across the ACT Public Service and the Health System, with community members and within the working group;</li><li>• Open sharing of information to improve the exploration of ideas and concepts linked to early productive discussion that supports solution-</li></ul>

	<p>focussed thinking about concerns being raised by people ‘on the ground’ within the ACT public health system; and</p> <ul style="list-style-type: none"> <li>• Innovative thinking and engagement to support improvement in the understanding of the root cause/s or issues impacting the workforce of the ACT public health system.</li> </ul>
<b>Membership</b>	<ul style="list-style-type: none"> <li>• Director-General, ACT Health Directorate (ACTHD)</li> <li>• Chief Executive Officer, Canberra Health Services (CHS)</li> <li>• Regional Chief Executive Officer, Calvary ACT (Calvary)</li> <li>• Executive Group Manager, People &amp; Culture, CHS</li> <li>• Australian Nursing and Midwifery Federation (ANMF) ACT Representative</li> <li>• Regional Secretary of the Community and Public Sector Union (CPSU)</li> <li>• Community and Public Sector Union Representative (CPSU)</li> <li>• Australian Nursing and Midwives Federation Representative (ANMF)</li> <li>• Deputy Director-General, Workforce, Capability &amp; Governance, Chief Minister, Treasury and Economic Development Directorate (CMTEDD)</li> <li>• Executive Branch Manager, People Strategy and Culture, ACTHD</li> <li>• Regional Director People and Culture, Calvary ACT (Calvary)</li> <li>• Executive Group Manager, WhoG Industrial Relations and Public Sector Employment, CMTEDD</li> <li>• President Visiting Medical Officers Association (VMOA) ACT</li> <li>• Health Care Consumers Association (ACT) Representative</li> <li>• Australian Salaried Medical Officers Federation (ASMOF) ACT Representative</li> <li>• Senior Adviser, Minister for Health</li> <li>• President Australian Medical Association ACT Limited (AMA)</li> </ul> <p>The Working Group may also invite other individuals or representatives of organisations from time to time with the agreement of the Working Group where special expertise or experience is required to assist the Group in its work.</p> <p>Members will be asked to declare any actual, potential, or perceived conflicts of interest, at each meeting.</p> <p>There will be no sitting fees provided for meetings.</p>
<b>Secretariat</b>	<p>Secretariat Support will be initially provided by the Culture Review Implementation Team until <b>(Insert new date)</b>.</p>
<b>Meeting Frequency</b>	<p>Meetings are to be held 6-8 weekly, aligning with Oversight Group meetings where possible, or as required by the Chair.</p>
<b>Absences from Meetings and Proxy Attendance</b>	<p>All Members are strongly encouraged to prioritise meetings.</p> <p>The Working Group supports a process of proxies however it is strongly encouraged that a commitment is made by individuals to maintain the momentum of discussions and work being progressed by the Working Group.</p>

<b>Functions</b>	<p>The Working Group will:</p> <ul style="list-style-type: none"> <li>○ identifying emerging issues that have the potential of impacting the broad workforce across the ACT public health system, for consideration by the working group;</li> <li>○ seek background information, data, evidence and advice on those issues;</li> <li>○ communicating back the working group's consideration of the issues and any strategies agreed to address or mitigate them.</li> <li>○ provide the Oversight Group with advice on the development, improvement, and sustainability of a model to support discussions to understand the root causes and maintenance factors in system-wide HR and people related issues that are enduring and unresolved within the ACT public health system; and</li> <li>○ consider models adopted in other jurisdictions to support understanding and exploration of issues present in HR and people related areas that impact on the workforce of a health system and advise the Oversight Group on applicability to the ACT to enhance system improvements.</li> </ul> <ul style="list-style-type: none"> <li>• Confirm there is a shared view that the issues are system-wide and may impact on culture. This may include: <ul style="list-style-type: none"> <li>○ Quantifying, exploring and understanding the issue;</li> <li>○ Understanding the scope of impact i.e. infrastructure, communications, marketing, change management;</li> </ul> </li> <li>• Agree what early intervention strategies might be to address or mitigate the issue and make recommendations on which group or organisation is best placed to implement those strategies, including the Oversight Group or other working groups.</li> <li>• Consider what metrics (lead indicator of culture) will be impacted on by the issue without early intervention, including ongoing monitoring and assessment of metrics.</li> <li>• Based on the experience of the working group, develop a model that formalises the above processes.</li> </ul>
<b>Reporting Mechanisms</b>	<p>The Working Group will provide regular updates to the Oversight Group on the agreed scope of work, agreed action plans and progress being made.</p> <p>Updates will be included in the Culture Reform Oversight Group Communique and Key Message documents.</p>
<b>Meetings and Agenda Requests</b>	<p>Meeting papers and the Agenda will be cleared by the Chair and circulated one week in advance of meetings.</p> <p>Meeting papers will be considered in-confidence by all members and the executive of each represented stakeholder group. Any other material that is made available to Working Group members which is by its nature confidential, marked as confidential or that the member ought to know is confidential, will be kept secret and confidential and not disclosed to anyone outside the Working Group. Papers will be distributed to members electronically five working days prior to the meeting taking place.</p>
<b>Standing Agenda</b>	<p>A summary of standing agenda items is at <a href="#">Attachment A</a>.</p>

<b>Items</b>	
<b>Minutes</b>	The Secretariat will prepare minutes of each meeting, and record actions items. Minutes and action items will be distributed within two weeks of the meeting taking place.
<b>TOR Review Frequency</b>	The Terms of Reference will be reviewed annually, or as required to ensure alignment with governance arrangements. The next review is due by <b>(Insert new date)</b> .
<b>TOR Approval</b>	





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## Culture Reform Oversight Group Meeting Paper

<b>Agenda Item:</b>	4.3
<b>Topic:</b>	<b>System-wide Workforce Effectiveness Dashboard and Analysis</b>
<b>Meeting Date:</b>	18 July 2022
<b>Action Required:</b>	<b>Noting</b>
<b>Cleared by:</b>	<b>Director-General, ACT Health Directorate</b>
<b>Presenter:</b>	Executive Branch Manager, People Strategy and Culture Branch, ACTHD

### Purpose

1. To present the bi-monthly System-wide Workforce Effectiveness Dashboard and analysis of data trends, for noting.

### Background

2. The Workforce Effectiveness Dashboard and data analysis, presented to the Oversight Group bi-monthly demonstrates trends and provides insights into how culture improvements are being experienced by the workforce. Measures include headcount, age profile, diversity, length of service, overtime, separations, preliminary assessments, and occupational violence.
3. Extensive consultation occurred across the ACT public health system in 2019 and 2021 to gain agreement to report workforce data. Consistent workforce effectiveness indicators and data definitions were agreed, to ensure consistency in application and measurement.
4. There is acknowledgement that some data sets recommended in the agreed Workforce Effectiveness Indicator Model (WEIM) are not currently available in one or more organisation at this time. However, the model enables reporting of available data, with the intent to continue to increase reported data as mechanisms for capturing data mature or become available.

### Issues

5. Following consultation with ACTHD, CHS and CPHB, some amendments to the dashboard have been implemented for this month. This is in alignment with previous agreement on the data definitions by the three organisations. These include:

- Separations displayed for permanent staff only,
- Inclusion of permanent separations by month,
- Cumulative turnover percentage is included for financial year, and
- Open preliminary assessments are displayed cumulatively.

6. The Workforce Effectiveness Dashboard is presented in Attachment A and the analysis report is at Attachment B.

## Recommendation

That the Oversight Group:

- Note the information provided in the Workforce Effectiveness Dashboard and attached analysis.

## Attachments

Attachment A	Workforce Effectiveness Dashboard
Attachment B	Workforce Effectiveness Data Analysis



## Staffing

### Canberra Health Services

Headcount as at 11 May 2022

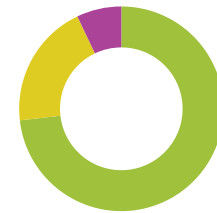
8,275

FTE as at 11 May 2022

7,136.29

As at 11 May 2022, the breakdown of headcount by

Employment Type



Permanent Temporary Casual

Full-Time/Part-Time



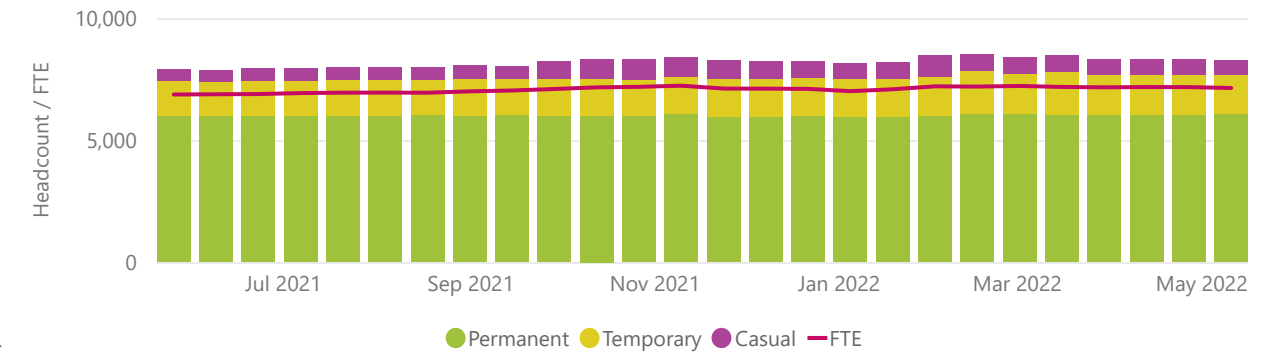
Full Time Part Time

Gender



Female Male Non-Binary/Ind...

Headcount / FTE - 12 Months History



### Calvary

Headcount as at 11 May 2022

1,802

FTE as at 11 May 2022

1,246.16

As at 11 May 2022, the breakdown of headcount by

Employment Type



Permanent Casual Temporary

Full-Time/Part-Time/Casual

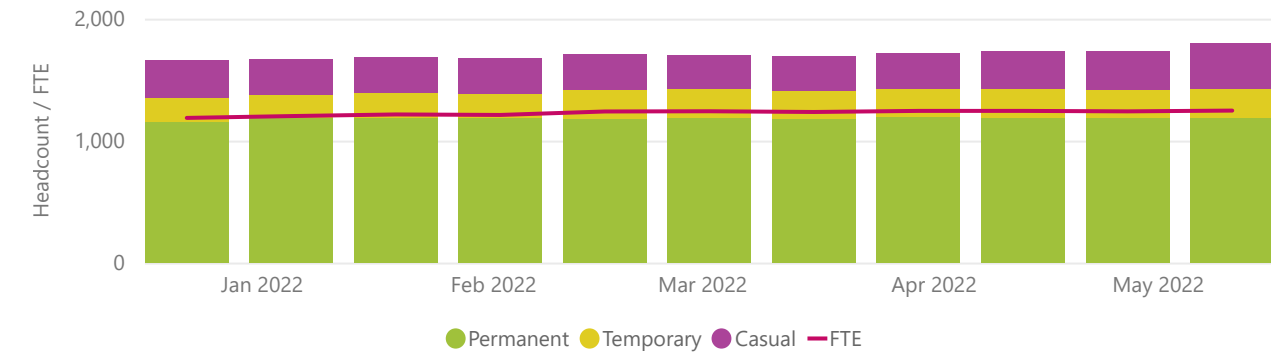


Full Time Part Time Casual

Gender

Not available for reporting period

Headcount / FTE - 12 Months History



### Health Directorate

Headcount as at 11 May 2022

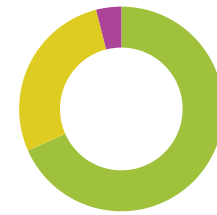
1,058

FTE as at 11 May 2022

985.96

As at 11 May 2022, the breakdown of headcount by

Employment Type



Permanent Temporary Casual

Full-Time/Part-Time



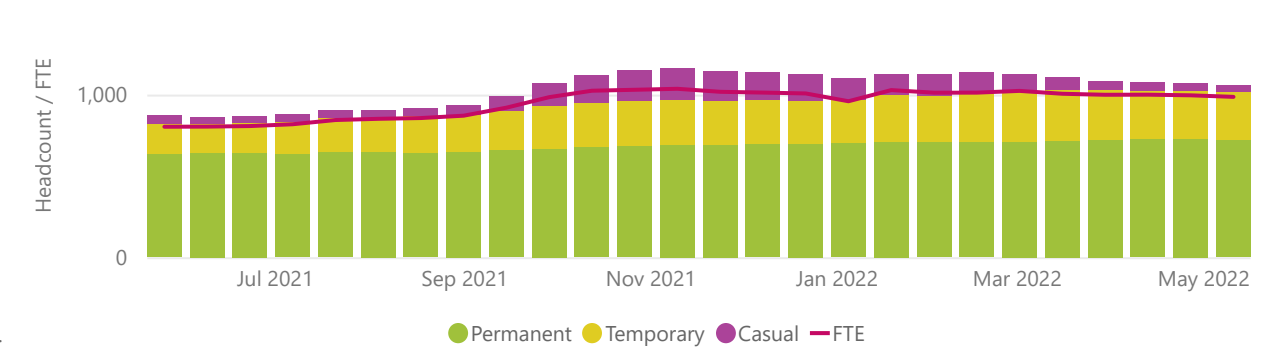
Full Time Part Time

Gender



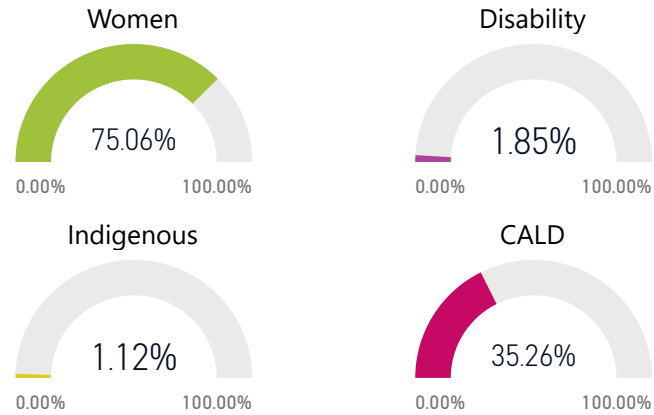
Female Male Non-Binary/Ind...

Headcount / FTE - 12 Months History

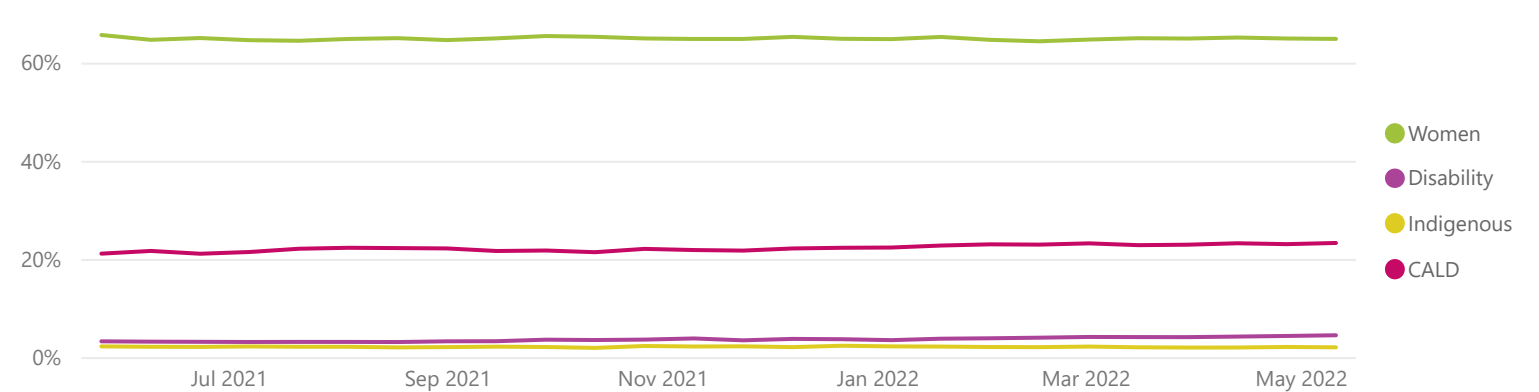
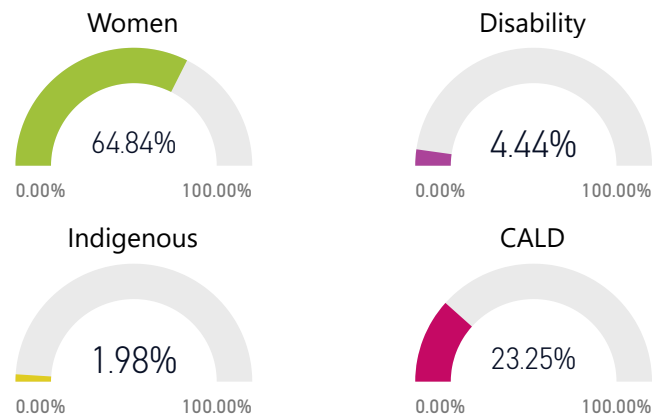
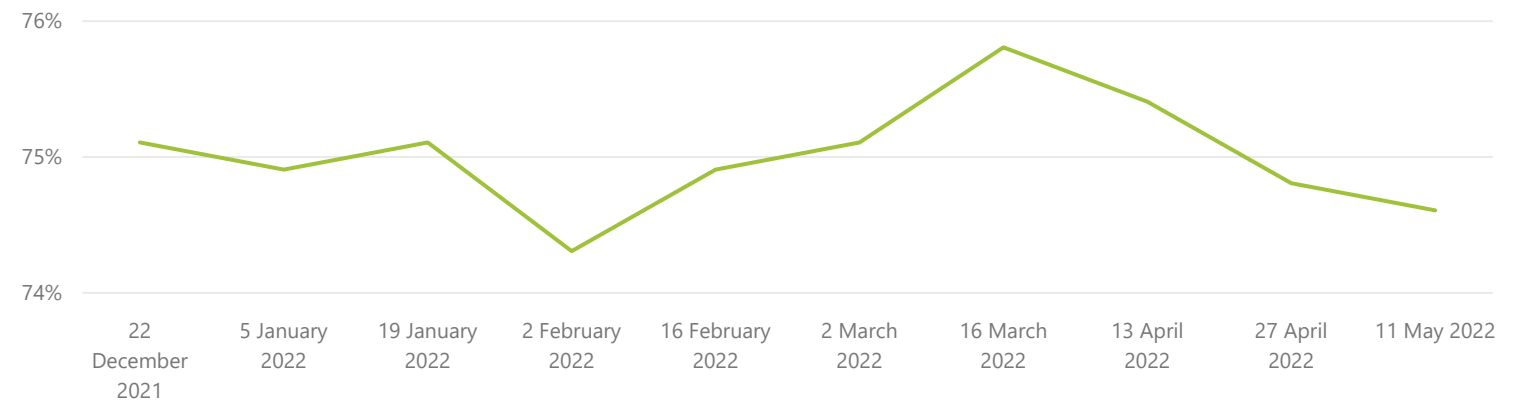
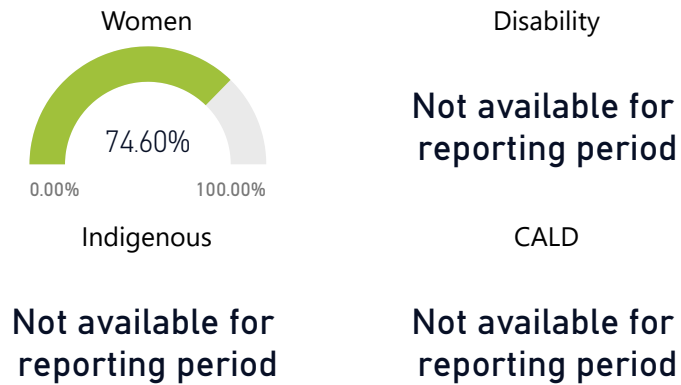
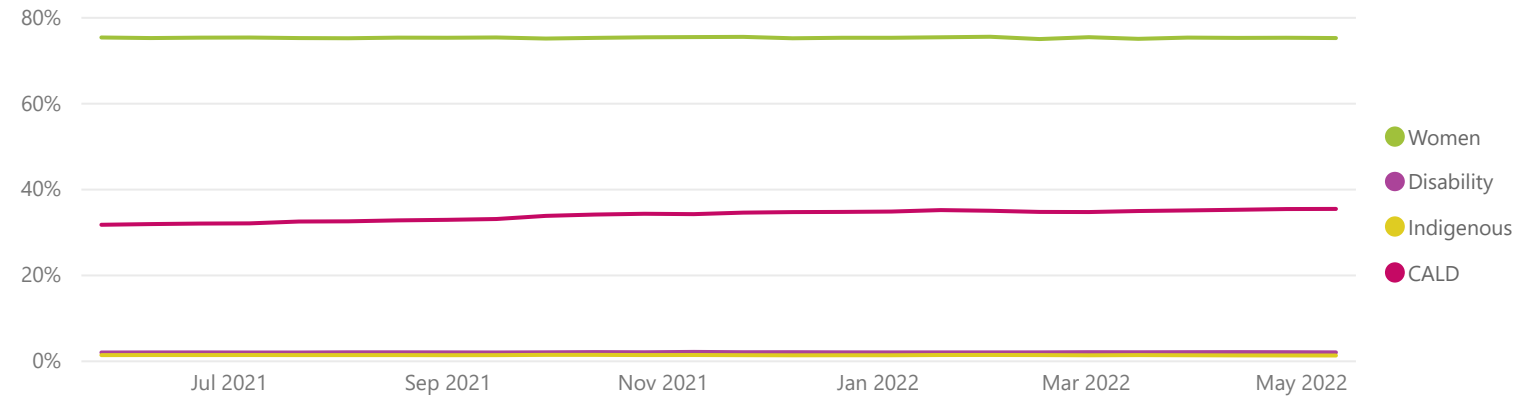


# Diversity

Diversity Statistics as at 11 May 2022



Diversity Statistics - 12 Months



# Age Profile

Age Profile by Employment Type as at 11 May 2022



Average Age as at 11 May 2022

**40.02 Years**

Average Age has decreased over the past 12 months by:

**0.67 Years**

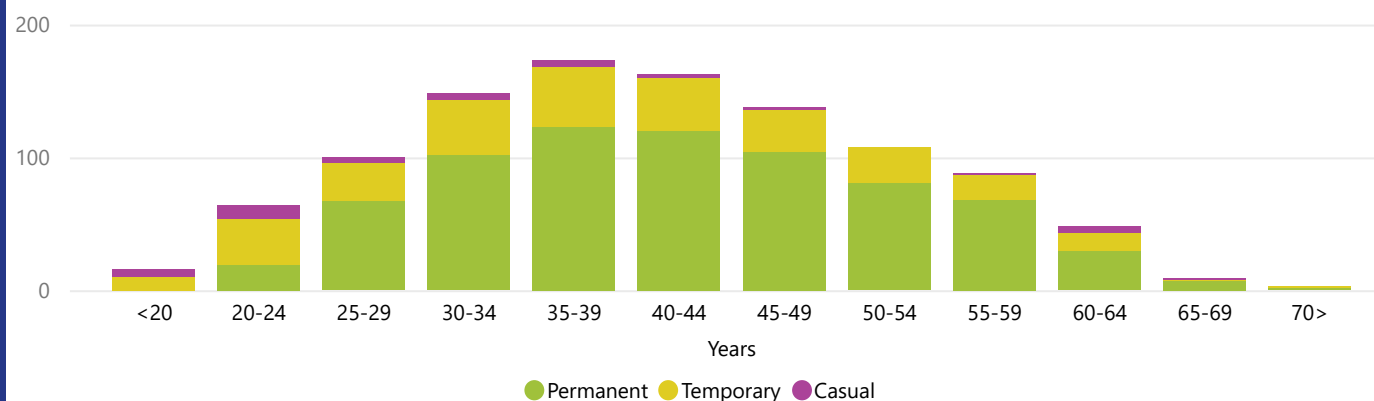


Average Age as at 11 May 2022

Not available for reporting period

Average Age has decreased over the past 12 months by:

Not available for reporting period



Average Age as at 11 May 2022

**41.07 Years**

No change in Average Age over the past 12 months

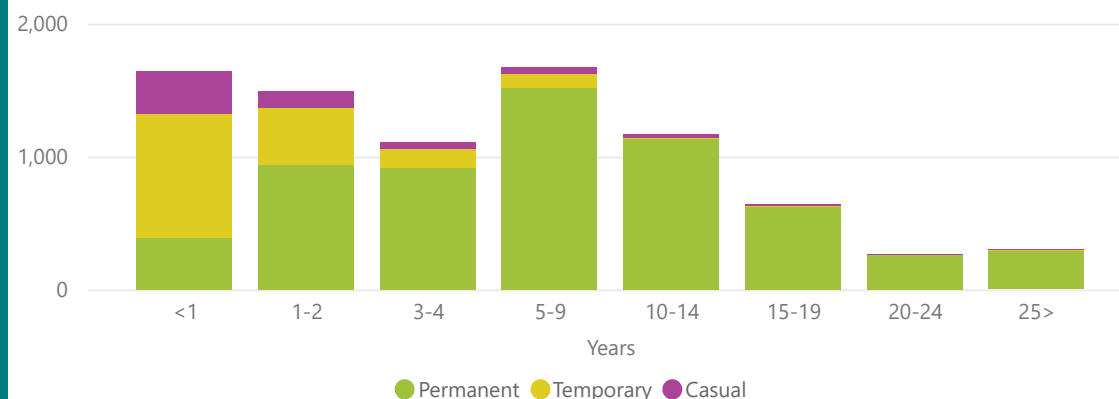
**0.00 Years**





# Length of Service

Length of Service Profile by Employment Type as at 11 May 2022

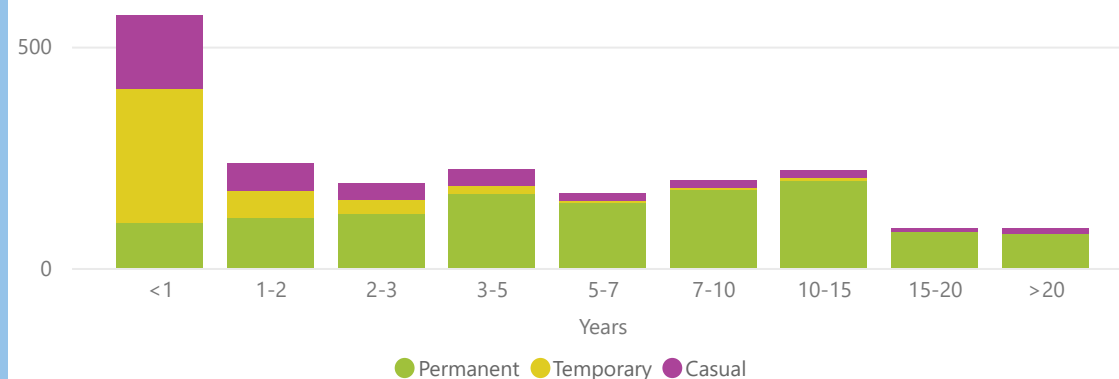


Average Length of Service as at 11 May 2022

**7.26 Years**

Average Length of Service has decreased over the past 12 months by:

**0.34 Years**

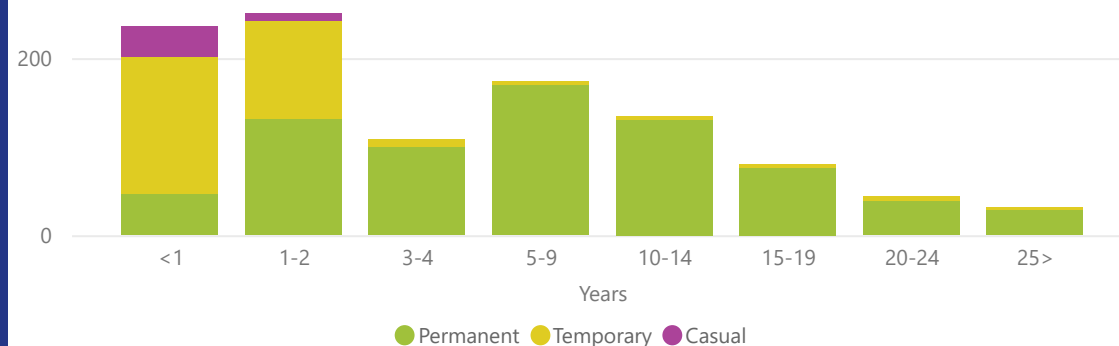


Average Length of Service as at 11 May 2022

Not available for reporting period

Average Length of Service has decreased over the past 12 months by:

Not available for reporting period



Average Length of Service as at 11 May 2022

**6.92 Years**

Average Length of Service has decreased over the past 12 months by:

**0.40 Years**



# Overtime

## Canberra Health Services

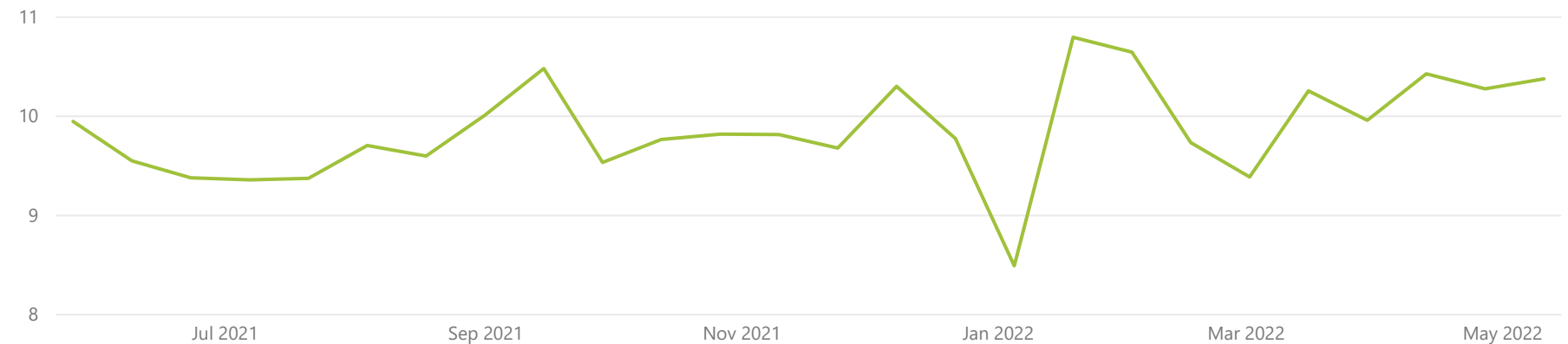
Average overtime hours worked per FTE for period ending 11 May 2022

**10.99**

Number of employees who worked overtime in period ending 11 May 2022

**1,744**

Average overtime hours per employee over the past 12 months



## Calvary

Overtime hours worked in period ending 11 May 2022

Not available for reporting period

Number of employees who worked overtime in period ending 11 May 2022

Not available for reporting period

Not available for reporting period

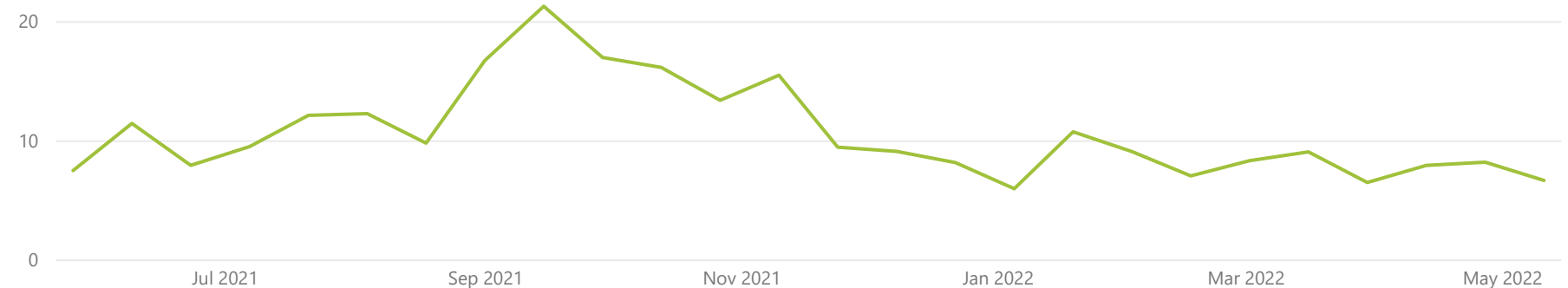
## Health Directorate

Average overtime hours worked per FTE for period ending 11 May 2022

**7.02**

Number of employees who worked overtime in period ending 11 May 2022

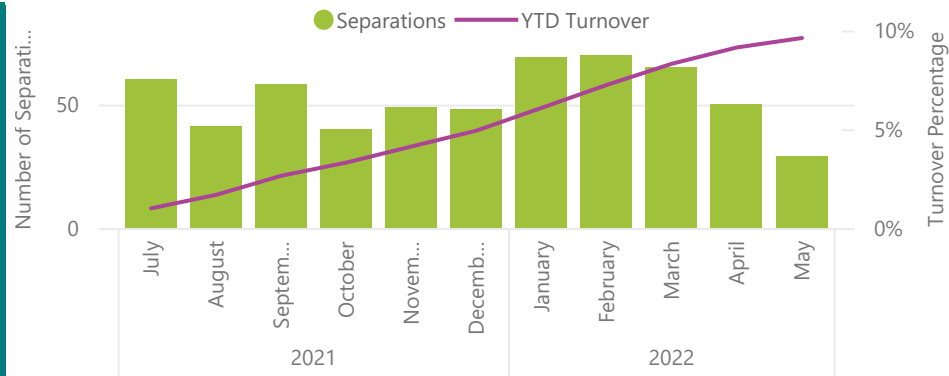
**141**



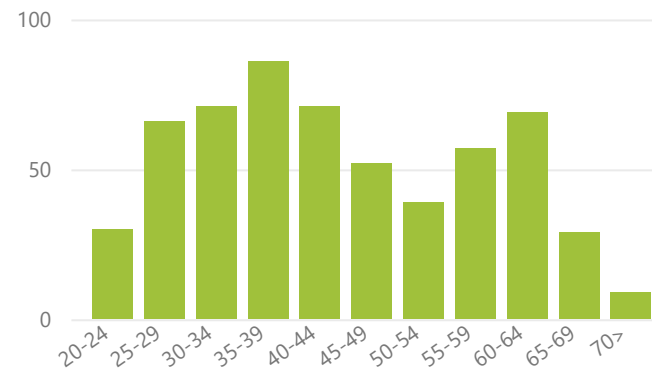


# Separations

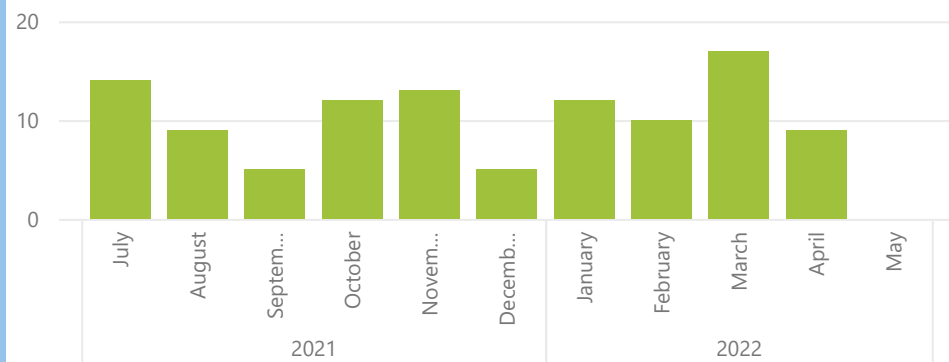
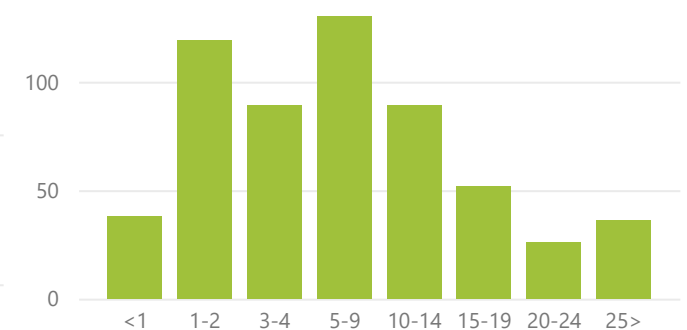
Permanent Separations and Cumulative Turnover by Month for 2022 Financial Year\*



Permanent Separations by Age for 2022 Financial Year\*



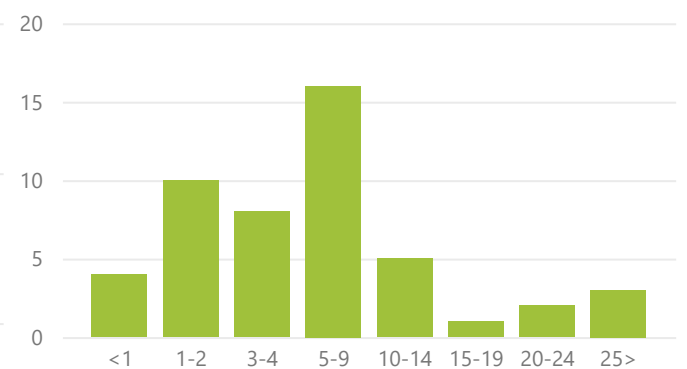
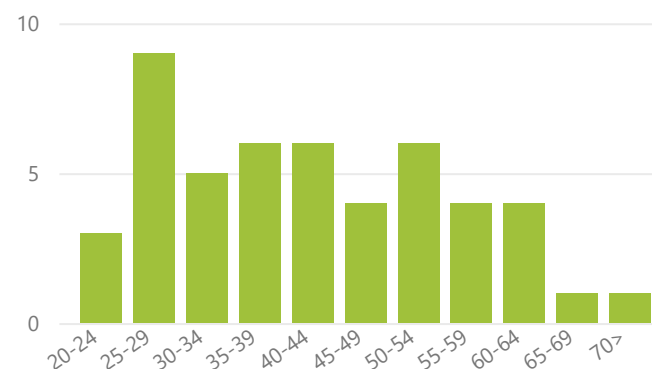
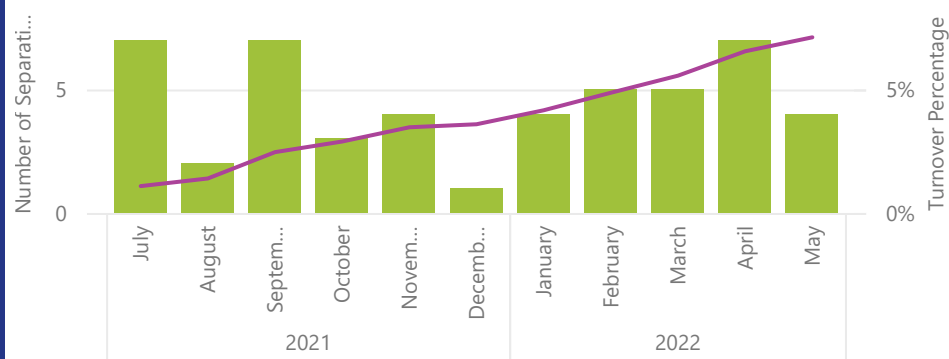
Permanent Separations by Length of Service for 2022 Financial Year\*



Not available for reporting period

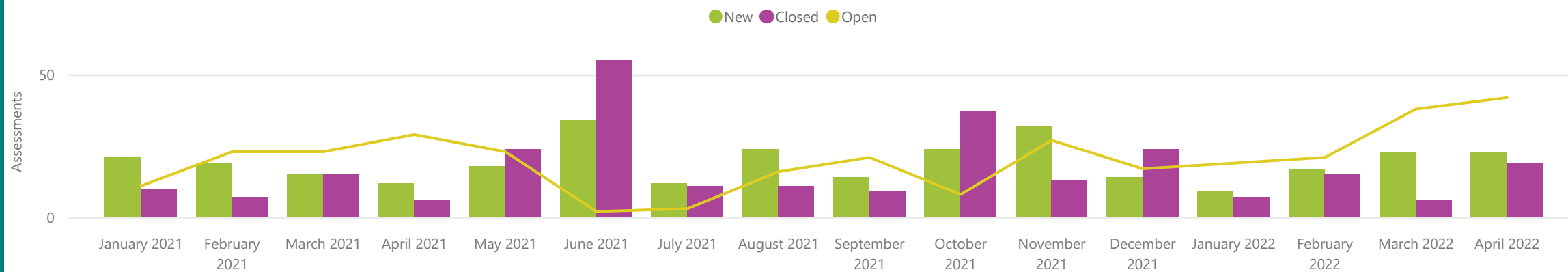
Not available for reporting period

\*Separations by Age, Length of Service and Cumulative Turnover not available for Calvary



# Preliminary Assessments

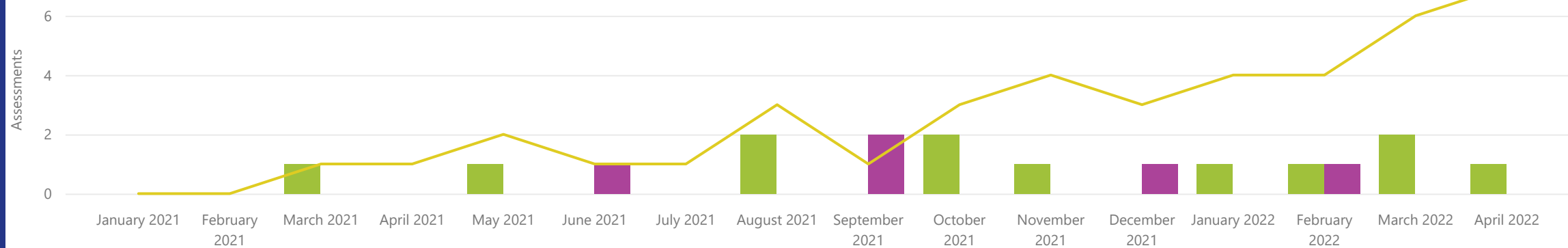
## Preliminary Assessments by Month



Canberra Health  
Services

Preliminary Assessments data not available

Calvary



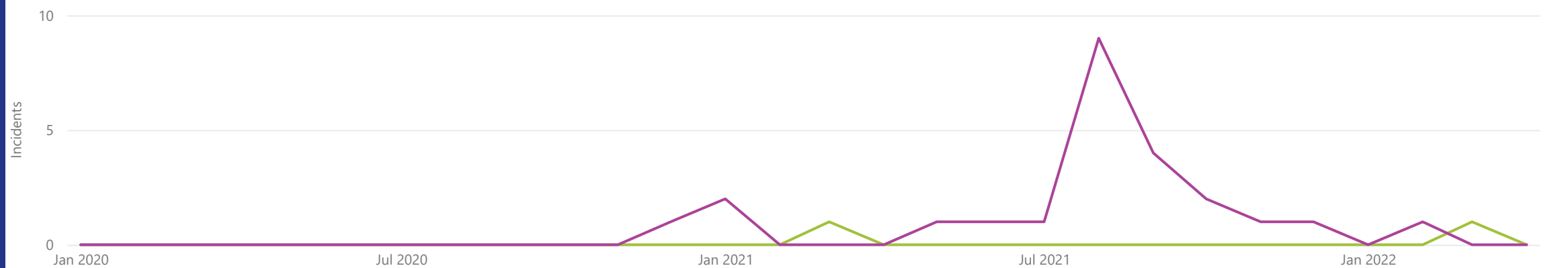
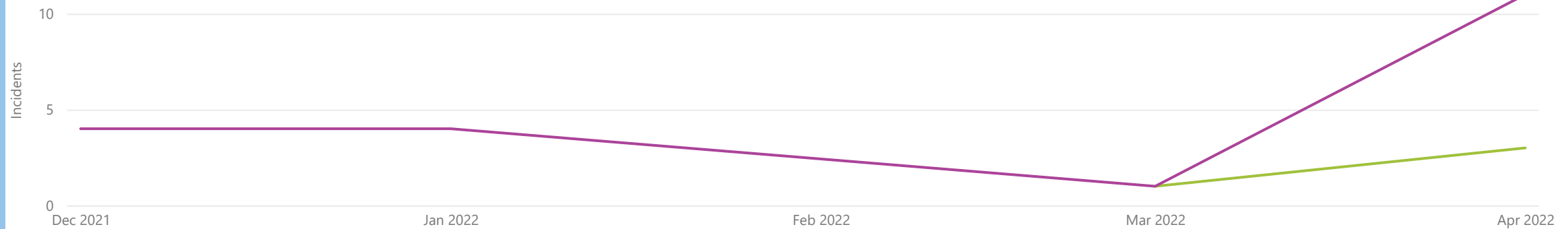
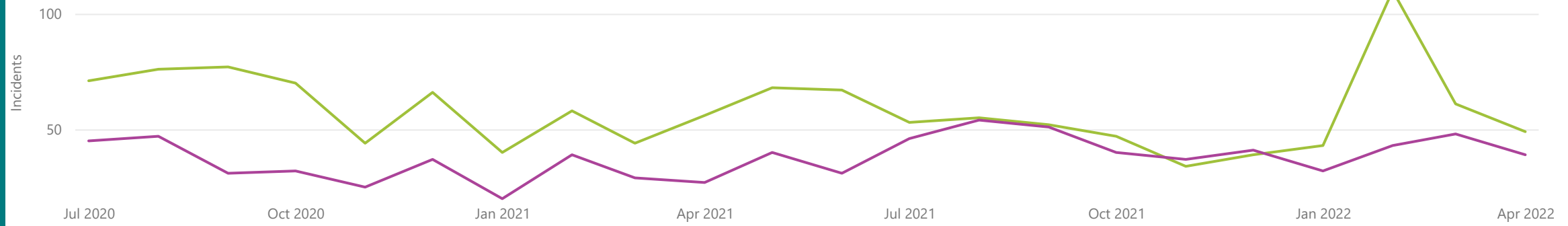
Health Directorate



# Occupational Violence

## Number of Incidents by Month

● Physical ● Verbal





# Culture Review Implementation

our journey of positive change



## Workforce Report Analysis- June

### Headcount

The ACT Health Directorate (ACTHD) headcount shows a slight decline over the December 2021 to June 2022 period, this decline is consistent with previous observations of short-term temporary and casual contracts ceasing after external staff were brought on temporarily to support the Directorates' response to COVID-19. ACTHD headcount as of 11 May 2022 is 1058, with an FTE of 985.96. Growth in headcount and FTE for Canberra Health Services (CHS) was seen in line with bulk recruitment to support the COVID-19 2021 response in late 2021. There was also a spike in 2022 in line with increased hospital activity, particularly within the emergency department and expansion of the ICU. There have been no significant changes in employment category, employment status or gender percentages over the last 12 months. For Calvary Public Hospital Bruce (CPHB) there has been a slight increase in overall employee numbers over the past year. Casual employees continue to be the highest growth category due to an increased focus on casual pool maintenance to support service operation during COVID-19.

### Diversity

Diversity and inclusion remain a focus for CHS and over the last year there has been gradual growth in the Aboriginal and Torres Strait Islander workforce and culturally and linguistically diverse workforce. The number of staff who identify as having a disability has remained stable. Diversity numbers for ACTHD and CPHB have remained steady and show no significant changes. Regarding CPHB diversity statistics provided on women there seem to be significant fluctuations over the last year. It was confirmed that on a couple of occasions, the overall data accidentally included the whole Calvary instead of just Calvary Bruce. This inflated the female staff count significantly at those instances, which can be seen in the graph. The value for women has remained around 74.6% consistently. In the next dashboard those percentages will be updated.

### Staffing profile

The average age of ACTHD staff is 41.07 years and average length of service of is 6.92 years which has decreased by 0.40 years since the same period 12 months ago. This decrease correlates to the increase in short term temporary and casual contracts within the COVID-19 Response team throughout 2021. The average age of staff at CHS is 40.02 years which has decreased over the last 12 months by 0.67 years, this may be due to the increase in more junior staff to administer covid testing and vaccination, including student nurses and entry point staff. The average length of Service for CHS staff has decreased slightly over the last 12 months by 0.34 years and may be due to many experienced staff holding off retirements due to the pandemic over the last two years, with their separations now occurring. Overall, the average age for all CPHB staff in the last year has remained at 39.6 years and average length of service for most permanent employees is 10-15 years and for temporary staff, under 12 months, with the overall average length of service being 6 years.

### Overtime

Overtime rates for ACTHD peaked in September - October 2021 and have been declining steadily since December 2021. This decline in overtime was expected as the directorate has transitioned to a business-as-usual model following the ACT Lockdown and surge period from August 2021 through to February 2022. Average overtime hours for CHS per person increased and decreased during 2021 and 2022 in line with CHS response to meet ACT Territory wide COVID Vaccination and testing needs.

## **Separations**

Since January 2022, there has been a total of 283 separations within CHS from permanent staff, 25 separations within ACTHD from permanent staff and 48 separations within CPHB from permanent staff. The highest number of permanent separations is seen from staff who had a length of service between 5-9 years. As CPHB moves toward normalising operations to account for COVID-19, a slight decrease has been seen in casual and temporary employees. CPHB is currently undergoing an Executive restructure over the next few months which will potentially (and temporarily) inflate separations and commencements as those positions are recruited to.

## **Preliminary Assessments and Occupational Violence**

Preliminary Assessments within ACTHD has steadily increased since October 2021 in response to increased engagement and partnering with business areas by People Strategy and Culture and suggests an increase in reporting as a result of increased trust within the organisation. While in CHS there continues to be PA's undertaken throughout the year with a slight peak mid-2021 due to a clustered issue requiring multiple preliminary assessments, this has since been resolved. Occupational violence incidents for CPHB have decreased consistently over the past 12 months. However, there has been an increase in the reported incidents in April. This is attributed to a drive to raise awareness amongst CPHB employees about the importance of incident reporting, however trends and incidents will be closely monitored.

## **Summary**

In reviewing the data there is evidence of the ongoing impact on the workforce with regards to how the ACT public health system is supporting the community through considering how our workforce is being used in agile ways such as recruiting younger staff such as nursing, allied health, and medical students, in addition to students of broader non-health disciplines. The data also demonstrates that the health system continues to transition from the surge period of August 2021 through February 2022, with headcount fluctuating and leave being taken increasing to respond to the impact of our workforce and broader community experiencing COVID-19 and influenza. It is anticipated that there will be continued elevations in staff across the ACT public health system in the immediate future.





## Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

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**Agenda Item:** 4.4

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**Topic:** Implementation of Recommendations

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**Meeting Date:** 27 April 2022

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**Action Required:** For Noting and Discussion

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**Cleared by:** Director-General, ACT Health Directorate (ACTHD)

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**Presenter:** Executive Branch Manager, People Strategy and Culture Branch, ACTHD

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### Purpose

1. To provide the Culture Reform Oversight Group with an update on the progress made in implementing the recommendations of the *Final Report: Independent Review into the Workplace Culture within ACT Public Health Services* (the Culture Review).

### Issues

2. The Final Report identified 92 actions required across the ACT public health system to implement the 20 Recommendations of the Culture Review.
3. As of July 2022, the Culture Review Implementation Steering Group has endorsed the completion of all 92 actions, and subsequently, the closure of the 20 recommendations of the Culture Review.
4. The Steering Group has assessed all recommendations as having been implemented, or sufficiently embedded into core business within each of the relevant organisations.
5. The Culture Review Implementation Steering Group endorsed the following actions as completed, during June and July 2022:

<b>Recommendation 3</b> Addressing bullying and harassment/inappropriate behaviours	<b>Action 3.3</b> Program delivery	ACTHD
<b>Recommendation 3</b> Addressing bullying and harassment/inappropriate behaviours	<b>Action 3.3</b> Program delivery	CHS

<b>Recommendation 4</b> Plan of improved clinical services coordination and collaboration	<b>Action 4.1</b> Plan and conduct first summit	ACTHD
<b>Recommendation 6</b> Re-establish open lines of communication with the NGO sector and other external stakeholders	<b>Action 6.3</b> Evaluate	ACTHD
<b>Recommendation 7</b> Develop coordinated research strategy	<b>Action 7.3</b> Implement academic partnership and training strategy	ACTHD
<b>Recommendation 9</b> Clinical engagement and agreed measures of monitoring	<b>Action 9.2</b> Ongoing monitoring and reporting	CPHB
<b>Recommendation 14</b> Review HR staffing and functions	<b>Action 14.2</b> Implement changes	CHS
<b>Recommendation 14</b> Review HR staffing and functions	<b>Action 14.2</b> HR Functions Review - Implement changes	CPHB
<b>Recommendation 14</b> Review HR staffing and functions	<b>Action 14.3</b> Evaluate (implementation of recommendations of HR Functions Review)	ACTHD
<b>Recommendation 14</b> Review HR staffing and functions	<b>Action 14.3</b> Evaluate (implementation of recommendations of HR Functions Review)	CPHB
<b>Recommendation 14</b> Review HR staffing and functions	<b>Action 14.3</b> Evaluate (implementation of recommendations of HR Functions Review)	CHS
<b>Recommendation 15</b> Review recruitment processes	<b>Action 15.2</b> Continually monitor/evaluate recruitment activity	CPHB
<b>Recommendation 16</b> Review training programs	<b>Action 16.2</b> Implement changes	CHS



<b>Recommendation 16</b> Review training programs	<b>Action 16.2</b> Implement changes	CPHB
<b>Recommendation 19</b> Independent and external annual reviews	<b>Action 19.3</b> Third annual review	ACTHD

6. Final status of the implementation of the recommendations across the Health System is as follows:

System-wide (Led by Culture Review Implementation Program Team)	<b>9 of 9</b> Recommendations completed
ACT Health Directorate	<b>11 of 11</b> Recommendations completed
Canberra Health Services	<b>12 of 12</b> Recommendations are completed.
Calvary Public Hospital	<b>10 of 10</b> Recommendations are completed

7. An update on actions that were taken to implement the Culture Review recommendations will be presented to the Oversight Group at Agenda Item 2.3.

## Recommendation

That the Oversight Group:

- *Note the implementation status of the recommendations of the Culture Review.*



# Culture Reform Oversight Group Meeting Paper

**OFFICIAL**

Agenda Item: 4.5

Topic: Culture Review Implementation Program Risk

Meeting Date: 18 July 2022

Action Required: Noting and feedback

Cleared by: Director-General, ACT Health Directorate (ACTHD)

Presenter: Executive Branch Manager, People strategy and Culture, ACTHD

## Purpose

1. To provide the Culture Reform Oversight Group (Oversight Group) with an update of key program risks identified for the Culture Review Implementation Program.

## Background

2. Project risk and issues management has been proactively managed throughout the life of the program.
3. The Culture Review Implementation Program of work officially comes to an end on 30 June 2022.

## Issues

4. There are **46 active** risks identified in the Program Risk Register.
5. The overall risk profile for the program is as follows:

Risk Category	Low	Medium	High	Extreme
Commercial	1	0	0	0
Financial	1	2	0	0
Governance	5	3	0	0
People	2	3	0	0
Project	1	4	0	0

Reputation and Image	1	1	0	0
Stakeholder Management	1	6	0	0
Strategic	0	15	0	0
<b>TOTAL</b>	<b>12</b>	<b>34</b>	<b>0</b>	<b>0</b>

6. No new risks or issues have been identified during this reporting period.
7. Mitigation controls have been put in place for all risks recorded on the Program Risk Register and active management of risks is occurring. There are currently no risks with a risk rating of **High** or **Extreme**.
8. The Program Risk Register is reviewed monthly to assess the effectiveness of existing controls and to identify and execute additional treatments.
9. On closure of the Culture Review Implementation Program, open risks relating to culture reform and people and workforce matters will be recorded on appropriate organisation risk registers for the purpose of ongoing monitoring and management.
10. It is proposed that system-wide risks which relate to culture reform and have a rating of high or extreme continue to be presented by each organisation to the Oversight Group, for discussion.

## Recommendation

That the Oversight Group:

- *Note the risk profile for the Culture Review Implementation Program.*
- *Note that at on conclusion of the formal program of work, open risks relating to culture reform and people and workforce matters will be recorded on the appropriate organisation risk registers and monitored and managed internally.*



**OFFICIAL**

# Culture Reform Oversight Group (CROG) Minutes

**27 April 2022**

**2:00pm to 5:00pm**

**Boardroom, ACT Health Directorate and via Webex**

## **Members:**

- Ms Rachel Stephen-Smith MLA, Minister for Health (Chair)
- Ms Emma Davidson MLA, Minister for Mental Health (Deputy Chair)
- Ms Rebecca Cross, Director-General, ACT Health Directorate (ACTHD)
- Mr Dave Pepper, Chief Executive Officer, Canberra Health Services (CHS)
- Mr Ross Hawkins, Regional Chief Executive Officer, Calvary, ACT (Calvary)
- Ms Madeline Northam, Regional Secretary, Community and Public Sector Union (CPSU)
- Dr Peter Hughes AOM, President, Visiting Medical Officers Association ACT (VMOA)
- Professor Russell Gruen, Dean, College of Health and Medicine, Australian National University (ANU)
- Dr Jeffrey Looi, Australian Salaried Medical Officers' Federation (ASMOF)
- Professor Michelle Lincoln, Executive Dean, Faculty of Health, University of Canberra (UC).
- Darlene Cox, Executive Director, Health Care Consumers Association ACT (HCCA)
- Mr Peter Somerville, proxy for Professor Walter Abhayaratna, President, Australian Medical Association ACT Limited (AMA)

## **Apologies:**

- Professor Walter Abhayaratna, President, Australian Medical Association ACT Limited (AMA)

## **Also present:**

- Dr Dinesh Arya, Chief Medical Officer, ACTHD
- Professor Christine Phillips, Social Foundations of Medicine, ANU Medical School
- Professor Nick Brown, Allied Health Research, Faculty of Allied Health
- Ms Meg Bransgrove, Adviser to Minister Stephen-Smith MLA
- Ms Jodie Junk-Gibson, Executive Branch Manager, People Strategy and Culture, Corporate and Governance Division, ACTHD (Adviser)
- Ms Belinda Harris Senior Program Manager, Culture Review Implementation, ACTHD
- Ms Jenna McVeigh, Culture Review Implementation, ACTHD (Secretariat).

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**Item 1 Welcome**

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

Apologies were noted.

The Chair welcomed Mr Ross Hawkins, the new Regional Chief Executive Officer, Calvary, ACT.

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**Item 2 Decision and Discussion Items**

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**2.1 Learning Health System**

Professor Christine Phillips provided a presentation to members on behalf of Translational Research Partnership. The presentation reflected on work that has been achieved as a community in the ACT public health system around advancing Learning Health Systems and the challenges that exist.

**2.2 Clinical System Governance**

Dr Arya presented on the work he is currently undertaking to strengthen clinical governance across the ACT public health system. Dr Arya discussed with the members that both CHS and CPHB have their own governance arrangements for quality improvement and patient safety within their own organisation. However, the systems and processes to ensure ACT-wide clinical system governance have not evolved, which is required from a quality and safety perspective. Dr Arya proposed the establishment of a system-wide clinical system governance arrangement and structure along with an opportunity to consult with clinicians around clinical leadership, innovation, and improvement across the ACT health system.

**2.3 Terms of Reference (TOR) for the Transition of the Oversight**

The Chair led this discussion, noting that the TOR had been updated and redrafted to focus on the 20 recommendations, most of which are complete, being embedded into a Business-As-Usual (BAU) stream of activities, and to reflect the proposed revised functions of the Oversight Group now until the completion of the 3<sup>rd</sup> Annual Review of the Culture Review Implementation. The intent of the TOR is to oversee the end of this group and transition into a different way of working, through embedding system-wide and organisational culture reform into normal business and governance arrangements.

It was agreed that the draft TOR would be amended to include the following changes:

- Under Membership: updating from Minister for Health and Wellbeing to Minister for Health; and
- Adding an end date of March 2023 for this committee.

**ACTION:** Ms Junk-Gibson to update agreed amendments for tabling at next meeting for endorsement.

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## 2.4 Working Group Progress

### System-wide Human Resources Matters Working Group (WG)

Ms Cross spoke to this item as Chair of the WG. The WG was developed to discuss a range of system-wide matters. The WG thus far has had six successful meetings and several workshops. Ms Cross highlighted a couple of key pieces that were being progressed by the WG:

- Union Encouragement Policy and how this is being implemented across different organisations; and
- Establishment of a WHS Community of Practice.

### Professional Transition to Work Working Group (WG)

Professor Brown spoke to this item as Chair of the WG. The WG was developed to ascertain the best way to support staff transitioning from their educational pre-work environment into the workforce. Professor Brown gave an overview of the two research projects the WG are currently working on:

- Project 1 is focussing on the transition from being a student to becoming a health professional; and
- Project 2 is focussing on the first two years as a professional within the health system.

### Early Intervention Working Group (WG)

Ms Junk-Gibson spoke to this item. The WG was developed to identify matters across the system by engaging early. The focus to date has been a number of presentations to enable discussions and updates around such projects as:

- Digital Health Record; and
- HRIMS updates.

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## Item 3 Member Updates

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### CPSU

Ms Northam advised that CPSU has started the process of bargaining for the next Enterprise Agreement.

A member of CPSU in ACT Government identified that sexual assault in the workplace is not a notifiable incident. The member has been advocating on this issue and has been advised by the Minister for Industrial Relations that the ACT Government is committed to legislating the amendment by the end of the year. Ms Northam noted it was excellent to see ACT Government leading the way on this.

Ms Northam raised the issue that eleven and a half month and eleven- and nine-month contracts are still occurring for temporary contracts.

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#### CPHB

Mr Hawkins advised the group he is only six weeks into the new role. There is a lot of work that is taking place and Calvary are still implementing the Great Workplaces Program to ensure recommendations are implemented by 30 June 2022.

#### AMA

Mr Sommerville updated members on the commencement of the Doctors Health Advisory Service in the ACT which commenced 6 weeks ago. He advised that AMA had received some funding to look at one of the main components that surround the triage, advice and referral service, that is education for medical registrars and medical students in the ACT.

#### CHS

Mr Pfeffer advised that the culture survey results have been rolled out which saw some great improvement in the vast majority of the teams.

Revised performance planning process has moved from a form that was approximately 4 pages long, which is now a very simple template which focuses on strengths, engagement, and a development plan to further employee's skill base and future career.

Mr Pfeffer advised that under the Speaking Up For Safety training, 6,000 staff members have now attended training with the goal to achieve 100 percent by 30 June 2022. The organisation is now implementing the second module of the Speaking up for Safety program which is Promoting Professional Accountability (PPA). PPA workshops are planned for May and June 2022 and will be attended by leaders and managers within the organisation.

#### University of Canberra (UC)

Professor Lincoln shared with members the new UC values that will be demonstrated by UC staff and students.

UC is developing a new strategic, ten-year plan which will be launched at the end of May 2022. To date there have been a number of engagement sessions with stakeholders and partners across the region. The implementation of the new strategic plan will be driven by the new values.

The Interprofessional Health Team Challenge is currently running, which has 50 students from ANU and UC working in teams to solve how they will manage a clinical case together.

#### ANU

Professor Gruen also advised members of the Interprofessional Health Team Challenge and commended the way UC and ANU are working successfully on the challenge together. He paid tribute to Professor Lincoln and Ms Kecskes and others who have helped lead this process.

ANU is still going through a significant change process and coming out with another innovation which is the formation of the school of Medicine and Psychology. A new Director has been appointed, Professor Paul Fitzgerald, who commences on 2 May 2022.



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### HCCA

Ms Cox wanted to thank the CHS Leadership Team for taking action pertaining to bullying, and harassment and poor behaviour. Ms Cox noted that bad culture is bad for patient safety and has a negative impact.

In terms of integrated care, HCCA is doing some work with health care consumers with CHS around co designing a paediatric navigation and liaison service.

HCCA has been working with the universities (UC & ANU) on enriching consumer participation research and teaching.

The community is very interested in the Digital Health Record (DHR) and there is a need to start ramping up some of the messages for the community around the value of DHR. DHR is going to significantly increase patient safety, improve the flow of care and improve the information to which people have access to.

### Minister for Mental Health

Minister Davidson advised that she has been seeing and hearing a lot of feedback from people who are working in the healthcare sector regarding how exhausted they have been. This is both clinical and administrative staff. Ms Davidson recognised that everyone has been working at a very high tempo for a very long time.

### ACTHD

Ms Cross advised staff members from ACTHD had been continuing to participate in the system-wide Leadership Development Training Program, which has had over 60 staff from the directorate participate to date. She noted that participant feedback has been largely positive, and that it has been a good forum for staff to meet and network with people from other organisations.

The leadership team within the directorate recently undertook the HBDI assessment to identify preferences of how staff work as a team and SES leadership workshop, which was followed up by a cross-organisational breakfast which helps fosters to keep networks strong.

The staff survey was undertaken in August last year, with results received late last year. It has taken some time to work through the results. Divisions are now focusing on developing action plans to address two key findings. One area where the division has done well and another area where division could improve. Actions will be built into the business plans.

### VMOA

Dr Hughes referred members to the article directly relating to bullying published in the Canberra Times 2 April 2022 by Dave Fenner and Jacki Carr.

### ASMOF

Dr Looi raised concerns regarding the application of procedural fairness approach applied by CHS. ASMOF reported to have made an application to Fair Work regarding a breach of the enterprise agreement relating to clinical governance aspects and patient care.

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**Item 4 Noting Items**

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**4.1 System wide dashboard and analysis**

Ms Junk-Gibson provided members with an update on the bi-monthly System-wide Workforce Effectiveness Dashboard and analysis of data trends. Ms Junk-Gibson reported that the workforce effectiveness model, data indicators and performance measures are being developed further.

**4.2 Implementation of Recommendations and Project Plan**

A summary was provided on the implementation of recommendations and current delays. It was noted that 75 out of the 92 actions from the 20 recommendations are completed and this was 82% of all actions.

Ms Junk-Gibson advised that there are a number of recommendations that have been put forward to the Culture Reform Implementation Steering Group which are being reviewed for closure. The actions that were delayed by more than 12 weeks were discussed.

**4.3 Culture Review Implementation Program Risk**

Members noted the paper.

**4.3 Minutes and actions arising from previous meetings**

Amendments made under section 2.1 to meeting minutes 9 August 2021 were accepted and approved.

Minutes of the 14 February 2022 meeting were accepted.

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**Item 7 Other Business**

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No other business

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**Next Meeting: 18 June 2022**



## Culture Reform Oversight Group Action Items Register- 27 April 2022

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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
7/5/2021	3.5	<b>Culture Connect Newsletter</b> Members to advise Ms Junk-Gibson of ideas for articles in the newsletter, including case studies on high performing teams/examples of great workplace culture.	All	29 June 2021	Ongoing
29/6/2021	4.1	<b>Workforce Dashboards – Measures of Success</b> Ms Reid to provide information to members on the timeframes for IT system changes at Calvary that would enable data analysis. <a href="#">There has been engagement with CPHB about gaining information required to incorporate into the Workforce Effectiveness dashboard.</a>	Ms Reid	9 August 2021	Completed
29/6/2021	6.5	<b>Choosing Wisely Program Update</b> Ms Reid to provide an update on the implementation of Choosing Wisely at the December Oversight Group meeting. <a href="#">This will be provided to the February 2022 meeting. Completed, follow-up on evaluation of program for July meeting.</a> <a href="#">This will be updated at July meeting.</a>	Ms Reid	December 2021	

Meeting Date	Agenda Item	Action Required	Officer Resp	Due Date	Status
27/04/2022	2.3	<b>Terms of Reference (TOR) for the Transition of the Oversight</b> Ms Junk-Gibson to update agreed amendments for tabling at next meeting for endorsement.	Secretariat	18 July 2022	

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# Culture Review Implementation

our journey of positive change



## Culture Reform Oversight Group

### Communique of meeting on 18 July 2022

The sixteenth meeting of the Culture Reform Oversight Group (Oversight Group) was held on Monday 18 July 2022.

Significant items discussed by the Oversight Group included:

#### Third Independent Annual Review

An update was provided to the group on progress in engaging with a reviewer to undertake the third and final independent annual review for the Culture Review Implementation Program. The 2022 review is scheduled to commence in August and will conclude November 2022.

#### Workforce and the ACT public health system

The Oversight Group discussed initiatives underway to support the wellbeing of the workforce, and further opportunities to invest in the workforce of the ACT public health system.

#### Culture Review Implementation - Program Closure

With the formal Culture Review Implementation Program ending in June 2022, a presentation was made by ACT Health Directorate, Canberra Health Services and Calvary Public Hospital Bruce on the status of the 20 recommendations of the Culture Review, including key achievements and outcomes.

#### Leadership Development - Pilot Program Evaluation

The Culture Review recognised the need for appropriate training in leadership and management skills for staff taking up leadership roles across the health system. A Leadership Development Program was launched as a pilot in December 2021, with around 250 staff attending the training during the 6-month pilot. The results of the evaluation of this pilot program were presented to the group.

#### NGO Leadership Group – Evaluation

The Culture Review identified the need for better relationships and improved collaboration with health sector non-government organisations (NGOs) and peak bodies. The NGO Leadership Group was established in 2019 in response to recommendation six of the Culture Review. An evaluation of the NGO Leadership Group has been undertaken and results presented to the group at this meeting.

#### Meeting schedule

The Oversight Group meets bi-monthly and its next meeting is scheduled for September 2022.



# Culture Review **Implementation**

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