
2 Our people

Sunshine Coast University Hospital, a drawcard for specialist talent

The quality and profile of the new Sunshine Coast University Hospital is attracting specialists from far and wide, further strengthening our patient services.

One of those specialists is Professor James O'Beirne.

Prof O'Beirne is a hepatologist, a specialist in liver medicine, caring for patients with conditions such as viral infections of the liver, liver cancer and cirrhosis. He joined the health service from the Royal Free Hospital in London, one of the six liver transplant centres in England. Prof O'Beirne developed the UK's first multidisciplinary liver cancer clinic and has conducted clinical research with colleagues leading to the publication of over 60 articles. He brings a wealth of tertiary experience to the Sunshine Coast Hospital and Health Service.

"The appointment of additional specialists extends the existing strengths of the Hepatology Department. It means we are now able to treat patients with serious or complex liver disease right here on the coast, which is a huge benefit to our patients and their carers. I am also developing a clinical research portfolio, which I hope will bring additional cutting edge treatments to the population of the coast." Prof O'Beirne said.

"There was an attraction in building something world class from the ground up, like we are doing at Sunshine Coast University Hospital. The environment and facilities

at Sunshine Coast University Hospital are superb and bang up to date. This must contribute to the feeling of optimism all the staff seem to have. People seem genuinely happy to be at work and this makes it a wonderful environment."

"It was quite a gamble to relocate a family with two teenagers to the other side of the world. But I am delighted to say we are all very happy with the change, and my sons are thriving at their new school. The Sunshine Coast is a wonderful place to live. It is a stimulating environment and the lifestyle is incredible."



Hepatologist, Prof James O'Beirne

Clinician involvement in the development of Sunshine Coast University Hospital

High quality and safe patient care is always the first priority of our health service. This was the focus of every aspect of the planning, design and commissioning of Sunshine Coast University Hospital. To ensure we deliver safe services, staff engagement is essential and our absolute commitment to consulting with staff is key to our success. This is why the health service involved senior clinicians from initial scoping right up to the decision of when to open.

Dr Ratna Aseervatham, Director of Surgical Services, provided essential clinical input throughout Sunshine Coast University Hospital's planning and development process.

“Our Chief Executive approached me and other senior clinical colleagues when the funding commitment for Sunshine Coast University Hospital was first announced. Clinical input went right back to selecting the parcel of land on which we would build,” he said.

This group of clinicians, known as the G8, provided early input into the design of the new hospital.

The G8 considered multiple real-life scenarios to ensure the design would make the delivery of care as safe, efficient and comfortable as possible. As well as general input, the clinicians also had specific input into their areas of expertise. For example the respiratory ward was designed by respiratory specialists.

Senior clinicians continued to play a key role in the later stages of Sunshine Coast University Hospital's development. A Clinical Readiness Advisory Group was established to provide a direct clinical voice during the Hospital Operational Commissioning period. Chaired by Dr Aseervatham, this committee ensured a rigorous patient safety approach and provided a formal expert

clinician sign-off on the health service's readiness to move into the new hospital and also reconfigure services at Nambour and Caloundra hospitals. The group also assessed the preparation of Maleny and Gympie hospitals and community health services for the significant changes to services across the whole region. The Clinical Readiness Advisory Group's advice was taken unedited to the Sunshine Coast Hospital and Health Board. This level of clinician involvement has set a new benchmark for major hospital commissioning.

“The high level of clinical involvement in the development of Sunshine Coast University Hospital reflected learnings and recommendations from previous hospital openings. It also reflects the general culture of the health service: committed to patient safety, rigorous in our planning and engaged with clinical staff,” he said.



Dr Ratna Aseervatham,
Director of Surgical Services,

“ I have loved every minute of my time as a nurse. I always loved the clinical aspect and the patient contact. ”

Jean Haimes

When Jean Haimes first joined Nambour General Hospital, she was just 17 years of age.

In 1976, Jean became a nurse in the 40-bed medical ward (2A) in Block 1 at Nambour General Hospital. Today, Jean is a nurse manager at Nambour and is located in the very room she attended her job interview in 1976—the ‘Matron’s Office’.

I worked as a registered nurse in the medical ward for 12 months then moved to the surgical ward (where the Surgical Care Unit is now situated). This ward consisted of 30 surgical beds and 10 paediatric beds. In those days there were no staff in the Emergency Department and the registered nurse in the surgical ward had to answer the Emergency Department buzzer, leave the ward and process the patient or patients in the Emergency Department.

In the 1970s, patients had a much longer stay in hospital compared to now. Of course the techniques and equipment used in procedures are now much more sophisticated, providing a much faster recovery time for patients.

Over the years I’ve seen many changes in nursing. The training of registered nurses has changed from being hospital-based to university-based and when I first began my career, nurses used to stay in the Nurse’s Quarters, although this was gradually phased out.

The nurses at Nambour General Hospital have always been excellent and very patient-focused. The rapid growth of the Sunshine Coast region has meant we have had to grow to keep up with this demand. Medical science has also gone ahead in leaps and bounds. We now have greater ability

to prolong the life of our patients, but this is also bringing the challenge of caring for an ageing population.

I have loved every minute of my time as a nurse. I always loved the clinical aspect and the patient contact and now in my present role, I feel I am looking after the nurses who are looking after the patients and helping to provide the skill mix and nursing ratios needed to achieve the best outcomes.

The transition to Sunshine Coast University Hospital has been amazing for our health service. I have remained at Nambour General Hospital but see Sunshine Coast University Hospital as a great move for the future of healthcare on the Sunshine Coast.



Registered Nurse, Jean Haimes

Leadership development

The 2016-2017 financial year saw the continued delivery of a number of leadership development programs. These were designed to empower and enable a strong and positive leadership culture for the health service. The two priority programs were the Step Up Leadership Program and the Process Communication Model® (PCM).

- Step Up Leadership Program is a two-month program designed to meet the complex leadership needs of the health service. The program focuses on developing and strengthening the skills staff need to supervise, motivate and provide effective leadership within a healthcare team. Normally offered as a state-wide, Queensland Health program to clinical staff only, Sunshine Coast Hospital and Health Service has adopted it and delivered this program in-house. There have been four programs with a total 87 attendees in 2016-2017.

- Process Communication Model® (PCM) is a course that has had international success and is supported by the Royal Australasian College of Surgeons for advanced training positions. It aims to teach participants how to observe and analyse verbal and non-verbal behaviours to ensure they communicate effectively, specifically in high pressured situations. There have been four programs with a total of 46 attendees in 2016-2017.

A number of health service staff also accessed leadership development workshops and initiatives offered by Human Resources, Corporate Services Division, Department of Health. In addition a range of other courses are provided to staff as summarised in Table 5 below.

Table 3: Other significant development and awareness training delivered by the health service includes:

LEADS Management Capability Program (MCP) – Line Manager Essentials

MCP Attendance 2016-2017	No. of sessions	No. of staff attendance
MCP1(A) - Recruiting for Success: Selecting the right candidate	45	313
MCP1(B) - Recruiting for Success: Policy and obligations	37	112
MCP2 - Effective performance discussions	11	24
MCP3 - Work health and safety for managers and supervisors	3	40
MCP4 - Working together: supporting ill or injured employees	10	31
MCP5(A) - Payroll Management Foundations: Payroll Assurance	48	212
MCP5(B) - Payroll Management Foundations: Workbrain Assurance	49	205
MCP6 - Team Socialisation	18	18*

*Note: For MCP6 Team Socialisation the number of staff attending is the number of teams

Workforce profile

Sunshine Coast Hospital and Health Service is working to ensure we have a sustainable and highly-qualified workforce to meet our future needs. There are a number of challenges facing the future growth of our organisation, including:

- further commissioning of new services and growth in demand
- an ageing workforce
- significant population growth on the Sunshine Coast
- a multi-generational workforce.

In order to meet these challenges and other emerging needs of the health service environment, it is critical we continue to invest in our people.

The opening of Sunshine Coast University Hospital was supported by a dedicated human resource function, which supported the health service's readiness for the expansion of services through initiatives including comprehensive workforce planning, transition, establishment, recruitment, onboarding and change management activities.

As at 30 June 2017, we employed 5378 Full Time Equivalent (FTE) people, representing a Minimum Obligatory Human Resource Information (MOHRI) Headcount of 6613 employees.

Table 4: Our workforce profile - Minimum Obligatory Human Resource Information (MOHRI) Occupied FTE (full time equivalent)

Employment category	FY2016 (note 1)	FY2017 (note 2)
Health practitioners	502.16	655.15
Managerial and clerical	906.24	1097.74
Medical including Visiting Medical Officers (VMOs)	583.57	712.15
Nursing	1763.72	2082.21
Operational	499.58	778.21
Professional and technical	39.80	40.10
Trade and artisans	14.00	12.00
Total	4309.07	5377.56

Notes:

1. Includes all full time, part time and casual health service employees at the end of June 2016
2. Includes all full time, part time and casual health service employees at the end of June 2017

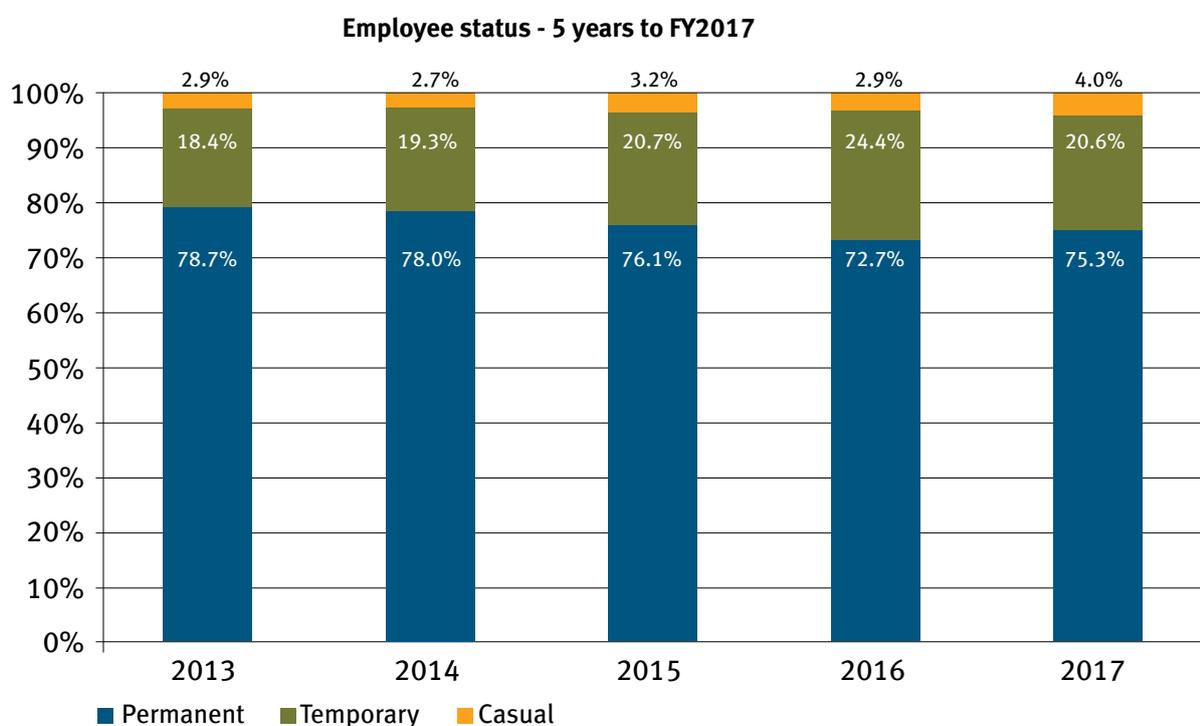
Table 5: Year-to-date MOHRI average FTE

Employment category	FY2016	FY2017
Health practitioners	488.90	554.20
Managerial and clerical	840.50	990.44
Medical including Visiting Medical Officers (VMOs)	557.04	633.99
Nursing	1689.65	1850.84
Operational	500.56	610.93
Professional and technical	37.59	41.17
Trade and artisans	12.42	12.73
All paypoints	4126.66	4694.29

Over the past financial year:

- the workforce (MOHRI Occupied FTE) increased by 1068 FTE or 24.8 per cent. Clinical streams accounted for 56.2 per cent and non-clinical for 43.8 per cent of the growth. The increase was mainly associated with the opening of Sunshine Coast University Hospital
- clinical streams make up 64.9 per cent of the workforce
- the headcount (MOHRI Occupied Headcount) increased by 1122 or 20.4 per cent
- the headcount to Occupied FTE ratio increased from 1:0.78 to 1:0.81.

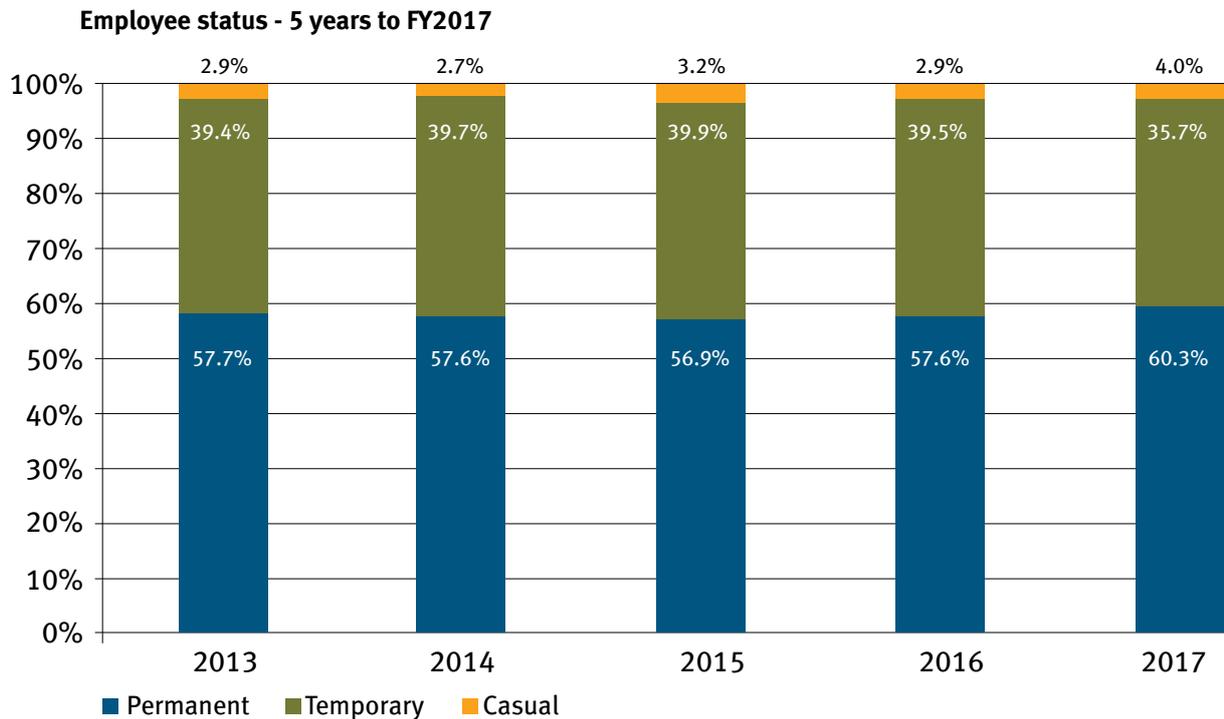
Chart 3: Five-year workforce type comparison: based on MOHRI Occupied FTE



The majority of our employees are employed permanently - reaching a peak of 78.7 per cent in the 2013 financial year. In the 2017 financial year, the proportion of permanent employees was 75.3 per cent, casual staff increased from 2.9 per cent to 4.0 per cent, and temporary

employees dropped from 24.4 per cent to 20.6 per cent. These changes were largely due to the winding up of the Sunshine Coast University Hospital project following the opening of the new hospital.

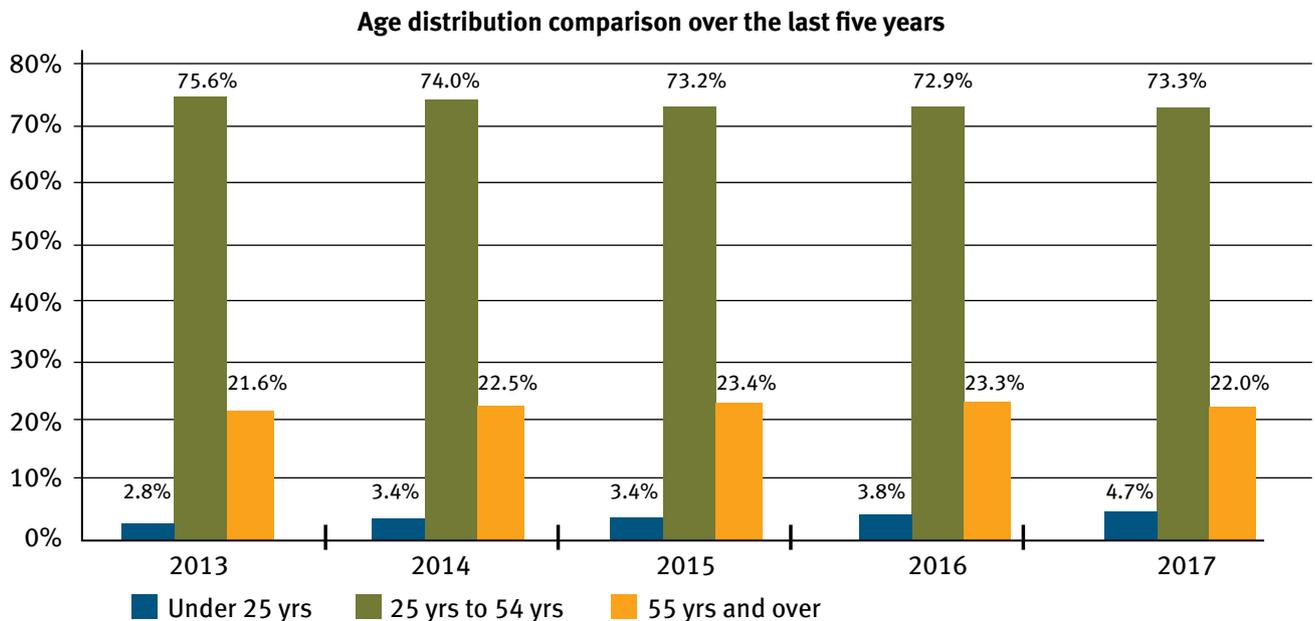
Chart 4: Five-year workforce type comparison: based on MOHRI Occupied FTE



The proportion of part time employees remained steady at nearly 40 per cent of MOHRI Occupied FTE from 2012-2013 to 2015-2016, but has dropped to 35.7 per cent in 2016-

2017. Full time employees increased from 57.6 per cent in 2015-2016 to 60.3 per cent in 2016-2017.

Chart 5: Age distribution comparison over five years (MOHRI Occupied FTE)



Over the period 2012-2013 to 2014-2015 there was a steady increase in the proportion of employees aged over 55 years, with an increase from 21.6 per cent in 2012-2013 to 23.4 per cent in 2014-2015. However, the over 55 rate dropped slightly to 23.3 per cent in 2015-2016, and has dropped to 22.0 per cent in 2016-2017. The proportion of employees aged less than 25 years has averaged 3.6 per cent over the last five years, but has

increased to 4.7 per cent in 2016-2017. Supporting our ageing workforce is a key focus in our *Strategic Workforce Plan*.

The average age of our workforce reduced from 45.36 years in 2015-2016 to 44.65 years in 2016-2017, mostly due to the influx of new staff to Sunshine Coast University Hospital.

Length of service

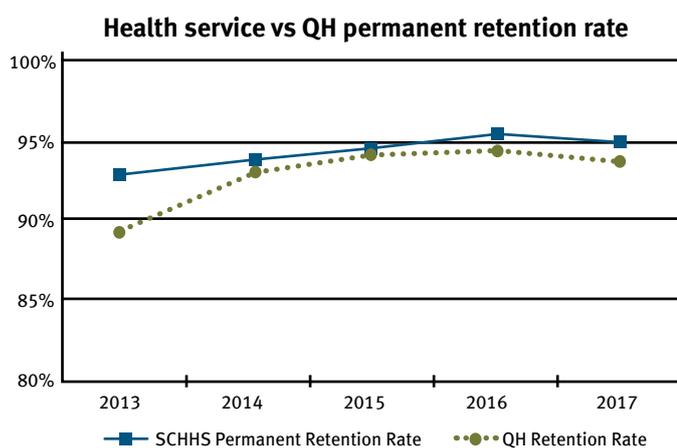
The average length of service has dropped from 9.05 years in 2015-2016 to 8.21 years in 2016-2017.

At 10.09 years, the trades and artisans stream has the longest average length of service. This is followed by nursing at 9.56, health practitioners at 8.37 and operational at 7.28 years. Medical and Visiting Medical Officers have the shortest average length of service due to the rotation of junior medical staff.

Table 6: Permanent retention rate per cent (MOHRI Occupied Headcount)

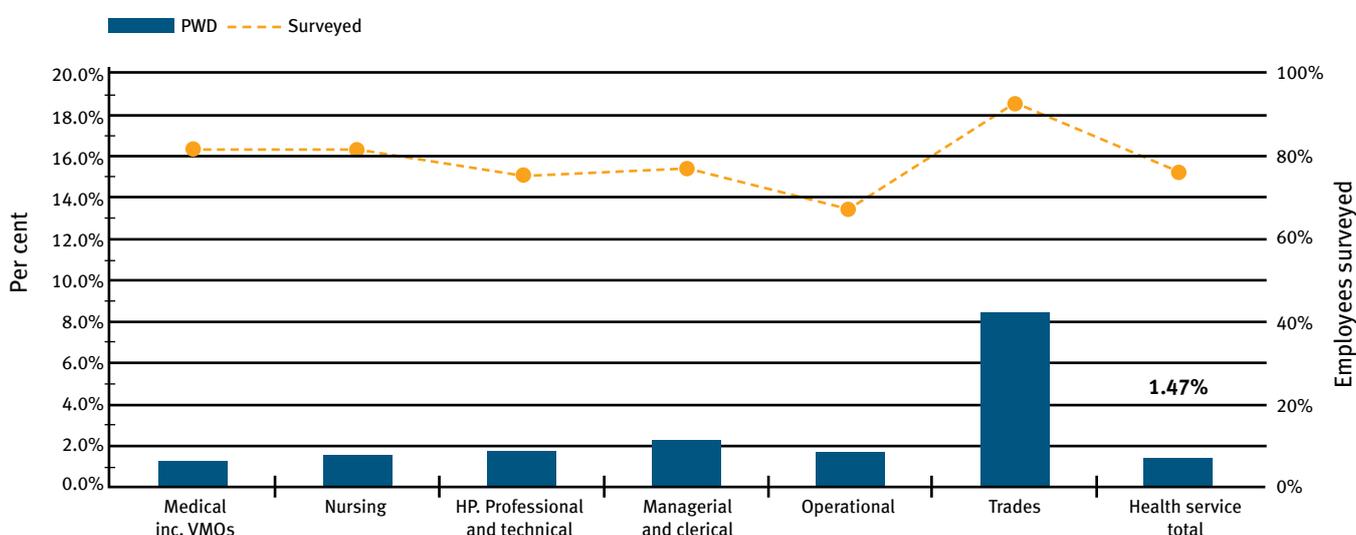
Permanent Retention Rate	2013	2014	2015	2016	2017
Sunshine Coast Hospital and Health Service permanent retention rate	92.96	93.73	94.85	95.68	95.02
Queensland Health retention rate	89.58	93.07	94.38	94.60	93.78

Chart 6: Permanent retention rate per cent (MOHRI Occupied Headcount)



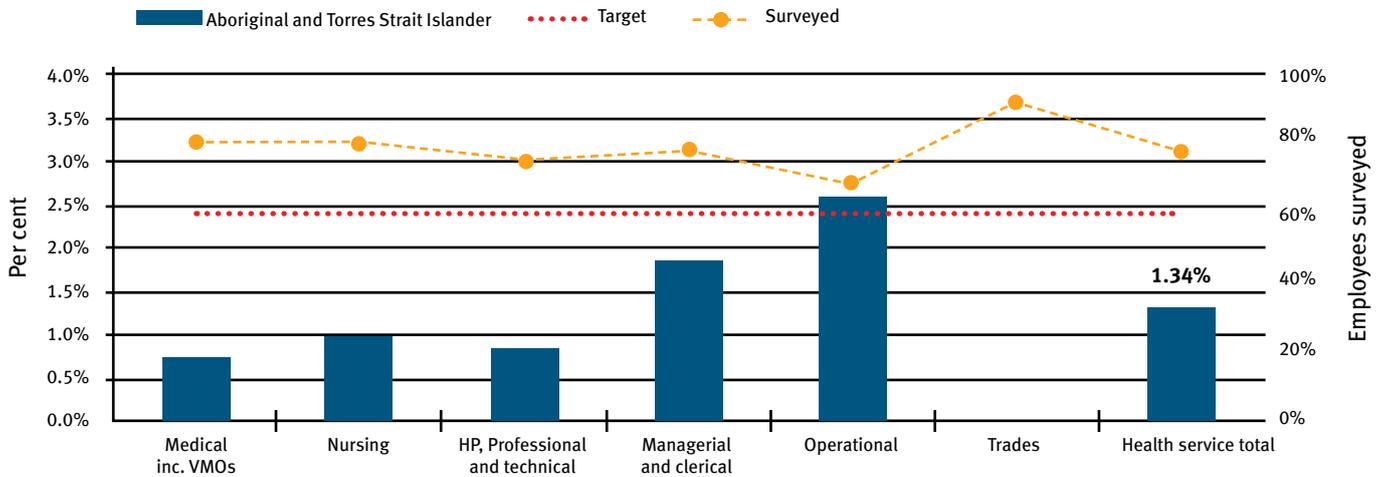
The health service has maintained a permanent employee retention rate of more than 92 per cent from 2013 to 2017. While the rate dropped slightly in 2016-2017, the overall trend has been upward and for the past two years has exceeded 95 per cent. Retaining the right people is a key element in the Sunshine Coast Hospital and Health Service Employee Retention Plan 2012-2017 as we undergo significant workforce growth.

Chart 7: Per cent of People with Disabilities (PWD) in our workforce (June 2017)



The health service supports the As One Public Service Disability Employment Strategy. As at June 2017 1.47 per cent of the workforce (97 employees) had identified as having a disability.

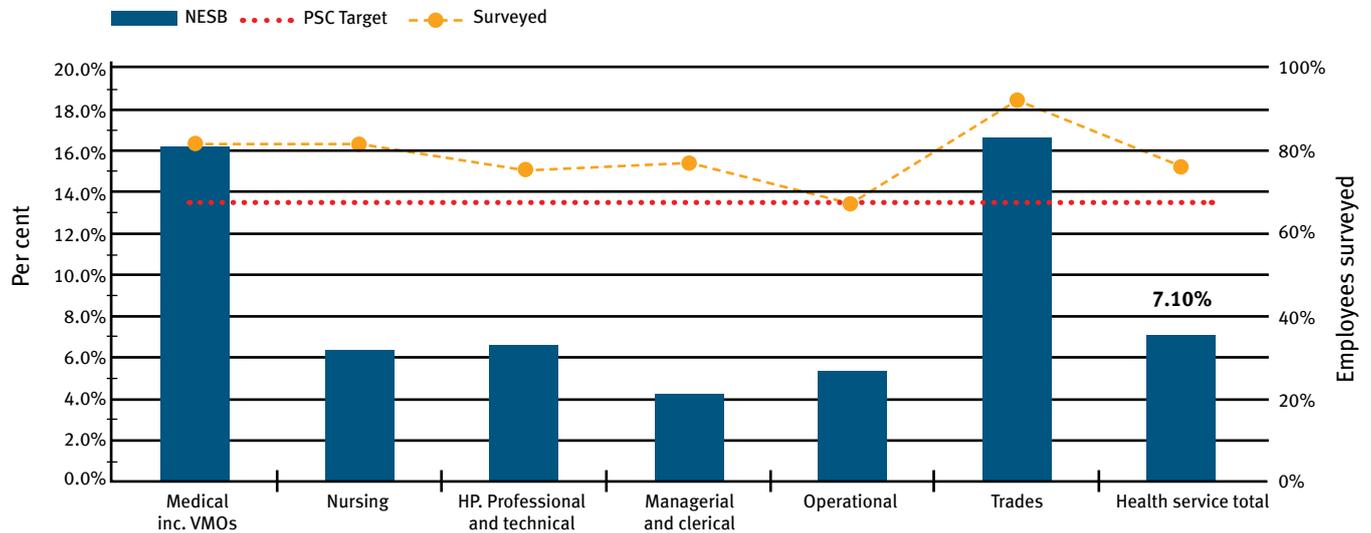
Chart 8: Diversity in the workforce (2016-2017)



Increasing Aboriginal and Torres Strait Islander representation in employment and reducing the overall level of disadvantage among Indigenous Australians, is an integral part of the health service’s commitment to closing the gap between Indigenous and non-Indigenous Australians.

The health service currently employs 89 staff who have identified as Aboriginal and Torres Strait Islander people, which represents 1.34 per cent of the workforce.

Chart 9: Per cent of Non-English Speaking Background (NESB) in our workforce (June 2016)



The health service encourages and supports linguistically diverse backgrounds across all occupational streams. As at 30 June 2017 7.1 per cent (470 employees) have identified themselves as having a non-English speaking background.

Table 7: Per cent of women in our workforce (2016-2017)

Per cent female by stream	2013	2014	2015	2016	2017
Health practitioners	77.8	76.6	76.7	76.8	76.9
Managerial and clerical	89.2	87.1	86.8	84.9	85.4
Medical incl Visiting Medical Officers (VMOs)	36.4	39.8	38.9	39.2	40.1
Nursing	86.7	86.7	86.7	86.5	86.1
Operational	58.7	59.3	58.2	58.1	52.5
Professional	64.1	62.8	62.8	68.1	72.9
Technical	100.0	-	100.0	100.0	
Trade and artisans	0.0	0.0	0.0	0.0	0.0
All paypoints	75.7	75.8	75.9	75.7	74.3

According to the Australian Government Gender Equality Agency report July 2013, the highest representation of women working in any industry was in healthcare. The health service workforce has consistently been composed of nearly 76 per cent women from FY2013 to FY2016, but has dropped to 74.3 per cent in FY2017.

In FY2017 the highest representation of women is in the Nursing stream at 86.1 per cent, with Managerial and Clerical at 85.4 per cent and Health Practitioners at 76.9 per cent. The lowest is in the Trades and Artisans stream with no women. The female representation in Medical and Visiting Medical Officers has increased from 36.4 per cent in FY2013 to 40.1 per cent in FY2017.

Employee recruitment, engagement and retention strategies

The provision of public health services in Sunshine Coast Hospital and Health Service has undergone a significant change in the past year with the transition of services from Nambour General Hospital and Caloundra Health Service, and the opening of Sunshine Coast University Hospital.

Our workforce has experienced significant change, including employees transitioning to new work locations, temporary employees securing permanent roles, and existing employees undertaking career progression.

The health service will continue to expand the services it provides to the community over the next four years. The attraction, recruitment, development and retention of the workforce is paramount.

The Sunshine Coast Hospital and Health Service Strategic Workforce Plan 2011-2021 ensures workforce planning and development is effectively addressed.

The health service continues to align with the Public Service Commission's Conduct and Performance Excellence (CaPE) framework in the management of employee conduct and performance. The focus remains on early identification of issues, implementing good practice and developing line manager capability.

Matters relating to allegations of suspected corrupt conduct are reported to the Crime and Corruption Commission. During 2016-2017, Sunshine Coast Hospital and Health Service had carriage of 123 new matters; of which 30 matters were assessed as suspected corrupt conduct and 93 relating to other ethical and employment related matters. Of the 30 new matters assessed as suspected corrupt conduct; three matters were substantiated, two matters had partial substantiation, five were not substantiated and 20 matters continue to be managed.

A Health Service Consultative Forum, along with local consultative forums representative of our workforce disciplines, continues to operate in line with the Public Service Commission Guidelines for Consultative Forums. These forums enable a strong focus and commitment to local resolution and provide a robust framework for consultation between management and unions on matters arising out of industrial instruments, workforce change or other workforce matters.

Organisational and workforce service change activities

The impacts of reforms across the health service as a result of workforce transition, service reconfiguration and the opening of the Sunshine Coast University Hospital in March 2017 resulted in the establishment of a dedicated human resource project team. This team supported the workforce service change processes required for the opening of Sunshine Coast University Hospital and the settling of services across all facilities.

These changes included realignment of clinical and corporate support services, role changes, roster changes, hours of operation and reporting line changes.

A range of human resource workforce change and roster change processes, templates and documents were piloted and modified to support ongoing human resource workforce change initiatives.

The health service also implemented roster working parties reporting to the Consultative Forum as an employee and union consultative strategy to oversee trial roster changes prior to formal agreement and implementation.

Nineteen Business Cases for Change were released during the period November 2016 to June 2017. These communication, consultation and engagement processes required for working arrangements and roster changes for employees have resulted in improvements to the efficiency and effectiveness of our staff and services and are consistent with the models of care developed over previous years.

Early retirement, retrenchment and redundancy

The health service continued to identify efficiencies through organisational change throughout 2016-2017, focussing on suitable employment placements for affected employees. Despite the significant changes to the workforce as a result of Sunshine Coast University Hospital service commencement, only one employee was offered and accepted a voluntary redundancy package (\$137,586).

Work Health Safety and Wellbeing

People are the focus of the Sunshine Coast Hospital and Health Service, and our commitment to ensuring the safety, health and wellbeing of all workers including volunteers, students, contractors and other persons is a key underpinning factor supporting the provision of safe and quality public healthcare services.

The health service undertakes safety assurance activities to monitor the effectiveness of the safety management system and identify areas for improvement these include:

- Work Health and Safety Legislative Compliance Check
- Safety Management System Executive Review
- external audit of the safety management system against Australian Standard 4801—Safety management systems
- Australian Council for Healthcare Standards accreditation
- internal WHS Audit and Inspection program.

The opening of the Sunshine Coast University Hospital created an opportunity to embed critical, proactive Work Health and Safety activity early on in the Sunshine Coast University Hospital journey. A proactive Work Health and Safety assurance and validation framework was coordinated to:

- integrate with the final stages of Sunshine Coast University Hospital commissioning
- support the official opening sequence
- embed a series Work Health and Safety lead indicators in the first calendar year of Sunshine Coast University Hospital.

This early integration of Work Health and Safety in the Sunshine Coast University Hospital journey will influence Work Health and Safety culture during a critical period in health service transition and transformation. The aim is to ensure safe environments are maintained and a culture of

safety and wellbeing is promoted.

The health service implementation of the new Queensland Health incident and risk management software solution Riskman has commenced and is expected to be operational in November 2017. Once implemented the program will provide enhanced WHS incident management and reporting capability.

There was a decrease in Work Health and Safety incidents reported per 1000 full time equivalent for 2016—2017 in comparison to 2015—2016. Ergonomics, occupational violence and slips/trips and falls are the top three WHS risk exposures. Incidence of each causative factor has remained approximately stable in compared to last year.

WorkCover Performance Indicators

- 2016—2017 hours lost (WorkCover versus Occupied FTE) has improved 0.326 per cent (target 0.33 per cent)
- new claims 2016—2017 at 324 was below the industry average of 326.48
- average days first return to work at 31.43 was above the industry average of 21.37.