What is happening to the Four Pillars?

A number of functions will be transferred from the Department to the ‘Four Pillars’. Where there is a significant change of functions the organisation of the relevant health entity will need to be restructured to accommodate the major change in role.

The Clinical Excellence Commission (CEC) will take full responsibility for system quality and safety and providing leadership in clinical governance with LHDs. The related functions in the Department, including critical response management for adverse clinical incidents and clinical risk management, will transfer to CEC, as will the state wide credentialing project.

A reformed Agency for Clinical Innovation (ACI) will be restructured to take on a strengthened role as the primary agency for state wide clinician engagement and for designing and implementing models of care to make the public health system more efficient, better performing and sustainable over the longer term. The Department’s clinical redesign, clinician advisory structures and models of care development functions will transfer to the ACI. The Policy and Technical Support Unit will also be incorporated into ACI providing economic and technical expertise which will be available to the CEC on request.

The Bureau of Health Information (BHI) will be recognised as the primary source of quality information to the community, healthcare professionals and policymakers. Responsibilities for the Patient Survey will transfer from the Department to the BHI. The Clinical Education and Training Institute (CETI) will be replaced by the Health Education and Training Institute (HETI) with an expanded focus to include non-clinical leadership and management development, and undergraduate and vocational training. Some Department and Cluster functions will transfer to HETI.

What will be the governance arrangements between the Ministry and the Four Pillars?

The Four Pillars will be an important source of expertise for the health system. Rolling 3 year Strategic Plans and Annual work plans will be prepared in consultation with each other, the Ministry and the LHDs.

Close collaboration with the Ministry will ensure alignment of their priorities with forward planning and budget development. These will be discussed, and ultimately agreed, with the Director-General. Service Compacts between the Ministry and the Pillars will be prepared, reflecting this interaction and agreeing to a specified body of work and the funding to support this. The Compact will build-in the agility for these agencies to deal with emerging issues encountered by the Ministry or LHDs whilst ensuring that matters of system-wide concern are considered and incorporated into the planned work of the agencies.
What will be the governance arrangements for the restructure?

A Governance Transformation Group will be immediately established to oversee the implementation of all the changes proposed by the Governance Review. The Director-General will chair this Group and will engage external support in the form of an experienced Project Manager, and organisational design and change management expertise, as and when required.

In addition for each part of NSW Health requiring detailed restructure there will be specific Transition Implementation Teams, including for those Pillars undergoing significant change.

What is the timeframe for restructure?

By the end of 2011 the aim is to:

1. Complete the establishment of, and appointment to the senior executive management structures of new or revised health entities, where this is required.
2. Be well progressed in developing or amending organisational structures.

Will my position be affected?

That will depend on your current position. The Governance Review has set down broad principles identifying where functions will be performed by various NSW Health entities. However, until further detailed planning occurs it is not possible to identify the effect on each position in your particular organisation.

Once the chief executive positions are appointed or confirmed, they will lead transition implementation teams to work on the restructuring required for each organisation. This will include the detailed structures and associated position descriptions for each new or changed unit.

If I am affected how will I be consulted?

Your manager will be your first point of contact and will be able to provide details about how your work area may be affected, and about the process and timeline for actions within your particular work area. The impact for your area may be minimal or it could be significant, so the implementation team will require time to identify what positions and who might be affected.

Will the transition change my award conditions of employment and entitlements?

No. Staff will remain employed in the NSW Health Service and will continue to be covered by the same industrial awards.

When will the changes happen?

The timing of these activities will vary across units and will depend on the implementation of that part of the plan which affects your work area.
Who will keep me updated on the progress of the restructure?

Your manager will be your first point of contact and will be able to provide details about how your work area may be affected, and about the process and timeline for actions within your particular organisation.

I will be commencing leave shortly, how do I make sure I am informed of changes that might affect me?

You should ensure that your manager has a current email address where you can be contacted and has your other contact details including a phone number where you can be reached during working hours.

If I find the restructure process difficult is there anyone I can talk to about it?

If you are experiencing difficulties with the restructure process, you are encouraged to contact the Employee Assistance Program (EAP). The EAP provides a confidential counselling service to staff for personal support, to discuss concerns, clarify options, and help deal with managing change and the associated stresses. EAP contact details are attached.

If I receive an affected staff letter, what does it mean?

An affected staff letter lets you know that your position is one that will or may be affected, that is changed and/or deleted, by the restructure. It is not a reflection on your performance of the role but rather the changing landscape in which you work.

As an affected employee, you have priority for employment in certain positions that are at an equivalent salary to your substantive position. The affected letter tells you what priority applies in your case.

Please note that while your position has been identified as affected, it has not yet been deleted and you have not been declared a displaced employee under the policy for Managing Displaced Staff of the NSW Health Service.

What does priority consideration mean?

Priority consideration means that you will be considered for a vacancy prior to other staff. You will be required to participate in a matching process that may include an interview to ascertain if you have the requisite skills, knowledge and experience for the role.

If there are other affected staff who also have priority for a position you are being considered for, there will be a merit selection process conducted to determine which affected staff member is appointed to the position.
What happens if I am affected and don't apply for any positions in the new structure?

Affected staff choosing not to be considered for position/s may be placed into any relevant remaining vacancies as part of the restructuring process. It is recommended that you to take all steps to be placed in a position in which you are interested.

What happens if I am affected and don't find a permanent position in the new structure?

Affected staff members whose position is deleted and who do not secure another position in the NSW Health Service will be formally declared displaced under the relevant policy on managing displaced staff once their position is deleted.

What rights do displaced staff have?

Displaced staff are entitled to priority of employment for positions at an equivalent salary across the NSW Health Service, salary maintenance, retraining opportunities and assistance in upgrading skills.

Will voluntary redundancies be offered?

There will be no general offer of voluntary redundancy. The focus is on the redeployment of staff. Some targeted redundancies may be offered where redeployment is not feasible.
## Employee Assistance Program (EAP) Contact List for HRTOs and Four Pillars
August 2011

<table>
<thead>
<tr>
<th>Transitional Organisation / Pillar</th>
<th>Name</th>
<th>Title</th>
<th>Phone</th>
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<tbody>
<tr>
<td>Western Transitional Organisation</td>
<td>Chris Patchett <em>(Also works on urgent cases across other Western LHDs)</em></td>
<td>Manager EAP Services, Sydney LHD &amp; South West LHD</td>
<td>02 9515 9680 / 02 9515 6111 / Pager: 88132</td>
</tr>
<tr>
<td></td>
<td>Vicky Purcell</td>
<td>A/Manager EAP, Western NSW and Far West LHD</td>
<td>02 6363 8091 / 1800 357 898</td>
</tr>
<tr>
<td></td>
<td>Beth Wilding</td>
<td>Staff Counsellor, Nepean Blue Mountains LHD</td>
<td>02 4734 2677</td>
</tr>
<tr>
<td></td>
<td>Jackie Brown</td>
<td>Staff Counsellor, Western Sydney LHD</td>
<td>02 9845 6297</td>
</tr>
<tr>
<td>Northern Transitional Organisation</td>
<td>Sanette Allen</td>
<td>Manager EAP Services, NS &amp; CCLHD</td>
<td>02 9976 9335</td>
</tr>
<tr>
<td></td>
<td>Lynette Moodley</td>
<td>Manager EAP Services, HNE LHD</td>
<td>02 4985 3289</td>
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<td></td>
<td>Yvette Bowen</td>
<td>Manager OH&amp;S, Workers Compensation Claims, Northern NSW LHD</td>
<td>02 6620 2521</td>
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<tr>
<td></td>
<td>(on leave until end of August 2011)</td>
<td>A/Manager OH&amp;S, Workers Compensation Claims, Northern NSW LHD</td>
<td>02 6620 2647</td>
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<tr>
<td></td>
<td>Julie McFadden <em>(Acting)</em></td>
<td>A/OHS &amp; Rehab Co-ordinator, Mid North Coast LHD</td>
<td>02 6588 2814</td>
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<tr>
<td></td>
<td>Dianne Sales</td>
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<tr>
<td>Southern Transitional Organisation</td>
<td>Eva Lion</td>
<td>Manager EAP Services, South Eastern Sydney &amp; Illawarra Shoalhaven LHD</td>
<td>02 9382 3681</td>
</tr>
<tr>
<td></td>
<td>Meredith McClelland</td>
<td>Manager OH&amp;S &amp; Wellbeing, Murrumbidgee &amp; Southern NSW LHD</td>
<td>02 6023 7138</td>
</tr>
<tr>
<td>Clinical Excellence Commission</td>
<td>Mentor Services</td>
<td>External EAP provider</td>
<td>1300 727 308</td>
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<tr>
<td>Clinical Education &amp; Training Institute</td>
<td>David Traheire Corpsych</td>
<td>External EAP provider</td>
<td>1300 360 364</td>
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<td>Bureau of Health Information</td>
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<td>Agency for Clinical Innovation</td>
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