



Waikato Hospital

A consultation document for
engaging clinical leadership and
managing Health Waikato
Stage 1
Nursing and Midwifery
Project

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19 May 2009



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1 BACKGROUND

1.1 Engaging Clinical Leadership in Managing Health Waikato, May 2009

The purpose of this project was to establish a structure and accountability framework for nursing at Waikato Hospital. As the project progressed it became evident there were a number of initiatives such as the bed clustering project, bed footprint and nursing resource model that were already broadening the level of change being considered within Waikato Hospital. As a result we explored the possible mirroring of the nursing structure to a medical framework that will support Waikato Hospital and could possibly apply across Health Waikato.

This consultation document focuses primarily on the nursing leadership structure for Waikato Hospital. We anticipate developing a similar structure for medical staff through consultation with ASMS and key stakeholders as part of Stage 2: Engaging Clinical Leadership in Managing Health Waikato. Similarly, we will be looking at how these structural and management improvements can be applied across Health Waikato as Stage 3 of this programme of change.

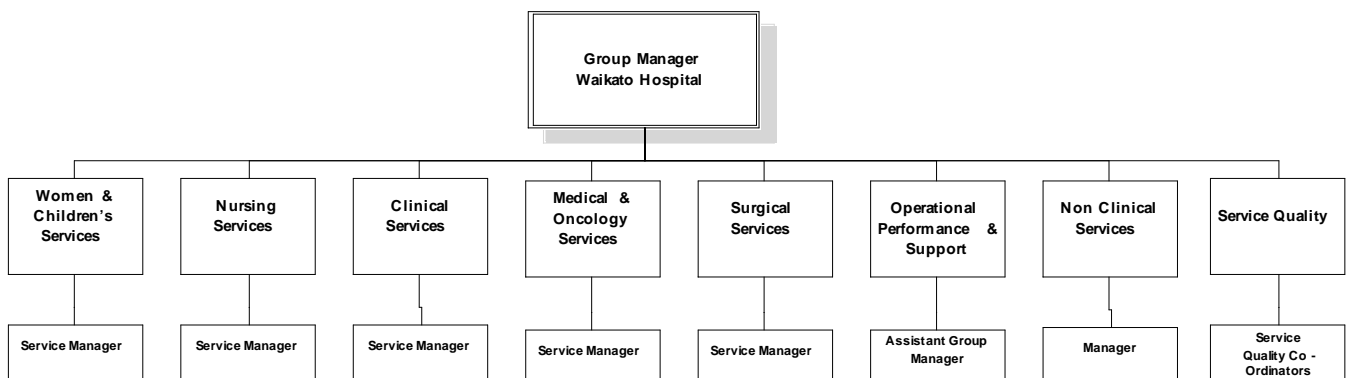
The project looked at how Waikato Hospital is currently organised to identify both the strengths and weaknesses of the current structure and identify potential benefits from the new structure.

Through the analysis and feedback process, we found issues for improvement which included:

- A mixed operating structure with two distinct models; nursing services and speciality services
- Variable management practices and professional support across the hospital
- Overlap between Clinical Nurse Manager and Clinical Nurse Specialist roles
- Weak nursing management practices in some areas
- Outpatients poorly understood, managed and supported, professionally isolated
- A disconnect between inpatient and outpatient services
- An array of nursing jobs titles (44 nursing titles)
- Isolated units that focus on their own patients rather than across services / across the hospital
- Features of the current structure do not support patient flow
- Delegations of authorities are not well understood

1.2 Current Waikato Hospital Structure

Our current structure is depicted below:



2 STAGE 1 NURSING & MIDWIFERY PROJECT

2.1 Project Objectives

- Identify key accountabilities and performance measures for Group Manager Waikato Hospital
- Establish a structure and accountability framework for nursing to deliver Waikato Hospital's commitment to patients in the region and contracted services for the Ministry of Health
- Establish a simple, clear and consistent structure for nursing throughout Waikato Hospital
- Ensure there is consistent understanding and commitment to the vision for nursing at Waikato Hospital
- Ensure that key accountabilities for nursing are assigned with appropriate authorities and reporting metrics
- Ensure that there are mechanisms and practices in place to measure and manage organisational performance for nursing
- Ensure that the status quo is recognised in establishing a minimum baseline for managing performance against accountabilities
- Ensure that there is a transition plan and timeframe for moving to the new structure that supports both the up-skilling of individuals and recognising the "other" e.g.: technology, improvements may be needed to move fully to the new environment for nursing

2.2 The Project Team Members

The project team members are:

- Jan Adams, Chief Operating Officer, Waikato DHB
- Sue Hayward, Director of Nursing and Midwifery, Waikato DHB
- Mary Anne Gill, Director of Media and Communications, Waikato DHB
- Fiona McCarthy, General Manager Human Resources, Waikato DHB
- Grant Howard, Group Manager, Waikato Hospital
- Angela Neil / Georgi Marchiano, Organiser, New Zealand Nurses Organisation
- Christine Baker, NZNO Delegate
- Neil Haines, Partner, PricewaterhouseCoopers
- Veronica White, Director, PricewaterhouseCoopers
- Haidee Davis, Manager, Programme Management Office, Waikato DHB

2.3 Approach

The approach taken to develop the proposed structure was based upon:

- A rigorous review of the current structure to identify its strengths and weaknesses
- Research into other health organisation structures from NHS, Canada and Australia
- Extensive input from staff and patients through interviews, workshops, written feedback, patient feedback and focus groups where standard questions were used to understand:
 - Key activities and purpose of each role
 - What success in each role looks like
 - What is needed from nursing line managers
 - Potential opportunities and improvements for nursing & midwifery at Waikato Hospital
- Consideration of other Waikato Hospital initiatives that would need to be aligned with a proposed new structure
- Understanding the range of functions and potential issues that would need to be considered

- Developing the key principles and benefits to guide the location and/or co-location of functions based on the review and feedback
- Developing and testing a number structure options
- Reviewing and refining of the features and benefits of the proposed structure
- Ongoing review from the Steering Committee including NZNO representatives
- Review and feedback for the Executive Team
- Consult on recommendations by release a consultation document to staff for submissions

2.4 Project Principles

Underpinning the approach are an agreed set of principles, which were developed following the initial engagement with Waikato Hospital nursing staff. They have been applied when modelling the new proposed structure.

- Nurses recognised as providing the continuity and consistency within the hospital
- Supporting patient safety through an end to end patient view within Waikato Hospital
- Improving patient outcomes by promoting the contributions of the wider team
- Promoting efficiency and reducing variability across the hospital
- Promoting nursing leadership and nurses reporting to nursing
- Promoting a pull model for patient flow that is standardised
- Visible and transparent nursing practice
- Creating safe staffing for Healthy workplaces (Report of the Safe Staffing/Health Workplaces Committee of Inquiry, June 2006)
 - Forecasting patients
 - Smoothing the planned workload
 - Estimating patients needs
 - Planning for maintaining and building competence
 - Supporting a nursing focused culture
 - Promoting effective/safe rostering
 - Incident responsiveness
 - Review targets and monitor indicators

3 PROPOSED CHANGES

The changes proposed are a new nurse management structure across Waikato Hospital. It does not include at this stage Older Persons & Rehabilitation Services, Community Service, Mental Health & Addiction Service, or the rural hospitals although this is a possibility in the future.

The changes proposed would replace the current nurse management structure at Waikato Hospital with 12 nurse managers of a business unit who would report through to an Associate Director of Nursing. (Please refer to point 4 for the proposed new structure for greater detail).

This proposal is designed to support other major Waikato Hospital initiatives including the proposed clustering model, bed footprint and nursing resource model. These initiatives are designed to group the specialties into clusters of logical clinical nature in order to optimise appropriate patient placement and flexible resourcing. Clustering supports the aim to place patients in an appropriate clinical area.

This is a significant change to the way we operate and therefore it is important that we ensure the operating structure is aligned to support this change.

3.1 Benefits of the proposed structure

- Establishes a single point of accountability
- Promote an end to end patient view, (encompass outpatient, ambulatory services and inpatients)
- Reinforce a business unit model that groups like patients
- Bring outpatient services together under an outpatient clinical nurse manager per cluster
- Supports clinical engagement in the structure and management of the Hospital as recommended in Creating Safe Staffing for Healthy Workplaces (Report of the Safe Staffing/Health Workplaces Committee of Inquiry, June 2006) and In Good Hands (Ministerial Task Group on Clinical Leadership, 2009).
- Clarity of roles – separation of management and clinical roles

3.2 Critical success factors

If the proposed change is favoured and agreed to, there is a fundamental requirement that will underpin the success and effectiveness of the proposed nursing management structure, specifically:

- Strong, clear, focussed nursing leadership
- Clarity in roles and functions
- Focus on open communication, dialogue and relationship management
- Articulation of a clear direction and vision for nurses
- Critical mass of qualified, expert senior nursing resource
- Mechanisms to measure performance and accountability (e.g. KPIs)

4 PROPOSED NEW WAIKATO HOSPITAL STRUCTURE

4.1 Structure Concept

The following diagram (A) shows the overall concept for the proposed structure which illustrates the partnership between nursing and medical staff, and is followed by diagram (B) which is an example demonstrating how a business unit / cluster would be organised.

Diagram A

Putting Waikato Hospital into the hands of clinicians

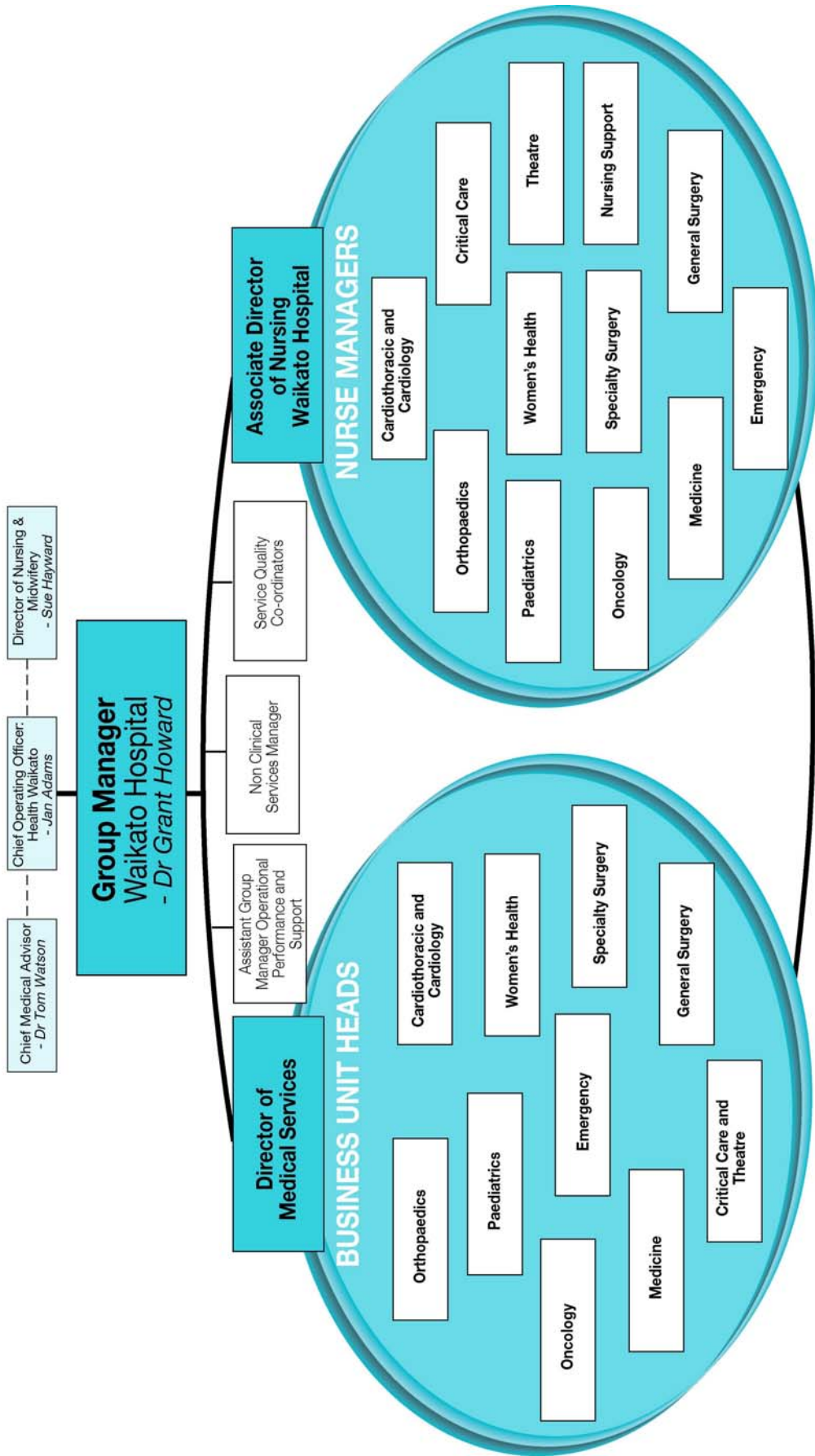
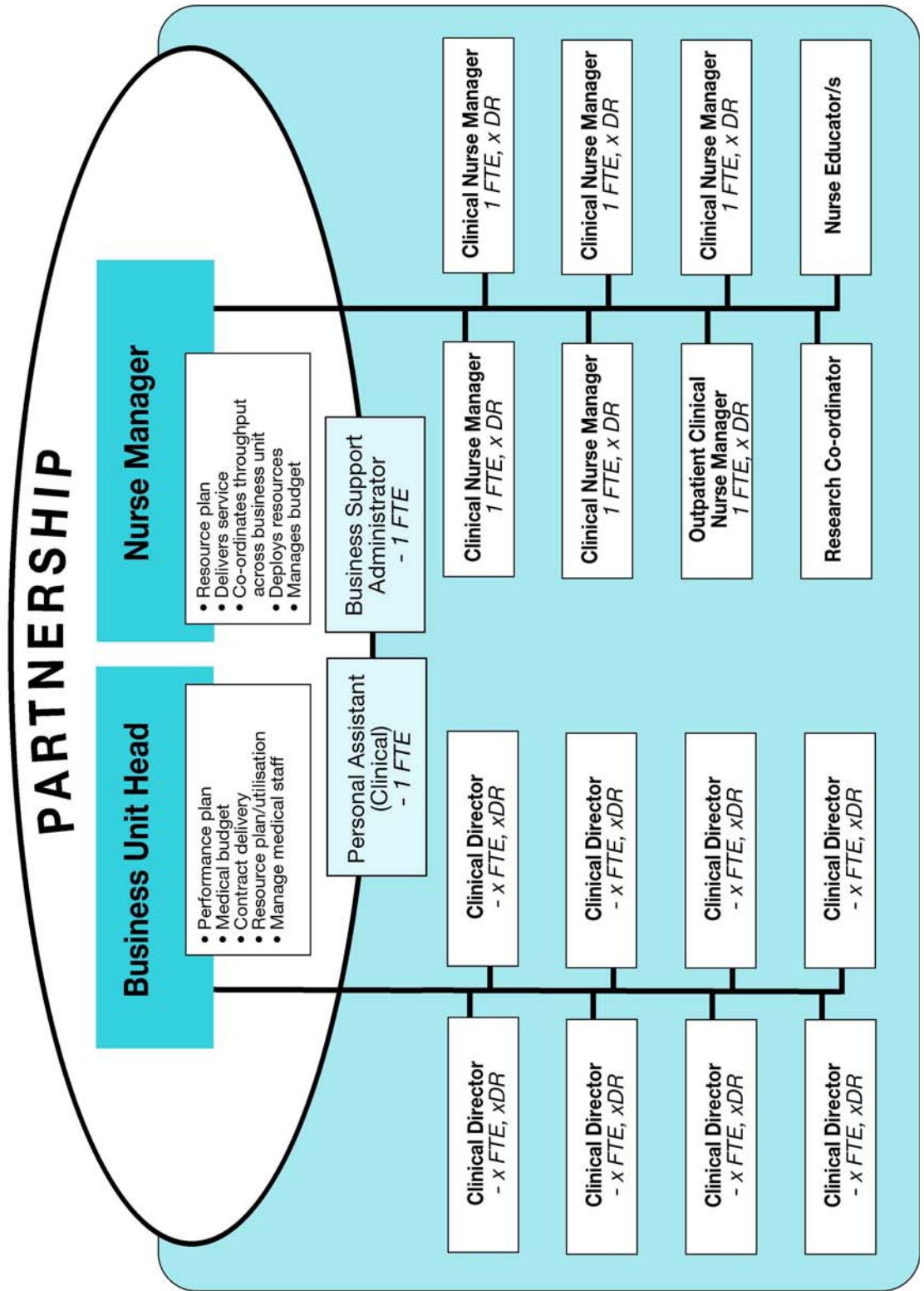


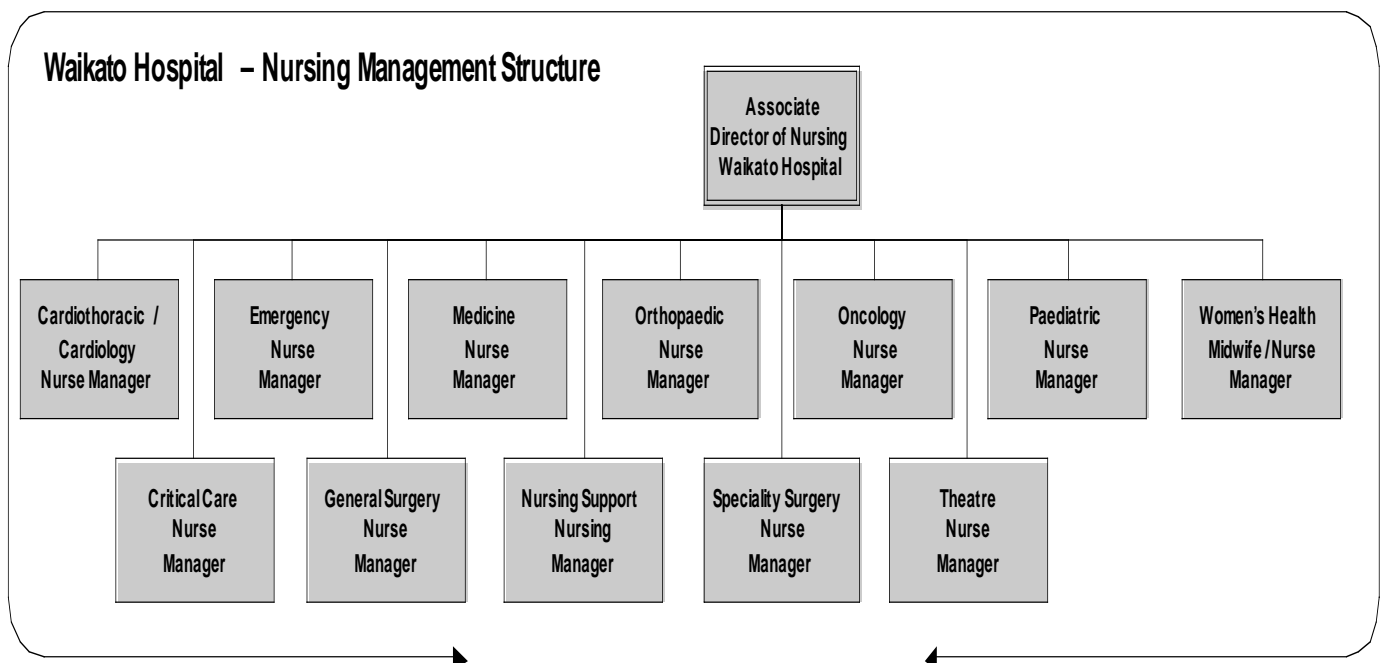
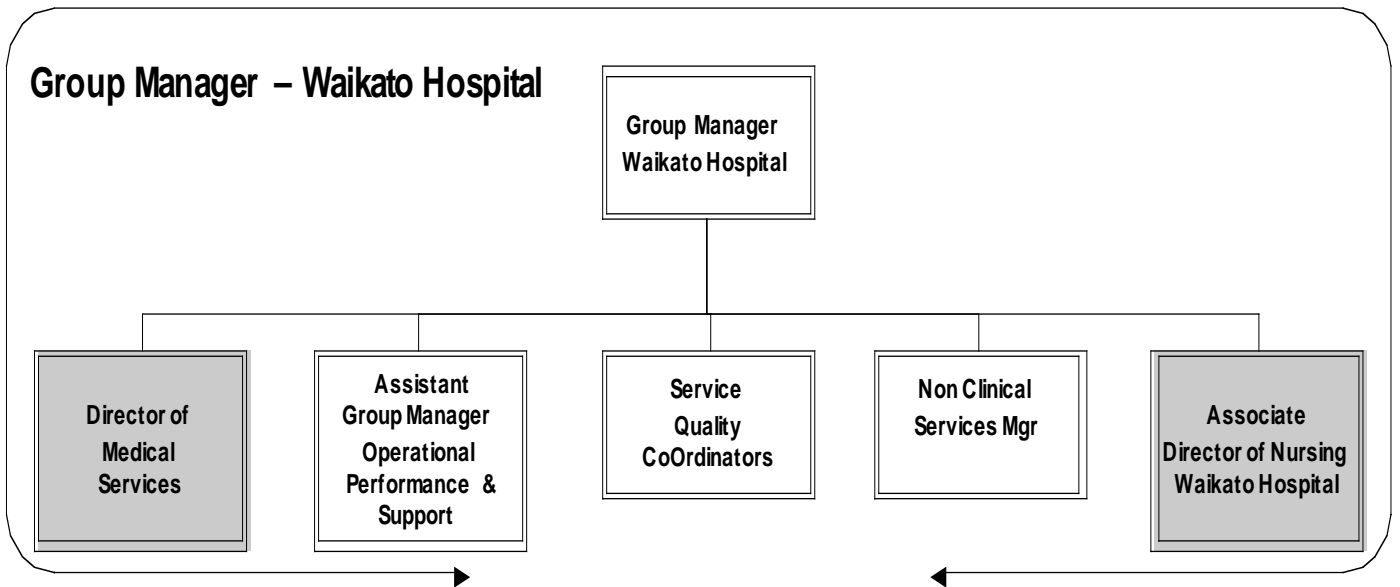
Diagram B

Proposed business unit example



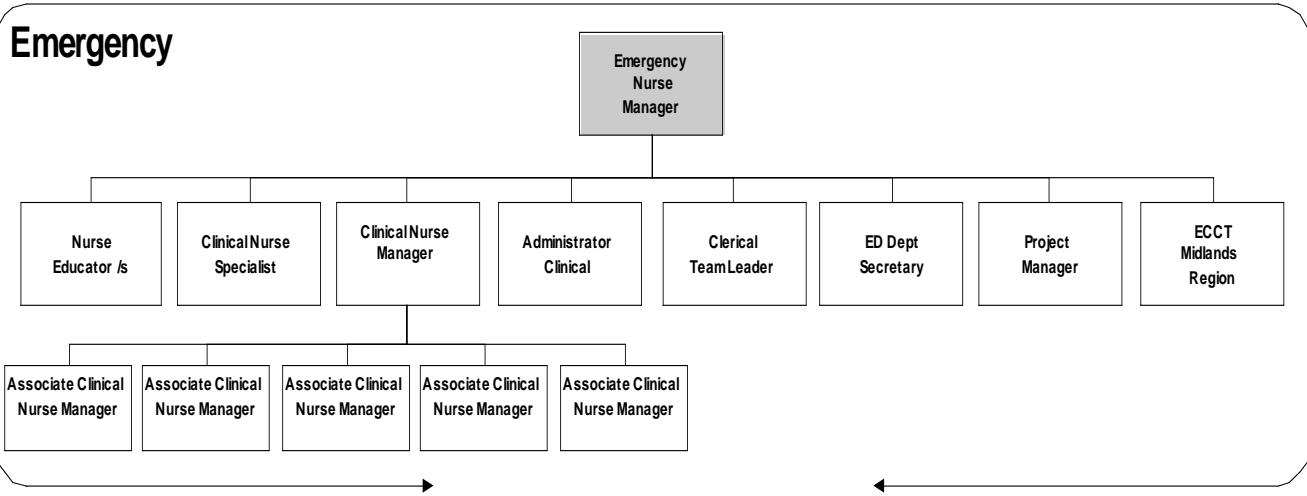
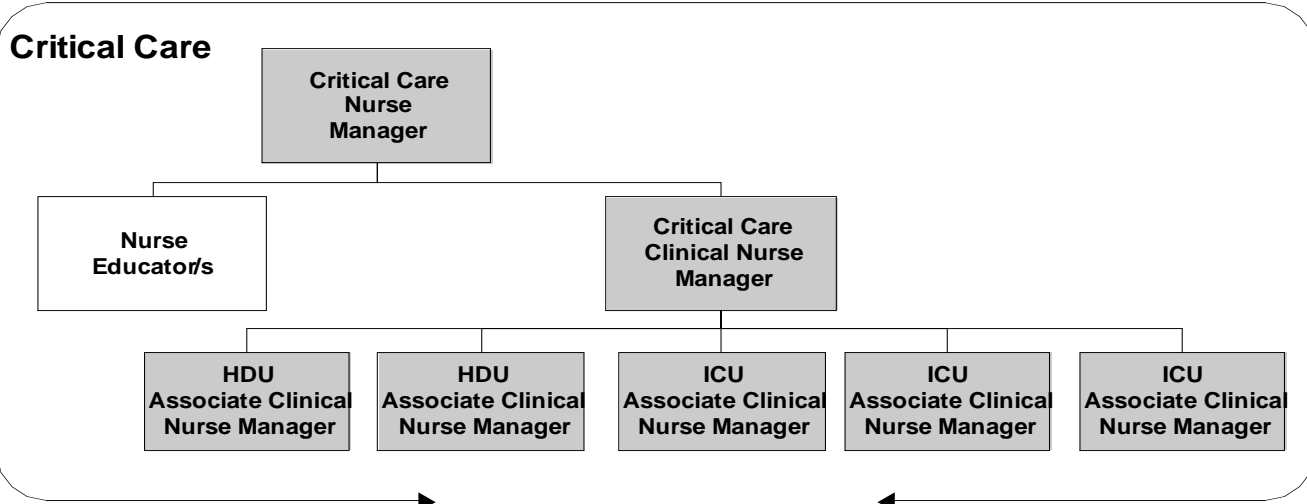
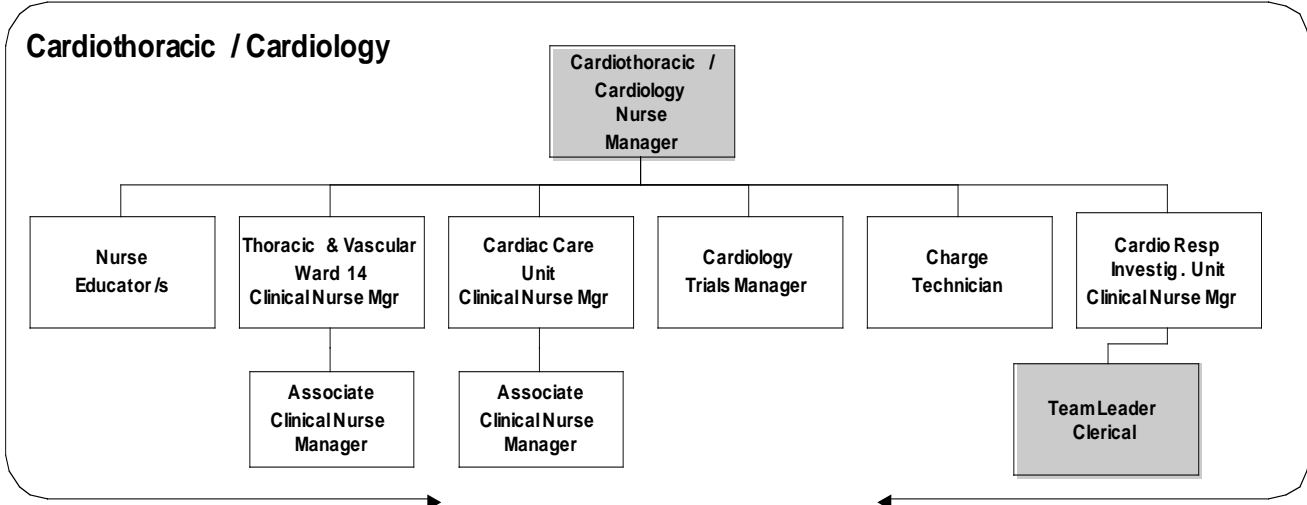
4.2 Group Manager – Director Reports and Waikato Hospital Nursing Management Structure

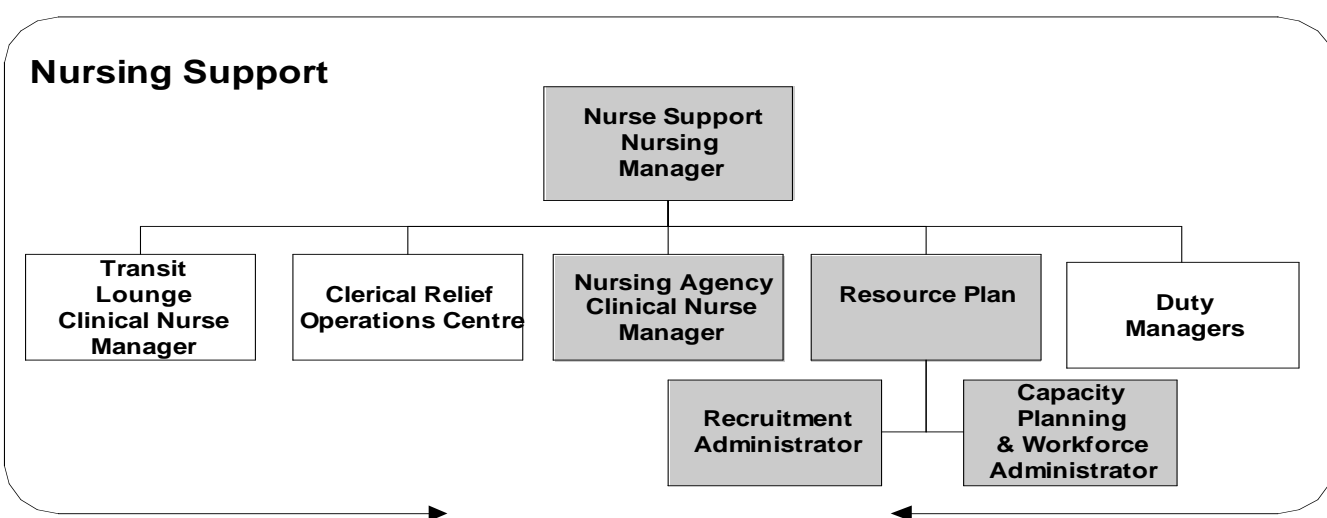
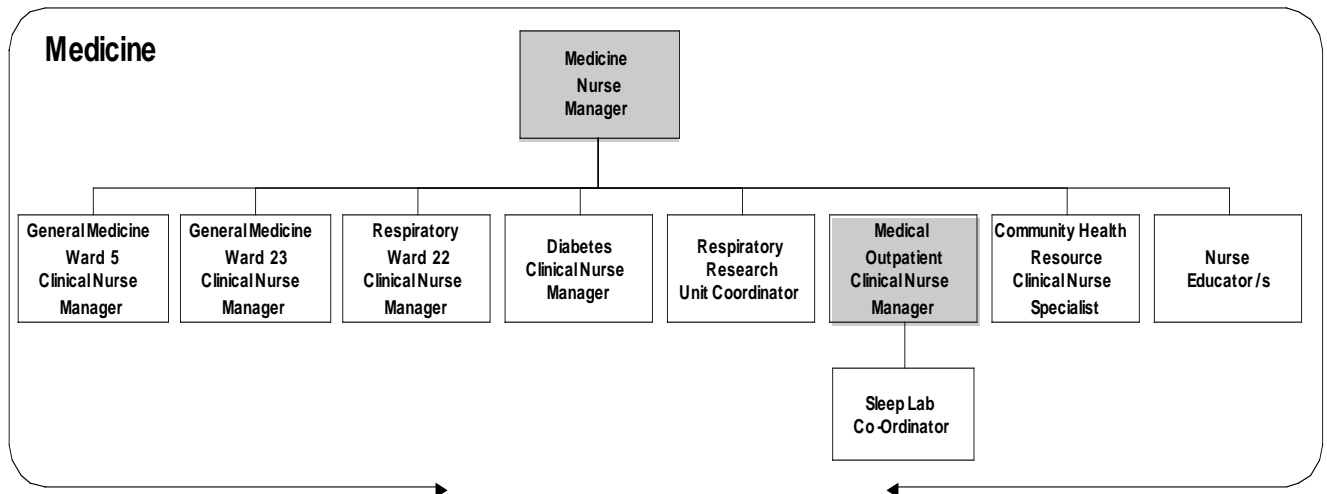
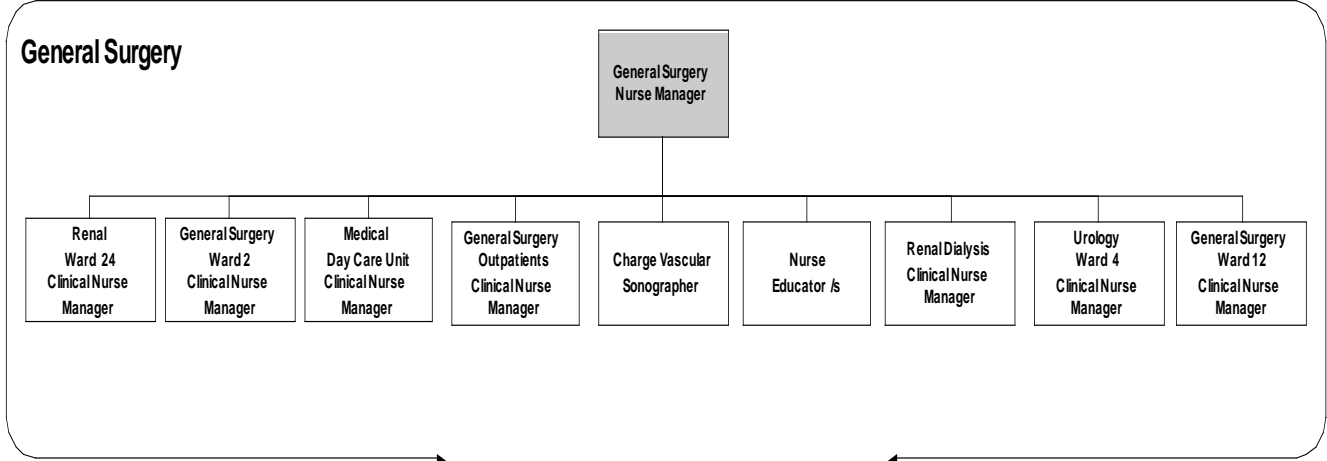
KEY:
Shaded boxes indicate new or changed positions

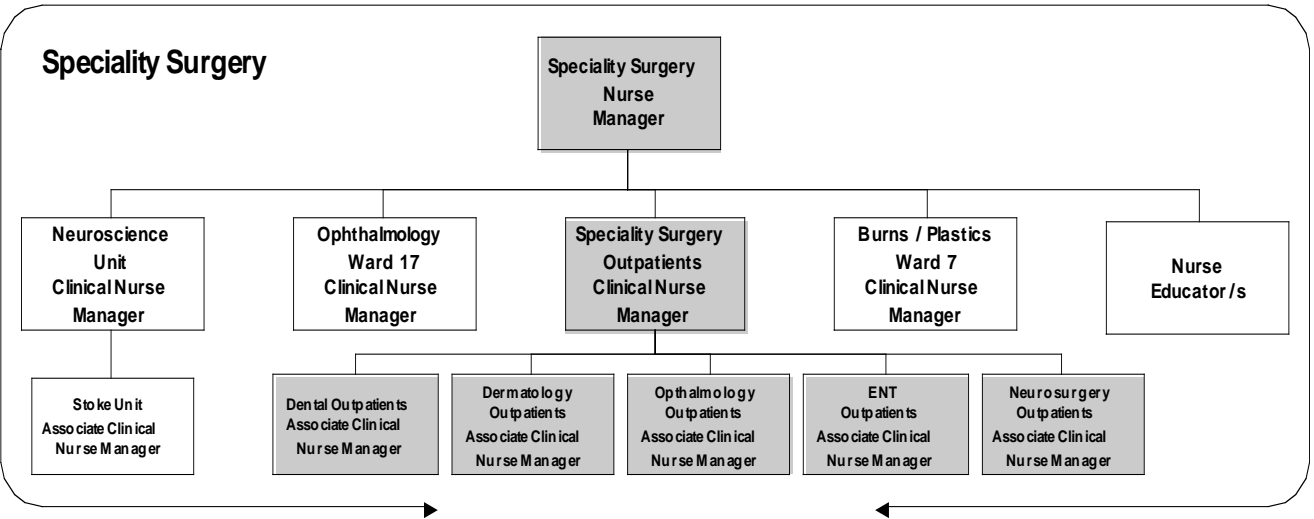
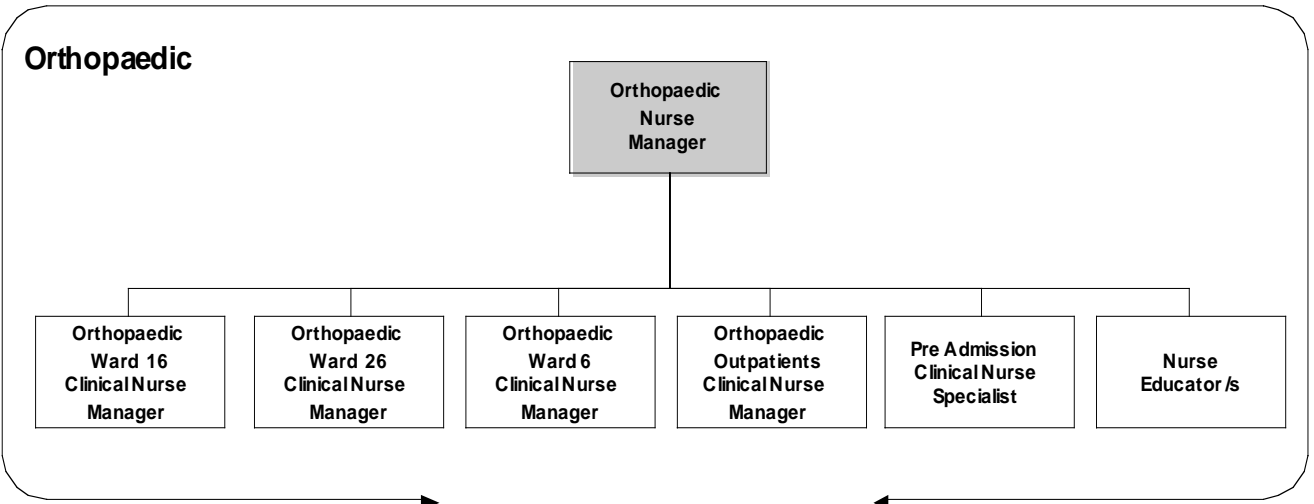
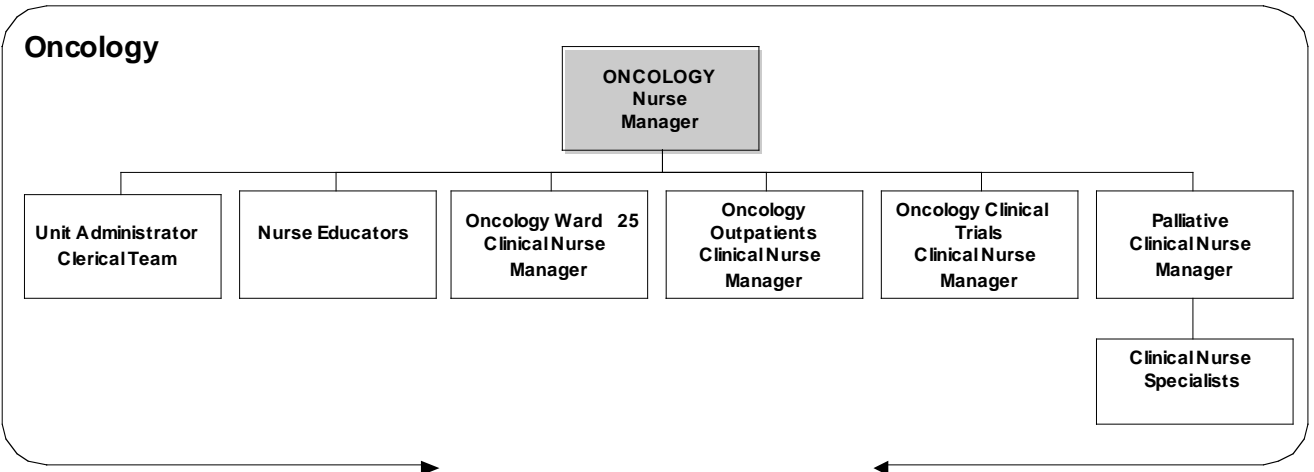


4.3 Business Unit – Nursing Structure

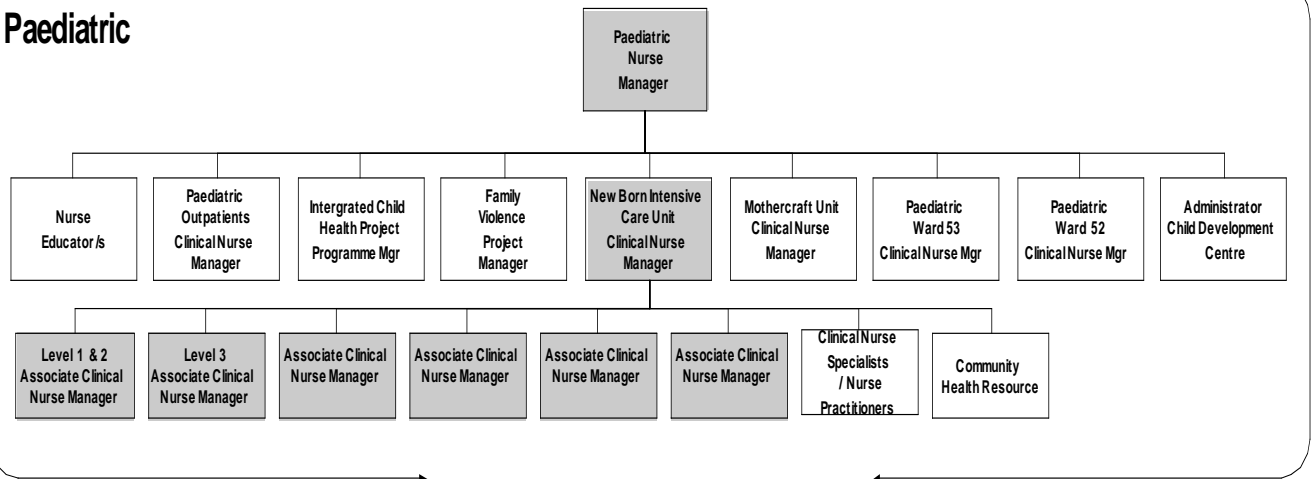
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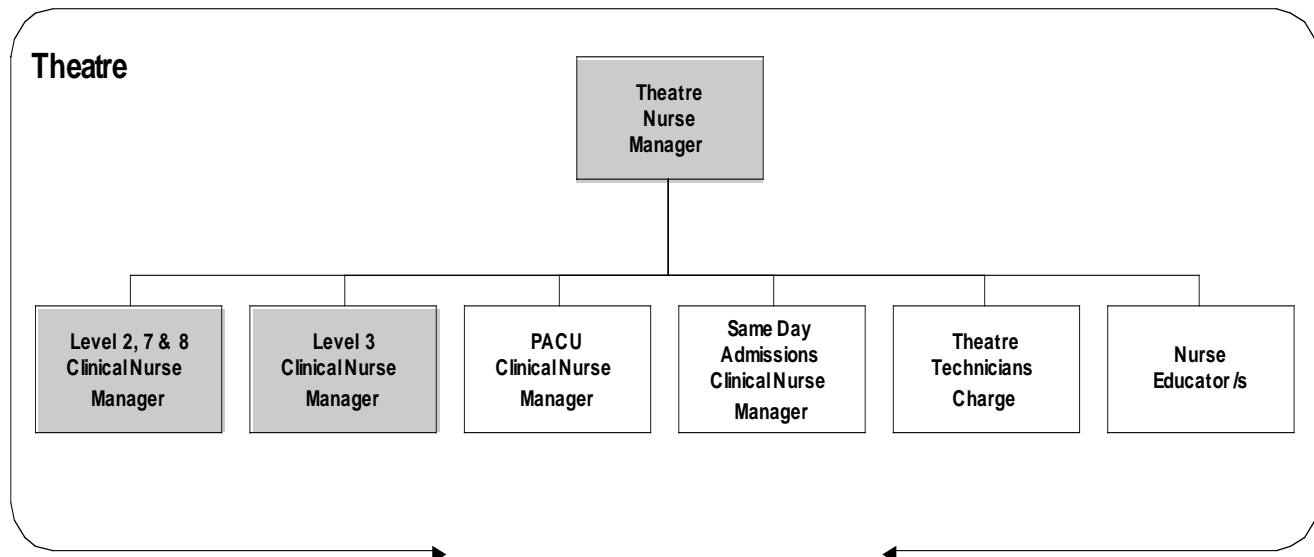




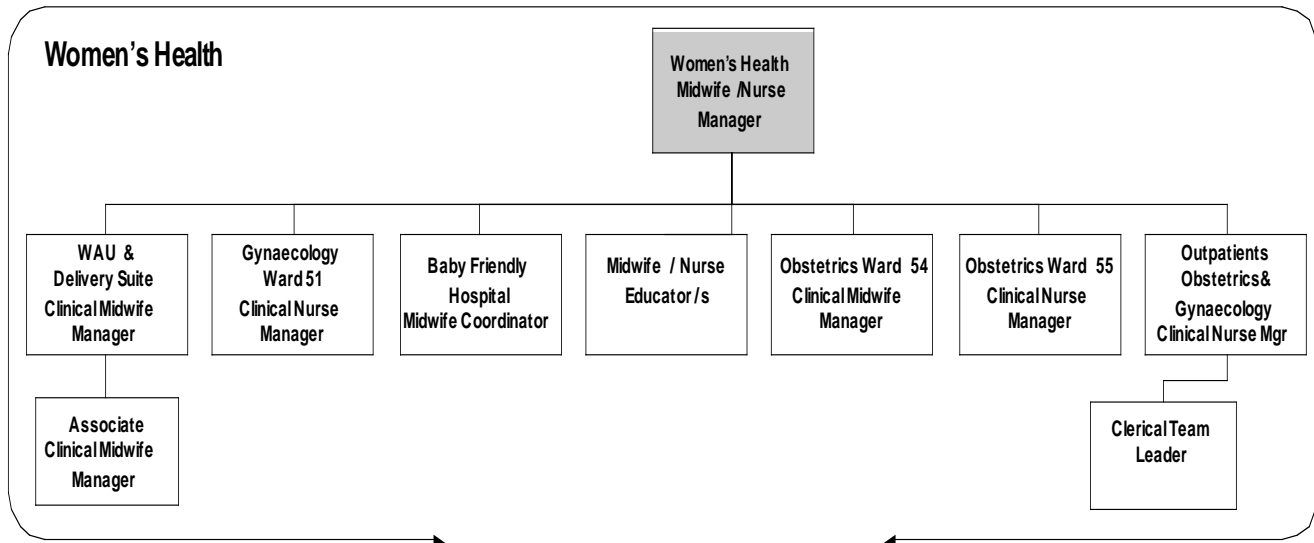
Paediatric



Theatre



Women's Health



5 WHAT'S NEXT – HAVE YOUR SAY

5.1 Consultation process

This consultation process is an opportunity for staff and key stakeholders to provide feedback on a proposed new structure for Waikato Hospital.

An overview of the proposed activities and timeframes for the initial phase of the change process is outlined below.

Timeframes	Activity
19 May 2009	Release consultation document to staff
16 June 2009	Consultation period ends
17 June 2009	Steering Group to review submissions
Mid July 2009	Update to staff
Mid July 2009	Decision made on final structure
Mid July 2009	Release final decision to staff

You can provide feedback on any aspect of the proposed structure as groups or individuals. You can suggest improvements or suggest why you believe something may or may not work. In discussing alternatives, please articulate how any proposed alterations will address some of the challenges confronting the hospital.

The closing date for submissions is 5 pm, June 16th 2009.

We have provided you with a feedback template in Appendix 1 to help organise your comments. Please record your feedback on this sheet

5.2 Staff Support

Staff are reminded that should they wish to access the Employee Assistance Programme for external support they may do by ringing 0800 327 669.

5.3 Transition Plan

Change is not new to Waikato Hospital. The principles we will work to reflect a desire to ensure we provide you with as much certainty as soon as practically possible. The transition plan, which explains, how we will move into the new structure, will be advised as soon as final decisions on a new structure are made.

During this process, we will work to ensure that all staff are treated with respect, fairness and integrity. We have and will continue to make available services to provide support and assistance to staff and managers during the change process.

Jan Adams
Chief Operating Officer
Health Waikato

Sue Hayward
Director of Nursing and Midwifery
Waikato District Health Board

APPENDIX 1: Consultation Feedback Template

We appreciate your feedback and input.

All feedback will be reviewed and considered by the Project Team.

A feedback report summarising key themes and any subsequent actions or amendments to the proposed structures will be distributed, along with the final structure, in mid-July.

Please group your feedback under the following headings.

If you have no comments to make in any section leave it blank.

There are two methods of providing feedback:

- Written submission
- Email submission

Written and Email submissions close at 5 pm, 16 June 2009 and should be forwarded to:

Internal Mail: Deryl Penjueli
Human Resource Consultant
D8 Portacoms
Waikato Hospital

External Mail: Deryl Penjueli
Waikato Hospital
Private Bag 3200
Hamilton 3240

Email to: penjueld@waikatodhb.govt.nz

For an electronic version of the submission document contact Deryl on 021 846 797.

You do not have to answer questions or provide any personal information regarding your identity if you do not want to.

This submission was completed by:

Name	
Ward/Team	
Position	

PROPOSED CHANGE

1. Do you support the proposed change? (Tick one box in this section)

yes

no

Comment:

2. If you indicated Yes above, can the structure be strengthened / enhanced in any way? How? What will be the benefits of the modifications?

Comment:

3. Is there another option that will serve Waikato Hospital nurse management better? Describe the option. What are the benefits of this option? How will this option contribute to nursing leadership and health gains?

Comment:

4. Please write any additional comments you wish to make about the proposed change:

Comment:

Please use another page if needed.

APPENDIX 2: Frequently Asked Questions

1. **Why are we considering restructuring?**

Our main goal is to strengthen the management structure for nursing and midwifery within Waikato Hospital. When we went out and spoke to nurses, midwives and health professionals in the hospital and on the wards, they told us that they are looking for change. They are keen for it because many felt the current structure hinders their ability to provide the best possible care for their patients and so they gave us their valuable feedback.

The proposed structure will help by:

1. having a single point of accountability for each service unit whether they be inpatient or outpatient clinics
2. providing clarity and separation between clinical and management accountabilities
3. aligning inpatient and outpatient units
4. supporting the cluster model

2. **How will the proposed new structure affect me?**

We have spoken to those people directly affected. Should the proposal proceed in its entirety or part, there will be a process for identifying redeployment opportunities for all the affected people and we will be working through that process with those people.

Senior people will be available to talk you through the changes in your area.

3. **How will this affect my job?**

If there are significant changes in your job we have already met with you or arranged to do so. If not then it is likely that the degree of change for you is minor. Look at the material on the intranet and you will see the detail of the proposed changes. If you have any concerns please talk to your manager or the project team.

4. **How can I get information and ask questions?**

The consultation documents and other relevant information are on “Our Major Projects” page on the intranet. An email address has been set up for you to email your concerns and questions.

In the first instance, you should talk to your manager and they will answer your questions as far as they can and then refer other questions on to the project team by emailing your question to us at clinical_leadership@waikatodhb.govt.nz. We will answer all questions within 24 hours of receipt.

5. **Who can provide feedback?**

All staff are invited to lodge comments and concerns. We suggest that you look at the material for your area on the intranet and you will see the detail of the proposed changes. If you have any concerns please talk to your manager, union representative, or the project team.

6. **How can I provide feedback?**

A template is provided at the back of the consultation document, if you have not been provided with a copy please photocopy the page of the copy allocated to your ward or area, or alternatively print off the relevant page from the intranet. In addition, we will accept other written documentation.

7. **How did you come up with the proposed restructuring? Did you engage with staff and the unions?**

We consulted widely with staff in workshops and meetings, testing proposals with all nursing staff and managers to develop the proposed structure. NZNO was active on the steering committee and Chris Baker worked closely with the project team to test ideas, develop the proposed structures and ensure that ideas were grounded in the MECA and key strategic nursing initiatives such as Safe Staffing Healthy Workplaces.

8. **Isn't commenting or providing feedback a waste of time as the decision has been made?**
No final determination has been made. It is correct that such a detailed proposal has already had significant input by various parties and considerable healthy debate has already taken place; however, all constructive feedback is appreciated and will be considered by the steering group.
9. **Who will make the final decision?**
The Steering Group will make a recommendation and then the final decision will be made by Jan Adams, the Chief Operating Officer.
10. **How long is this going to take?**
There will be a structured roll out. We will finalise the programme of change once the consultation process is complete and a final structure form confirmed.
11. **What should I tell my patients if they ask what is going on within the hospital?**
Waikato Hospital is a big community in itself and we anticipate there will be interest outside of the hospital. Of course patients will ask questions. Be honest, say the changes are about putting patient safety first by making improvements in the way we manage and deliver our services. The changes boost clinical support for nurses and midwives and streamline services to patients.
12. **Do I have access to EAP?**
Every employee can seek support and they will receive full support from EAP Human Resources and other services to assist them to work through the proposed changes. The number for EAP is 0800 327 669. You can contact EAP directly without a referral number.
13. **Where else can I get advice?**
Suggested people are your manager, union, human resources, and independent advisers.
14. **Assuming the proposal is substantially adopted will anyone lose his or her job?**
There are a number of roles that could be affected by the proposed changes and we either met with them or arranged to do so. There are a similar number of new roles which are to be appointed following the standard Waikato redeployment and recruitment processes. We will work through this process and seek to redeploy as many of the impacted people as possible.
15. **When is implementation?**
During the consultation process we will develop a likely implementation timetable and we will publish this as soon as we are able.
16. **Will the new jobs be advertised?**
It is anticipated that at the very least the bulk of the new positions will be advertised with all of the new jobs with job descriptions and details of accountabilities and competencies for the appointees. We will also advise the recruitment process and timetable for all appointments.
17. **What is the process to appoint the new jobs?**
We will advertise any position deemed contestable in accordance with normal practice. Once there is an established timetable we will detail the application process on the intranet.

19th May 2009

Jan Adams
Chief Operating Officer
Health Waikato

Fiona McCarthy
General Manager
Human Resources
Waikato District Health Board

Sue Hayward
Director of Nursing &
Midwifery
Waikato District Health Board

APPENDIX 3: Nursing Accountabilities

Associate Director of Nursing

Accountable for the performance of nursing at Waikato Hospital:

- Contributes to the setting of the Waikato Hospital service plan
- Ensures that professional standards for Nursing are maintained
- Develops the service plans and budgets across the clusters for nursing
- Ensures that nursing service plans and budgets are met for each of the clusters
- Ensures the model of nursing care delivery is continuously evaluated to maintain optimal patient safety while delivering cost effective services across the clusters

Nurse Manager

Accountable for the performance of nursing for a cluster:

- Inputs to the capacity planning cycle for the service cluster
- Manages the service plan and budget for the cluster
- Develops and implements the resource model for the cluster and contributing service units to promote efficient, effective, safe and compassionate nursing services eg: sets and manages the roster profiles
- Optimises end to end patient management practices ie: “patient pull” practices across the patient episode of care
- Coordinates activities across the cluster to facilitate interactive management and the development of collegial relationships

Clinical Nurse Manager

Accountable for the performance of a nursing unit:

- Inputs to the capacity planning cycle for the service unit
- Contributes to the setting of the service plan + budget for the unit
- Roster and deploy staff to the staffing and patient profile for the unit
- Recruits manages and leads nurses in the delivery of patient care to the agreed service plan
- Ensures the professional standards for safe patient care are met
- Ensures clinical competence of nurses
- Ensures unit meets non staffing budget (consumables)
- Manages overtime, sick leave and annual leave

Clinical Nurse Specialist

Contributes to the performance of Nursing in a unit by providing advanced clinical care for high need patients:

- Establishes and maintains professional stds for nursing in the delivery of services within the clinical specialty
- Contributes to the planning and deliver of specialty services
- Contributes to the development and maintenance of nursing competence within the specialty (with Nurse Educators and CNMs)
- Promotes excellence in clinical nursing care by ensuring that Nurses operate within their scope of practice
- Contributes to the effectiveness and efficiency of service delivery by optimising agreed patient outcomes (KPIs)

Associate Clinical Nurse Manager

Contributes to managing the performance of nursing in a unit

- Manages “on the day” resourcing and deploying staff, allocate workloads, responding to enquiries and complaints for a shift
- Ensures safe patient care by providing clinical nursing expertise to the shift
- Manages an assigned portfolio of duties eg: quality and safety
- Manages a portfolio of staff providing professional support and guidance, and completing performance appraisals (not hire and fire)
- Monitors professional standards, addressing and/or escalating performance issues and works with the CNM to ensure all staff are professionally competent within their scope of practice

Clinical Resource Nurse

- Provide clinical expertise and advise across the hospital “out of hours”
- Provides the out of hours shifts by providing expert nursing knowledge, skills and assessment
- Contributes to nursing education by teaching and certificating nurses out of hours
- Responds to and manages emergency events within the hospital out of hours
-

Nurse Practitioner

- Provides advanced Nursing practice within a specific area to improve health outcomes for high need patients
- Provides leadership and consultancy within their defined practice area
- Develops nursing guidelines and policy, nurse education and quality improvement within their specialty
- Shows scholarly research and enquiry into nursing practice
- Leads development and changes in nursing practice

Nurse Educator

Contributes to the performance of nursing by working with the CNM to ensure the competence of all staff within their cluster

- Develops the nurse education strategy and programme for the cluster
- Works with the CNM to ensure nurses are competent and current with best practice and that the cluster meets it’s workforce development goals
- Ensures the operational nursing practices within the cluster meet the requirements of Waikato Hospital patient safety and quality
- Designs, delivers and assess nursing education for the speciality cluster to meet educational commitments and meet individual needs
- Contributes to the safe delivery of nursing patient care
- Maintains compliance with respect to certification
- Plans and delivers training on new technologies and practices
- Undertakes clinical practice to maintain clinical skills and expertise
- Contributes to the clusters continuous improvement activities

Duty Nurse Managers

- Delegated responsibility for the out of hours operational management of the hospital
- Facilitates patient care by managing the admission, discharge and transfer of patients
- Applies clinical expertise by prioritising and deploying the Resource Nurses across the hospital
- Manages the deployment of nurses to cover resource and skill deficits across the hospital
- Manages emergencies and disaster responses

APPENDIX 4: Medical Accountabilities

Director of Medical Services Waikato Hospital

Accountable for delivering the clinical performance for Waikato Hospital

- Contributes to the setting of the Service Plan for Waikato Hospital including the clinical budget
- Continuously seeks opportunities for improvements in the clinical performance of the hospital in terms of improved patient outcomes and operational efficiency
- Works in partnership with the Group Manager Waikato Hospital and the Associate Director of Nursing to promote a culture of clinical and operational excellence

Head of Clinical Business Unit

- Develops the performance plan for clinical services for the cluster
- Agrees the clinical budget for revenue and cost for the cluster
- Determines the resource plan for the cluster
- Ensures that the cluster meets its performance plan

Clinical Director

- Negotiates and agrees the services and resources to deliver on the service plan
- Recruits, deploys and manages the doctors for the delivery of services within the cluster
- Establishes and continuously improves the efficiency and effectiveness of the model of care
- Agrees a service plan with Nursing and other services to deliver on the service plan
- Delivers patient care in the most appropriate, safe and cost effective manner across the outpatient and inpatient continuum
- Monitors and manages the service plan delivery and budget
- Ensures that appropriate development and training are delivered to early post training medical staff and all junior medical staff
- Ensures all medical staff within the unit meet their professional credentialing requirements for both individuals and to meet the scope of service delivered
- Ensures the medical staff comply with the quality and safety requirements of Waikato Hospital
- Ensures all safety and clinical governance issues for the unit are addressed in a timely manner