

Restructure – Consultation Document (Procedure reference PR2014_016)

Document control sheet

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Contents

Stage 1 – Scope, Plan and Approval.....	2
1.1 The Need for Change	2
1.1.1 Description of Service	2
1.1.2 Background	2
1.1.3 Current Structure	3
1.2 Restructure Plan.....	3
1.2.1 Reason and Purpose of the Restructure	3
1.2.2 Proposed New Structure	3
1.2.3 Proposed New Position Descriptions	3
1.2.4 Impact on Services and Functions.....	3
1.2.5 Strengths	4
1.2.6 Likely impact on employees.....	4
Stage 2 – Consultation	5
2.1 Notification to employees.....	5
2.2 Notification to Union/Industrial Bodies and other relevant parties.....	5
Stage 3 – Implementation.....	5

Stage 1 – Scope, Plan and Approval

1.1 The Need for Change

1.1.1 Description of Service

The Hornsby Ku-ring-gai Mental Health Service, located within Hornsby Ku-ring-gai Hospital, comprises a 6-bed Psychiatric Emergency Care Centre (PECC), a 35-bed Adult Mental Health Unit (AMHU), a 12-bed Child and Youth Mental Health Unit (CYMHS), and a 12-bed Mental Health Intensive Care Unit (MHICU)

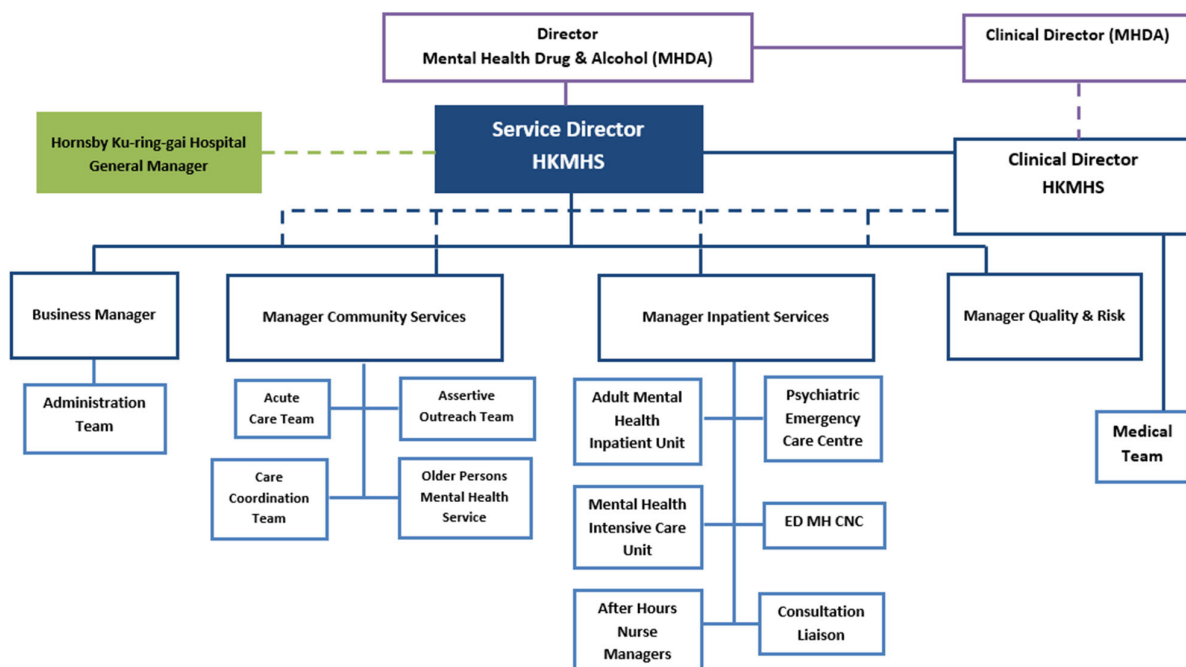
Additionally, the Hornsby Ku-ring-gai Community Mental Health Service (HKMHS) provides community-based mental health care to residents of the Hornsby and Ku-ring-gai Local Council Areas, as well as to individuals presenting to emergency services in need of mental health support. These services operate across three primary locations: the Palmerston Centre at HKH, the Pennant Hills Community Centre (PHCC), and the Hornsby Police Station Ku-ring-gai Local Area Command.

Adult inpatient mental health services are delivered through 53 adult mental health beds located onsite at Hornsby Ku-ring-gai Hospital (HKH). Additionally, the service offers 24-hour mental health support to HKH, covering all 270 inpatient medical and surgical beds, the Emergency Department, and HKH patients requiring mental health care.

1.1.2 Background

The growth of clinical mental health services has led to an expansion from a 4-bed Psychiatric Emergency Care Centre (PECC) to a 6-bed PECC with additional staff FTE totalling 20.59 along with the addition of 1.57 FTE for the ED CNC, totalling 4.57 ED CNC to provide 24-hour care in the HKH Emergency Department. This welcome service expansion has highlighted the need to review existing managerial and governance structures to ensure the safe and effective delivery of mental health services around the clock.

1.1.3 Current Structure

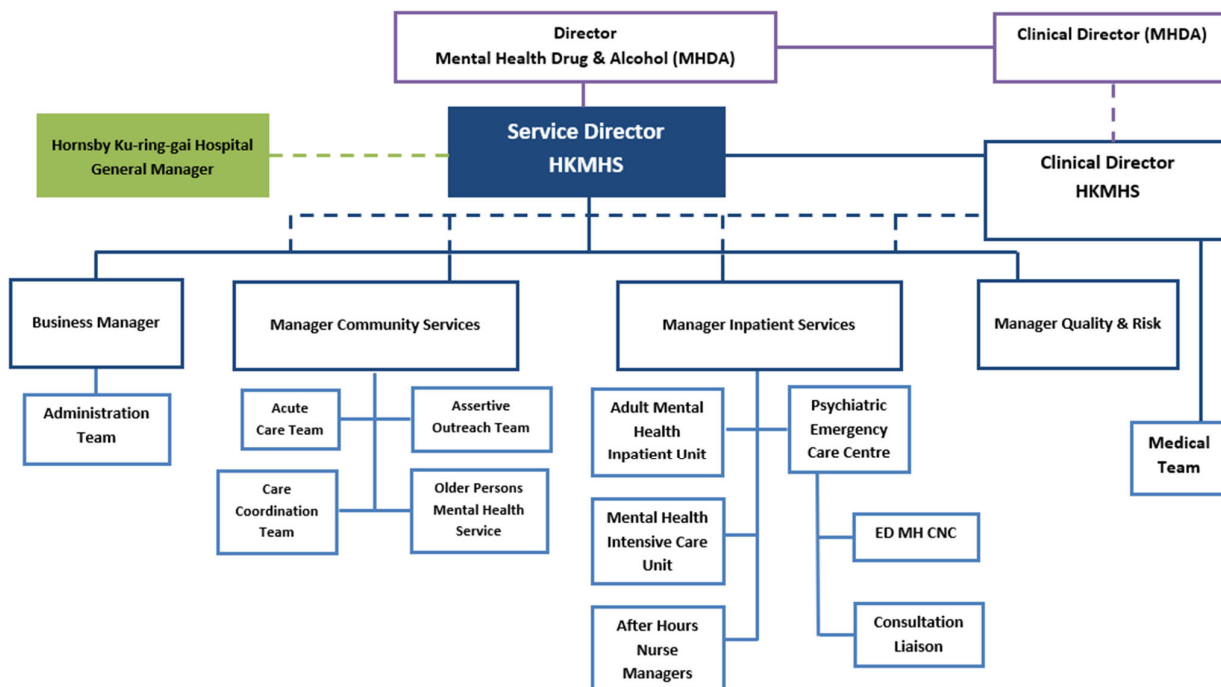


1.2 Restructure Plan

1.2.1 Reason and Purpose of the Restructure

The purpose of the restructure is to align the three Mental Health services under a single line management structure to strengthen governance and enhance service delivery. This model will address the current gap in team management for the Consultation Liaison (CL) and Emergency Department (ED) Clinical Nurse Consultant (CNC), who are presently managed directly by the Inpatient Service Manager (ISM).

1.2.2 Proposed New Structure



1.2.3 Proposed New Position Descriptions

The current NUM 1 position is proposed to be reclassified as Nurse Unit Manager 3, in accordance with the Nursing and Midwifery Award.

1.2.4 Impact on services and functions

The revised model clarifies roles and responsibilities within HKMHS and strengthens the interface with HKH care pathways and the whole-of-hospital program, aiming to improve patient care by seamlessly integrating mental and physical health services.

1.2.5 Strengths

Clear line management and oversight will enhance the operations of the ED CNC and CL services. This structure will establish transparent governance processes and provide a resolute Nurse Unit Manager who is able to be focused on quality of care, leadership, rostering, and workforce matters. The NUM 3 will report to the ISM, reducing operational workload and allowing more time for strategic and business planning and service growth.

1.2.6 Impact on employees

With this proposed change, the following will occur:

- The existing NUM 1 position will need to be regraded and advertised, which may result in the incumbent becoming an affected employee.
- Employees currently in roles within the Consultation Liaison (CL) and
- Clinical Nurse Consultant (CNC) services will experience a change in their line management, reporting to the NUM 3 instead of the ISM.

Table 1 Impacted Staff FTE

HKMHS Service	FTE
ED CNC	4.57
CLS	2.34
PECC	20.59
Total FTE	27.5

Stage 2 – Consultation

2.1 Notification to employees

This document will be provided to the HKMHS impacted PECC ED CNC and CLS teams following preliminary conversations regarding proposed change. The impacted teams will be provided with a minimum period of 2 weeks to provide feedback and consult with relevant Unions and Associations as required.

2.2 Notification to Union/Industrial Bodies and other relevant parties

The proposed changes to the HKMHS affected ED CNC and CL teams will be approached with NSLHD’s commitment to genuine consultation and the relevant industrial instruments. The date this consultation document is provided will commence a minimum 2-week consultation period with representative Unions and Associations. In this time, NSLHD will seek active feedback from the Unions and Associations, with any concerns raised to be reviewed.

Stage 3 – Implementation

The service is working toward a proposed implementation date of mid-January 2026. However, the proposed implementation time is dependent on endorsement and consultation of the restructure on relevant parties.