



Australian Nursing Federation

ACT Branch

ABN: 41 698 088 660

President: A Rosborough Secretary: J. Miragaya

Ms Grace Concannon
Secretary
Standing Committee on Health, Community
and Social Services
ACT Legislative Assembly Secretariat

26 November 2010

Dear Ms Concannon

Re: Consultation into the proposed options for the further ownership and management arrangements of Calvary Public Hospital

Thank you for your email of 14 October. The ACT ANF is happy to participate in this consultation. Please see the attached ACT ANF response to this request.

The ACT ANF looks forward to further exploring these matters at the public hearing to be held on 1 December 2010.

Yours sincerely


Jenny Miragaya
Secretary



Australian Nursing Federation *ACT Branch*

ABN: 41 698 088 660

President: A. Rosborough Secretary: J. Miragaya

ACT ANF Submission into the Inquiry on the Future of Calvary Public Hospital

26 November 2010

Overview

The Australian Nursing Federation was established in 1924 and represents the industrial and professional interests of nurses and midwives throughout Australia. It is the second largest union in Australia with a current membership of 192,000. The ACT ANF represents the interests of both public and private sector nurses and midwives within the ACT. Nurses and midwives represent the largest single employment group within the ACT Health Care sector and are the most likely to be affected by the changes to the future ownership and management arrangements of the Calvary Public Hospital as outlined in the four options discussed in the *Briefing paper for community stakeholders Public hospital services in the ACT*.

On 14 October 2010 the ACT ANF was invited, on behalf of the ACT Government Standing Committee on Health, Community and Social Services, to prepare a submission in relation to the inquiry into the four proposed options for the future ownership and management arrangements of Calvary Public Hospital. These options were outlined by the Minister for Health in her statement of 19 August 2010. They were also detailed in the *Briefing paper for community stakeholders Public hospital services in the ACT*, tabled at the Community Stakeholders forum held on 8 September 2010.

The following constitutes the ACT ANF response to the matters raised in the Minister's statement, the briefing paper and the options and terms of reference outlined in Ms Conçannon, on behalf of the ACT Government Standing Committee on Health, Community and Social Services, in her email request of 14 October 2010.

Introduction

As previously stated, the ACT ANF, as part of the consultative process associated with the future ownership of Calvary Public Hospital, was invited on 14 October 2010 to participate in consultation and consider providing a submission regarding the terms of reference of the inquiry into the future ownership and management arrangements of Calvary Public Hospital. Prior to this invitation, the ACT ANF had participated in the Community Stakeholders forum held on 8 September 2010 where the Stakeholder Briefing Paper was tabled. After the September sitting of the ACT ANF Branch Council, it was resolved that the ACT ANF would support, in-principle, Option Four (that the ACT Government builds a new acute public hospital on Canberra's north side), but reserved the right to withdraw support, pending receipt of further information regarding this option. Therefore, the ACT ANF wrote to the Minister for Health on 24 September 2010 requesting clarification on a number of issues concerning Option Four. To date, the ACT ANF has not received a written response. On seeking further clarification in respect of the matters raised in correspondence of 24 September, the ACT ANF has been informed, that as no decision has yet been made as to the future of Calvary Public

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Hospital, it is not possible, at this time, to provide the clarifications sought by the ACT ANF and its Branch Council. Questions raised by the Branch Council were:

1. What would be the arrangement of the sub/non acute beds for public patients from Calvary Hospital? Would the funding model of Calvary Public beds be congruent to the current model?
2. What would constitute sub/non acute beds in Calvary Hospital? Would there be a palliative care/rehabilitation-convalescent focus?
3. What does the ACT Government envisage to be the future of Calvary Private Hospital if Option 4 is progressed?
4. How would funding/arrangements be maintained in the current model during the development and construction of the new public hospital?
5. What are the timeframes for planning and establishing Option 4?
6. What possible locations are being considered for the new Public Hospital? Would it become a teaching hospital for Nursing and Allied Health staff?
7. What probable effects would Option 4 have on Nursing Staff and Patient care?

Issues

Regarding the term of references, the ACT ANF asserts that when "Evaluat[ing] the relative merits, including the financial and health impacts, of the four options" the ACT Government must be conscious of a number of issues that will affect ACT ANF members, most importantly, the probable effects Option Four would have on the Nursing Staff and Patient Care. Currently, ACT Public Sector Nursing and Midwifery Staff face a number of problems regarding staffing and workload at both Public Hospitals (The Canberra Hospital and Calvary Public Hospital). This has been particularly prevalent at Calvary Public Hospital over recent times and has been the subject of many Critical Incident form notifications, correspondence, meetings with staff and management, and also the subject of discussions at both the Work Place Consultative Committee and the Agency Consultative Committee. The ACT ANF is currently involved in an ongoing dialogue with Calvary Health Care ACT in respect of unresolved Occupational Health and Safety Risks which may exist in respect of unsafe working practices and conditions.

The ACT ANF considers the proposed new Public hospital option may address these issues. The ACT ANF further considers that a new purpose built hospital with a management function more closely aligned with the existing legislative and industrial responsibilities applying to other Public Sector health services, and consistent with the safe working practices and related conditions, such as those currently administered by ACT Health at the Canberra Hospital, will benefit both staff and patients and the ACT Community more generally. However, the ACT ANF is not convinced that the simple relocation of acute beds from Calvary Public Hospital to a new hospital administered by ACT Health would be an adequate solution to the problem of unsafe working practices. Further planning in respect of this option, particularly in relation to staffing and workload, the physical layout of the facility, the proposed acute care clientele expected to utilise the new hospital and the possible relationship between such a hospital and the University of Canberra, particularly in respect of nursing, midwifery and allied health faculties, is required before the relative merits, including the financial and health impacts, of Option Four can be fully endorsed.



Although the ACT ANF is generally supportive of the transformation of Calvary Hospital to a sub/non acute bed hospital, this raises questions about the viability and future direction of Calvary Private Hospital. The ACT ANF considers that it is difficult to envisage Calvary Private Hospital operating as an adequate stand alone private hospital without Little Company of Mary Health Care (LCMHC) requiring ACT Government assistance for its development as outlined in Option Three. However, unless it can be demonstrated that there is a genuine public-good investment, the ACT ANF cannot support a funding arrangement where a private company may benefit from public funds. In addition, the ACT ANF remains cognisant of members working in Calvary Private Hospital, and would request an undertaking from the ACT Government that the security of employment for nurses and midwives employed by Calvary Private Hospital is considered, if Calvary Private Hospital cannot be sustained due to changes instigated by the Territory Government.

The ACT ANF is also cognisant of the problems that may be faced with any relocation of Nursing Staff, from both a practical perspective and common law perspective. As such, the ACT ANF considers that the location of the proposed hospital must be in close proximity to the current hospital. The concept of a Teaching Hospital (involving an educational partnership with the University of Canberra) may provide impetus for discussion in respect of a proposed site close to the University of Canberra Campus as the University currently offers courses in Nursing and Midwifery, Pharmacology, Physiotherapy and other Health related fields.

Many of the issues that will need to be addressed through further consultation concern the proposed arrangement of maintaining public sub/non acute beds at the current site and the funding model associated with these beds. Option Four indicates that the ACT Government and LCMHC would continue operating under the Service Agreement in its current form, while the Government undertakes preliminary planning and analysis of the hospital requirements on the north side of Canberra. In maximizing the opportunities for a rational delineation between facilities, inclusive of the Canberra Hospital maintaining its tertiary role, the new proposed hospital providing public acute services on the north side of Canberra and public sub/non acute services being provided at the current Calvary Public Hospital site, the ACT ANF has concerns in relation to the funding model to be utilised in such a scenario.

Of additional concern is the future management and utilisation of Clare Holland House because the Hospice is currently managed by LCMHC. While the location of sub/non acute services at the current Calvary Public Hospital may fit with the LCMHC Mission and Values and may also provide some synergy with the services provided by the Hospice, greater clarity is required in respect of the future of the Hospice. This is particularly so in relation to its ongoing management and function, but also in respect of its relationship with the new public hospital if Option Four is implemented and the services and specialties which may be offered at the new public hospital.

If the proposed funding model is congruent with the current model, the ACT Government may face dilemmas similar to those currently experienced in the future. As such, the ACT ANF submits that alternative funding models must be considered. This consideration must pay appropriate attention to the question of operational control, which must be firmly vested in the ACT Government, with ACT Health having absolute operational control. This is particularly so in respect of staffing and workload, pay, and conditions of employment and other industrial matters, along with other fundamental operational issues including consistency of practice, protocols, policy and procedures etc, to ensure that the public services provided by Calvary Public Hospital will be fully integrated into the ACT public health network. This will facilitate an easy incorporation of these



services within the proposed Local Hospital Networks associated with the *National Health and Hospitals Network Agreement*.

Further, the ACT ANF considers that with the removal of acute beds at Calvary Public Hospital, as suggested in Option Four, the ACT Government has the opportunity to investigate the provision of a publicly funded palliative care unit under the operational control of ACT Health, with such services having a greater focus on rehabilitation/convalescent health care as well as palliative care. Hence the need to clarify the future and management of services provided at Clare Holland House.

With regard to the second and third terms of reference provided, the ACT ANF considers it would be prudent for the ACT Government to continue to identify and evaluate any further options regarding the future of Calvary Public Hospital, and explore the relative disadvantages of Option Four and possible alternative options. Regardless of what option is eventually favoured, if Option One or Four are considered in the interim, specific operational control matters, as outlined above, need to be factored into the Service Agreement.

The ACT ANF considers that, having regard for the depth of research, consultation and consideration required, the timeline of reporting back to the assembly to be adequate. The ACT ANF intends participating in the public hearing to be held in December 2010 and would appreciate being provided with a copy of the report to the ACT Legislative Assembly which is due to be tabled by the last sitting day in March 2011.

Conclusion

The ACT ANF, having regard to the issues discussed above, supports Option Four in-principle, but is cognisant that there are many issues that need to be clarified and adequately addressed before progressing this option further. The ACT ANF considers ACT Nurses and Midwives to be the backbone of the public health care system. As such, the ACT ANF considers that adequate consultation with ACT Nurses and Midwives must occur if Option Four is progressed. Genuine consideration to ACT Nurses' and Midwives' concerns and suggestions must be given by the Government, with these professionals playing an active role in the decision-making process. The ACT ANF looks forward to continuing consultative discussion with the ACT Government in regards to this matter and thanks the Committee for the opportunity to contribute to this consultative process.