

1 May 2019

Translation principles for nurse roles

This document sets out:

- The process by which affected employees will transfer from pre-transfer status to post transfer status.
- The translation arrangements are only for identified Hunter Residences employee cohorts.
- The objective of translation principles is to provide transparency and to ensure minimal disruption to employees and operations and to ensure positions are filled quickly and efficiently and advise the outcome as quickly as possible.

Background

On 1st March 2019 FACS made the announcement about the transferring of services to the Non-Government Sector as part of the redevelopment program. As part of this announcement, discussion with our employees and the relevant unions has commenced.

The staffing cohorts within scope of the transfer includes direct Nursing roles to continue to provide direct care to our clients. As the clients transition to new providers, those providers are considering the most appropriate staffing model to support the client needs. These translation principles will assist in identifying the in scope employees who will be issued employment packs for new providers and are therefore expected to be transferring.

As has occurred where FACS has previously redeveloped large residential service sites, the number of direct nursing roles is less in a community based setting where nursing staff work in conjunction with other cohorts to support clients.

Approximately 100 (30%) residents will transition to group homes outside of the broader Hunter geographic area. It is not reasonable or feasible for staff based in the Hunter to commute to these work locations.

All employees in ongoing, temporary or casual roles as Registered Nurses, Enrolled Nurses and Assistants in Nursing have been asked to identify a placement preference based on client cohort and geography. Each Service Group now has a defined list of suburbs, which is located on the final page.

Preferences have been collated and reviewed by FACS to attach staff to service groups. Staff will transfer to a service provider and each SIL will ultimately make decisions as to the actual group home that a staff member will be attached to. The transfer of staff who know and have worked with

residents is key to maintaining the principle of continuity of care and support through a transfer and transition process, where this is operationally possible. Therefore FACS and the SILs will liaise to enable client needs and also staff preferences to be taken into account in making these decisions.

Assignments of staff to preferred locations cannot be guaranteed. Staff assignments will be made noting reasonable travel distances.

There is no change in contracted hours at the point of transfer, meaning that full-time staff transfer to full-time roles and part-time staff transfer to part-time roles at the same contracted hours.

Any agency staff (employed through a labor hire company) are not eligible for transfer.

Process

Process for determining the filling of positions to be transferred to the Non-Government Sector.

1. General

As advised on the nomination form, the continuity of support for the residents is the preeminent factor in consideration of transfer assignment. To maximise the transfer of staff who have knowledge of the transferring clients, information related to where and with whom employees have worked with during the past year, April 2018 to April 2019, will inform transfer decisions.

Where there are too many or too few staff, employees will be identified as in scope for transfer by using the following principles in priority order:

2. Ongoing Employees

All Registered Nurses ongoing will be assigned for transfer to Service Groups 1, 2, 3 or 5.

All Enrolled Nurses will not transfer and will remain employed by FACS and will be managed via the Change Management Plan and process.

The collation of staff preferences and information from the SILs about their needs means that we now know that there is a surplus of Assistant in Nursing employees who are in scope of transfer. The following principles have been applied to guide decisions as to which Assistants in Nursing will or won't transfer as follows:

a) **Client care requirements**

Employees will be selected based on the individual needs of the client cohort and whether they have relevant experience and

knowledge of the residents who will transition to the care of the Supported Independent Living Provider.

- b) If you are an AIN and currently based at Tomaree site you will be assigned to Service Group 1 and will transfer (some staff may have selected an alternate Service Group and their preference will be based on client need outlined below).**
- c) If you are an AIN and currently based at Kanangra site you will be assigned to Service Group 3 or 5 and will transfer.**
- d) If you are an AIN and currently based at Stockton the following will apply**
 - I. If you expressed a preference for Service Group 3 you will be assigned to Service Group 3 and will transfer**
 - II. If you expressed a preference for Service Group 1 approximately 20 Full Time Equivalent (FTE) will transfer to Service Group 1 (selection process will be based on client need outlined below)**
 - III. If you have worked with residents in Service Group 3 and considered within reasonable travel distance approximately an additional 11 FTE, to those identified in point c) above, will transfer to Service Group 3.**
 - IV. Service Group 2 approximately 40 FTE will be selected based on connections to residents aligned to that service group.**

e) Length of service

In cases, where individual(s) are still equal based on the above, then the length of service at FACS will apply.

f) Closest to new provider location

In cases, where individuals are still equal based on the above then the employee who is in the closest proximity of the new provider location from their current home residences will apply.

3. Temporary Employees

To maximise transfer opportunities for ongoing staff, temporary employees in each of the roles will not transfer and will remain FACS employees until temporary contracts are finalized. Where temporary staff are also within the casual pool, a transfer may still occur but as a casual employee.

4. Casual Employees

Casual employees in Registered Nurse and Assistant in Nurse Roles will transfer and be assigned as follows:

- Staff based at Tomaree will be assigned to Service Group 1
- Staff based at Stockton will be assigned to Service Group 1 or 2
- Staff based at Kanangra will be assigned to Service Group 3 or 5.

Transfer numbers

At the end of this process FACS will finalise the transfer numbers and employees will be provided an Employee Information Pack identifying the respective SIL Provider and meetings between assigned staff and the SIL Provider will be organised.

Employees identified as not in scope for transfer will be provided with correspondence advising that their employment remains with FACS and managed through the change management plan.

The employee non-transfer status will not change unless the individual non-transfer employee requests FACS considers their potential inclusion as in scope for transfer. Based on an employee request this would only occur should employees identified as in scope exit FACS employment prior to transfer.

FACS will support employees through Change Management Plan activities and the Managing Excess Employees Policy.

Employees who will be transferring

Employees will transfer to Supported Independent Living Providers aligned to geographical location and client groups. The letter to each staff member will identify the SIL Provider they will transfer to and in separate correspondence FACS will inform the staff member the group home location to which they have been indicatively assigned.

Review process

A Review Committee will be formed and comprise Executive Director Disability Services; Director, Hunter Residences; Nursing Manager. The Executive Director will convene the Review Committee.

Grounds for a review

A review will only occur of the in or out of scope decision, assessing compliance with the process outlined in the Translation Principles at 2a) – 2f). Employees will be required to submit in writing to the Committee, the reasons they consider that the decision as it relates to them is not compliant with the

principles. To request a review, please email Allocations.Disabilityservices@facs.nsw.gov.au with "Review Request – Employee Name" in the title field.

The Review Committee is unable to consider issues related to the Conscientious Objection Process as that is a separate process outlined in the Employee Information Pack.

Service groupings

<p>New Horizons Service Group 1</p>	<p>Anna Bay, Bolwarra Heights, Corlette, East Maitland, Fern Bay, Nelson Bay, Fletcher, Holmesville, Maryland and Raymond Terrace.</p> <p>Outside of the Hunter region they will also service houses for residents on the Far North and Mid North Coast.</p>
<p>Cerebral Palsy Alliance Service Group 2</p>	<p>Cardiff, Kotara, Lambton, Shortland, Stockton and Wallsend.</p> <p>Outside of the Hunter region they will also service houses for residents in The Central Coast, North Sydney and Western Sydney.</p>
<p>The Disability Trust Service Group 3</p>	<p>Belmont, Blacksmiths, Mount Hutton, Bonnells Bay, Charmhaven, Cooranbong and Morisset.</p> <p>Outside of the Hunter region they will also service houses for residents in the Illawarra, South East Sydney and South West Sydney.</p>

Service Group 5 for Kanangra Complex Services (Bonnells Bay and Morisset)