



Health
Hunter New England
Local Health District

HR/IR Presentation

Matt Byrne- HR/IR
Manager

Eve Youman- HR Manager

Who are



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Matthew Byrne

Snr HR/IR Manager



- Bach of Nursing and Bach of Laws (Hons)
- Continuing to work as RN
- Previous NSWNMA- Legal Officer, Organiser.

Eve Youman

HR Manager- Greater Metro



- Bach of Business (Hons)
- Working in various Workforce roles in HNELHD for 19 years
- Previously Snr HR Consultant CYFS, M&G & JHH Outpatients

What will I learn

- Corrective Counselling
- Documentation and File Notes
- Difficult Conversations
- Serious Matters
- Outcomes
- Scenarios
- Where to get help and support



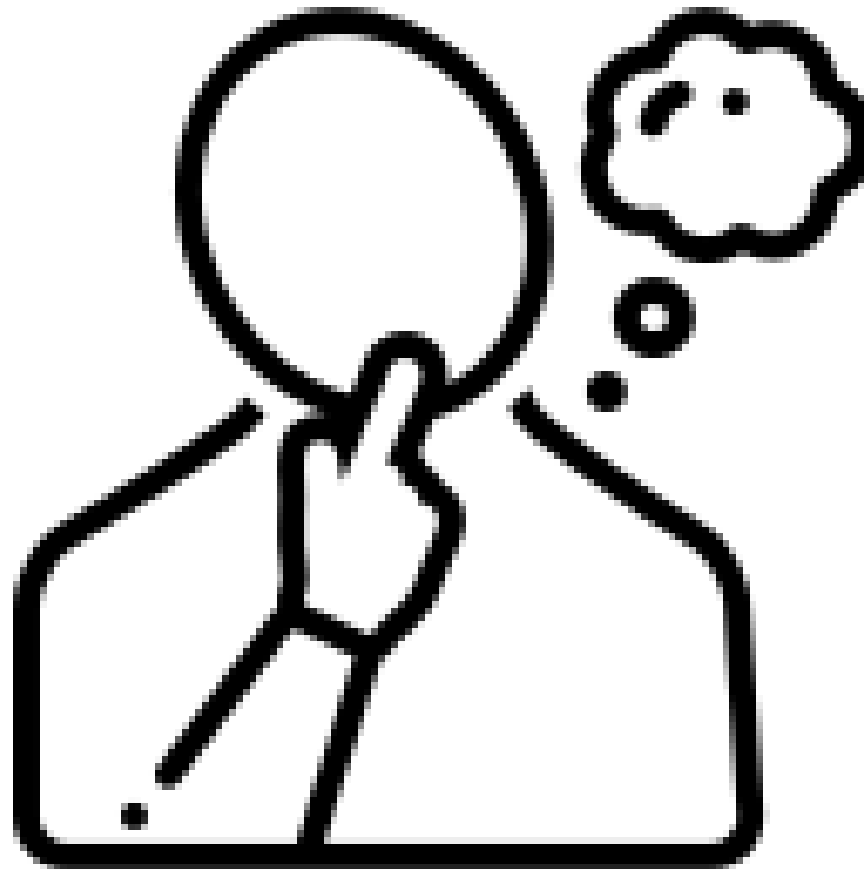
Possible Scenarios

- Coming in late and leaving early
- Reports of Inappropriate discussion and behaviour
- Coming to work not ready to work
- Not carrying out duties as required



Corrective Counselling -

- **Speak to a fellow manager, your manager, HR, etc**
- **What is it, how does it feel, strategies moving forward**
- **Choose the right location and time (for both)**



- **Am I clear about what needs to be actioned?**
- **Do I have all the information needed?**
- **Am I equipped to have the conversation?**
- **Could there be more to the situation?**

- Describe the behaviour/action
 - Ask for the staff members view
 - Explain the impact
 - Detail what would like to occur
 - Be Respectful, Clear and Actionable
 - Ask for the staff member to state the key messages.
 - Other help from other sources (education, online learning etc)
 - Document the conversation
- Avoid a feedback sandwich (positive, Negative, positive)
 - Have the conversation, don't put it off
 - Avoid self-serving statements (you make us look bad)
 - As a group message when it involves one person in particular.

Documentation, Documentation, Documentation



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HOW

- **Intranet Form-Record of Discussion**
- **An email or word document**

WHAT TO INCLUDE

- **Dates**
- **Who is involved in the conversation**
- **What was discussed**
- **What were the points of agreement**
- **What was not agreed**
- **What was the outcome**

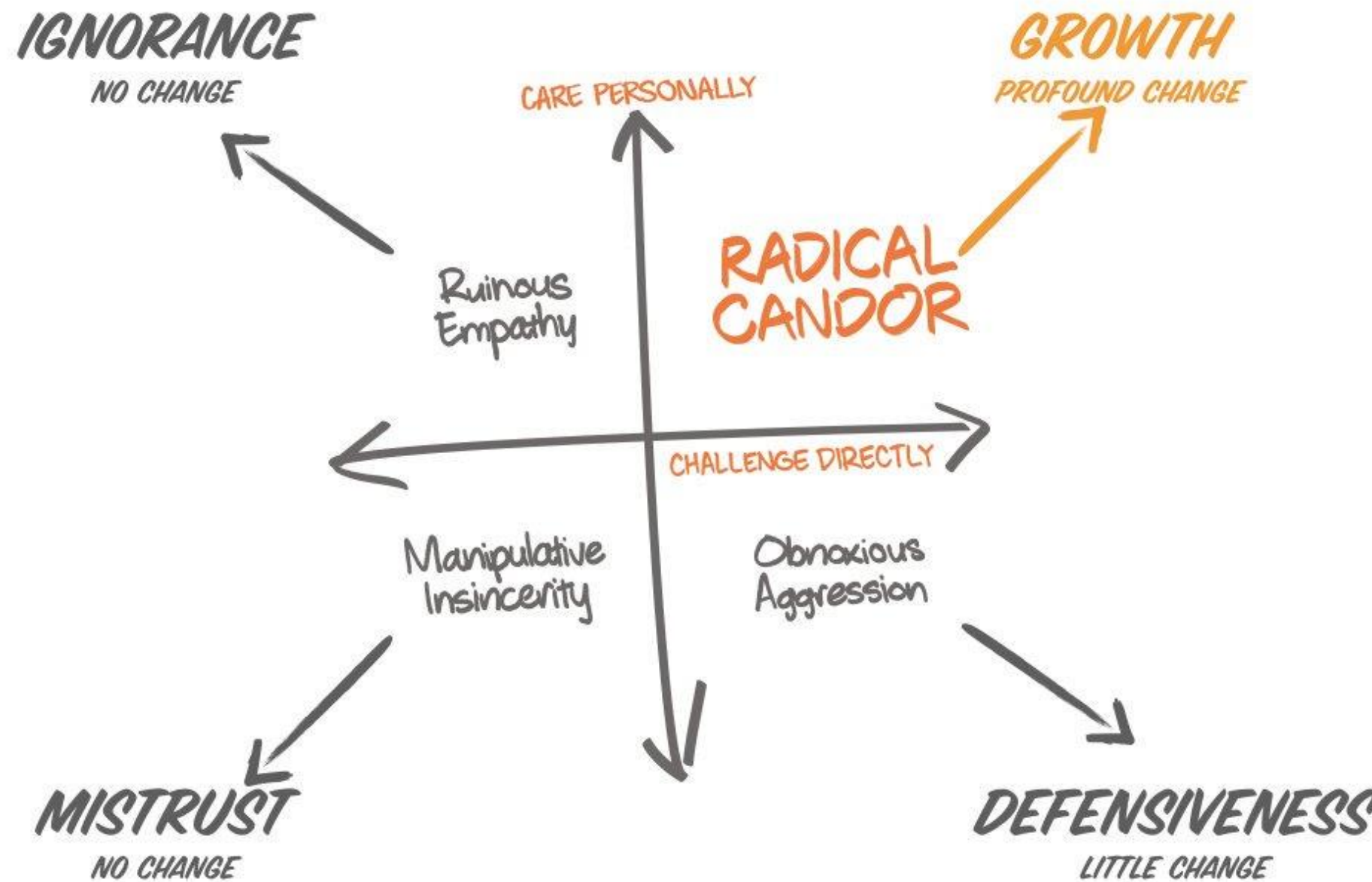
WHAT NEXT

- **Are there any next steps**
- **Do you need to send it or save it?**

Difficult Conversations- Radical Candor



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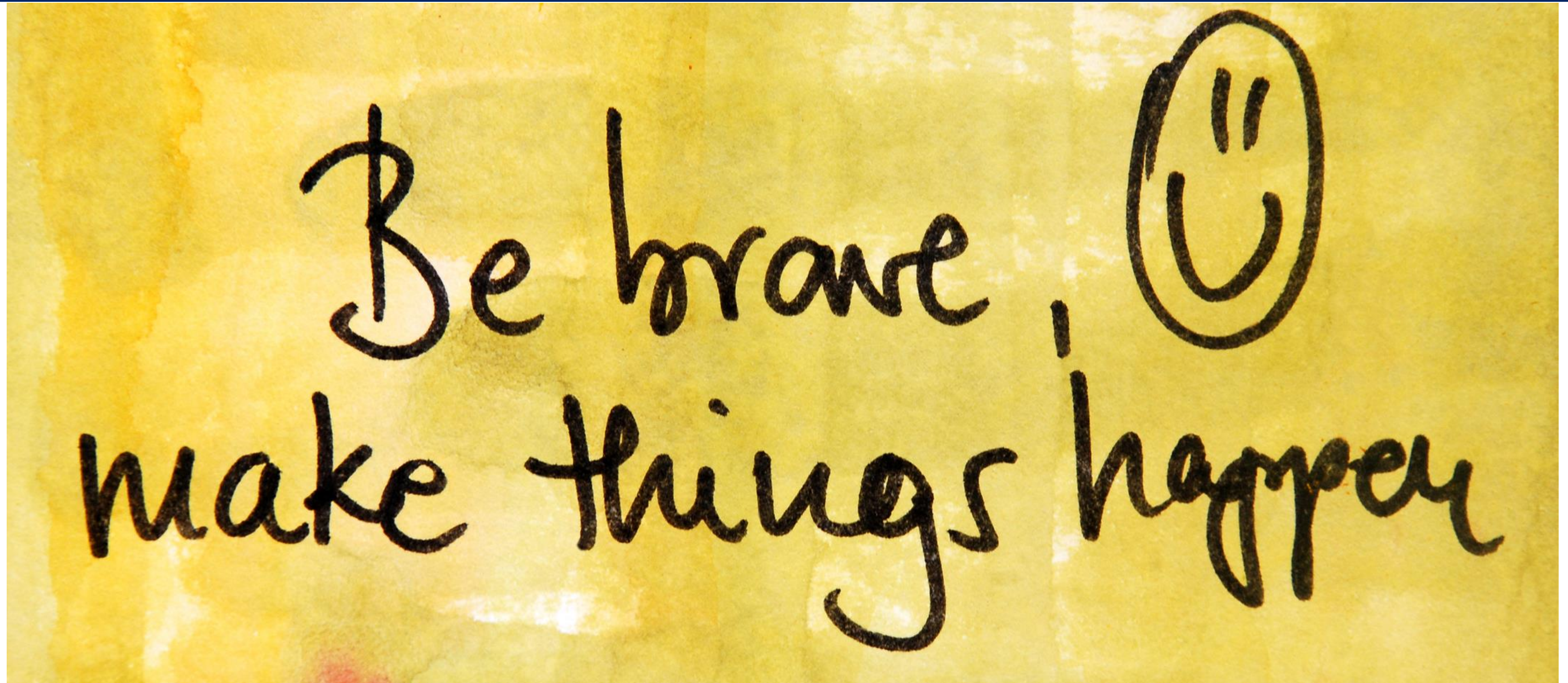
Radical candor is best defined as the ability to challenge directly while showing that you care personally at the same time.

Kim Scott

Difficult

- **Don't avoid the conversation**
- **Work on you first**
- **Confront with care, safety and respect**
- **Stay focused (don't be distracted or waffle), one problem at a time**
- **Be flexible**
- **Focus on outcomes and actions**
- **Know when to end the conversation**
- **Follow up and ensure you follow through on agreements**

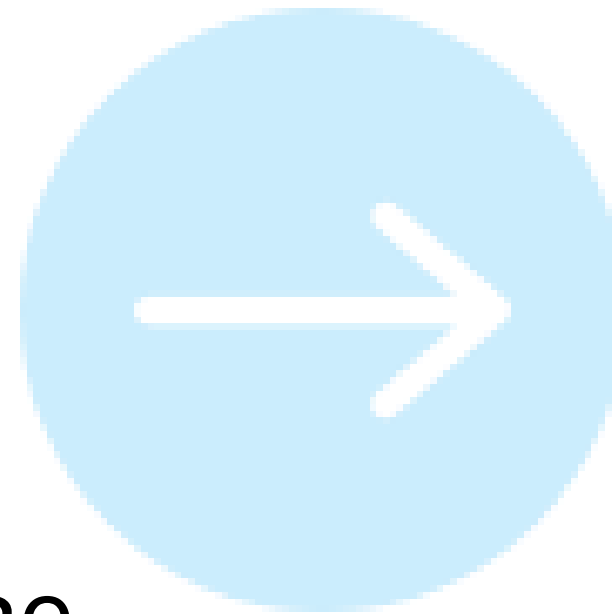




Serious

Possible Scenarios

- s8 medications
- Inappropriate sexual behaviours
- Inappropriate behaviours towards patients
- Affected presentation in the workplace
- Grievance/Complaint
- Bullying & Harassment



Next Steps

- Risk Assessment (Suspension/Alternate duties)
- Timeline/Documentation
- ISBAR
- Investigation (Managing misconduct or MCCC)
- Interviews
- Checking in on welfare and timeframes to manage expectations

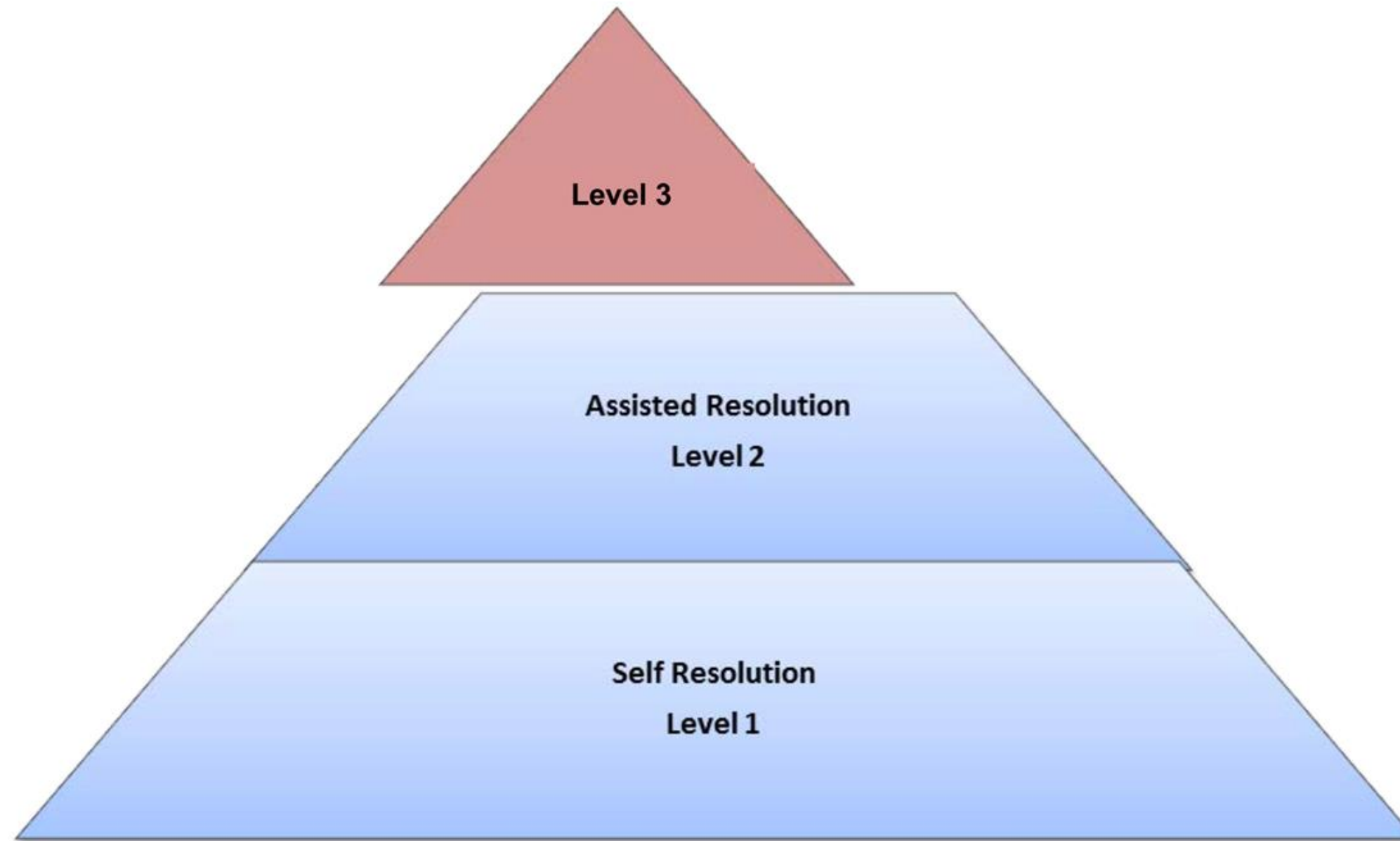
Outcome

- Manager and ELT Consideration of
 - corrective counselling
 - formal disciplinary action
 - Termination
 - Reporting to External Agencies
 - AHPRA, ICAC, HCCC
 - N&MC, Medical Council, etc
 - Retaining on SCR
 - Unfair Dismissal, IRC



- Resolving Workplace Grievances
PD2016_046 ideally!?!?
- If unresolved
- Complainant -v- Respondent -v- You
- File notes & Off-the-record discussions





Workplace Grievance Resolution Model

Your role



- Are you Switzerland?
- Confidentiality;
- Procedural Fairness;
- Speak to all those identified by either party as having information relevant to the issue.
- Include appropriate documentation & ensure its security.

Scenario 2-Missing Drugs



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- Managing Misconduct PD2014_042
- NSW Health Code of Conduct PD2015_01049

Considerations...

- Forensic process of investigation;
- Sensitive to registrants under investigation;
- Your reporting obligations



If you detect the loss of an S8:

Step 1. Records the actual physical stock balance in the accountable drug register along with a witness.

Step 2. Reports loss to nurse or midwife in charge.

Nurse or midwife in charge responsibilities:

Step 3. Performs initial investigation, checking the drug register for calculation errors etc.

Step 4. Records findings in IMS+

Step 5. Reports NUM/MUM – DON - Director of Pharmacy.

DON (or delegate) and Director of Pharmacy:

Step 6. Investigating the loss of accountable medications.

Step 7. Reporting the loss to Ministry of Health via the [Notification of Loss or Theft of Accountable Drugs](#) form

Missing Drugs - Key Contacts



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For the Investigation/Audit ...

Kirstin Berry

Medication Safety and Quality Manager - District Pharmacy Services, HNELHD

Cherie Williams

Director Internal Audit & Corporate Governance, HNELHD

For the Registrant ...

Jacqui Brown

Manager Employee Assistance Program, HNELHD

Annmaree Nicholls

Manager Health Pathway, Nursing & Midwifery Council of NSW

Where to get help



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- **The Intranet**
- **Sign up for free HR articles**
- **Podcasts**
- **Find a management mentor**
- **Find a management buddy**
- **Call HR**
- **Talk to your manager**
- **My Health Learning courses**

