



**ST VINCENT'S
HOSPITAL**
MELBOURNE



POSITION DESCRIPTION

Position Title:	Project Manager / Coordinator East Metro and Murrindindi Local Health Service Network
Award Classification:	HS8
Award / Agreement Name:	Victorian Public Health Sector (Health Professionals, Health and Allied Services, Managers & Administrative Officers) Multiple Enterprise Agreement 2021 - 2025
Position Reports to:	Chief Executive Governance committee through Eastern Health Chief Executive

East Metro and Murrindindi Local Health Service Network

In 2023, an independent Expert Advisory Committee was established by the Department of Health to consider how to improve access and equity of our health services for all Victorians. The Committee consulted with health service and sector leaders and found that although we have a world-class health services system with a committed and excellent workforce, like health systems across the world, it is under increasing strain and there is a need to deliver better, more connected care.

Overall, the Committee found that the system was often disconnected and hard to navigate, access to services was inequitable, and resources were sometimes insufficiently focused on patient care due to duplication and administrative inefficiencies. To provide solutions, the Committee developed the Health Services Plan.

The Health Services Plan recommended more collaboration and connection between health services by creating Local Health Service Networks.

The Local Health Service Networks LHSNs will group health services within a geographical region and will be responsible for delivering better care, as close to home as possible.

The Networks will enable health services to work better together to deliver more accessible, higher quality care for Victorians. This may include coordinating clinical services and attracting and retaining the right workforce.

The Networks will aim to deliver:

- A system that is easier to navigate, with more consistent pathways between hospitals
- Better and more consistent support for our precious health workforce
- Less duplication of administration, so that our hospitals can focus on what they do best - caring for patients

Each health service will keep its name, local leadership, identity and connection to its community – while working together in a network to provide greater access to services, closer to home.

The LHSNs will deliver stronger referral pathways that enable specialties to share expertise across the region. In addition, to support better access to high complexity care and expertise, each LHSN will establish a formal relationship with a tertiary, a women's and a children's hospital so that patients can more easily and quickly access specialist care when they need it.

Final LHSN groupings were determined following extensive consultation with health services, guided by principles drawn from the Health Services Plan.

ALEXANDRA DISTRICT HOSPITAL

Alexandra District Health delivers a broad range of health care and community services for individuals and families in its local community and the broader Murrindindi Shire.

We provide inpatient care for both medical and surgical patients. Day and overnight surgical services are supported by visiting specialist surgeons and specialist anaesthetists. Patients can be transferred to Alexandra District Health to continue their care following surgery or medical care in Melbourne or other Regional hospitals.

EASTERN HEALTH

Eastern Health is one of Melbourne's largest metropolitan public health services. We provide a comprehensive range of high quality acute, sub-acute, palliative care, mental health, drug and alcohol, residential care, community health and statewide services to people and communities that are diverse in culture, age and socio-economic status, population and healthcare needs.

Eastern Health is the fund holder and employer for the core roles within the East Metro and Murrindindi Local Health Service Network (EMM LHSN)

ST VINCENTS HOSPITAL MELBOURNE

St Vincent's Hospital Melbourne (SVHM) is a leading teaching, research and tertiary health service, which employs more than 7,500 staff across 16 sites throughout Melbourne, the home of the Wurundjeri people. Part of Australia's largest not-for-profit Catholic health and aged care network, St Vincent's Health Australia, SVHM provides a diverse range of adult clinical services including acute medical and surgical services, sub-acute care, medical diagnostics, rehabilitation, allied health, mental health, palliative care, correctional health and community residential care. SVHM's mission is to provide high quality and efficient health services to the people of Victoria in accordance with the philosophy of St Vincent's Health Australia.

YEA & DISTRICT MEMORIAL HOSPITAL

Yea & District Memorial Hospital (YDMH) is a vibrant and compassionate health service located north of the Yarra Valley in the beautiful rolling green hills of Yea.

With a 24-hour Urgent Care Centre, 10 bed acute ward, a 25-bed Aged Care facility and a Community Health Centre, YDMH is committed to providing quality health care to the local community through the provision of high quality health services.

YDMH has a broad community reach servicing a population of approximately 6,892 from the communities of Yea, Glenburn, Kinglake, Flowerdale and surrounds.

1. POSITION PURPOSE

The Project Manager / Coordinator will serve a pivotal role in the coordination of activities across the EMM LHSN as the networks moves towards and into formal commencement from 1 July 2025. The primary objectives of this role are:

PROJECT MANAGEMENT:

- Support each member of the EMM LHSN to deliver against the short term goals and deliverables.
- Develop a project management plan to oversee the various aspects of the short term and ongoing role of the LHSN.
- Lead and manage the project to ensure timelines are met, issues and risks are identified and appropriately managed, costs are within budget, scope is managed, and deliverables are of a high quality and meet expectations.
- Escalate appropriately out of tolerance risks, scope, time and budget changes. Tolerances will be approved by the relevant governance committees.
- Utilise appropriate project management tools to support tracking of project progress and achievement of milestones and deliverables with consideration of the requirements of the Program Management Office including preparing detailed project GANTT charts, status reports, risk and issues registers etc.
- Prepare, maintain and report project budgets.
- Develop and provide reports to the relevant governance committees as required.
- Manage potential scope changes to project to achieve the best outcome based on the project objectives and organisational requirements in accordance with delegations of authority.
- Oversee workflow mapping of current and future state workflows.
- Formulate and validate training plans and facilitate the implementation. Ensure that the training plan develops a sustainable training model for post project training.
- Prepare implementation plan with key stakeholders and ensure approval from relevant governance committees.
- Formulate and implement a go-live and post go-live support plan.
- Ensure appropriate quality mechanisms exist and are utilised to enable the achievement of expected outcomes and that appropriate processes are followed.
- Ensure post project evaluations and assessments are undertaken to define lessons learnt and successes.

ENGAGEMENT

- Engage with relevant leaders and teams across LHSN organisations to ensure project support, commitment and involvement.
- Work closely with clinical and business managers in the delivery of projects to ensure their needs are recognised and they are appropriately informed and involved.
- Work collaboratively with other people and teams to ensure that dependencies are managed.
- Establish and coordinate any required functional and technical working groups.
- Constantly monitor and report on progress of the project to all stakeholders.
- Actively work with key stakeholders regarding the 'business as usual' arrangements and requirements including resourcing and allocation of responsibility.
- Assist with the change management required across the organisation to achieve the greatest benefit from the new system/workflows/initiatives as well as controlling the potential impact of the change.
- Develop and deliver an effective Communication Plan and Change Management process.
- Identify and involve key stakeholders in projects as appropriate.

2. SAFE PRACTICE AND ENVIRONMENT

Occupational Health and Safety

Eastern Health is committed to provide and maintain a working environment for all staff that is safe and without risk to health. All staff are to take care of their own health and safety and the health and safety of any other person who may be affected by your acts or omissions at the workplace. Understand responsibilities and accountabilities to yourself and others in accordance with OH&S legislation and Eastern Health policies and promote a working environment that is congruent with these guidelines. This includes staff reporting of all clinical and OHS incidents and near misses, in particular those related to Occupational Violence, Manual Handling and Slips, trips and falls.

Staff are required to comply with all state legislative requirements in respect to the Occupational Health and Safety Act 2004 and the Workplace Injury Rehabilitation and Compensation (WIRC) Act 2013.

3. TRAINING AND DEVELOPMENT

Relevant, practical and timely education should direct, facilitate, enhance and support the professional growth and practice of employees in a health environment characterised by change. All programs should endeavour to promote evidence-based practice, a problem solving approach and to be competency based.

You are expected to participate in the personal development process on an annual basis.

4. QUALITY

As a staff member of Eastern Health staff are required to comply with Eastern Health performance standards and participate in continuous monitoring and improvement as part of your role. You are also required to comply with legislation, professional standards and accreditation standards.

As a staff member employed by Eastern Health services you must have and maintain the appropriate skills and knowledge required to fulfil your role and responsibilities within the organisation. In addition, you must ensure that you practice within the specifications of this position description, and where applicable within the agreed scope of practice.

You are responsible for ensuring safe high quality care in your work. This will include complying with best practice standards, identifying and reporting any variance to expected standards and minimising the risk of adverse outcomes and patient harm. In addition, you will ensure that service and care is consistent with the Eastern Health approach to patient and family centered care.

5. CONFIDENTIALITY

Any information obtained in the course of employment is confidential and should not be used for any purpose other than the performance of the duties for which the person was employed. Staff are bound by the Information Privacy Act 2000 and the Health Records Act 2001.

6. EQUAL EMPLOYMENT OPPORTUNITY

You agree to adhere to the Equal Employment Opportunity policies and practices of the Health Service. Discriminatory practices, including sexual harassment, are unlawful. The Health Service will not tolerate discriminatory behaviour and any such conduct may lead to the invoking of the Disciplinary Policy and Procedure, which may result in termination of employment.

7. PERFORMANCE DEVELOPMENT

A Performance Review, that includes agreed targets, will occur three (3) months from commencement and then annually on the basis of the duties and responsibilities outlined in this position description. This is an opportunity to review personal and the allocated work unit's service performance, facilitated by the setting of objectives/goals and ongoing evaluation of performance and achievement. Objectives will be developed annually, documented, discussed and agreed with the immediate line manager, who will act as the assessor. The incumbent is expected to demonstrate and show evidence annually of on-going self and allocated work unit's service development.

8. EASTERN HEALTH'S PROMISE (as employer)

Our promise to our communities, patients, consumers and staff is that we will be HEALTHIER TOGETHER. Bolder than a vision for the future, our promise calls us to action. We know that working together is the only way we can achieve what is necessary for a healthier future.

Our values are ones in action and are the behaviours that matter most.

- Respect for all
- Safe always
- Partnering in care
- Learning and improving every day.

Learning from the challenges of the past and looking to the future, we understand that we are building towards a more engaged, more reliable, always safe health service in partnership with our people to improve every day.

9. ATTACHMENTS

- Attachment 1 Key Selection Criteria

10. NOTE

Statements included in this position description are intended to reflect in general the duties and responsibilities of this position and are not to be interpreted as being all-inclusive.

Prior to accepting any offer of employment, prospective employees will be required to read and commit to the Eastern Health Code of Conduct, including (but not limited to) issues of Occupational Health and Safety, Equal Opportunity and Confidentiality.

Vaccination against infectious disease is a mandatory requirement of this role. An offer of employment is conditional on you providing evidence that you are currently vaccinated against COVID-19, prior to commencing employment.

Signed: _____

Date: ____/____/____

Manager

INCUMBENT STATEMENT

I _____ (Incumbent Name) have read, understood and accepted the above Position Description and associated Attachments.

Signed: _____

Date: ____/____/____

ATTACHMENT 1

KEY SELECTION CRITERIA

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Essential

Skills

- Essential:
 - Demonstrated project management skills
 - Excellent understanding of the provision of health services both in a hospital and primary care environment
 - Demonstrated ability to consult and collaborate with others and work as an effective member of a team to deliver desired outcomes
 - Proven track record in achieving objectives within a complex organisation and tight time frame
 - Excellent communication and presentation skills, both written and verbal
 - Excellent interpersonal skills
 - Demonstrated success in negotiation.

Qualifications/Experience

- Experience in a senior leadership role
- Qualifications and/or experience in a relevant field.

Desirable

- Demonstrated high-level analytical skills
- Health industry background.

Aboriginal & Torres Strait Islander Candidates

Eastern Health's Aboriginal Workforce Plan 2023 – 2026 was released in February 2023. With a strong focus on cultural safety and belonging, actions included in the Workforce Plan provide practical supports for all Aboriginal and/or Torres Strait Islander staff.

An Aboriginal Employment Coordinator is available to ensure each person has culturally safe and positive employee experiences which foster belonging and access to diverse experiences and career pathways. Should you require further information regarding this position or support to complete an application, please contact the Recruitment Manager for this position or Eastern Health's Aboriginal Employment Coordinator at Aboriginal.Workforce@easternhealth.org.au.

Appendix

Local Health Service Networks Information

All Networks will deliver initiatives consistent with the following objectives:

- **access, equity and flow:** connected high-quality care is easy to navigate and provided equitably along logical pathways, with seamless transfers of care, across all care provided by health services, including community health, acute and residential aged care.
- **workforce:** a skilled and diverse clinical and non-clinical workforce continues to be attracted and retained, supported by teaching, training, research and collaboration across the sector.
- **safety and quality:** Networks foster more robust management of safety, quality and risk and support continuous improvements to clinical service delivery. For example, Networks could identify, design and implement shared clinical governance arrangements such as joint morbidity and mortality meetings or credentialing processes.
- **shared services:** duplication is reduced to deliver value for the people we serve and unnecessary administration for our staff through ensuring better use of current resources, and minimising unnecessary duplication.

Common Network initiatives

The department will set mandatory common initiatives to be implemented by all Networks, aligned with the objectives under each priority area. Further information about the common initiatives will be provided prior to Network establishment. Subject to budget outcomes, these are expected to include:

Access, equity and flow

- Network-level clinical service planning: for Networks where a Health Service Partnership regional clinical service plan has been developed with the Department within the past three years, this will involve updating and agreeing the plan to align with your Network geography and membership.
- Step up and down models to better utilise existing bed capacity.
- Continued implementation of the residential in-reach program to reduce avoidable admissions for people in aged care (currently being delivered through HSPs, with funding to continue in 2025-26).

Workforce

- Network workforce plans, including consideration of workforce attraction and retention programs to address shortages and maldistribution, including but not limited to networked employment models and skills maintenance.
- Collation and sharing of workforce data to enable identification and management of workforce trends in each Network.

Safety and quality

- Continued implementation and scaling of the Safer Together Program (currently being delivered through HSPs, with funding to continue in 2025-26).
- Work to ensure that all health services have more consistent and robust clinical governance frameworks that align with the Victorian Clinical Governance Framework, with a long-term aim to have a shared Network-wide clinical governance framework
- Establish clinical governance to support step-up and step-down models across health services and the Network
- Current state analysis of the Network's clinical governance maturity, using tools to be provided by SCV.

Hospitals Victoria will also be providing further advice on the approach to back-office efficiencies, including shared services, beyond the types of initiatives that Networks may easily progress on their own.

Early Network initiatives

In addition to the common initiatives, each Network is asked to agree on three early initiatives for each of the four Network priority areas. Early initiatives should deliver concrete benefits for patients, workforce and communities, while being relatively straightforward to implement. Initiatives should build on, and not disrupt, partnering in your region, leveraging existing momentum and expertise.

Initiatives should be identified under the assumption that Networks have planning and coordination resources of a comparable scale to HSP establishment funding. Final Network resourcing will be confirmed following announcement of the 2025-26 State Budget.

The department expects that Networks will identify longer-term initiatives through their 3-year Network strategy and clinical service planning process. The department will support Networks by providing data for your region to inform these planning processes.

Collaborative arrangements

Networks have flexibility to decide the design of their own collaborative arrangements, within certain parameters set by the department. Your collaborative arrangement must include a clear position on the following design features:

- Committee structure, including mechanisms to ensure all CEOs and board chairs of all member health services are adequately engaged or represented.
- Chairing arrangements for Networks with more than two health services, noting that the chair's role is to convene Network meetings and liaise between the Network and department, including for any statewide Network forums.
- Decision making processes, noting that the goal should be to reach consensus wherever possible, with the Network advising its preferred decision-making arrangements and escalation processes in case consensus cannot be reached.
- Core resourcing and staffing arrangements, noting that, subject to budget outcomes, it is expected that all Networks comprising multiple health services would engage an executive lead and support staff to coordinate Network activities. A single health service should be nominated to hold core Network funding and employ staff on behalf of the Network. Individual project funding may be allocated to alternative health services and these arrangements can be decided at a later point. All Networks will require mechanisms to ensure transparency of budgeting, decision-making, allocation and spending of Network funding.

Networks are not being requested to decide their preferred underpinning agreement at this time. All Networks will be required to have underpinning agreements that are at least as robust as their existing HSP arrangements, with a Memorandum of Understanding at a minimum. Networks have the flexibility to decide if they wish to adopt more formal approaches, such as an unincorporated Joint Venture Agreement.

The department appreciates that it may take Networks some time to determine their preferred underpinning agreement, given the potential legal considerations and need to consider how existing arrangements can be strengthened. The department expects that each Network should reach a consensus view on the form of its underpinning agreement and finalise this agreement by the end of 2025.

Networks may wish to include other stakeholders as affiliate members, such as Primary Health Networks, community health or Aboriginal Community Controlled Health Organisations. However, this is optional at this time and additional members may be added later as Networks mature, noting that integration across acute and primary care is a longer-term objective for Networks.

Networks do not need to decide on subnetworks at this time. Subnetwork arrangements will be a decision for individual Networks once they are established, and will be subordinate to Networks. Networks are not expected or required to have subnetworks, but can be established where needed.

Networks also do not need to decide on their approach to engaging consumers at this time. Network arrangements will ultimately need to include mechanisms to incorporate consumer voice in alignment with the Victorian Partnering in Healthcare framework. The department will ask Networks to engage with consumers and consumer advisory committees to help design the appropriate approach for their Network.

The department acknowledges that Networks will change and mature over time. Networks will therefore have the opportunity to review and update their collaborative arrangements 12 months after establishment, with opportunities for collaborative arrangements to evolve.