



**St John**

# **Emergency Stream Transformation**

**All Stream Session**

28 May 2024



# Agenda

- Acknowledgement of country
- Housekeeping
- St John Values
- Program background
- Feedback received
- Design principles
- Proposed structure:
  - State Control and Logistics
  - Clinical and Operational Excellence
  - Ambulance Operations
  - Medical Director
  - Patient and Community Transport Services
- Implementation
- Next steps





# Program background

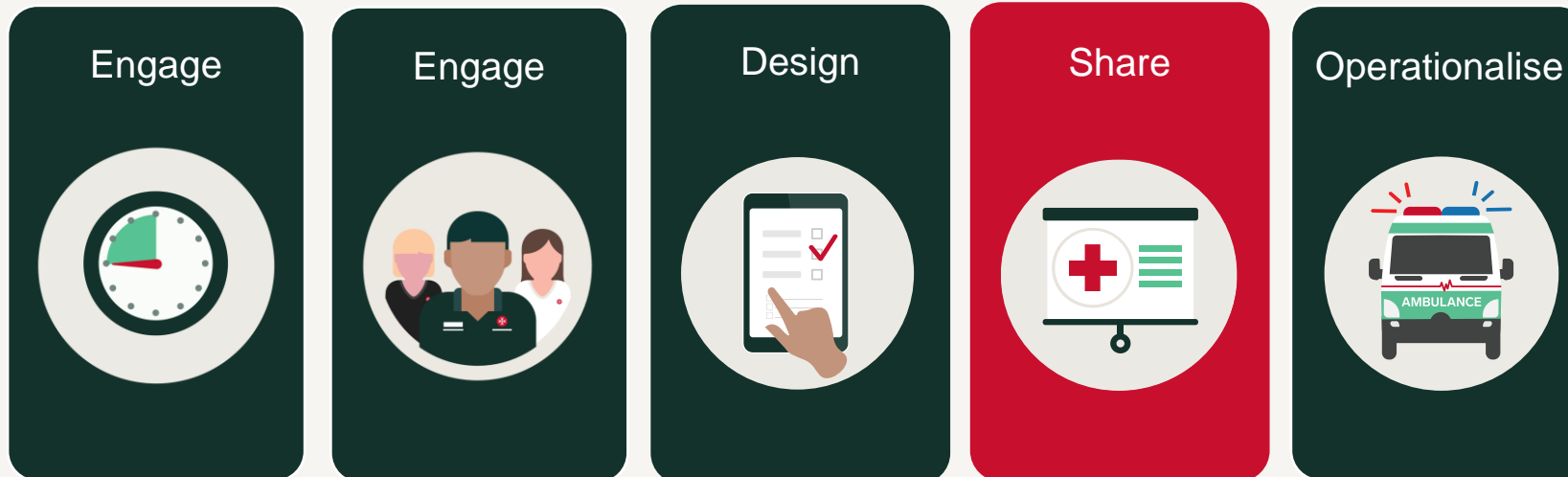


# Transformation Background

## Program purpose:

- Create a structure that supports a high performing team.
- Strengthen the connection between frontline team members and leadership.

## Approach:





# Feedback and design principles



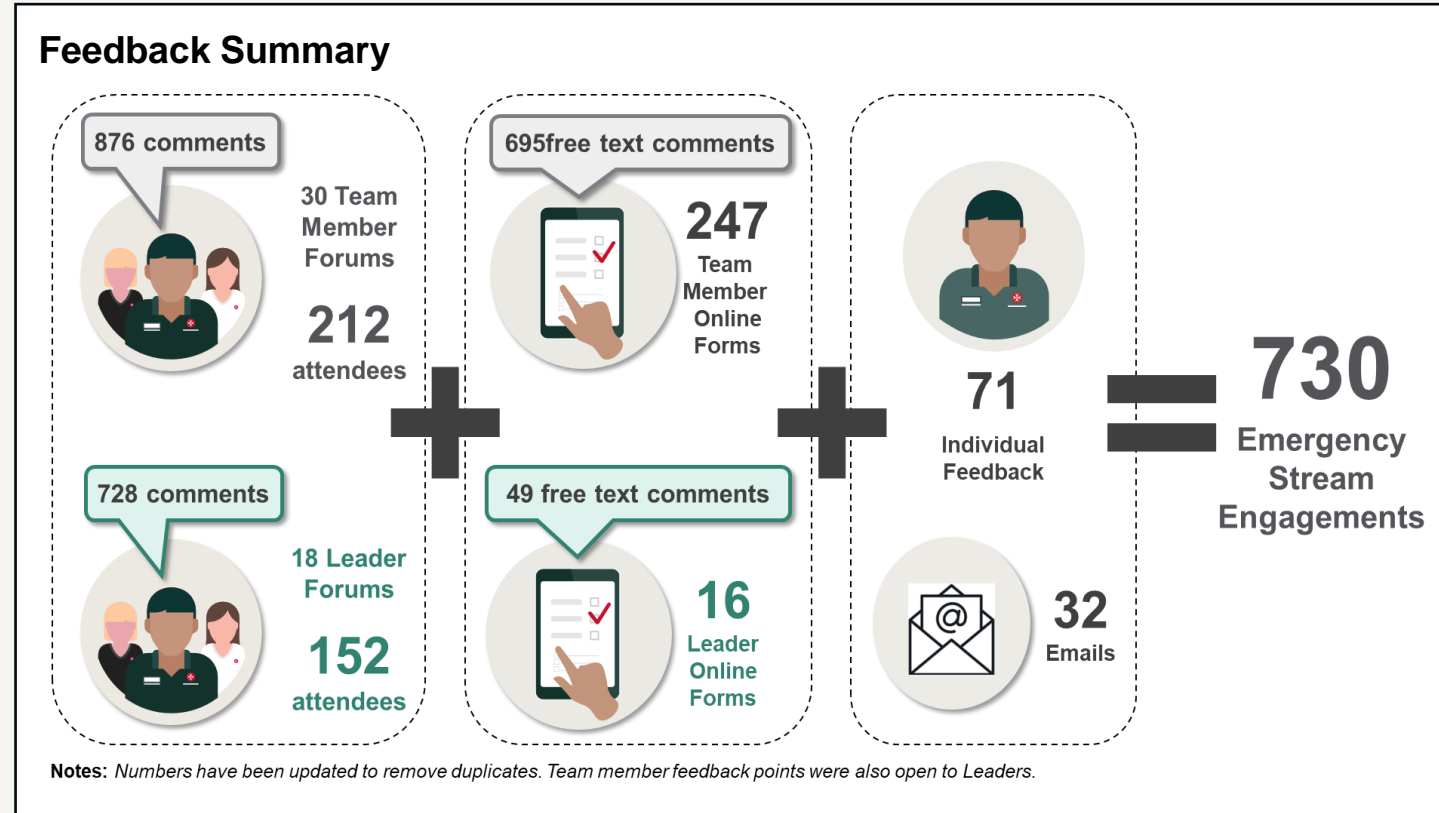
# Feedback approach

## Guidance was derived from:

- Recommendations outlined in the Parliamentary Inquiry
- Ambulance Service Agreement Key Performance Indicators; and
- Consideration of external stakeholder leadership models.

## Team members were engaged through:

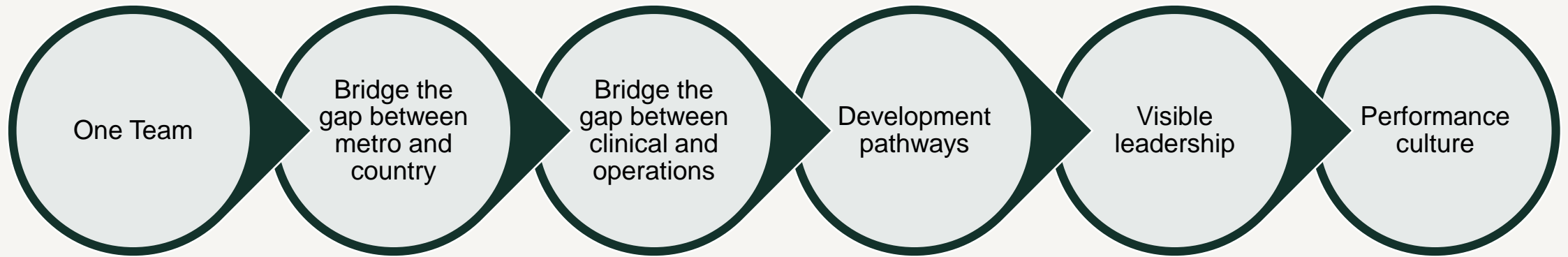
- Feedback forums held throughout February and March
- An online feedback tool
- One-on-one meetings
- Individual feedback from team members
- Culture survey feedback





# Design principles

Outcomes from the Parliamentary Inquiry and analysis into the Feedback captured from the workforce suggested a clear set of design principles which the structure has been designed to address.



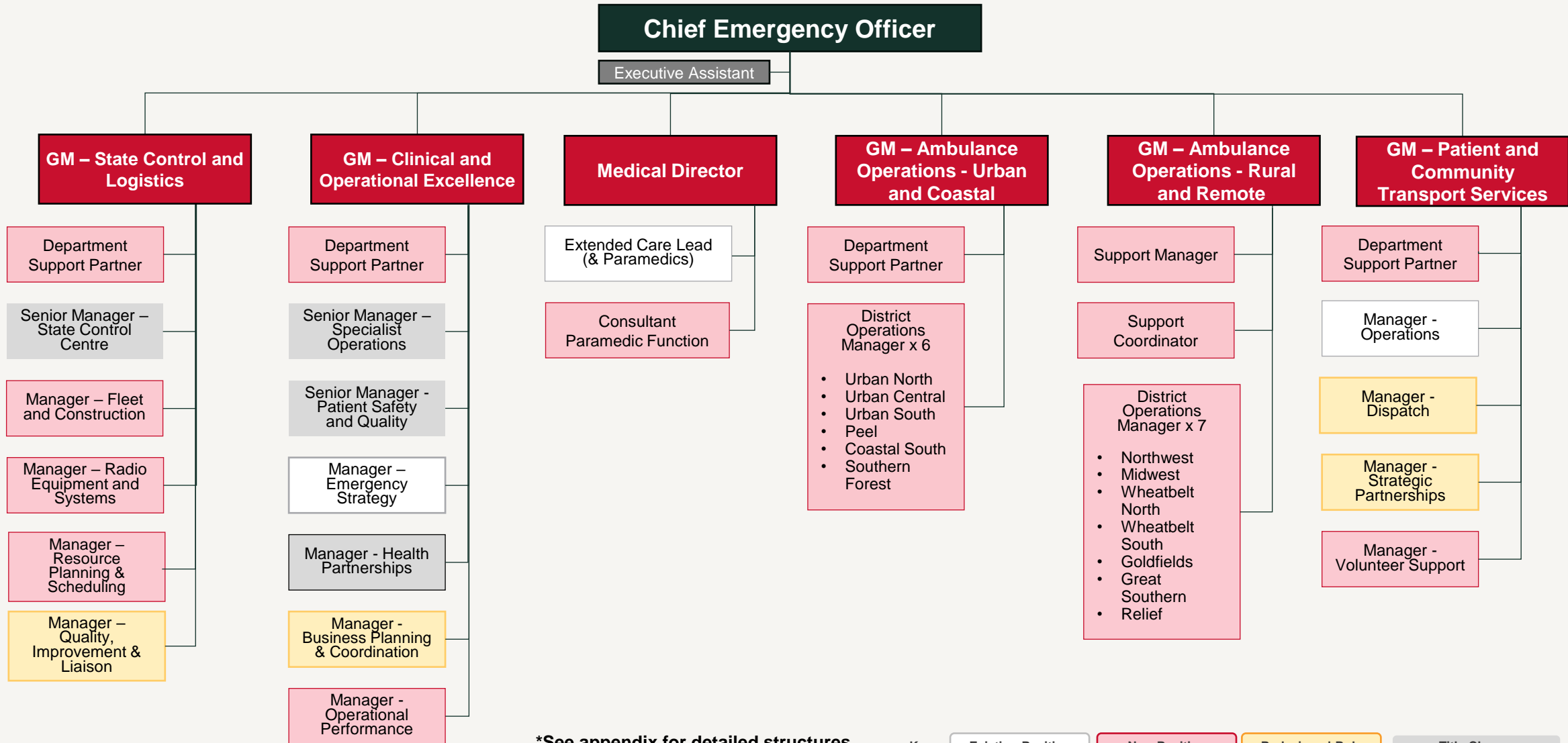


# Proposed structure & design





# Proposed Emergency Stream Structure (Levels 1 – 3)



\*See appendix for detailed structures.

Key:

Existing Position

New Position

Redesigned Role

Title Change



# Proposed district boundaries: Urban & Coastal and Rural & Remote

## Urban and Coastal:

- Six districts
- Includes current Metro area plus current Southwest and Bullsbrook

## Rural & Remote:

- Six districts
- Recognising Wheatbelt scale

## Patient & Community Transport:

- Geographic span to include Southwest

## Key notes:

- Boundaries are for people leadership.
- Definitions of Metro and Country are not changing in the Enterprise Agreement conditions or the Ambulance Services Agreement delivery.





# Twelve districts

**Boundaries are for people leadership:** District Operations Managers have been distributed across proposed district boundaries according to span of control, case load, case nature and forecast population growth.

## Urban and Coastal Operations:

District Operations Manager Distribution	Total # team members
Urban North	323
Urban Central	397
Urban South	261
Peel	256
Coastal South	434
Southern Forest	252

## Rural and Remote Operations:

District Operations Manager Distribution	Total # team members
Northwest	425
Midwest	425
Wheatbelt North	618
Wheatbelt South	416
Great Southern	528
Goldfields	294



# State Control and Logistics



# Summary of changes

**Enhanced emphasis on operational coordination by ensuring that each role has the necessary resources and capacity to efficiently support the service demands of frontline team members.**

## **Key changes:**

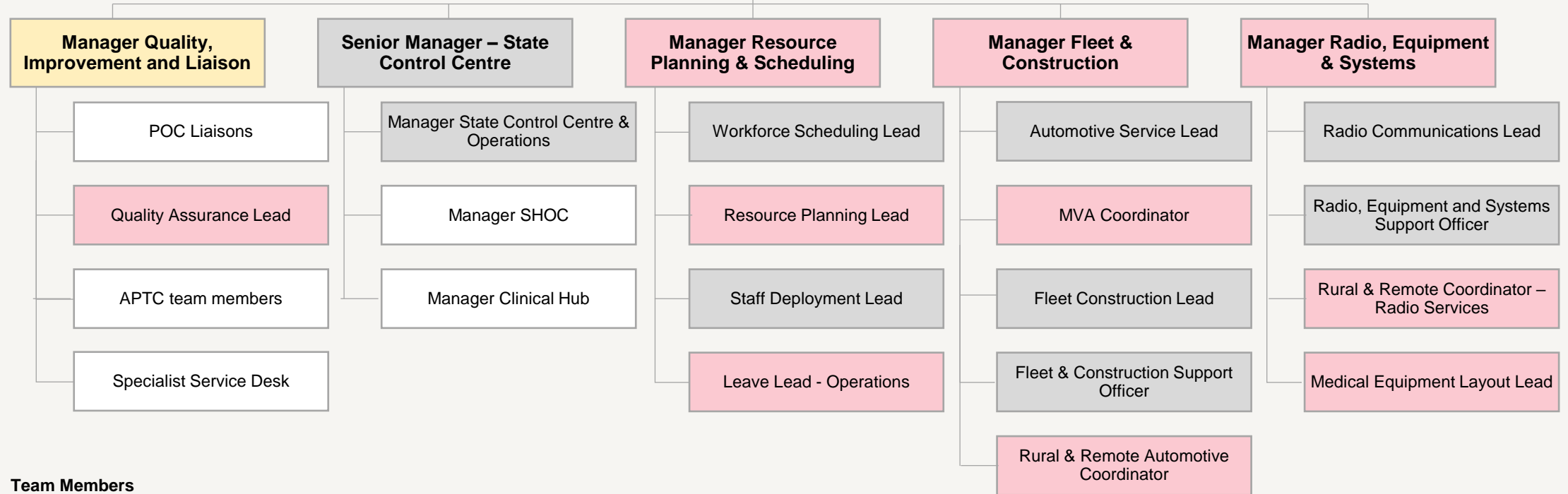
1. Creating clear lines of people leadership and shift leadership with the introduction of Shift Supervisors and a State Operations Manager.
  - Shift Supervisors will provide day-to-day leadership and ensure daily KPIs are achieved and a high standard of delivery.
  - Manager State Operations will be responsible for the operations, service delivery, management and coordination of the Statewide ambulance service.
2. Fleet & Radio will have two Manager roles and additional positions across Fleet and Construction and Radio, Equipment and Systems.
3. Resource Planning & Scheduling team see's the creation of a new Manager position with increased scope and additional position including a dedicated team for leave.
4. Clinical Support Paramedics (CSP) within SOC will remain a vital role and report directly into the State Control Centre team.



# State Control and Logistics

GM State Control and Logistics

State Control and Logistics Support Partner



## Team Members

- Quality Assurance Officer
- Shift Development Officers
- Clinical Nurse Specialists
- Emergency Dispatch Quality Specialists

- SOC Systems Specialist
- Shift Supervisors
- Managers – State Control Operations
- Clinical Pathways Coordinators
- Waved Systems Manager
- Country / Metro Leads SCC
- Country / Metro dispatch
- ANC
- Clinical Hub Staff
- Waved Navigator
- Clinical Support Coordinator

- Resource Planning Admin Officer
- Staff Deployment Officers
- Workforce Scheduling Officer
- Leave Officer – Operations

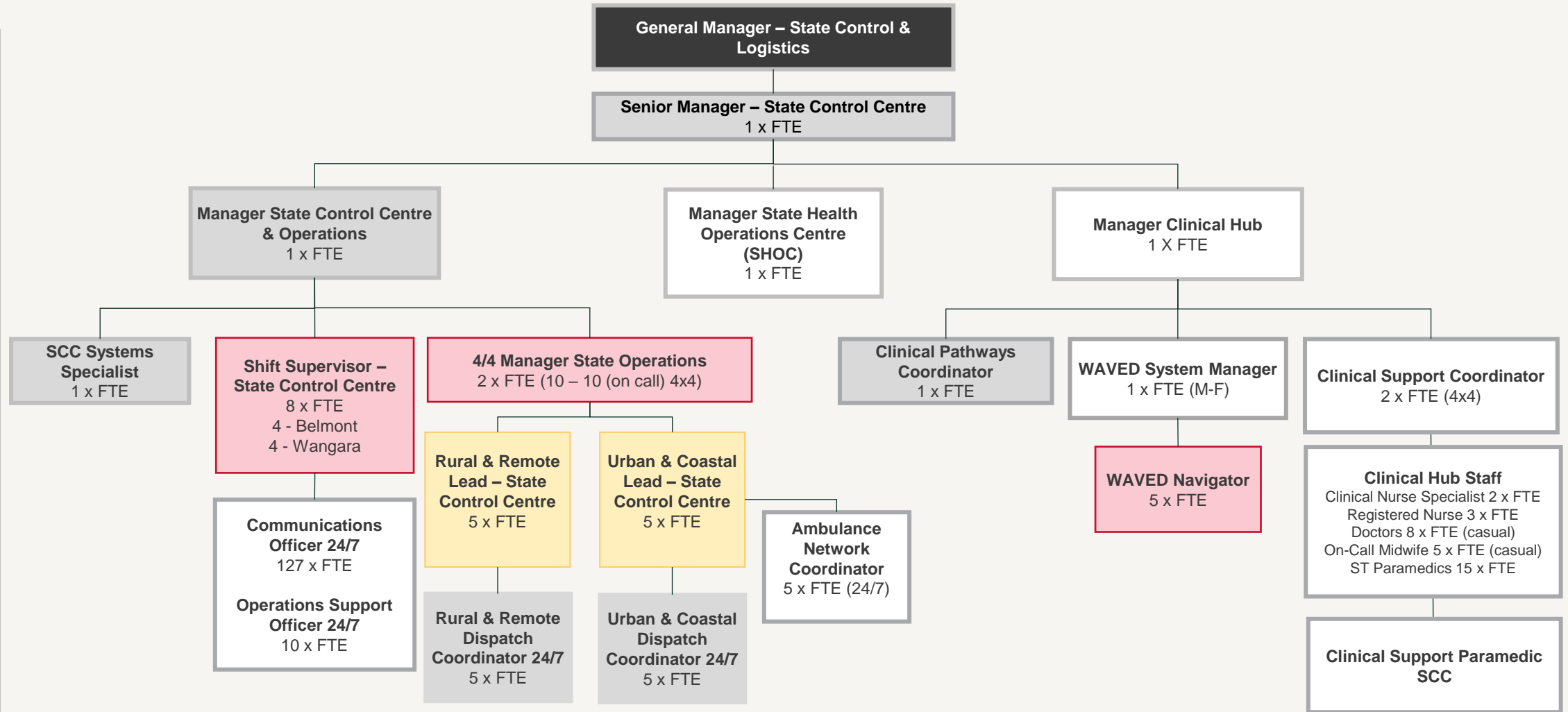
- Fleet Officer
- Automotive Technician
- General Duties Assistant
- Fleet Construction Coordinator
- Fleet Construction Admin

- Senior Radio Technician
- Radio Technicians
- Radio Installers
- Medical Equipment Technicians

Key: Existing Position New Position Redesigned Role Title Change



# State Control Centre



Key:

Existing Position

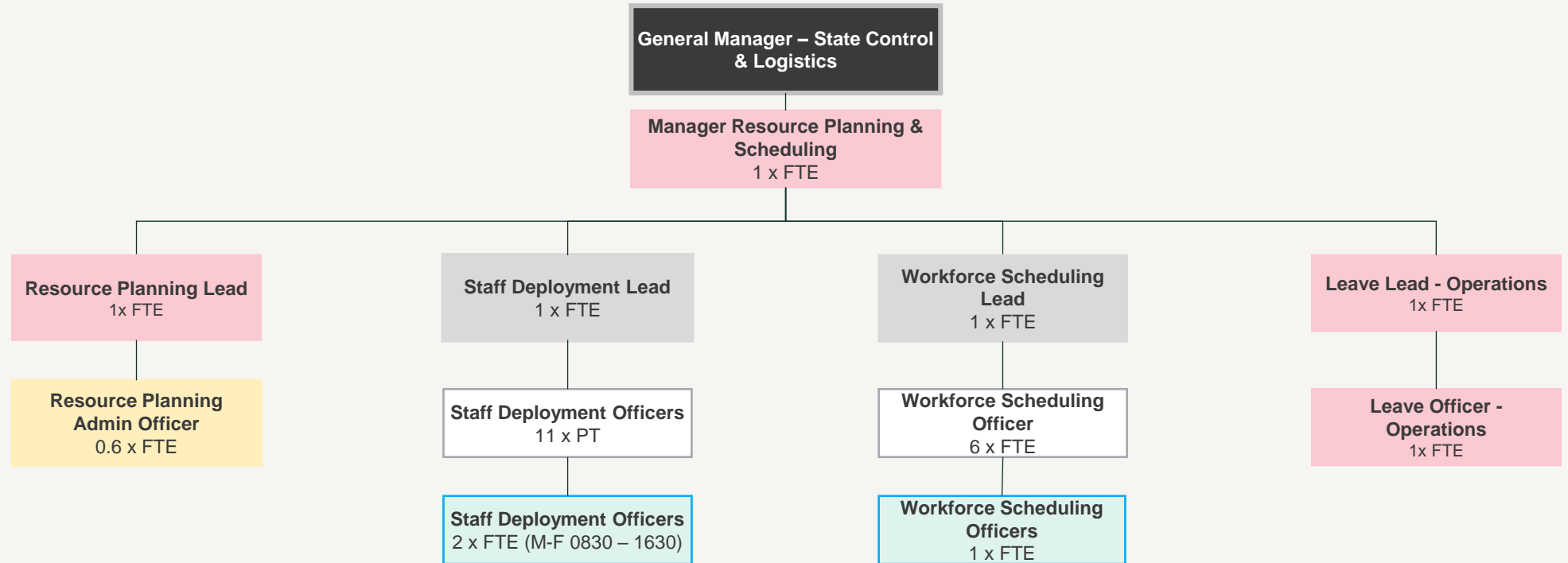
New Position

Redesigned Role

Title Change



# Resource Planning and Scheduling



Key:

Existing Position

New Position

Redesigned Role

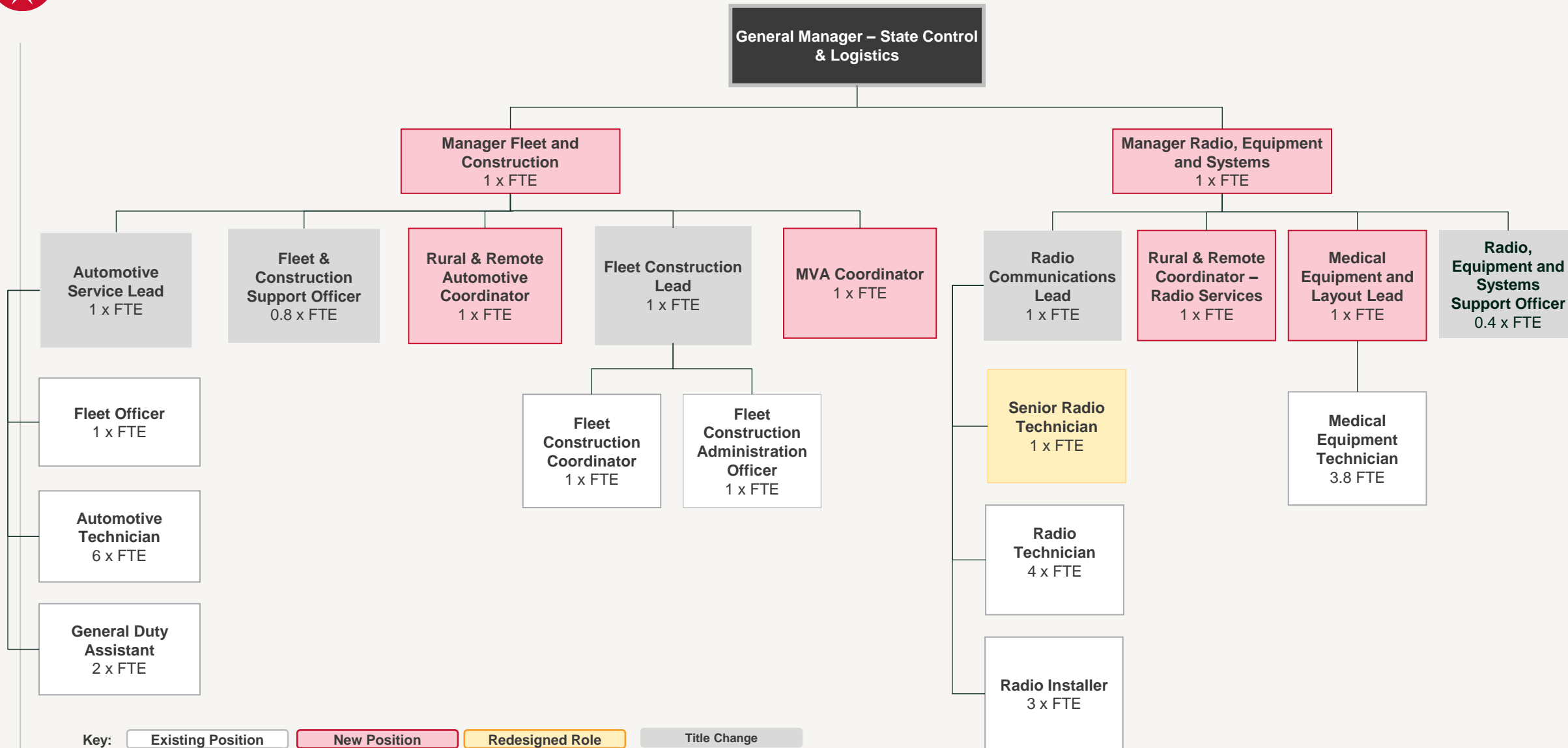
Additional FTE

Title Change



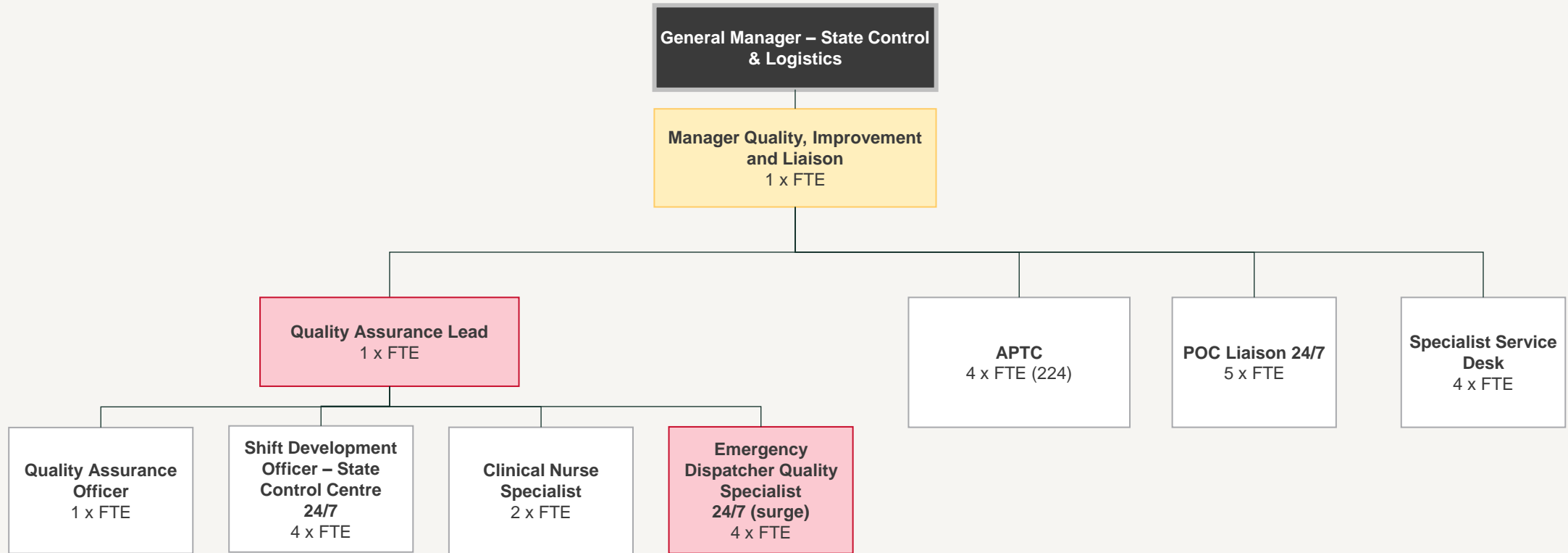


# Fleet & Radio





# Quality, Improvement and Liaison



Key:

Existing Position

New Position

Redesigned Role

Title Change



# Clinical and Operational Excellence



# Summary of changes

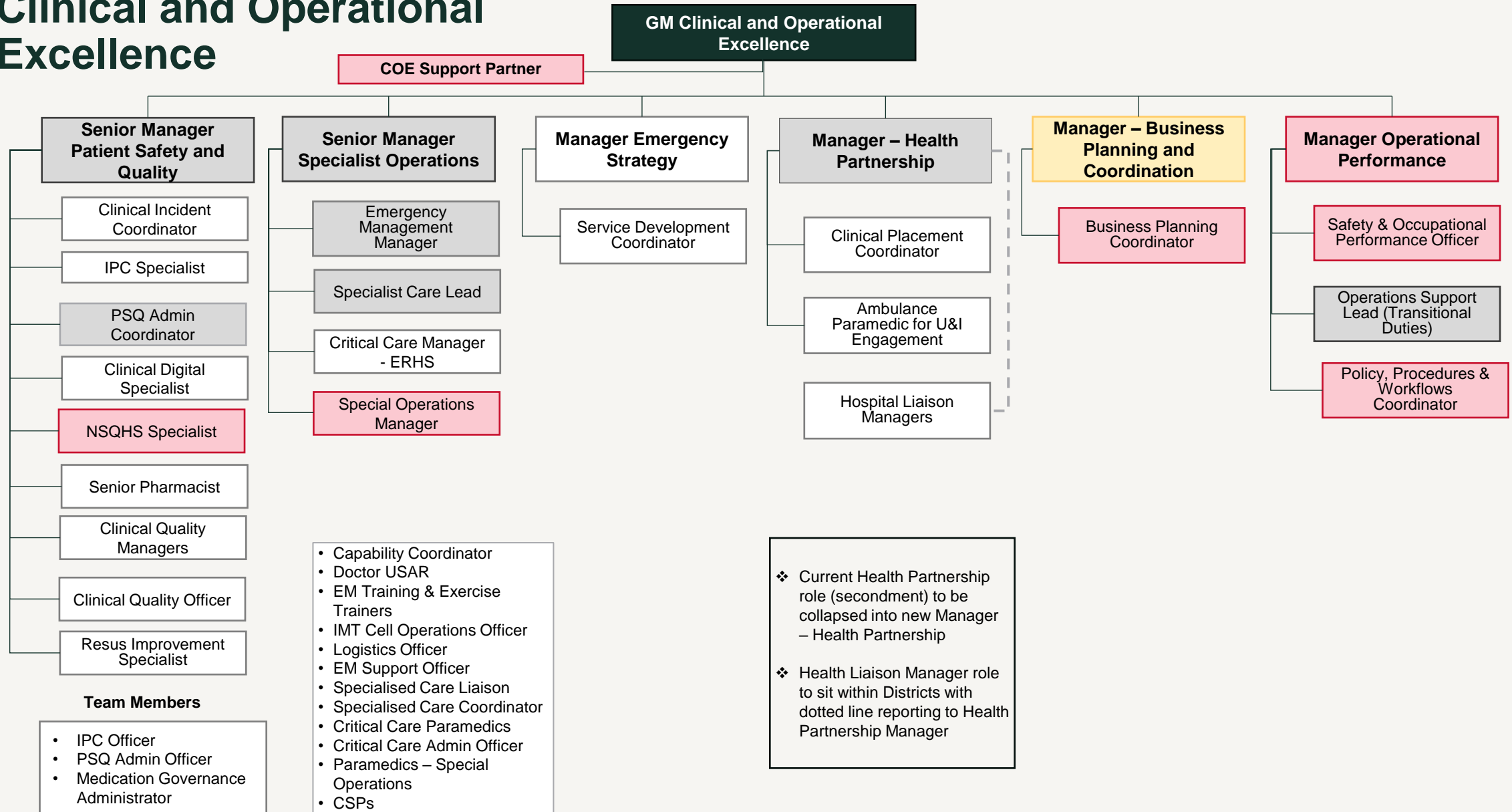
**The structure has been consolidated to logically group functions together and expand others to deliver operational excellence to frontline teams.**

**Key changes:**

1. Introduction of Senior Manager Specialist Operations to provide leadership for all specialist functions.
2. On-road Clinical Support Paramedic role remains under the Special Operations Manager. Clinical Lead appointments will commence under the Urban & Coastal structure.
3. The Clinical Support Paramedics (CSP) role in the State Operations Centre will move into the Clinical Hub under State Control and Logistics.
4. Operational planning and improvement functions have been centralised with a whole stream focus.



# Clinical and Operational Excellence



❖ Current Health Partnership role (secondment) to be collapsed into new Manager – Health Partnership

❖ Health Liaison Manager role to sit within Districts with dotted line reporting to Health Partnership Manager



# Ambulance Operations: Urban and Coastal



# Summary of changes

**Ambulance Operations Urban and Coastal has been designed to create clarity and increase availability of leaders in the districts.**

**Key changes:**

1. The Southwest Region and Bullsbrook Sub Centre will be included along with current metro locations to reflect caseload intensity.
2. Six District Operations Manager roles (based in district) will be created. Replacing current Operations Managers and Manager Metropolitan Operations (MMO) roles.
3. District Operations Leads proposed to work 4x4 roster aligned to shift colours.
4. District Clinical Leads introduced to align to shift colours and based in districts.



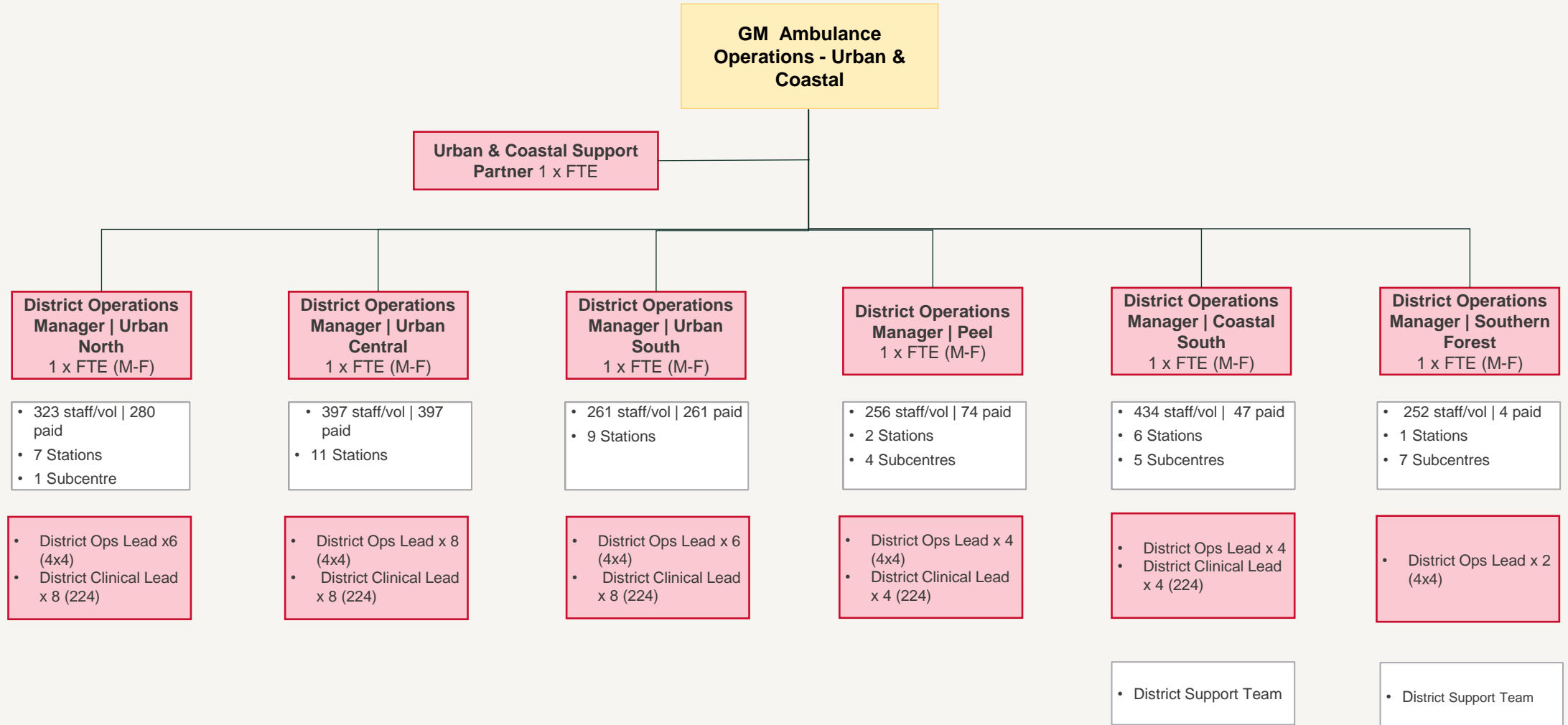
# District Operations Lead and District Clinical Lead

District Operations Lead		District Clinical Lead
<b>Role Functions:</b>	<ul style="list-style-type: none"><li>• Oversees operational aspects of the district<ul style="list-style-type: none"><li>○ managing resources</li><li>○ quality standards</li><li>○ safety standards</li><li>○ crew support &amp; leadership</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Ensures compliance with clinical guideline</li><li>• Promotes clinical excellence</li><li>• Provides mentoring and coaching for on-road crews</li><li>• Respond to P0 and P1 jobs as required</li></ul>
<b>Direct Reports:</b>	<ul style="list-style-type: none"><li>• District Clinical Leads</li><li>• Paramedics</li><li>• Station Managers</li><li>• Clinical Volunteers</li></ul>	Nil direct reports, however, has shared responsibility for oversight and governance of the quality of service in the district. The DCL will be responsible for liaising with the DOL in performance management of the District service delivery teams.
<b>KPIs</b>	<ul style="list-style-type: none"><li>• Response times</li><li>• Resource allocation</li><li>• Quality of care</li><li>• Staff performance &amp; development</li><li>• Compliance</li><li>• Safety &amp; risk management</li><li>• Emergency preparedness</li><li>• Stakeholder engagement</li></ul>	<ul style="list-style-type: none"><li>• Leadership and managerial support on frontline and when DOL unavailable</li><li>• Clinical upskilling of crews</li><li>• Major incident/accident scene management</li><li>• Clinical mentoring, support and development</li><li>• Delivery of clinical education and training to enhance skills and knowledge of the District team</li><li>• Clinical expertise</li><li>• Clinical audits and reviews</li><li>• Investigates clinical incidents in their assigned District</li><li>• Tactical resource flow</li></ul>
<b>Role Requirements</b>	<ul style="list-style-type: none"><li>• Demonstrated mentoring experience</li><li>• Cert IV or tertiary qualification in management or similar experience</li><li>• Operations management skills</li><li>• Ahpra registration (preferred but not essential)</li></ul>	<ul style="list-style-type: none"><li>• Current unrestricted Ahpra registration</li><li>• AP2 or above</li><li>• Demonstrated clinical leadership skills and experience</li><li>• Excellent communication and interpersonal skills</li></ul>





# Ambulance Operations - Urban & Coastal



Key:

Existing Position

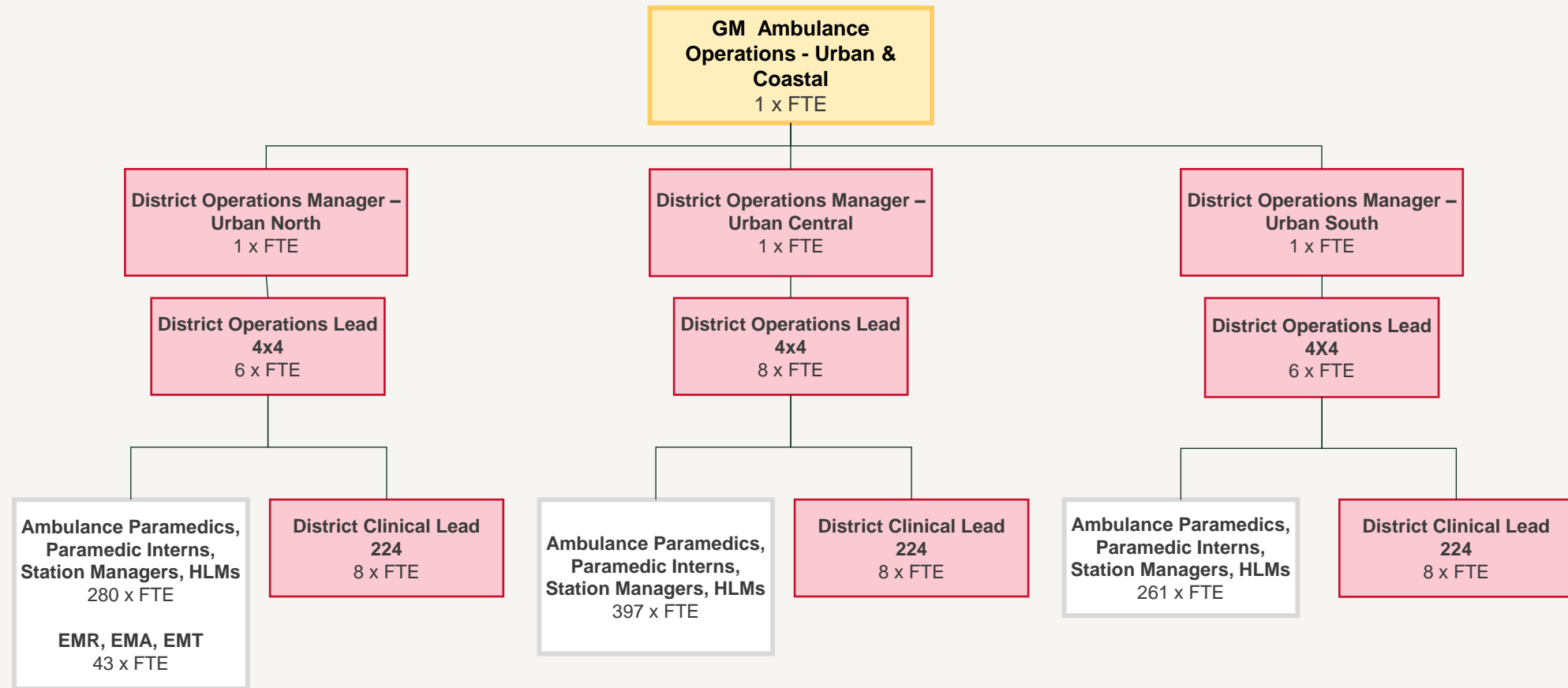
New Position

Redesigned Role

Title Change

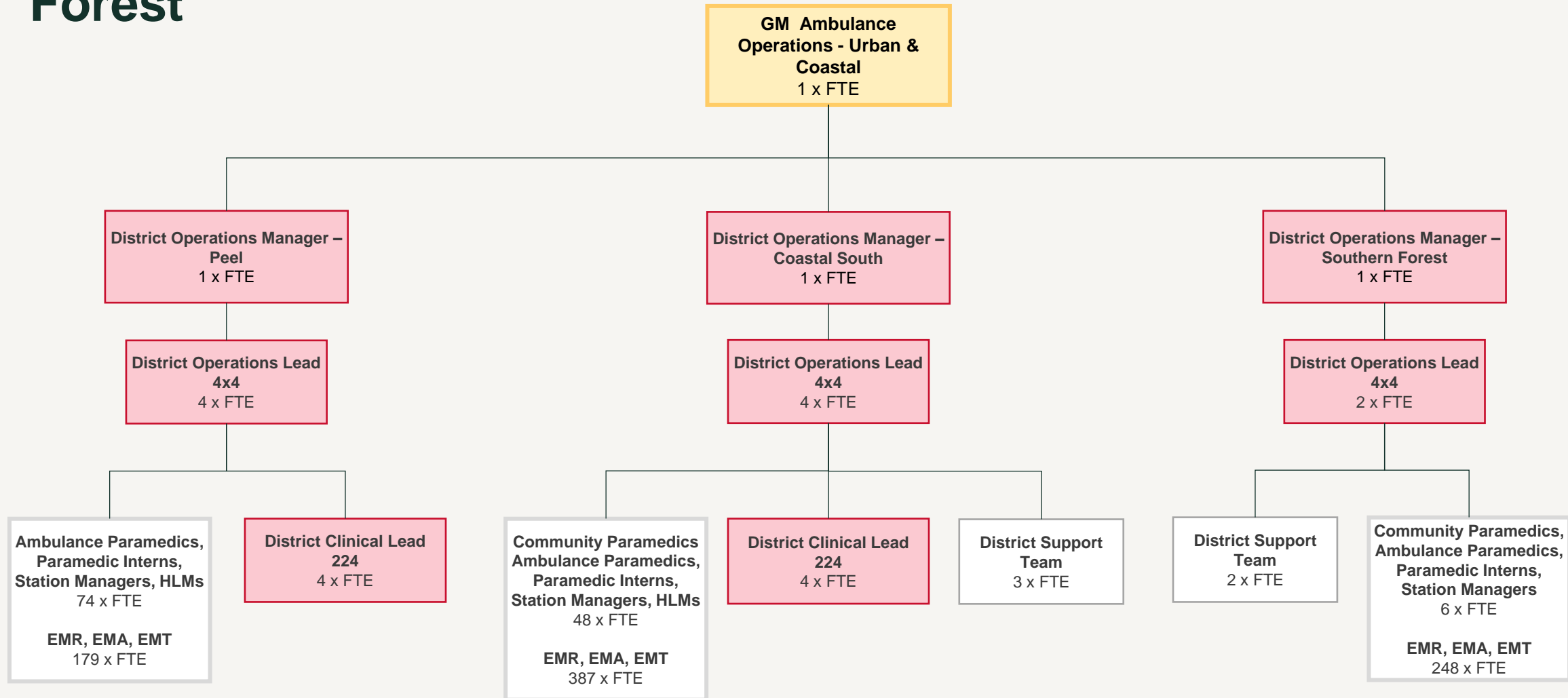


# District Operations – Urban North, Central, South





# District Operations – Peel, Coastal South, and Southern Forest



Key:

Existing Position

New Position

Redesigned Role

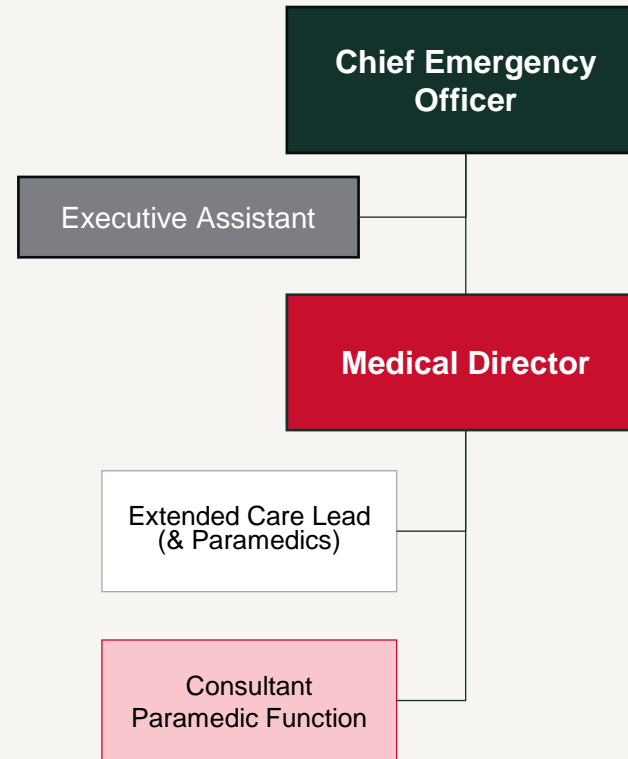
Title Change



# Medical Director



# Medical Director



**\*See appendix for detailed structures.**

Key:

Existing Position

New Position

Redesigned Role

Title Change



# Ambulance Operations: Rural and Remote



# Summary of changes

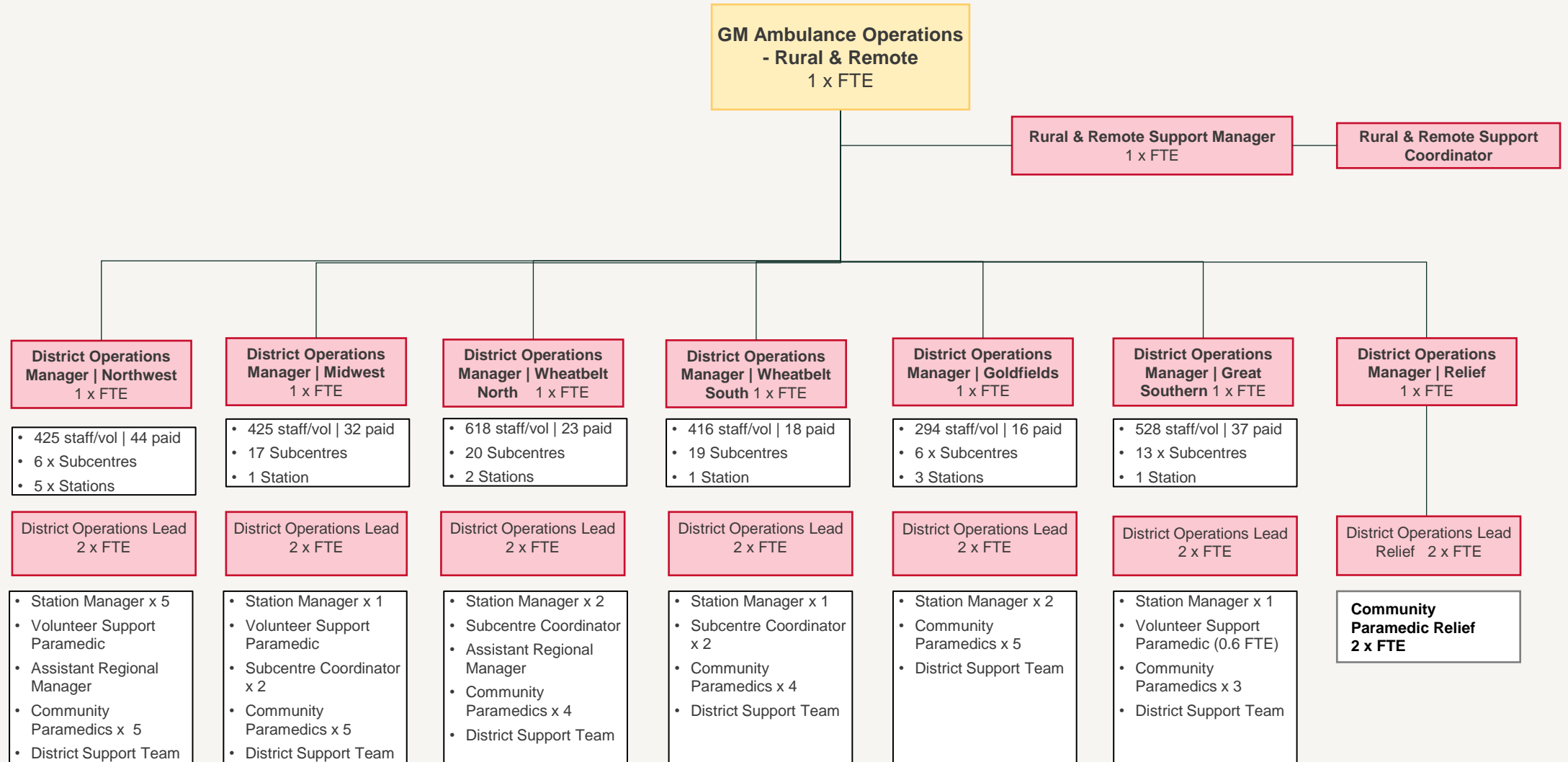
**Ambulance Operations Rural and Remote has been designed to increase leadership in the regions and clarify reporting lines for all Community Paramedics.**

## **Key changes:**

1. Based on case numbers and geographical remit the Southwest region and Bullsbrook will move to Urban & Coastal. The Wheatbelt will be split into two Districts.
2. Six District Operations Manager roles (based in district) will be created. Replacing current Operations Managers and Regional Manager roles.
3. Introduce District Operations Leads (working a 4x4 roster) in each district, aligned to shift colours.
4. Community Paramedic roles are not changing but will report through to each district to strengthen teams locally. Central coordination as required.
5. Future change - seek to progressively evolve Community Paramedic to 4x4 roster pattern. Dependent on WACHS and EA negotiations.
6. Station Manager roles are not changing, however the addition of the District Operations Lead roles provides additional support for Station Managers.



# Ambulance Operations Rural and Remote



Key:

Existing Position

New Position

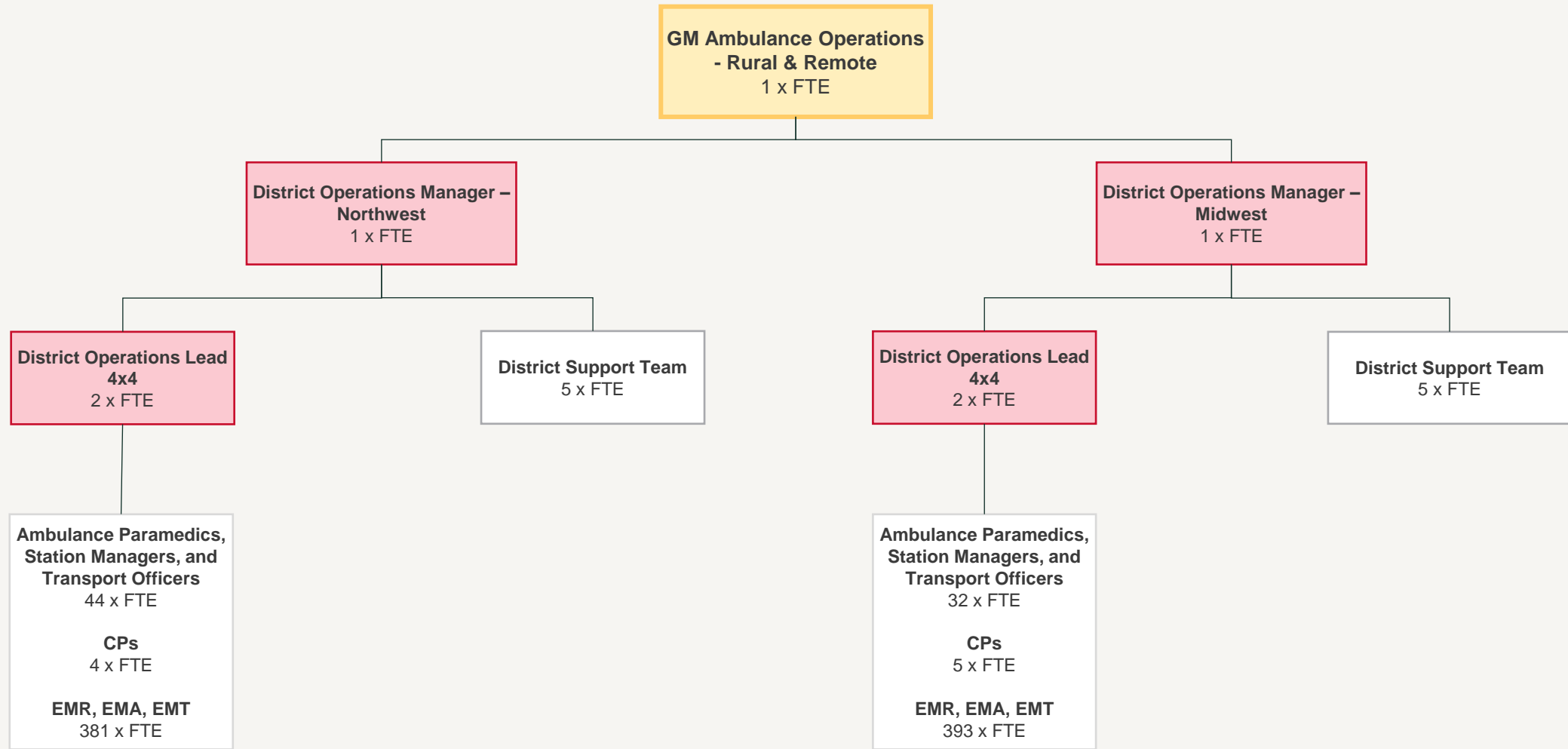
Redesigned Role

Title Change



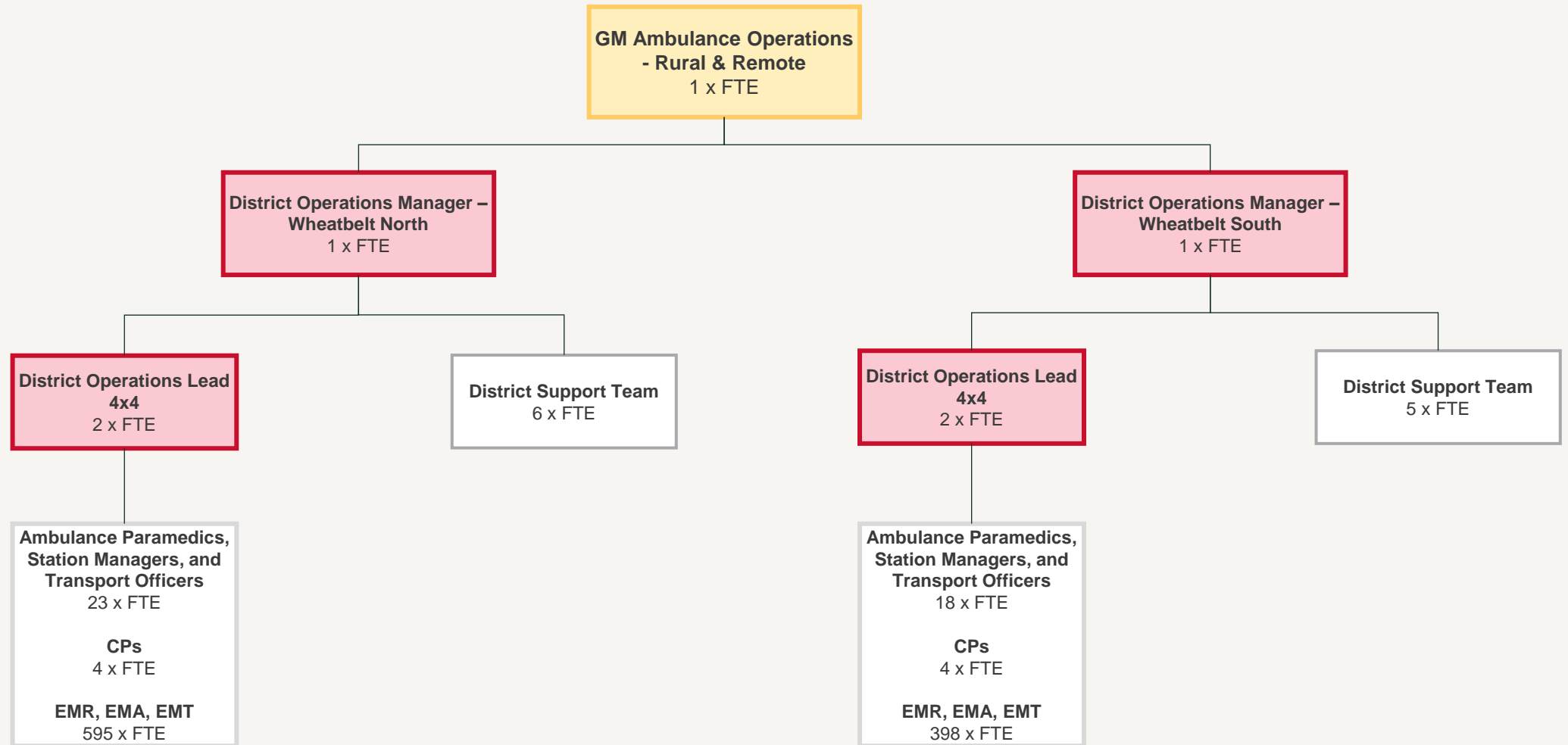


# District Operations – Northwest and Midwest





# District Operations – Wheatbelt North and South



Key:

Existing Position

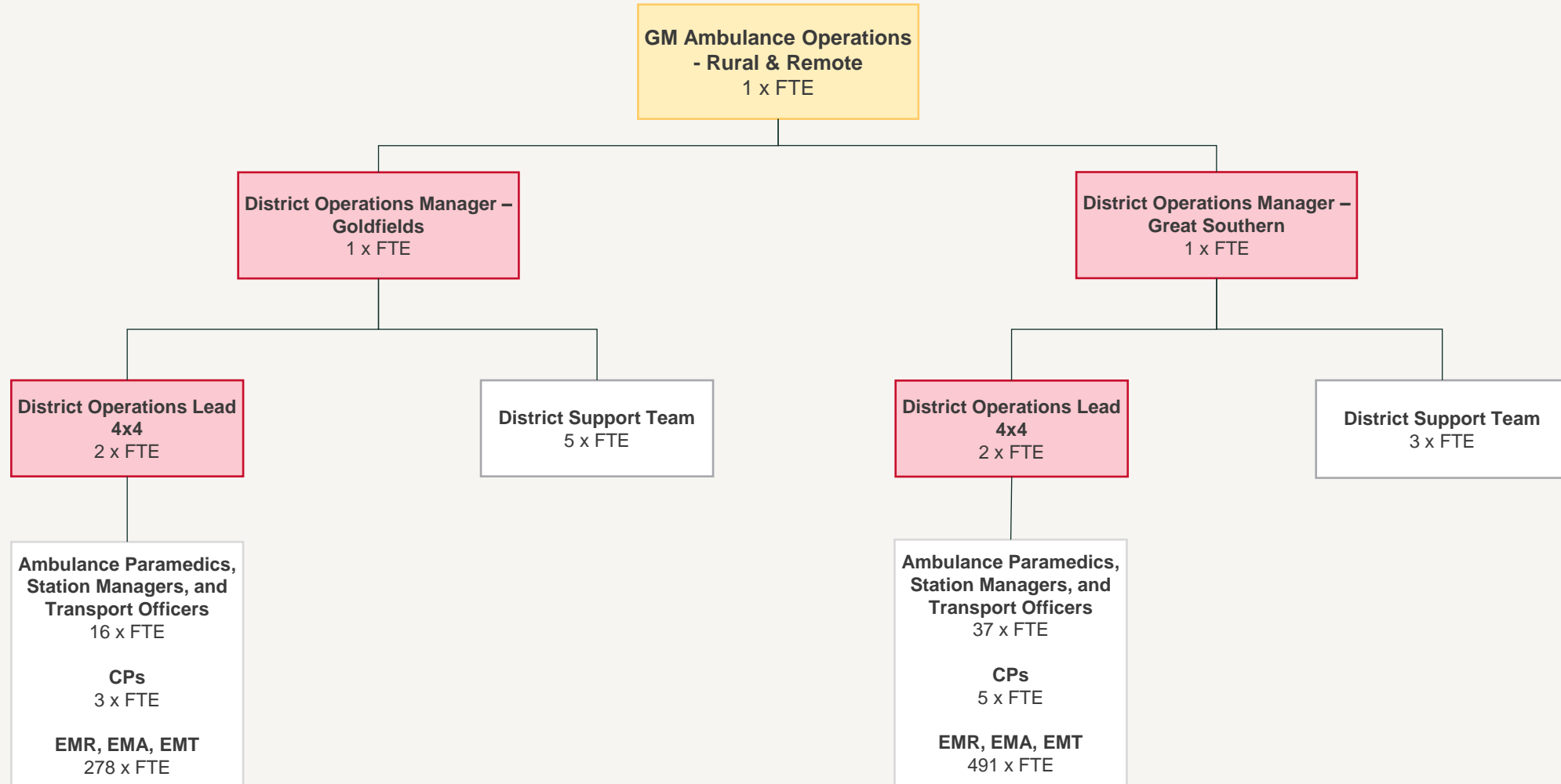
New Position

Redesigned Role

Title Change



# District Operations – Great Southern and Goldfields



Key:

Existing Position

New Position

Redesigned Role

Title Change



# Patient and Community Transport Services



# Summary of changes

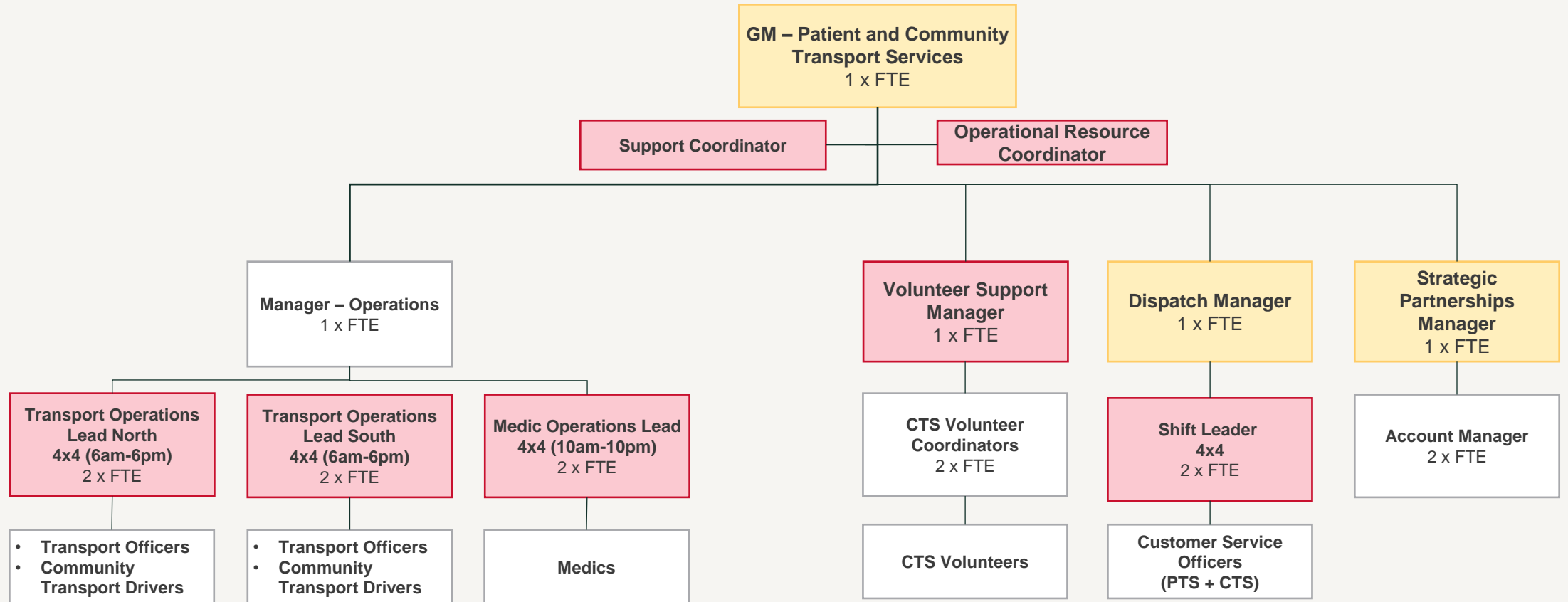
**The Patient and Community Transport Services department has been designed to provide increased leadership for frontline paid and volunteer team members.**

**Key changes:**

1. Expanded geographical remit to include the current Southwest region.
2. Unify dispatch function for Patient Transport and Community Transport Services.
3. Increase frontline leadership to 6 Operations Lead roles (mix of paramedic and transport credentials).
4. Create Volunteer Support Manager role to improve volunteer support and experience.



# Patient and Community Transport Services



Key:

Existing Position

New Position

Redesigned Role

Title Change



# Leadership development



# Emergency Leadership Development Program – 2-year delivery plan

## Internal Training Delivery: SJWA Leadership Academy

- 01 Leadership Essentials  
*1 Day Course*
- 02 Introduction to Emotional Intelligence  
*1 Day Course*
- 03 Understanding Team Dynamics  
*1 Day Course*
- 04 Leveraging Language  
*1 Day Course*
- 05 Courageous Communicators  
*1 Day Course*
- 06 Managing Change  
*1 Day Course*
- 07 Resilience Through Change  
*½ Day Course*

## External Training Delivery: AIM WA

- 01 Critical Thinking Skills  
*1 Day Course*
- 02 Effective Workplace Relationships  
*1 Day Course*
- 03 Operational Plans  
*1 Day Course*
- 04 Leading a Diverse Workforce  
*1 Day Course*
- 05 Workplace Safety  
*1 Day Course*
- 06 WHS for Managers, Supervisors and Team Leaders  
*2 Day Course*
- 07 Personal Work Priorities and Professional Development  
*1 Day Course*

## Result for St John WA:



BSB50420 – Diploma of Leadership and Management



Team alignment to Values, Organisation Strategy and processes



Succession pathways and professional development supported across organisation

**Implementation of the Leadership Development Program to commence next month (July).**





# Next steps



## Next steps

- Consultation currently underway with team members directly impacted
- Organisation-wide communication going out this afternoon
- Recruitment will commence once consultation has been completed
- Important to lead with our values during this time:





# Questions

