



## ROLE DESCRIPTION

<b>Role Title:</b>	Orthoptist
<b>Classification Code:</b>	AHP2
<b>LHN/ HN/ SAAS/ DHA:</b>	Women and Children's Health Network
<b>Hospital/ Service/ Cluster</b>	Women and Children's Hospital
<b>Division:</b>	Paediatric Surgery
<b>Department/Section / Unit/ Ward:</b>	Ophthalmology
<b>Role reports to:</b>	Orthoptic Clinical Coordinator
<b>Role Created/ Reviewed Date:</b>	March 2016 Reviewed: 23/11/2021
<b>Criminal History Clearance Requirements:</b>	Working with Children Check (issued by DHS) National Police Check – Vulnerable Unsupervised
<b>Immunisation Risk Category</b>	<input checked="" type="checkbox"/> Category A (direct contact with blood or body substances)

## ROLE CONTEXT

### Primary Objective(s) of role:

The Orthoptist will join the Ophthalmology team to ensure patients receive high quality ophthalmic care whilst attending the Women and Children's Health Network. The orthoptist will investigate and manage paediatric ophthalmology and ocular motility conditions and contribute to the effective and efficient running of Ophthalmology outpatient clinics.

The Orthoptist will also take part in community outreach clinics, providing access to specialist screening services in the metropolitan Adelaide area, subject to departmental requirements.

### Direct Reports:

> Nil

### Key Relationships/ Interactions:

#### Internal

- > **Orthoptic Clinical Coordinator** – line manager for all Allied Health staff within ophthalmology. Daily contact via multiple communication streams.
- > **Medical Unit Head of Ophthalmology** – key relationship as head of ophthalmology department. Regular contact via email and occasional face to face interaction.
- > **Consultant Ophthalmologists, Department Secretary, Junior Medical Staff, Contact Lens Optometrist, Orthoptic Team and Outpatient Nursing and Administrative Staff.** These staff members will be who the orthoptist will work with on a daily basis, high levels of communication are required to ensure good teamwork resulting in best outcomes for patients. Regular contact
- > **Student optometrists, orthoptists and nurses** – allied health staff have a key role in the development of the next generation of staff working in paediatric ophthalmology. Providing good education and observation opportunities forms a core part of what we do. Infrequent contact.

#### External

- > **NDIS Providers including Can:Do4Kids, Guide Dogs and RSB** – providing specific patient information regarding NDIS applications including writing reports in NDIS appropriate language. Infrequent contact.
- > **SASVI and Kilparrin Schools** – providing specific clinical information regarding low vision/visual impairment patients to the Department for Education. Infrequent contact.
- > **CaFHS Nurses** – whilst attending community outreach clinics, CaFHS nurses may come and ask questions, observe clinics or wish to discuss referrals. Infrequent contact.
- > **Department of Child Protection (DCP)** – working with social workers, foster families and primary health staff to ensure attendance and appropriate treatment occurs in children cared for by DCP. Infrequent contact.

### Challenges associated with Role:

Challenges associated with the role include:

- > **Complexity of the Caseload** – the Ophthalmology Department runs paediatric clinics with a wide variety of cases, requiring a breadth of investigations to be performed. The orthoptists use their knowledge and autonomy within clinic to decide which investigations to undertake without discussing each individual case with the ophthalmologist, unless necessary. This autonomy means the orthoptist tests visual acuities, ocular motility, binocular vision, visual fields, intraocular pressures, OCTs, fundus photographs and subjective refractions.
- > **Team Work** - given the number of part-time specialists across the team, good teamwork and communication is essential.
- > **Time Management** - Service demands and case complexity and variety in clinic, require appropriate prioritisation and time management skills to be demonstrated by the Orthoptists.
- > **Flexibility** – the demands of the ophthalmology service means that at times you may be asked to change your roster or clinics at short notice, to fit the needs of the department at that time.

### Delegations:

- > Nil

### Resilience:

SA Health employees persevere to achieve goals, stay calm under pressure and are open to feedback.

### Performance Development

The incumbent will be required to participate in the organisation's Performance Review & Development Program which will include a regular review of the incumbent's performance against the responsibilities and key result areas associated with their position and a requirement to demonstrate appropriate behaviours which reflect a commitment to SA Health values and strategic directions.

### General Requirements:

Managers and staff are required to work in accordance with the Code of Ethics for South Australian Public Sector, Directives, Determinations and Guidelines, and legislative requirements including but not limited to:

- > *Work Health and Safety Act 2012 (SA)* and when relevant WHS Defined Officers must meet due diligence requirements.
- > *Return to Work Act 2014 (SA)*, facilitating the recovery, maintenance or early return to work of employees with work related injury / illness.
- > Meet immunisation requirements as outlined by the *Immunisation for Health Care Workers in South Australia Policy Directive*.
- > Equal Employment Opportunities (including prevention of bullying, harassment and intimidation).
- > *Children and Young People (Safety) Act 2017 (SA)* 'Notification of Abuse or Neglect'.
- > Disability Discrimination.
- > *Independent Commissioner Against Corruption Act 2012 (SA)*.
- > *Information Privacy Principles Instruction*.
- > Relevant Awards, Enterprise Agreements, *Public Sector Act 2009*, *Health Care Act 2008* and the *SA Health (Health Care Act) Human Resources Manual*.
- > Relevant Australian Standards.
- > Duty to maintain confidentiality.
- > Smoke Free Workplace.

- > To value and respect the needs and contributions of SA Health Aboriginal staff and clients, and commit to the development of Aboriginal cultural competence across all SA Health practice and service delivery.
- > May be responsible for supervision and oversight of volunteers assigned within the department, in collaboration with the WCHN Volunteer Unit. Refer to Volunteer Engagement and Management Procedure
- > Applying the principles of the *South Australian Government's Risk Management Policy* to work as appropriate.

The SA Health workforce contributes to the safety and quality of patient care by adhering to the South Australian Charter of Health Care Rights, understanding the intent of the National Safety and Quality Health Service Standards and participating in quality improvement activities as necessary.

#### **Handling of Official Information:**

By virtue of their duties, SA Health employees frequently access, otherwise deal with, and/or are aware of, information that needs to be treated as confidential.

SA Health employees will not access or attempt to access official information, including confidential patient information other than in connection with the performance by them of their duties and/or as authorised.

SA Health employees will not misuse information gained in their official capacity.

SA Health employees will maintain the integrity and security of official or confidential information for which they are responsible. Employees will also ensure that the privacy of individuals is maintained and will only release or disclose information in accordance with relevant legislation, industrial instruments, policy, or lawful and reasonable direction.

#### **Special Conditions:**

- > It is mandatory that no person, whether or not already working in SA Health, may be appointed to a position in SA Health unless they have provided the a satisfactory current Criminal and Relevant History Screening, as required by the SA Health Criminal and Relevant History Screening Policy Directive.
- > For appointment in a Prescribed Position under the Child Safety (Prohibited Persons) Act (2016), a current Working with Children Check (WWCC) is required from the Department for Human Services Screening Unit. For other positions, a satisfactory National Police Certificate (NPC) assessment is required.
- > For 'Prescribed Positions' under the Child Safety (Prohibited Persons) Act (2016), the individual's WWCCs must be renewed every 5 years from the date of issue; and for 'Approved Aged Care Provider Positions' every 3 years from date of issue as required by the Accountability Principles 2014 issued pursuant to the Aged Care Act 1997 (Cth).
- > Appointment is subject to immunisation risk category requirements (see page 1). There may be ongoing immunisation requirements that must be met.
- > As a state-wide service, WCHN employees may be required to undertake work at various locations in metropolitan Adelaide, and provide outreach to other parts of South Australia (the latter in consultation with the incumbent of the role).
- > Depending on work requirements the incumbent may be transferred to other locations across SA Health to perform work appropriate to classification, skills and capabilities either on a permanent or temporary basis subject to relevant provisions of the Public Sector Act 2009 for Public Sector employees or the SA Health (Health Care Act) Human Resources Manual for Health Care Act employees.
- > The incumbent may be required to participate in Counter Disaster activities including attendance, as required, at training programs and exercises to develop the necessary skills required to participate in responses in the event of a disaster and/or major incident.
- > This Role Description provides an indication of the type of duties you will be engaged to perform. You may be lawfully directed to perform any duties that a person with your skills and abilities would reasonably be expected to perform.

- > Some out of hours work will be required
- > A driving licence is preferable, to be able to attend Community Outreach locations
- > Intra and Interstate travel may be required

#### **Zero Tolerance to Racism:**

The Women's and Children's Health Network has zero tolerance to racism. The Network is committed to ensuring its staff, volunteers, consumers and visitors are able to work or access health services in an environment that is culturally safe and free from any form of racism or discrimination.

Our staff are supported to address any form of racism in all environments, in line with our Corporate Procedure: ***Zero Tolerance to Racism – Identifying, Responding, and Managing in the Workplace.***

#### **White Ribbon:**

SA Health has a position of zero tolerance towards men's violence against women in the workplace and the broader community. In accordance with this, the incumbent must always act in a manner that is non-threatening, courteous, and respectful and will comply with any instructions, policies, procedures or guidelines issued by SA Health regarding acceptable workplace behaviour.

## Key Result Area and Responsibilities

<b>MAJOR RESPONSIBILITY 1 – Provide a High Standard of Orthoptic Care</b>	
<b>Key Result Areas</b>	<b>Major Responsibilities</b>
1.1 Ensure that a comprehensive, effective and efficient Orthoptic service is provided within accepted standards.	<ul style="list-style-type: none"> <li>&gt; Provide high quality, contemporary orthoptic care to patients</li> <li>&gt; Demonstrate a positive approach and commitment to high quality patient service</li> <li>&gt; Consult with patients and their families, both independent of and in conjunction with Ophthalmology consultants.</li> <li>&gt; Attend Paediatric Ophthalmology, other specialist ophthalmology and outreach clinics as required by the Department.</li> <li>&gt; Maintain clinical databases and performing timely audits both retrospective and prospective, as directed by the Senior Orthoptist and Orthoptic Clinical Coordinator.</li> <li>&gt; Take part in paediatric ophthalmology and ocular motility research activities within the department of Ophthalmology</li> <li>&gt; Liaise with other professionals including, but not limited to, Medical Specialists, General Practitioners, Optometrists, Occupational Therapists, Speech Therapists and Nursing Staff.</li> </ul>
1.2 Appropriate investigation and management of Orthoptic conditions	<p>Orthoptic assessment of patients should include all essential tests to be able to assist in appropriate diagnosis and plan future management of patient care. Examples of testing required includes:</p> <ul style="list-style-type: none"> <li>&gt; Age appropriate visual acuity assessment               <ul style="list-style-type: none"> <li>o Selecting logMAR-based tests</li> <li>o Using crowding bars/confusion bars</li> <li>o Increasing difficulty as soon as a patient is able to comply</li> </ul> </li> <li>&gt; Differential diagnosis of strabismus</li> <li>&gt; Assessment of eye position and ocular motility</li> <li>&gt; Pre and post-operative strabismus surgery measurements</li> <li>&gt; Level of binocular single vision:               <ul style="list-style-type: none"> <li>o Synoptophore</li> <li>o Free space assessment</li> </ul> </li> <li>&gt; Ophthalmology Imaging Modalities:               <ul style="list-style-type: none"> <li>o Visual Fields (Zeiss Humphrey Visual Field Analyser 3)</li> <li>o OCT (Zeiss Cirrus)</li> <li>o Ultrawidefield Fundus (Zeiss Clarus)</li> <li>o Slit Lamp Photography (Haag Streit IM900)</li> <li>o Any other imaging equipment modalities required</li> </ul> </li> <li>&gt; iCare Tonometry and Pachymetry</li> <li>&gt; A-Scans, B-Scans and UBM</li> <li>&gt; Document Orthoptic assessment and management plan in accepted abbreviations, conforming to local clinical procedures, and WCHN policies.</li> <li>&gt; In community outreach services, appropriately identify patients who do not reach the required standard and refer on to appropriate services.</li> <li>&gt; Orthoptists should adhere to local clinical procedures designed by the AHP3 and AHP4 on assessment and referral of vision screening and triage patients.</li> </ul>
1.3 Assist in managing patients with amblyopia, refractive error, strabismus and other eye conditions	<ul style="list-style-type: none"> <li>&gt; Develop management plans for paediatric patients with reduced vision, amblyopia and strabismus, and suggest further medical or surgical management, where appropriate, using best and evidence based practice.</li> </ul>

appropriate for Orthoptic management.	<ul style="list-style-type: none"> <li>&gt; In complex cases or in cases of poor parental/patient compliance with treatment plans, discuss the case with a senior team member to establish what management intervention should occur next.</li> <li>&gt; Clearly and concisely communicate management plans to patients and their families</li> </ul>
1.4 Demonstrate the ability to work independently and autonomously, using evidence based practice	<ul style="list-style-type: none"> <li>&gt; Use evidence based practice to design Orthoptic management plans in cases of amblyopia and refractive error.</li> <li>&gt; When working in the outreach service or in solo Orthoptic clinics, manage workload, making appropriate clinical decisions based on level of experience and ensuring contact with senior staff member (Senior Orthoptist or Orthoptic Clinical Coordinator, Registrar or Consultant) if unsure of the appropriate management plan.</li> </ul>
<b>MAJOR RESPONSIBILITY 2 – Complex Case Management</b>	
<b>Key Result Areas</b>	<b>Major Responsibilities</b>
2.1 Liaise with the Senior Orthoptist or Orthoptic Clinical Coordinator regarding complex case management	<ul style="list-style-type: none"> <li>&gt; Take direction from the Senior Orthoptist and Orthoptic Clinical Coordinators' for management of long term and complex cases. The Senior Orthoptist or Orthoptic Clinical Coordinator will direct the Orthoptist on the action required regarding specific cases, this will occur on an 'as needed' basis and at the instigation and discretion of the Senior Orthoptist or Orthoptic Clinical Coordinator.</li> <li>&gt; Support the Senior Orthoptist and Orthoptic Clinical Coordinator in complex case management, in conjunction with the Consultant Ophthalmologists</li> </ul>
2.2 Contact Lens service	<ul style="list-style-type: none"> <li>&gt; At the direction of the Orthoptic Clinical Coordinator, assist in the management of contact lens ordering for patients of WCH.</li> <li>&gt; Appropriately maintain contact lens records, as per the standard of the hospital and following clinical procedures set out by ophthalmology.</li> <li>&gt; As directed by the Orthoptic Clinical Coordinator, learn to provide 'Contact Lens Education" and any other required tasks for the continued provision of a high quality, efficient contact lens service.</li> <li>&gt; Flexibly provide support as part of the orthoptic team, to allow for timely education for new contact lens patients.</li> </ul>
<b>MAJOR RESPONSIBILITY 3 – Develop Effective Time Management and Teaching Skills</b>	
3.1 Contribute to the Orthoptic and Ophthalmology administration	<ul style="list-style-type: none"> <li>&gt; Liaise with the Orthoptic Clinical Coordinator regarding work organisation, procedures and protocols</li> <li>&gt; Ensure appropriate documentation in patient records, completed in a timely fashion, conforming to WCHN policies and local clinical procedures</li> <li>&gt; Provide written reports, where necessary</li> <li>&gt; When appropriate answer queries from other health professionals, both internal and external</li> <li>&gt; Manage time effectively to achieve the required outcomes of the patients whilst working to the clinic schedules, outlined by the Orthoptic Clinical Coordinator.</li> </ul>

3.2 Contribute to teaching provided by the Ophthalmology department	<ul style="list-style-type: none"> <li>&gt; Supervise and teach orthoptic and optometry students as requested by either the Senior Orthoptist or Orthoptic Clinical Coordinator.</li> <li>&gt; Contribute to teaching sessions provided to other health professionals; including but not limited to Nurses, Optometrists, and students</li> <li>&gt; Teach junior medical staff how to perform ophthalmology imaging modalities, as required.</li> </ul>
<b>MAJOR RESPONSIBILITY 4 – Team working</b>	
4.1 Support and actively participate in a positive culture and safe work environment within the Ophthalmology department	<ul style="list-style-type: none"> <li>&gt; Contribute to a team environment, which promotes positivity, learning and development, safety and welfare of employees, acknowledging differences and encouraging creativity and innovation.</li> </ul>
<b>MAJOR RESPONSIBILITY 5 – Professional Development and Credentialing</b>	
5.1 – Actively participate in SA Health’s Clinical Supervision programme working with your supervisor on a regular basis to further build your knowledge base.	<ul style="list-style-type: none"> <li>&gt; Proactively draw on the support of experienced peers of diverse professional backgrounds, Clinical Specialists, Profession Leads and/or managers when required.</li> <li>&gt; Display a commitment to continuous personal and professional development by: <ul style="list-style-type: none"> <li>a. Actively participating in clinical supervision</li> <li>b. Completing annual credentialing requirements</li> <li>c. Attending all mandatory training and actively pursuing other training and development as required to maintain currency of clinical knowledge (which may include post-graduate study)</li> <li>d. Applying well-developed reflective practice skills to your own work, and supporting peers/students/supervised staff to develop reflective practice skills</li> <li>e. Utilising the support of mentors and peers</li> <li>f. Actively participating in the Professional Review and Development (PDR) process, including developing and pursuing a personal/professional development plan in consultation with your line manager/clinical supervisor</li> <li>g. May, as required, provide training for professional staff</li> </ul> </li> <li>&gt; Contribute, as required, to clinical/professional supervision, support and oversight of AHP1 level staff, allied health assistants and profession-specific professional students or multi-disciplinary student teams.</li> </ul> <p>Develop, share and support your peers to gain knowledge of effective practice through research, evaluation of services and information sharing (e.g.: via professional networks and presenting papers for conferences and/or publishing)</p>
5.2 Continuing personal development and training	<ul style="list-style-type: none"> <li>&gt; Ensure a commitment to continuous improvement</li> <li>&gt; Identify and pursue professional development needs</li> <li>&gt; Utilise the support of mentors and peers</li> <li>&gt; Actively participate in the professional development and review process</li> <li>&gt; Integrate new evidence-based approaches into practice</li> <li>&gt; Keep appropriate records of all CPD activities undertaken to be able to claim 50 points over 2 years to achieve the standards set out by the AOB.</li> <li>&gt; Provide updated CPD certificate of currency, issued by the Australian Orthoptic Board, every 2 years.</li> </ul>

## **Knowledge, Skills and Experience**

### **ESSENTIAL MINIMUM REQUIREMENTS**

#### **Educational/Vocational Qualifications**

Appropriate degree or Master's Degree qualification in Orthoptics which entitles registration with the Australian Orthoptic Board (AOB). Eligible for membership of Orthoptics Australia (OA)"

#### **Skills:**

##### **Demonstrated**

- > Ability to manage a varied workload, meeting tight time frames
- > Ability to work independently
- > Ability to develop and maintain effective working relationships with peers and staff at all levels
- > Ability to liaise and work within a multi-disciplinary setting
- > High level of written and oral communication skills
- > Ability to analyse and interpret clinical data
- > Ability to communicate well with patients and their families
- > Registered with the Australasian Sonographer Accreditation Registry (ASAR)

##### **Experience**

- > 2 years of paediatric ophthalmology experience post-qualification
- > Experience in the field of paediatric orthoptics; strabismus, amblyopia, ocular motility, refractive error and assessment of children with visual impairments.
- > Experience with a range of orthoptic assessment procedures
- > Experience with professional communication with patients and families

##### **Knowledge**

- > Working with children
- > Orthoptic knowledge; strabismus, amblyopia, refractive error and ocular motility
- > Evidence Based Knowledge: treatment of amblyopia (PEDIG, MOTAS and ROTAS studies)
- > Paediatric ophthalmology knowledge – founded in high quality evidence published in journals with considerable impact factor and textbooks widely accepted within the paediatric ophthalmology community.
- > Principles and practices of OHSW, Equal Opportunity, the Public Sector Management Act, and employee conduct standards and diversity appropriate to the requirements of the position.

**DESIRABLE CHARACTERISTICS** (To distinguish between applicants who have met all essential requirements)

#### **Educational/Vocational Qualifications**

##### **Qualifications**

- > Honours completion or other related studies

##### **Experience**

- > Experience in neuro-ophthalmology and complex ocular motility;
- > Experience with autonomous management of amblyopia
- > Experience using Humphrey Visual Fields, OCT's and Fundus Photos on paediatric patients
- > Experience teaching undergraduate Orthoptists and other health professionals
- > Experience with research and audit
- > Experience working in the public health system
- > Experience working with interpreters
- > Experience using the 'Oracle' procurement system
- > Experience using Zeiss Forum to view and analyse visual fields and OCT scans

##### **Knowledge**

- > Knowledge of WCHN objectives and functions
- > Knowledge of SA Health System and operation of the Women and Children's Health Network
- > Knowledge of public sector procedures and processes



## Organisational Context

### Organisational Overview:

Our mission at SA Health is to lead and deliver a comprehensive and sustainable health system that aims to ensure healthier, longer and better lives for all South Australians. We will achieve our objectives by strengthening primary health care, enhancing hospital care, reforming mental health care and improving the health of Aboriginal people.

SA Health is committed to a health system that produces positive health outcomes by focusing on health promotion, illness prevention and early intervention. We will work with other government agencies and the community to address the environmental, socioeconomic, biological and behavioural determinants of health, and to achieve equitable health outcomes for all South Australians

### Our Legal Entities:

SA Health is the brand name for the health portfolio of services and agencies responsible to the Minister for Health and Wellbeing.

The legal entities include but are not limited to Department for Health and Wellbeing, Central Adelaide Local Health Network, Northern Adelaide Local Health Network, Southern Adelaide Local Health Network, Women's and Children's Health Network, Country Health SA Local Health Network and SA Ambulance Service.

### SA Health Challenges:

The health system is facing the challenges of an ageing population, increased incidence of chronic disease, workforce shortages, and ageing infrastructure. The SA Health Care Plan has been developed to meet these challenges and ensure South Australian's have access to the best available health care in hospitals, health care centres and through GPs and other providers.

### Health Network/ Division/ Department:

The Women's and Children's Health Network (WCHN) was established to promote, maintain and restore the health of women, children and young people in South Australia. The Service plans, develops and coordinates health services as part of an integrated health system.

The Women's and Children's Health Network efficiently conducts and manages, within its identified resources, health services for children, young people and women, including:

- Specialist hospital services.
- Primary health care and population health programs.
- Integrated community care services.
- Services to address the health and wellbeing of particular populations, including Aboriginal Health Programs.
- Education and training programs.
- Research.

## Values

### SA Health Values

The values of SA Health are used to indicate the type of conduct required by our employees and the conduct that our customers can expect from our health service:

- > We are committed to the values of integrity, respect and accountability.
- > We value care, excellence, innovation, creativity, leadership and equity in health care provision and health outcomes.
- > We demonstrate our values in our interactions with others in SA Health, the community, and those for whom we care.

### Domestic and Family Violence

The WCHN recognises violence against women as a human rights issue that must be addressed in the workplace, and is committed to a zero tolerance policy towards violence against women in the workplace. Accordingly employees must appropriately report and respond to any such acts in the workplace, and make available appropriate support to employees who may be experiencing violence in the community.

### Code of Ethics

The *Code of Ethics for the South Australian Public Sector* provides an ethical framework for the public sector and applies to all public service employees:

- > Democratic Values - Helping the government, under the law to serve the people of South Australia.
- > Service, Respect and Courtesy - Serving the people of South Australia.
- > Honesty and Integrity- Acting at all times in such a way as to uphold the public trust.
- > Accountability- Holding ourselves accountable for everything we do.
- > Professional Conduct Standards- Exhibiting the highest standards of professional conduct.

The Code recognises that some public sector employees are also bound by codes of conduct relevant to their profession.

## Approvals

### Role Description Approval

I acknowledge that the role I currently occupy has the delegated authority to authorise this document.

**Name:**

**Role Title:**

**Signature:**

**Date:**

## Role Acceptance

### Incumbent Acceptance

I have read and understand the responsibilities associated with role, the role and organisational context and the values of SA Health as described within this document.

**Name:**

**Signature:**

**Date:**

## Women's & Children's Health Network

### **Accountability – what does it mean for me?**

Within WCHN everyone is accountable for their contribution to the safety and quality of care delivered to consumers.

#### **Consumers**

Consumers and their families participate as partners to the extent that they choose. These partnerships can be in their own care, and in organisational design and governance.

#### **Staff including Contractors, Locums, Agency, Students and Volunteers**

All staff (as described above) have a role in the delivery of safe, high quality care to consumers, and are expected to perform their roles with diligence; and with a person-centred approach to the best of their ability. It is the responsibility of all staff to raise concerns when it is recognised that something is not right. Safety and quality is the responsibility of all staff, at all levels and across all locations.

#### **Clinicians**

All clinicians are accountable for the provision of competent, consistent, timely, safe, reliable, contemporary and person centred care within a defined scope of practice.

Clinicians work in teams with professionals from a variety of disciplines based on mutual respect and clear communication, with an understanding of responsibilities, capabilities, constraints and each other's scope of practice.

All clinicians are responsible for providing care that is person centred, evidence based and which focuses on safety through minimising risk while achieving optimal outcomes for consumers. This is helped by participating in clinical governance, in WCHN health and safety forums, fostering a learning environment and supporting other clinicians to provide high quality services which are safe.

Clinicians are expected to speak up when there are concerns about safety so that these can be rectified and learnt from. Clinicians are accountable for their own individual professional practice, including maintaining currency of credentialing, registration and professional practice.

#### **Managers**

Managers are accountable for implementing systems and practices that support high quality clinical practice. Managers oversee, guide and direct staff by providing leadership and advice ensuring appropriate clinical governance, continuous quality improvement, and leading safety programs. Managers develop, implement and monitor performance indicators for the identification, management and reporting of risk. Managers implement the Clinical Governance Framework; Consumer Engagement Framework and the requirements of the National Safety & Quality Standards within their areas of responsibility. Managers are expected to demonstrate diligence and honesty in the management of public resources.

Managers organise, direct and manage the performance of staff to meet operational requirements; implement and promote evidence based standards and policies that are compliant with relevant, professional, industrial and legislative requirements. Managers engage with and listen to staff, and create an environment where staff feel able to speak up in relation to concerns about safety. Managers address concerns raised and provide regular, ongoing feedback in the interests of improving care and safety.

#### **Executive/Divisional Directors**

Executive/Divisional Directors are accountable for embedding the Clinical Governance Framework; Consumer Engagement Framework and the requirements of the National Safety & Quality Standards into their areas of responsibility and providing assurance to the Executive and Board that these systems are in place and work effectively, all risks are known and mitigated and that staff understand their safety and quality responsibilities.

It is expected that those holding senior leadership positions will model the highest standards of ethical and professional behaviour.

#### **WCHN Committees**

WCHN Committees support Executive Directors to implement and evaluate organisational systems, support divisions to work together to identify and mitigate risk and continuously improve practice. They support the organisation to work as a single entity.

#### **Chief Executive Officer**

The Chief Executive has overall accountability for safety, care delivery, system governance and monitoring.

#### **Board**

The Board is accountable for governance, monitoring, compliance and ensuring the executive are discharging their responsibilities in managing the organisation.

## Four Strategic Priorities



Improved health and wellbeing of families and communities



Meaningful gains in Aboriginal health and wellbeing



Provide leading healthcare for women, babies, children and young people



Create one health network

## Key Enablers

Effective communication

Consumer and community engagement

Culture and leadership

Engaged and capable workforce

Enabling technology

Research

Productive partnerships

Contemporary infrastructure

Financial sustainability

Continuous improvement and innovation

**Mission** To improve the health and wellbeing of families and communities by providing integrated care and support

**Vision** To be a leading and respected health network for women, babies, children, young people and their families

**Values** Compassion, Respect, Equity, Accountability, Together for Excellence

**Our Story** starts with our consumers and communities who are at the centre of everything that we do.

Our focus for the years ahead is to:

- Provide outstanding care and service
- Enhance our culture and leadership
- Design and deliver a new Women's and Children's Hospital
- Strengthen partnerships, expand innovation
- Through research, education and learning, inspire others, share specialist knowledge and deliver excellence in everything that we do
- Deliver an integrated WCHN

**Our Way** is underpinned by our agreed ways of working together that enable us as an organisation to:

- Share a common purpose and direction
- Use innovative and new ways to deliver our service
- Educate and support people to excel in the care that they give
- Grow and develop our current and future leaders
- Ensure that we have consistent behaviours and ways of working
- Implement processes and systems that are efficient and effective



State-wide services: Child and Family Health Service, Child and Adolescent Mental Health Service, Yarrow Place Rape and Sexual Assault Service, Disability Services, Child Protection Service, Metropolitan Youth Health, Women's Health Service, Women's Safety Strategy