


Tasmanian
Audit Office


Rostering of specialists in
Tasmania's major hospitals

Report of the Auditor-General
No.4 of 2019-20



Today's presentation


- Objective and scope of the review
- Review approach
- Auditor-General's conclusion
- Review findings
- Recommendations
- Comments received



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Objective


The objective of the review was to form a limited assurance conclusion on the efficiency and effectiveness of the rostering of specialists in Tasmania's major hospitals, with a focus on assessing whether the rostering of specialists was controlled and managed in a transparent and fair manner.



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Review approach

- The review was conducted to express a limited assurance conclusion
- The following medical specialties at each of the four major hospitals were selected for review:
 - anaesthetics and surgery
 - general medicine
- Evidence for the review was obtained primarily through discussions with relevant personnel and examining corroborative documentation
- No procedures were undertaken to test for accuracy of the rosters against actual hours worked.


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Review criteria

1. Are rosters managed in a transparent and fair manner?


2. Do cultural and systemic issues impact on the transparent and fair rostering of specialists?

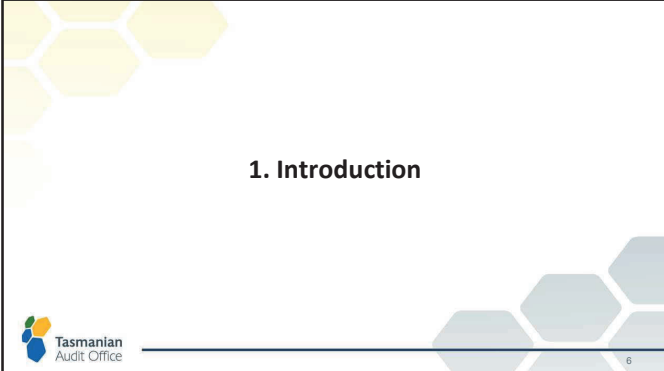
3. Do current rostering practices increase the risk exposure of the THS?

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Auditor-General conclusion

The rostering of specialists in Tasmania’s major hospitals has not been performed to an optimal level with respect to efficiency and effectiveness as evaluated against the identified criteria, or the objective of the review, as a whole.

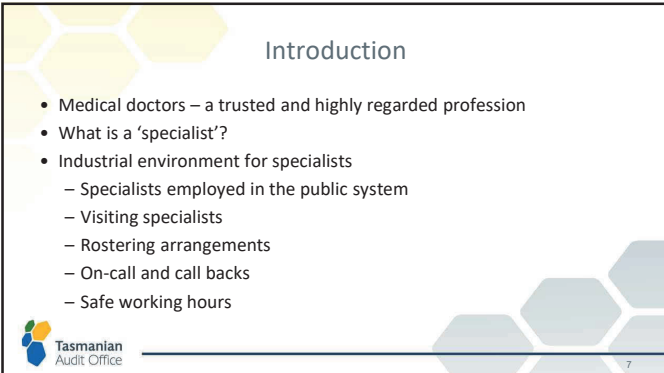
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1. Introduction

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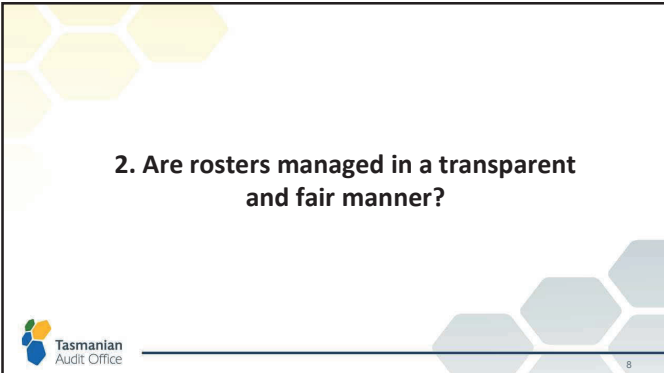


Introduction

- Medical doctors – a trusted and highly regarded profession
- What is a ‘specialist’?
- Industrial environment for specialists
 - Specialists employed in the public system
 - Visiting specialists
 - Rostering arrangements
 - On-call and call backs
 - Safe working hours

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2. Are rosters managed in a transparent and fair manner?

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Are rosters managed in a transparent and fair manner?


- Responsibility for establishing and managing changes to specialist rosters is generally defined
- Technology is not used effectively to develop, manage and control rosters
- Timesheets are not consistently used to manage rostering of specialists

3. Do cultural and systemic issues impact on the transparent and fair rostering of specialists?

Do cultural and systemic issues impact on the transparent and fair rostering of specialists?

- The Head of Department is not consistently provided with the necessary skills and tools to manage rostering
- The ability to successfully recruit and retain specialists has an impact on the transparent and fair rostering of specialists
- Transparency and fairness can be impacted by specialists practicing in private hospitals
- There is little accountability for non-clinical time


4. Do current rostering practices increase the risk exposure of THS?



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Do current rostering practices increase the risk exposure of THS?

- Risk of fatigue increased
- Risk of loss of accreditation for the department increased
- Risk of increase cost to the health system increased



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Recommendations and comments received




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Recommendations

We recommend the Department of Health:


1. Conduct a detailed review of how specialists account for their time in order to develop a range of improvements to this process, consequently reducing risks to the THS through tighter controls. This review should consider whether rosters be managed within departments or at a more centralised level and whether they be prepared by specialists or administrative staff.



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Recommendations


2. Consider planning and executing a rollout of a rostering and time management system across all medical departments within all major hospitals and train each hospital department in using the software to manage and account for specialists' time. This system should have consistent access controls, monitoring and reporting.
3. Consider mandating the use of timesheets in all hospital departments, either electronically (preferred), or manually for submission within the following month. This would enable specialist hours to be more transparent, providing evidence of fairness to the THS and specialists themselves.



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Recommendations

4. Develop a Statement of Duties for all Heads of Department and invest in transitional and ongoing managerial and leadership development for these roles.
5. Consider recording time scheduled for private practice on other premises in specialist rosters to increase transparency, assess fairness and better manage specialist fatigue
6. Assess whether departments need to factor in appropriate levels of non-clinical time to rosters to enable specialists to better structure their working days.




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Comments received

Minister for Health

The Tasmanian Government welcomes the Auditor-General's report into this important aspect of our State's health system. The recommendations and findings contained within the report outline several opportunities to improve safety, transparency, fairness and accountability through enhanced workforce management processes and investment in our senior clinical leaders.

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Comments received

Secretary, Department of Health

Thank you for your Report. I am pleased that it provides a comprehensive situational analysis of current rostering practices and constructive recommendations on the management of the associated issues and risks.

The Department of Health is currently working very closely with the Tasmanian Health Service (THS) to plan and implement a range of governance and improvement initiatives that intersect with the recommendations of this Report, including investments in strengthening local leadership.

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Thank you

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