This is the annexure marked "**JPO-21**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

A National Approach to the Assessment of Temporary Resident Doctors

Background

The assessment of Temporary Resident Doctors (TRDs) working in area of need (AON) positions, including general practice, has been a matter of national discussion at a political and regulatory level since at least 1992 when it was on the agenda of the Australian Health Ministers' Advisory Council (AHMAC). The concern then was that Australia was too reliant on temporary resident visa doctors. Restrictions were imposed by the Commonwealth via quotas on Australian Medical Council (AMC) candidates and immigration visa applicants. In addition allegations of discrimination due to inconsistencies in registration processes of TRDs led to this topic becoming a major concern.

Specific problems arose as a result of mutual recognition legislation, exposing all States to individual jurisdictional practices. The Tasmanian example of legislating to grant registration, without conditions, to four long-serving area of need practitioners, thereby bypassing both agreed national standards and the regulatory role of the Medical Council of Tasmania, raised concerns of political interference in standards maintenance by Boards. In December 1995, the AMC was asked by the Australian Health Ministers' Advisory Council (AHMAC) to provide advice on a national approach to assessment and registration for area of need positions.

In April 1996, a Working Party established by the AMC developed an options paper for AHMAC, entitled '*A Structured Approach for Area of Need Registration*'. The options paper, which is enclosed at **Attachment A**, proposed a structured approach to area of need registration which matched individual practitioners to the service needs of the area of need positions. The 1996 model identified the following requirements:

- o Definition / categorisation of area of need positions in registration terms
- o Open processes for assessment and registration
- o Supervision issues and mechanisms for monitoring standards.

The Working Party stated the following in its introduction;

- *The community has an expectation of having access to medical services which places demands on Governments and employers to meet medical workforce requirements.*

- *Medical Boards are concerned with standards issues and the need to ensure that medical practitioners meet the legal requirements for registration and maintain appropriate standards of medical practice.*

Current Position

The position described above remains equally relevant today. Recent examples include the (2004) Commonwealth initiatives to streamline the introduction of overseas trained specialists into the Australian workforce, and the recent announcement of the Productivity Commission study into the health workforce, including *'regulatory factors that are affecting the supply of health professionals'.*

There are other considerations:

- The changing profile of area of need International Medical Graduates (IMGs) who no longer are mostly from Commonwealth or countries with similar health systems to Australia
- Increased reliance on IMG's in rural and remote regions due to the inability to attract Australian graduates
- Increased concerns raised through the Joint Medical Boards Advisory Committee of the AMC about the inconsistency and, to a certain extent, the quality of assessment of IMGs and the potential impact on the quality of care ultimately being received by the public
- A shortage of qualified supervisors brought about by the increased ratio of IMGs in rural positions and demands on general practitioners in practice
- Conflict of interest concerns arising from Boards placing reliance upon assessment processes conducted by those with vested financial or workforce interests
- Commonwealth initiatives to increase the number of IMGs by reducing barriers to registration, qualifications and remuneration sources (Health Insurance Commission)
- Changes to immigration requirements, providing increased work opportunities for overseas qualified professionals
- The workforce impact of increased number of doctors passing the AMC MCQ and seeking post AMC placements
- Public pressure on governments to meet the increased demand for medical services
- The need for agreed minimum standards and greater national consistency in assessment processes for area of need positions given the proposals for greater portability of registration.

These considerations place increased importance on formulating a consistent national approach to assessment and registration processes and urnderscore the message from the 1996 Report to AHMAC which observed:

> *"failure to do so will see moves towards political rather than professional/standards solutions to the [workforce] problem'.*

The 1996 Report to AHMAC also identified a number of general principles that would be equally relevant to the current attempts to agree on a standards-based national approach. These are:

1. **Need for a consistent approach by all Medical Boards to 'area of need' registration**
2. **The importance of supervision where AON practitioners do not meet the formal standards for full registration**

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3.   **The need for qualifications and experience to match the service requirements and clinical responsibilities of the position**

4.   **AON registration should not be open ended and should avoid 'border hopping' by being accumulative across States [The time in each position to be counted towards the total time available for AON registration].**

5.   **Registration into AON positions should be determined on standards, not workforce considerations.**

A National Approach

This paper is intended to build on the work of the 1996 Report to AHMAC and provide a way to progress the development of a national approach to the assessment and registration of IMG's into non-specialist* AON positions including AON general practice. Its purpose is to facilitate a "Best Practice Model" of registration management of IMGs into AON positions that is acceptable to all Boards and appropriate for the relevant stakeholders. This provides opportunity for consistency in standards of registration, increased confidence for each jurisdiction when determining applications from colleague States and increased public confidence in the quality and safety of medical services provided nationally.

There are currently significant variations in standards across a number of processes. These include assessment, requirement for clinical interview, information required for consideration by the Board, supervision and monitoring/reporting requirements. Table 1 provides an overview of the current assessment processes for area of need registration.

Some of these differences are explained by external factors operating within each State, such as:

*   the number of positions declared as area of need and IMGs applying to a Board (one to the ACT vs. hundreds to Queensland)
*   the individual resources of the Boards
*   the time pressures placed upon various jurisdictions by workforce needs,
*   the quality of applications
*   access to appropriately qualified supervisors and
*   the characteristics of the AON positions (eg rural or outer metropolitan, GP placements or hospital locations).

However there are some areas in which all Boards have discretion to take action to improve the consistency of the registration process nationally. These areas are starting to be addressed and the need to do so shall become increasingly more pressing as we move closer to realising portability of registration.

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* It is assumed that IMGs who satisfy the requirement for recognition as a "specialist' in general practice (eg. who obtain the FRACGP or are assessed as equivalent) will not need to proceed through the non-specialist AON pathway.

NATIONAL COMPARISONS OF AREA OF NEED ASSESSMENT REQUIREMENTS FOR REGISTRATION

Table 1

STEPS:	NSW	VIC	WA	ACT	SA	QLD	TAS	NT
1. CV	✓	✓	✓	✓	✓	✓	✓	✓
2. References (last 2 yrs)	✓	✓	✓	✓	✓	✓	✓	✓
3. Detailed position description	✓		✓	✓	✓	✓	✓	✓
4. AON letter from DoH^	✓	✓	✓	✓	✓	✓	✓	✓
5. Registration Fee	✓	✓	✓	✓	✓	✓	✓	✓
6. ID	✓	✓	✓	✓	✓	✓	✓	✓
7. Degree	✓	✓	✓	✓	✓	✓	✓	✓
8. Passport Photo*	✓	✓	✓	✓	✓	✓		
9. Certificate of registration from last authority	✓	✓	✓	✓	✓			
10. COG	✓	✓	✓	✓	✓	✓	✓	✓
11. Statutory Declaration if unregistered*	✓			✓				
11. Board Assessment Panel	✓			✓	✓		✓	
12. Assessment Panel Recommended to Board	✓			✓	✓		✓	
13. Registration Subcommittee		✓	✓	✓	✓	✓		
14. Right of Appeal if rejected	✓	✓	✓	✓		✓	✓	✓
15. Progress reports***	✓	✓	✓	✓	✓	✓	✓	✓
16. Board to be informed and/or position description changes	✓	✓		✓				
17. Evidence of satisfactory internship		✓					✓	✓
18. Visa/Passport^^^	✓	✓	✓	✓	✓	✓	✓	✓
19. Mandatory disclosure	✓	✓	✓			✓	✓	✓
20. IELTS	✓	✓	✓	✓	✓	✓	✓	✓
21. Requirement to commence within period of approval	✓		✓		✓	✓	✓	
22. Assessment fee	✓			✓				
23. Limits on supervisor/doctor ratio	✓			✓			✓	
24. Limits to period of conditional registration^^	4yrs	4yrs	5yrs	5yrs	4yrs	3yrs	5 yrs	5yrs

^AON letter from DoH - NT:any potential employer

*Statutory Declaration if unregistered - NSW:3/12

***Progress reports:NSW:1/12 for 3/12, 3/12 for 9/12, then 6/12; SA:1/12, 3/12 or 6/12 as deemed necessary on an individual basis.TAS:@ 2wks orientation, 3/12, 12/12, 12/12 thereafter

WA: as deemed necessary.

^^Limits to period of conditional registration - NT: 5ys with discretion.

**Passport photo:Qld & SA: 2 photos   ^^^Visa/Passport - Qld: s - for ID only

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Recent examples of standardisation of process developed jointly by the Boards are the English Language Testing policy agreed by the Joint Medical Boards Advisory Committee and the work now being done on Validation of Identity (100 points check) as a basis for all registration.

To assist in the above, there are useful recommendations contained within the 1996 Report to AHMAC that are relevant to today's considerations. The concepts are not overly prescriptive and are adaptable to jurisdictional resources and requirements. Importantly, there is an emphasis on matching the skills and experience of the applicant with the position description and then with the level of autonomy and expected clinical profile serviced by the position.

This matrix approach allows for support and training of those IMGs who fall into the lower categories as described by the National Reference Panel (NRP) on Overseas Trained Doctors (OTDs).

Since the Report to AHMAC was produced there have been developments in the available resources to assist Boards in this task, including bodies such as the Postgraduate Medical Education Councils, Rural Doctors Workforce Agencies and their equivalents and within the Colleges.

Therefore, more discussion is required to see if there is opportunity for these bodies to continue to provide the assessment and supervision/monitoring and reporting functions required by the Boards.

This may require some further funding and sources: this will need to be discussed with State and Commonwealth governments and health service providers. It is argued that by attracting qualified IMGs, Australia benefits by avoiding the considerable education and training costs incurred by Australian graduates. In order to ensure that such doctors are orientated to Australian medical practice and are able to perform at a level comparable to an equivalent Australian qualified practitioner it is arguable that governments should contribute to the costs of ensuring proper and reliable assessment, orientation and, where necessary, up-skilling.

Guidelines for Essential/Desirable Elements of TRD Assessment – Issues to be Considered

Pre Registration
1.   International computer-administered screening examination (AMC)
2.   Verification of qualifications and identity (National Procedure)
3.   English language proficiency (National Standard)
4.   Review experience and background including relevant College; assessment of experience
5.   Assess evidence of fitness for registration, including where appropriate character, Certificates of Good Standing, references.

6. Assess job description according to categories based on level of decision making, clinical profile, available supports and supervision etc.

7. Categorise practitioner based upon NRP categories

Option A:

Category 1:	Similar health system + post grad studies or formal qualifications in relevant field + Minimum of 5 years independent experience (based on College assessment)
Category 2:	Not from similar health system + post grad studies in relevant field + Minimum of 5 years independent experience (based on College assessment)
Category 3:	Similar health system + minimum of 5 years independent experience (based on College assessment)
Category 4:	Not from similar health system + minimum of 5 years independent experience (based on College assessment).
Category 5:	Others.

OR

Option B:. Individual assessment of fitness for the described position by an independent assessing body

OR

Option C: . Combination of categorisation and individual assessment.

7. Clinical Interview – Limit to Category 2 - 5 or apply to all applicants ?

8. Clinical Exam – Limit to Category 3 - 5 or apply to all applicants?

9. Match position with skills and experience of practitioner based upon mix of paper based assessment and objective clinical assessment performed by independent body (eg Board panel, Rural Doctors Workforce Agency, RACGP)

Post Registration

1. Initial period under direct supervision (1 to 3 months) (The nature of the supervision may need to be clarified.)

2. Mandatory professional development and training within first 3, 6 or 12 months of registration as appropriate:

   Board briefing session.
   Aboriginal health
   Woman's health
   IMG networking meetings
   Cross cultural training.
   HIC and Australian health system.

Drugs and poisons session.
Australian welfare system.
Australian financial system.

3. Completion of AMC examination or specialist recognition should be obtained within a defined period of years from initial registration.

4. Work reports (standardised) - after 1 month, 3 months, 6 months, 12 months.

It is recognised that one of the problems faced by Boards is their reliance on third party information such as supervisors or employer reports and recruiter assessments. One of the key principles which all Boards have confirmed is that assessment and reporting processes need to be provided by independent parties to allow confidence in the objectivity of the content.

Way Forward

Stage 1:   Establish, by mutual agreement, guidelines for essential/desirable elements of assessment processes

Stage 2:   Determine what changes and needs must be addressed within each Jurisdiction for model to be adopted.
Determine what external support (if any) needs to be sourced and on what specific issues.
Determine time frame and implementation. [This may need to be a phased implementation.]

Stage 3:   Determine costs and recovery options –"Who Pays" (eg. candidate, employer, respective Board, or candidate via separate application fee)

Stage 4:   Agreement on new process, cost and cost recovery

Stage 5:   Formalise national policy

Stage 6:   Agree on implementation date

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This is the annexure marked "**JPO-22**" mentioned and referred to in the Statement of **JAMES PATRICK O'DEMPSEY** dated this 17th day of May 2005.

OPERATIONAL PLAN 2002-2003

OFFICE OF HEALTH PRACTITIONER REGISTRATION BOARDS

CONTENTS

Introduction

Registration Services

Complaints Management Services

Health Assessment and Monitoring Services

Board Meeting Support Services

Professional Advice and Support Services

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Records Management Services

INTRODUCTION

The *Operational Plan 2002-2003* documents those objectives we will implement to achieve the corporate strategies detailed in the *Strategic Plan 2000-2003*.

The hallmark of our planning process is the extensive input received from staff in the organization. In this regard we have sought the views of senior managers and all staff through participation in workshops to undertake a guided self assessment of the organization. Additionally, senior managers have participated in an operational planning workshop. Input of this significance and value ensures that the Office's operational objectives are both informed and influenced by those who will have a key role in achieving our outcomes. The central themes of this plan are that:

- Clear direction will enable organizational alignment and a focus on the achievement of goals.

- Mutually agreed plans will translate organizational direction into actions.

- To improve the outcome a focus on improving the systems and the associated processes is required.

- All people work in a system but outcomes are improved when people work on the system.

I look forward to working with all staff in the exciting year ahead.

Jim O'Dempsey, A/Executive Officer

REGISTRATION SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1. To establish and evaluate a Renewals and Restorations Business Processing Centre	Develop project proposal by June 2002 Submission to Executive Officer detailing project proposal by July 2002 Implement project as per schedule approved by Executive Officer	Steering Committee to be constituted by JOD, GC, MD-G, JB, MB & Project Officer Project Officer AO5 (.5FTE) June – October 2002 AQC Opportunities Identified 1. To better identify data required to make management decisions 2. To ensure data is easy to use and is timely and reliable and that data is analysed 3. To improve access to data – perhaps by allowing broader access to report generation 4. To better develop the processes around innovation 5. To develop standard work processes and systematic approach to improving them

REGISTRATION SERVICES

	OBJECTIVES	MILESTONES	RESOURCES AND NOTES
2.	To develop and implement an integrated Registration Policy and Procedure	Develop project proposal by July 2002 Submission to Executive Officer detailing project proposal by August 2002 Implement project as per schedule approved by Executive Officer	Steering Committee to be constituted by JOD, GC, MD-G, JB, MB & Project Officer Project Officer AO5 (.5FTE) June – October 2002 Total Process Mapping to be completed as component of Project <u>AQC Opportunities Identified</u> 1. To better identify data required to make management decisions 2. To ensure data is easy to use and is timely and reliable and that data is analysed 3. To improve access to data – perhaps by allowing broader access to report generation 4. To better develop the processes around innovation 5. To develop standard work processes and systematic approach to improving them

COMPLAINTS MANAGEMENT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1. To develop a Complaints Management Policy and Procedure	Develop project proposal by August 2002 (identification of those to be consulted will be addressed in this proposal and must include the Registrars of the Tribunal and Professional Standards Panel	Steering Committee to be constituted by JOD: VOB; JC; JL; MD; MB; AO3 complaints
	Submission to Executive Officer detailing project proposal by September 2002	Project Officer AO6 July – December 2002
	Implement project as per schedule approved by Executive Officer	Total process mapping to be completed as component of this Project
		AQC Opportunities Identified 1. To better identify data required to make management decisions 2. To ensure data is easy to use and is timely and reliable and that data is analysed 3. To improve access to data – perhaps by allowing broader access to report generation 4. To better manage complainants' expectations 5. To better develop the processes around innovation 6. To develop standard work processes and systematic approach to improving them

COMPLAINTS MANAGEMENT SERVICES

	OBJECTIVES	MILESTONES	RESOURCES AND NOTES
2.	To develop and implement a proposal for use of external investigators	Develop project proposal by July 2002 Submission to relevant Boards by August 2002 Implement project as per schedule approved by the Boards	Project team to be constituted by JOD; VOB; JL; RW Cost/benefit analysis to be completed in preparing project proposal Will require internal management/ co-ordination which may be shared between investigators Budget items required based on cost/ benefit analysis

HEALTH ASSESSMENT AND MONITORING SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1. To develop a Health Assessment and Monitoring Policy and Procedure	Develop project proposal by August 2002 Submission to Executive Officer detailing project proposal by September 2002 Implement project as per schedule approved by Executive Officer	Steering Committee to be constituted by JOD: VOB; JC; JL; MB; AO3 (HAM) Project Officer AO6 July – December 2002 Total process mapping to be completed as component of this Project AQC Opportunities Identified 1. To better identify data required to make management decisions 2. To ensure data is easy to use and is timely and reliable and that data is analysed 3. To improve access to data – perhaps by allowing broader access to report generation 4. To better develop the processes around innovation 5. To develop standard work processes and systematic approach to improving them

HEALTH ASSESSMENT AND MONITORING SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
2. To implement the outcomes of the Siggins Miller review of the Health Assessment and Monitoring service	Develop implementation proposal by July 2002-05-13 Submission to Medical Board detailing implementation proposal by August 2002 Implement as per schedule approved by Medical Board	Resources dependent on Cabinet decision Implementation proposal to be informed by Health Assessment and Monitoring Committee

BOARD MEETING SUPPORT SERVICES

	OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1.	To evaluate the efficiency and effectiveness of Board secretariat services and processes	Evaluation proposal completed by July 2002	Within existing resources of general administration and staffing budget
		Evaluation process undertaken from August 2002 and as per schedule approved by Executive Officer	JO'D responsible for development of proposal. Steering Committee to be constituted by Senior Managers
		Evaluation Report and recommendations completed by October 2002	Total process mapping to be completed as component of this project
		Submission to Boards proposing future direction completed by November 2002	AQC Opportunities Identified
		Implement approved outcome from January 2003	1. To better identify data required to make management decisions
			2. To ensure data is easy to use and is timely and reliable and that data is analysed
			3. To improve access to data – perhaps by allowing broader access to report generation
			4. To better develop the processes around innovation
			5. To develop standard work processes and systematic approach to improving them

	OBJECTIVES	MILESTONES	RESOURCES AND NOTES
2.	To evaluate the Service Agreements and their implementation	Evaluation proposal completed by August 2002

Evaluation process undertaken from September 2002 and as per schedule approved by Executive Officer

Evaluation Report and recommendations completed by December 2002

Submission to Boards proposing future Service Agreement completed by February 2003

New Service Agreements entered into by June 2003 | This project will be undertaken by an external consultant selected through a process consistent with the State Purchasing Policy

JOD responsible for development of proposal and senior managers will inform evaluation process
AQC Opportunities Identified
1. To clarify roles of the Boards and the Office with regard to governance of the whole organisation – and to operate as one organisation
2. To better identify data required to make management decisions
3. To ensure data is easy to use and is timely and reliable and that data is analysed
4. To improve access to data – perhaps by allowing broader access to report generation
5. To better predict customer expectations and deploy this including via performance criteria
6. To better develop the processes around innovation
7. To develop measures of quality of processes
11. Service Agreements require better development of KPIs to measure success |

PROFESSIONAL ADVICE AND SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1. To develop a Recency of Practice policy and procedure	Complete development proposal by September 2002 Submission to all Boards detailing development proposal by October 2002 Implement as per schedule approved by all Boards	Within existing resources of general administration and staffing budget JO'D responsible for development of proposal AQC Opportunities Identified 1. To better develop the processes around innovation 2. To develop standard work processes and systematic approach to improving them 3. To consult with all stakeholders in a systematic way

STATUTORY COMPLIANCE, PLANNING AND REPORTING SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1. To contribute to the review required under Section 33, *Health Practitioner Registration Boards (Administration) Act 1999*	Undertake by August 2002 a review of Executive Officer position description and reporting/supervision framework	Within existing resources of general administration staff and budget
	Prepare a review report with recommendations by September 2002 for the Minister's consideration	JO'D responsible for co-ordination process
	Contribute to terms of reference to be developed by Legislative Projects Unit, Queensland Health by October 2002	<u>AQC Opportunities Identified</u>
	Co-ordinate input to the Review process from March to June 2003	1. To clarify roles of the Boards and the Office with regard to governance of the whole organisation – and to operate as one organisation

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
2. To co-ordinate development of the Strategic Plans of the Boards and the Office as required under the *Financial Administration and Audit Act 1977*	Development strategies identified with senior managers by July 2002	Within existing resources of general administration and staffing budget
	Submission to all Boards from Executive Officer proposing development process completed by August 2002	AQC Opportunities Identified
	Development process approved by Boards and Executive Officer commenced from September 2002	1. To consult with all stakeholders in a more systematic way
	Report and recommendations completed by February 2003 for consideration by Boards and Executive Officer	2. To incorporate external influences in a more strategic, deliberate and systematic way
	Strategic Plans approved by Boards and Executive Officer published by July 2003	3. To deploy an operational planning process throughout the organisation
	Operational Planning Workshop proposal completed by February 2003 and Workshop undertaken by March 2003	4. To better develop measures in operational plans
	Budget development commenced by March 2003	5. To involve staff more in the planning of the work of the Office
	Budget submission completed by May 2003 for consideration by Boards and Executive Officer	6. To more systematically identify customer needs - particularly registrant customers
		7. To better predict customer expectations and deploy this including via performance criteria
		8. To develop systems for measuring customers' perception of value and for deploying this information
		9. To develop an approach to internal and external benchmarking
		10. To develop and measure indicators of sustainability
		11. Service Agreements require better development of KPIs to measure success

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1. To develop and implement communication standards and structure	Development team established by July 2002 Development proposal completed by August 2002 Submission to Executive Officer detailing development proposal by September 2002 Development completed by December 2002 Submission to Executive Officer detailing – (a) proposed standards and structure; (b) implementation proposal; and (c) evaluation proposal Implementation completed by March 2003 Evaluation commenced from March 2003	Within existing resources of general administration and staffing budget Communication Standards to include both internal and external channels. Additionally, client service standards will be articulated <u>AQC Opportunities Identified</u> 1. To clarify roles of the Boards and the Office with regard to governance of the whole organisation – and to operate as one organisation 2. To develop a culture and systems that supports creativity, listening, learning and sharing throughout all parts of the organisation 3. To better share best practice from one unit to another 4. To give staff opportunities to meet, discuss, learn and share 5. To ensure that teams function as part of one organisation and develop processes to support this - such as meetings and communication systems 6. To develop clear guidelines to resolve customer problems and for managing relationships

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
2. To implement Performance Development and Review Policy and process	Develop implementation proposal by July 2002 Submission to Executive Officer by July 2002 detailing implementation proposal Implement as per schedule approved by Executive Officer	All of Staff workshop – costs including facilitator, venue and catering JB responsible for development of proposal. Senior managers responsible for implementation of proposal AQC Opportunities Identified 1. To develop a culture and systems that supports creativity, listening, learning and sharing throughout all parts of the organisation 2. To better leverage all organisational assets 3. To better develop a policy and procedure framework in order to capture and retain knowledge 4. To deploy the planned PP&R system 5. To better predict customer expectations and deploy this including via performance criteria

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
3. To develop and implement a Training Plan	Complete development and implementation proposal by July 2002 Submission to Executive Officer by July 2002 detailing development; implementation and evaluation of Training Plan Implement as per schedule approved by Executive Officer	Within existing resources of general administration and staffing budget JB responsible for development of proposal. Senior managers responsible for implementation of proposal AQC Opportunities Identified 1. To identify existing knowledge 2. To develop a training plan and ensure that a proper induction process is developed 3. To develop an ongoing training system for customer contact personnel

CORPORATE SUPPORT SERVICES

	OBJECTIVES	MILESTONES	RESOURCES AND NOTES
4.	To develop a Human Resource Management Policy and Procedures	Complete development and implementation proposal by July 2002	This project will be undertaken by an external consultant selected through a process consistent with the State Purchasing Policy
		Submission to Executive Officer by July 2002 detailing development process	
		Development process undertaken as per schedule approved by Executive Officer	JB responsible for development of proposal. Steering committee of representative staff to be established
		Development of Policy and Procedures to be completed by July 2003	AQC Opportunities Identified
			1. To develop a culture and systems that supports creativity, listening, learning and sharing throughout all parts of the organisation
			2. To develop an organisation wide approach to developing leadership
			3. To identify opportunities to better impact on the environment and community contribution of the organisation
			4. To develop a workplace health and safety strategy and policy
			5. To better develop the processes around innovation

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
5. To further develop and implement a Financial Management Practice Manual	Development proposal completed by August 2002 (To include: (a) cost benefit analysis of Time Capture; and (b) evaluation of efficiency and effectiveness of current practices)

Submission to Executive Officer by August 2002 detailing development proposal

Development process undertaken as per schedule approved by Executive Officer

Development and implementation of FMPM to be completed by January 2003 | This project will be undertaken by an external consultant selected through a process consistent with the State Purchasing Policy

JB responsible for development of proposal. Steering committee to be established by JOD; JB; BJ; GC; and MD-G

AQC Opportunities Identified

1. To clarify delegations in some areas of the organisation
2. To better identify data required to make management decisions
3. To ensure data is easy to use and is timely and reliable and that data is analysed
4. To improve access to data – perhaps by allowing broader access to report generation
5. To work more systematically with suppliers to reduce cost and improve quality
6. To ensure that staff interacting with suppliers have appropriate authorities
7. To develop standard work processes and systematic approach to improving them |

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
6. To implement quality improvements for the: (a) financial management reporting framework; and (b) budget development and review process	Evaluation of current reporting framework completed by December 2002 Implementation proposal completed by March 2003 Proposal approved by Executive Officer implemented from July 2003	Within existing resources of general administration and staffing budget Implementation proposal to be informed by BJ; JB; JOD; GC; and MD-G AQC Opportunities Identified 1. To better identify data required to make management decisions 2. To ensure data is easy to use and is timely and reliable and that data is analysed 3. To improve access to data – perhaps by allowing broader access to report generation 4. To better develop the processes around innovation 5. To develop standard work processes and systematic approach to improving them

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
7. To implement quality improvements for the Investment Policy and Procedures	Evaluation of current investment policy and procedures completed by April 2002. Implementation proposal completed by April 2002 for consideration of Boards and Executive Officer in May 2002. Investment Policy and procedures approved by Boards and Executive Officer implemented from July 2002	Within existing resources of general administration and staffing budget
8. To develop an internal audit framework	Needs analysis for internal audit completed by February 2003 Proposal for introduction if internal audit completed by March 2003 for consideration of Boards and Executive Officer in April 2003 Internal Audit Proposal approved by Boards and Executive Officer implemented from May 2003	Within existing resources of general administration and staffing budget

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
9. To develop and implement an Information Management Policy and procedures	Development proposal completed by July 2002 Submission to Executive Officer by August 2002 detailing development proposal Development process undertaken as per schedule approved by Executive Officer Development and implementation completed by June 2003	Within existing resources of general administration and staffing budget MB responsible for development of proposal Development proposal to be informed by JB; JP; JOD Policy to include service standards to be achieved Total process mapping may need to be completed as component of this project AQC Opportunities Identified 1. To better develop the processes around innovation 2. To develop standard work processes and systematic approach to improving them

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
10. To implement a 12 month plan for system architecture and infrastructure/security	Implementation plan and costing to be completed and approved by Executive Officer by June 2002 Plan to be implemented as per schedule approved by Executive Officer Implementation to be completed by June 2003	Within existing resources of general administration and staffing budget MB responsible for development of plan and plan is to be informed by Information Management Committee

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
11. To evaluate the efficiency and effectiveness of REGIS and its sub-modules (Complaints and Health Assessment and Monitoring)	Evaluation proposal completed by September 2002

Submission to Executive Officer by October 2002 detailing evaluation proposal

Evaluation process undertaken as per schedule approved by Executive Officer

Evaluation Report and recommendations (including cost/benefit analysis) completed by February 2003

Submission to Boards proposing future direction completed by March 2003

Implement Boards' decision from April 2003 | This project will be undertaken by an external consultant selected through a process consistent with the State Purchasing Policy

MB responsible for development of proposal. Steering Committee to be established by Senior Managers

AQC Opportunities Identified

1. To better leverage all organisational assets
2. To better identify data required to make management decisions
3. To ensure data is easy to use and is timely and reliable and that data is analysed
4. To improve access to data – perhaps by allowing broader access to report generation
5. To better develop the processes around innovation
6. To develop standard work processes and systematic approach to improving them |

CORPORATE SUPPORT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
12. To develop a proposal for an integrated World Wide Website which provides on-line services	Development proposal completed by September 2002 Submission to Executive Officer by October 2002 detailing development proposal Development process undertaken as per schedule approved by Executive Officer Development Report and recommendations (including full costing) completed by February 2003 Submission to Boards proposing future direction completed by March 2003 Implement Boards' decision from April 2003	Within existing resources of general administration and staffing budget <u>AQC Opportunities Identified</u> 1. To better develop the processes around innovation

RECORDS MANAGEMENT SERVICES

OBJECTIVES	MILESTONES	RESOURCES AND NOTES
1. To evaluate the efficiency and effectiveness of Records Management services	Evaluation proposal completed by August 2002 Submission to Executive Officer by September 2002 detailing evaluation proposal Evaluation process undertaken as per schedule approved by Executive Officer Evaluation Report and recommendations (including full costings) completed by March 2003 for Executive Officer consideration Implement Executive Officer's decision from April 2003	Within existing resources of general administration and staffing budget JP responsible for evaluation proposal which is to be informed by senior managers <u>AQC Opportunities Identified</u> 1. To develop standard work processes and systematic approach to improving them