

WorkSpace Accommodation Policy

Summary This Policy describes Work Space provisions for NSW Health staff in respect to all new or refurbished Work Space accommodation. It provides a people-centric framework to allow NSW Health Organisations to develop Work Spaces that are tailored to the Organisation's vision, its strategic goals, the way its people work together and the nature of the work being undertaken. Work Spaces must maintain the safety and wellbeing of staff.

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WORKSPACE ACCOMMODATION POLICY

POLICY STATEMENT

The NSW Government's clear direction is to create consistent, efficient, flexible, agile and dynamic workplaces across the whole of Government. The <u>NSW Government</u> <u>Fitout Design Principles (Office Workplace Accommodation)</u> (the Fitout Design Principles) provides Workspace standards that support the needs of a contemporary workforce.

This policy adopts the standards, principles and design criteria of the *Fitout Design Principles* and is consistent with the requirements set out in the publication.

Workspaces covered by this policy do not include areas identified as Operational Space.

SUMMARY OF POLICY REQUIREMENTS

The process of developing new Workspaces for NSW Health staff must be undertaken in alignment with the planning and design criteria set out in the *Fitout Design Principles* as amended from time to time and with any relevant Award provisions.

Consultation between Health Organisations' managers and the relevant union(s) is to occur at a sufficiently early stage in the planning of a significant change to Workspace accommodation.

Employees who are affected by the proposed Workspace change are to be consulted on the change.

REVISION HISTORY

Version	Approved by	Amendment notes
December-2019 (PD2019_060)	Secretary, NSW Health	New policy.

ATTACHMENTS

1. Workspace Accommodation Policy: Procedures.



CONTENTS

1	BACKGROUND				
	1.1	About	this document	2	
	1.2	Key d	efinitions	2	
2	wo	WORKSPACES			
	2.1 Workspace Accommodation Principles			3	
	2.2 Workspace Criteria			3	
		2.2.1	Activity Based Working (ABW)	3	
		2.2.2	Enclosed Space and Unenclosed Space	3	
	2.3	Identif	fying Workspace zones in health care facilities and other facilities	4	
3	CONSULTATION REQUIREMENTS				
	3.1	Health	n unions	4	
	3.2	Affect	ed employees	5	
	3.3	Staff S	Specialists	6	
		3.3.1	Offices and Clause 24 of the Staff Specialist Award	6	
4	APF	PENDIX	(LIST	7	
	Atta	chmen	t 1: Information Sheet – Space Requirements	8	



1 BACKGROUND

1.1 About this document

Contemporary Workspace accommodation enables people and teams to choose from a variety of work settings to support their workstyle based on the type of activities they perform and the people they need to work with.

Work, and therefore the needs we have of Workspaces, is constantly evolving. Technology and other factors are transforming the way we work, resulting in a need for flexible, efficient individual and collaborative spaces. Workspaces must be created to suit the needs of those who work in them, and also have the ability to respond to a rapidly changing environment.

The overarching objective is to provide welcoming and supportive Workspaces that enable NSW Health Staff to achieve their goal to provide the right care or service, in the right place, at the right time.

This Policy describes Workspace provisions for NSW Health staff in respect to all new or refurbished Workspace accommodation and outlines the requirements and approach for consulting with unions and affected staff. It provides a people-centric framework to allow NSW Health Organisations to develop Workspaces that are tailored to the Organisation's vision, its strategic goals, the way its people work together and the nature of the work being undertaken. Workspaces must maintain the safety and wellbeing of staff.

1.2 Key definitions

<u>Enclosed Space</u> refers to a single-person or multi-person space which is acoustically separated from other areas within the Workspace (also known as a traditional enclosed office). It can include space types that provide Workpoints for individual focussed work, as well as spaces designed for collaborative working for multi-person activities, such as one-on-one conversations and enclosed meeting rooms.

<u>Unenclosed Space</u> refers to single-person or multi-person space which is not acoustically separated, or is partially acoustically separated from other areas within the Workspace. It includes Workpoints for individual work and spaces for casual interaction, such as collaborative hubs and open meeting tables.

<u>Operational Space</u> refers to clinical areas in which direct patient care takes place. Operational Space includes, for example, the clinical care areas of inpatient units (including Workpoints), operating theatres, coronary care units, medical imaging departments, ambulatory care centres. Operational Space also includes wet and dry laboratories (but not associated write up spaces), logistics functions such as production kitchens, goods receiving and loading areas, and ancillary functions such as libraries, reception areas, and patient consult/interview rooms.

<u>Workpoint</u> refers to a physical location for an individual to undertake activities within a Workspace. A Workpoint can be within an Enclosed Space or located in Unenclosed Space. A Workpoint may be allocated on a dedicated, exclusive or shared basis where appropriate.

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<u>Workspace</u> refers to non-Operational Space in which staff carry out office-based functions such as administrative, managerial, clinical follow-up, planning and research activities, either individually or collaboratively.

2 WORKSPACES

2.1 Workspace Accommodation Principles

The key principles of Workspace Accommodation are to create dynamic, efficient and agile Workspaces that:

- Meet legislative and industrial requirements
- Enable and facilitate staff to carry out their duties safely and effectively
- Support effective health care service delivery
- Encourage collaboration, and
- Are adaptable to changing needs.

2.2 Workspace Criteria

The process of developing new Workspaces for NSW Health staff must be undertaken in alignment with the planning and design criteria set out in the *Fitout Design Principles* as amended from time to time and any relevant Award provisions.

2.2.1 Activity Based Working (ABW)

Activity Based Working (ABW) is the space planning model prescribed in the *Fitout Design Principles*. ABW accommodates staff in a range of settings, both enclosed and unenclosed, tailored to the type of work that the staff members undertake and the proportion of their working hours spent engaging in different tasks. Using this model, staff may share Workpoints within these settings, so that all staff can access the range of spaces they need to be productive.

Activity based working does not seek to dictate the range of spaces that might be provided in any given design. Instead, it promotes the use of consultation processes that enable staff to articulate their working styles and be involved in the design of working environments to suit.

2.2.2 Enclosed Space and Unenclosed Space

While the *Fitout Design Principles* do not support enclosed offices (in this policy, singleperson Enclosed Spaces), Health Organisations are encouraged to develop Workspaces that support both collaborative work and focussed, individual work. This policy promotes the use of a mix of enclosed and unenclosed space types tailored to support the work activities of the staff that will use them. This can include the provision of both singleperson and multi-person Enclosed Spaces, on a dedicated, shared or exclusive basis.



Appropriate arrangements for use of Enclosed Space and Unenclosed Space will be developed by each Health Organisation through the consultation process. This can include shared, dedicated or exclusive use of space.

The requirement of the *Fitout Design Principles* that open plan office arrangements and/or configurations must be fully tested first refers to testing through pre-construction activities such as consultation, design, and physical or digital mock-ups of designs.

The requirements of this policy are to be used in place of any non-operational design guidance in the Australasian Health Facility Guidelines for Workspaces.

The *Fitout Design Principles* indicate space requirements for utilisation. Refer to Attachment 1 of this policy document for details on the application of space requirements.

2.3 Identifying Workspace zones in health care facilities and other facilities

Space within health care facilities and other health-related facilities with mixed operational / non-operational functionality is broadly arranged in three levels of access:

- Public Space which is accessible to staff, patients and visitors
- **Invited Space** where access by patients and visitors is controlled, e.g. an inpatient unit, operating theatre unit
- **Private Space** which is restricted and controlled so it is only accessible to staff and is physically secure from the public. Workspaces are typically found in these zones and must follow the planning and design guidance set out in this policy.

Operational Spaces should be co-located with, or near to Workspace areas which accommodate staff such as managers, clinicians and other support staff.

3 CONSULTATION REQUIREMENTS

3.1 Health unions

Consultation between Health Organisations' managers and the relevant union(s) is to occur at a sufficiently early stage in the planning of a significant change to Workspace accommodation (including change associated with a refurbishment, a new fitout or a health care facility redevelopment).

Consultation with the relevant union(s) must be undertaken by managers of the Health Organisation that employs the staff whose Workspaces are proposed to be changed. Consultation must be genuine, transparent and be a two-way process between the representatives of Health Organisations and industrial organisations where the parties:

- Talk to each other about Workspace accommodation matters,
- Listen to their respective priorities and concerns,
- Seek and share views and information, and
- Consider what is said before making decisions.



Managers of Health Organisations may utilise existing Joint Consultative Committees and other established channels of communication with union representatives to consult with and share information on Workspace accommodation projects.

Health Organisations must provide unions with information that describes the Workspace model/s to be considered.

3.2 Affected employees

Workspaces will not reflect a 'one size fits all' approach. A consultation process with employees who are affected by the proposed Workspace change will support the successful implementation of new Workspaces, as people involved in the process communicate with each other to identify issues, talk about any service delivery and safety culture matters (noting everyone has responsibility for ensuring their own and others' health and safety at work) and work together to identify optimal Workspace accommodation designs.

The engagement and consultation process will enable understanding of how people in the organisation work individually, in teams and with other stakeholders, in order to effectively translate the organisation's goals and guiding principles into detailed requirements for the new Workspaces.

The consultation process must:

- Be consistent with consultation provisions of relevant industrial Awards and the Work Health and Safety Act 2011. For example, the design of Workspaces must reflect the results of a Work Health and Safety risk assessment undertaken in consultation with workers, their health and safety representatives, and Work Health and Safety Risk Managers,
- Include discussion of a change management plan developed to outline key processes for a successful transition to new Workspace environments,
- Involve Health Organisation managers communicating with the people who will be using the new Workspaces,
- Occur at a sufficiently early stage in the planning of Health Organisation projects so that the people impacted can receive information about Workspace accommodation in the context of the new facility or refurbishment and be given sufficient time to provide feedback and for those views to be taken into account in the decision-making process,
- Utilise a formal group-based consultation structure designed to capture the feedback of staff who will use the Workspace,
- Use a variety of means to communicate the objectives and outcomes of the consultation process, which may include face to face meetings, written advice such as emails, posts on facility noticeboards, intranets and other communication tools,
- Consider the feedback of people who will be using the new Workspaces. The consent of staff does not have to be obtained to implement the changes to Workspace accommodation, however best practice should be followed to support



effective and efficient health care service delivery and achieve real and sustainable workplace change through cooperative and open change management processes, and

• Communicate outcomes as soon as practicable.

While the above points remain relevant, further matters for consultation with Staff Specialists are set out below.

3.3 Staff Specialists

Consultation with Staff Specialists can include individual or group consultation in conjunction with other staff members and may occur by survey, email, face to face interview or discussions with senior managers and Heads of Departments.

3.3.1 Offices and Clause 24 of the Staff Specialist Award

Note: For the purpose of this Policy Directive, references to enclosed offices in this section are a reference to Enclosed Spaces (section 2.2.2).

The Staff Specialist Award provides at clause 24 "Staff Specialists will have access to such office, secretarial and administrative support as may be reasonably necessary to undertake the requirements of the position."

Clause 24 does not mandate the provision of a dedicated, enclosed office to all Staff Specialists, whether on an individual or a shared basis. Clause 24 encompasses the office accommodation to which Staff Specialists must have access. The office accommodation could extend to an enclosed office, including on an exclusive or shared basis, but need not do so. An "office" can include the broader area in which a workforce might work, which might itself incorporate Workpoints in an open-plan configuration.

The nature of the office accommodation to which a Staff Specialist must be given access will depend on what is reasonably necessary for the Staff Specialist to undertake the requirements of their position. This is to be determined on a case-by-case basis, taking into account the work performed by the Staff Specialist and the place at which it is performed.

Where an individual Staff Specialist has concerns regarding the nature of the office accommodation to which they may be given access they are encouraged to request a meeting with their Health Organisation manager.



4 APPENDIX LIST

Attachment 1: Information Sheet – Space Requirements

APPENDICES



Attachment 1: Information Sheet – Space Requirements

This Information Sheet provides technical details on how to apply the space requirements contained in the *Fitout Design Principles* to Health Organisation Workspaces.

The Fitout Design Principles contain two underlying space requirements:

- full time equivalent (FTE) utilisation, measured in m² per FTE, and
- workplace density, measured in m² per workpoint.

In NSW Health facilities, both the above space requirements are to be considered as a maximum and are to be measured in Gross Departmental Area (GDA). GDA is the sum of nett functional areas contained within the workspace zone and their associated intradepartmental circulation areas.

Gross Departmental Area does not include travel and engineering areas such as lift shafts, risers, plant rooms and interdepartmental circulation spaces that connect the departments or health planning units within which workspace zones are located.

Utilisation is to be calculated using the FTE number of staff that the workspace zone is intended to accommodate. It does not include FTE numbers from staff that may visit the workspace from other areas within the facility or from outside the facility.

The workpoints to be used to calculate workplace density are ergonomic workpoints. Ergonomic workpoints are workpoints that are designed to facilitate individual work over a substantial period of time, and would typically be furnished with a task chair and a desk / workstation as a minimum. Ergonomic workpoints do not include casual working spaces that may be provided in collaboration hubs, for example, or numbers of chairs in meeting spaces.