**A Guide for Addressing Workload**

Draft V1.1

 

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Contents

[**Introduction** 3](#_Toc75331792)

[**Purpose of the guide and how to use** 3](#_Toc75331793)

[**Workload management guide** 3](#_Toc75331794)

[**Principles of good workload management** 5](#_Toc75331795)

[**Process for resolving a workload management issue** 5](#_Toc75331796)

[**Process flow chart** 7](#_Toc75331797)

[**Identification** 8](#_Toc75331798)

[**Analysis and risk assessment** 9](#_Toc75331799)

[**Develop options** 9](#_Toc75331800)

[**Action** 11](#_Toc75331801)

[**Reviewing and reporting** 11](#_Toc75331802)

[**Escalation and dispute resolution** 12](#_Toc75331803)

[**Appendix 1 – Roles and responsibilities** 13](#_Toc75331804)

[**Appendix 2 Tools for managers – worksheets** 14](#_Toc75331805)

[**Worksheet 1: Identification of workload issues** 14](#_Toc75331806)

[**Worksheet 2: Analysis of workload issues** 15](#_Toc75331807)

[**Worksheet 3: Risk assessment of workload issues** 16](#_Toc75331808)

[**Worksheet 5: Recommended actions for resolving workload issues** 19](#_Toc75331809)

[**Worksheet 6: Review** 20](#_Toc75331810)

[**Worksheet 7: Reporting** 21](#_Toc75331811)

# **Introduction**

## **Purpose of the guide and how to use**

Pursuant to the HSPBA/HEABC provincial collective agreement a working group on workload (WGW) was established. The WGW consists of HSPBA, HEABC and health authority representatives. The WGW was tasked to develop guidelines to address workload issues affecting Health Sciences Professionals.

The purpose of this guide is to support managers and front line staff in addressing the predictable and unpredictable fluctuation in patient care and service delivery. The WGW recognizes that workload that is consistently excessive can contribute to staff illness/injury, turnover, and attrition.

The WGW recognizes the importance of dialogue and collaboration between employees and the employer in an open and supportive manner to proactively identify, assess and strategize methods to address workload issues, while recognizing the Employer’s responsibility to determine the appropriate action and communication to all relevant and interested parties.

In order to facilitate the dialogue and collaboration the following guide has been developed by the parties. This guide should be used to build capability and improve outcomes and performance within the work sites.

Teams are encouraged to use this guide in conjunction with any internal or external resources that are found to be of benefit to support staff and managers work through to a resolution. While it is agreed that there are many causes for workload issues, due to the various work settings and occupations within the health authorities, reasonable workload will not be defined, as this can range by profession, geography, and patient population that is being served.

Teams are encouraged to review this guide with a flexible lens and modify the tools/process to better suit your agency or department. Any further changes or suggestions for improvement of the guide can be made to the HSPBA WGW.

## **Workload management guide**

This guide was created through the combined efforts of the HSPBA, HEABC and health authority representatives. The original inspiration for this document comes from the Queensland Government Workload management: A guide for managers (August 2017).

The HSPBA workload working group maintains that:

1. HEABC, HSPBA, and the Employer representatives have worked together to ensure that the current HSPBA reflects the needs of the employees and the employers. One of the initiatives in this collective agreement is the focus on workload and ways to best utilize available resources, while also identifying challenges that work sites face. It is in the spirit of working together to see best outcomes for both the front line manager/supervisor as well as the employee. Focus was paid to encouraging early conversations and work at a local level to support the unique care needs of patients in the areas in areas of care delivery.
2. Workforce planning requires that work patterns/flows are continually monitored to ensure employees are best utilized and to be able to deal with demands/pressures as they arise.
3. The guide is intended to foster communication, cooperation and achieving outcomes. The WGW recognized that there may be local processes that allow for evaluation. In such cases the local processes can be maintained and the guide is used as a supplementary resource.
4. Throughout the term of the collective agreement, the working group will continue to evaluate this guide and ensure that it is up to date with current practices.

# **Principles of good workload management**

Effective workload management requires:

* Open and transparent decision making
* Understanding that workload management forms part of normal business and project planning processes (established work patterns)
* Understanding both managers and employees are accountable for effective workload management
* Employees and managers to understand and accept that in each workplace there can be natural peaks and troughs with achieving service delivery requirements
* Recognition that changes occur in workplaces on a daily basis and that managers are responsible for managing workloads, (and have the ability to prioritize tasks to ensure employees are able to complete their work in the designated time)
* Workload allocation and prioritization that supports strategic priorities and links to business, operational and workforce planning processes.
* Decisions that take into account the work-life balance of employees
* Equitable distribution of workloads
* Recognition that employees should not be required to undertake work that significantly and regularly exceeds ordinary working hours, unless exceptional circumstances exist (such as an urgent or unexpected high-volume of work of a short-term nature, and/or for a specified time period; or where there are critical community service requirements e.g. emergency management services)
* Maintenance of safe work environments, safe work practices, and adherence to workplace health and safety legislation/policy
* Compliance with applicable legislation, collective agreement and arbitration awards - including hours of work and remuneration provisions
* Workload management informed by effective identification and analysis of data/information and accurate and consistent performance reporting within the context of the (healthcare delivery site)
* Processes undertaken and information collected as part of workload management take into account the privacy of, and confidentiality of issues raised by, individual employees
* Flexibility and discretion is maintained in applying workload management to ensure local and business area needs are met
* Issue escalation processes and dispute resolution mechanisms are in place.

# **Process for resolving a workload management issue**

Where possible, managers/supervisors and employees should refer to this guide to support their work in resolving the identified workload issue. While this guide does contain modified tools from the Australian model and tools identified from managers within the province, a local approach is emphasizedto ensure a sustainable solution that fits the environment where the workload issue has been identified.

Contained within [Appendix 1](#_Appendix_1_–) is a list of roles and responsibilities for resolving workload management issues, and any support or clarification should come from local management.

When an issue has been identified by an employee or manager or supervisor:

* 1. Identify the issue, collect data and establish normal work patterns
	2. Analyses the issue: review the data to determine underlying/contributing/causative factors, understand the risks including impacts and consequences
	3. develop options (refer to the tools contained in the appendix) for suggestions:

If no further action is required- communicate the outcome to employee(s), incorporate the issue into regular business planning activities and monitor.

If a significant risk is identified – then develop a range of options to address the risk (Refer to the tools found in the appendix)

* + Assess the priorities and review the options
	+ Document these options and develop an action plan
	+ Implement the action plan
	+ Evaluate and monitor the plan.

## **Process flow chart**



## **Identification**

Effective work units undertake ongoing planning to ensure being able to manage workloads and to be able respond to changes to established work patterns. Early planning and identification help achieve work goals and maintain a safe and healthy work environment.

Workload issues may be identified in a number of ways:

* by an employee or group of employees
* by a supervisor, manager, senior leader
* other impacted groups, such as a board, or patient/client or professional practice. as part of the operational planning cycle
* in response to major organizational change
* unexpected peaks in work
* Other external factors.

In examining an issue, the privacy and confidentiality of issues raised by individual employees or managers/supervisor should be maintained.

Indicators of workload issues can be potential ('lead indicators') or retroactive ('lag indicators').

Some examples of indicators of workload issues

|  |  |
| --- | --- |
| **Potential Indicators**Lead indicators may result in either an increase or decrease in workloads and therefor have different impacts on the need for workload management actions. | **Retroactive indicators**Lag indicators may be used to monitor and measure data in relation to a workload issue. |
| * Introduction of new programs or work
* Major organizational change, including staffing changes
* New or revised business or strategic plans
* Service reprioritization
* Changes in the external environment such as legislative changes, introduction of new professional or qualification standards
* Budgetary/economic factors
* Changes within the work unit’s client base
* Developments in community expectations
* Changes to documentation practices
* Interdisciplinary communication (referrals)
 | * Failure to achieve work unit goals or targets
* Increase in unplanned absences
* High levels of recreation leave accruals
* High rates of overtime
* Banked overtime and Time Off
* Outcomes of staff opinion or health and wellbeing surveys
* Increased numbers of complaints (internal and/or external)
* Above average staffing turnover
* Seasonal surges
 |

Documentation and workforce data may help to identify and plan for possible workload concerns. This requires identification and gathering of relevant indicators over a representative period of time as this will establish a work pattern. Retroactive indicators can then be measured against the identified norm.

[Worksheet 1 in Appendix 2](#_Worksheet_1:_Identification) - Tools for managers, contains examples of workload indicators and measures and can be used to collect data for issue identification.

## **Analysis and risk assessment**

Developing a reasonable timeframe that is mutually agreed upon will depend on the complexity of the issue and the workplace context.

Analyzing the workload issue ([worksheet 2 in Appendix 2](#_Worksheet_2:_Analysis)) should consider the range of factors involved, the associated risks and possible impacts on the work unit and employees, including work unit outcomes and health and safety. The risk evaluation matrix ([worksheet 3 in Appendix 2](#_Worksheet_3:_Risk)) provides a framework for assessing risk and analyzing issues. Alternatively, any current risk assessment tool(s) that are currently used locally may support this function and are encouraged to be utilized.

Considerations at this step should include:

* What factors, underlying causes, problems or trends are contributing to the workload issue?
* Are these factors temporary or ongoing?
* To what extent are these factors within the control of management, of employees and/or of the work unit generally?
* What is the impact of each contributing factor?
* Is there any kind of causal or correlative relationship between the indicators identified in step one and what are the assumptions underpinning that?
* What is the relative experience, capability and capacity of individuals within the work unit?
* Is there relevant historical and/or empirical data available that could help put a particular indicator in context? (For example, historical data that shows client demand for particular services typically increases in June but decreases again in August).

Workload issues at a local level can be impacted by/from multiple settings such as community, health and safety, economic/financial and political. The manager is responsible for analysis and planning for an identified issue and for maintaining communication with affected employees. Support should be sought when necessary from human resources, health and safety staff or those with expertise in change management.

## **Develop options**

As the workload issue is identified, potential options for resolution may include the issue resolved at a local level, incorporated within a newly established work pattern or may prove not to be identified as a problem.

If an action is required, refer to [Worksheet 4 in Appendix 2](#_Worksheet_4:_Options) for assistance to document potential options and manage the risks associated with these options. Options should be sustainable within the local setting and not impede on the safe delivery of patient care. Options identified will need to be prioritized into short, medium and long term, and incorporated into an action plan, work plan, or project plan that will have clearly identified action items and timelines.

The department and health authority has discretion as to how options are developed, responsibilities within the process (including documentation), the approval and formal reporting employed within the agency.

Relevant considerations when developing options include:

* What is the scope of the option i.e. is it a local level application or beyond to potentially an across agency scope?
* Given the scope of the option, what levels of and mechanisms for approval of the option are required?
* What is the potential impact on the existing workload within the work area, both at point of action and in an ongoing manner?
* Is reprioritization of services or work performed by the business unit a viable option?
* What level of resource investment or service rationalization is required e.g. human or financial resources?
* Is there the current capability or capacity to implement the option, and if not how might this capability/capacity be achieved?
* Are the options realistic, achievable, practical or viable?
* Has there been an appropriate level of consultation amongst affected staff?
	+ What level of involvement and/or impact does the option/s have on other interested parties?
	+ What impact does it have on clients or the community?
	+ Referencing back to the risk assessment process step, what is the degree of urgency and importance around each of the potential options?
	+ Do the potential options meet legislative, policy, financial and/or cultural requirements relating to the work area and agency?
	+ Are external sources of expertise or advice required to develop the options?
	+ Have local, national and international level best practice examples, where available, been referred to (ensuring that these are contextualized within the organization’s culture, environment, capability and capacity)?

## **Action**

Upon action plan development, implementation will need to be conducted, in an effective manner to the current work site planning. The manager has discretion as to how the actions are implemented, measured and evaluated.

[Worksheet 5 in Appendix 2](#_Worksheet_5:_Recommended) incorporates factors that should be included and may assist at this stage.

Existing agency planning tools may be used, and incorporate:

* + A set of tasks or procedures to implement the approved actions
	+ An allocation of these tasks or procedures
	+ Some agreed timeframes to implement these actions
	+ Development of strategies for the reprioritization of services and resources where relevant
	+ An allocation of resources e.g. financial, human, equipment, accommodation
	+ An identification of the key interested parties
	+ A set of performance measures
	+ Identified consultation and communication processes, both internal and external
	+ An approved evaluation mechanism. The action plan should also incorporate:
	+ Change management practices and related communication strategies
	+ Established work patterns
	+ Minimization of impact on clients and any other key interested parties
	+ Adherence to legislative, directives, policy and probity requirements e.g. recruitment and selection directive, procurement policy, workplace health and safety legislation
	+ Changes to update business and operational planning documents
	+ Adjustments to individual performance plans.

## **Reviewing and reporting**

Included within the work plans should be a reporting structure that supports regular status updates to interested parties. These updates and reports should inform the progress and resolution of workload management issues and should occur within an agreed timeframes. Workload management activities and actions need to be reviewed to ensure a safe and healthy work environment and continued achievement of desired business outcomes ([worksheet 6 in Appendix 2](#_Worksheet_6:_Review)).

Next level of supervision should be informed of the approved action plan and provide input to how the process for review and reporting is conducted, including appropriate timeframes for review and reporting. These agreed timeframes will depend upon the scope of the workload management issue and the details of the action plan.

[Worksheet 7 in Appendix 2](#_Worksheet_7:_Reporting) provides a template report form which may be used. Factors to consider in the review and reporting process:

* + effective record keeping and documentation of actions and decisions is vital
	+ performance targets/measures/normal workflow patterns need to be incorporated into the review and understood by all parties
	+ accurate and relevant data (both quantitative and qualitative) needs to be used
	+ options for who will undertake the review - depending on the agency and work unit circumstances, this work could be tasked to a small working group within the respective work area, another manager or an external third party, or the unit manager/supervisor
	+ apply objectivity and impartiality
	+ progress reporting may occur at different levels i.e. formalized departmental reporting lines and/or work unit levels

Acknowledging the manager has the discretion to determine how the review and reporting process is to occur, the timeframes or junctures for review and reporting, who performs the review, what constitutes the report i.e. the content and extent of the information/data, and at which levels within the agency the report is provided.

# **Escalation and dispute resolution**

If a workload management issue cannot be resolved at a local level, and/or by using the process steps in this guide, it may be escalated using the provisions of the collective agreement, specifically Article 38.05 – Workload. A group of employees or individual employee should ensure that they have genuinely and constructively attempted to address or resolve the issue, prior to escalation, and can provide evidence of doing so as described in 38.05 (a).

The work contained in this document can support the documentation required for 38.05 (b) in providing an assessment and any follow up documentation from the proposed issues identification. Information may be subject to the site/manager availability to information collected. Further to this, all documentation will support the workload dispute resolution section of 38.05 (c) to track and trend solution and support the recommendations that will resolve the differences.

Collective Agreement dispute resolution procedures should be adhered to for the escalation of workload management issues.

# **Appendix 1 – Roles and responsibilities**

Working together at a local level to promote health, safety and wellbeing in the workplace.

|  |  |  |  |
| --- | --- | --- | --- |
| Employees | Operation Managers and Supervisors  | Workplace Health and Safety (WH&S) managers | Human Resource Managers and other HR/IR Practitioners |
| * contributes to reviewing, planning for, implementing, evaluating and reporting on workload management within their teams, units, programs and services
* applies safe work practices to maintain safe work environments
 | * collaborates with employees to review, plan for, implement, evaluate and report on workload management in an open, consultative and fair manner
* ensures safe work practices are undertaken and adhered to, and safe work environments are maintained
 | Responsible for providing advice and support to managers and employees, relating to the WH&S implications of workload issues and processes | Responsible, within their area of expertise, for providing advice and support to managers and employees relating to workload management |

Working together, HEABC, HSPBA, and central agencies to promote health, safety and wellbeing in the workplace.

|  |  |  |
| --- | --- | --- |
| Unions | Professional Practice | HEABC |
| Responsible for supporting members within the collective agreement. | * Works with both the employees and operations to facilitate workplace solutions to ensure:
	+ - * + adherence to discipline specific scope of practice and standards,
				+ promotes best practice,
				+ accreditation and safety standards are maintained
 | Works with health employers and government to create the human resource and labour relations environment necessary to deliver high-quality health care – central consultative forum – bringing union and ER together |

# **Appendix 2 Tools for managers – worksheets**

## **Worksheet 1: Identification of workload issues**

|  |  |
| --- | --- |
| **Workload Indicator** | **Measure** |
| Number of hours overtime - paid and banked overtime | Average hours of paid overtime peremployee per week for a representative period of time |
| Number of accrued/flex hours forfeited | Average hours of excess banked timeforfeited per employee per month for a representative period of time |
| Number of hours or days sick leave taken | Average number of hours or days sick leaveper employee per quarter |
| Number of hours of excess vacation leave | Number of staff who have accrued excessvacation leave (e.g. beyond eight weeks) |
| Issues arising from work schedules | Number of shifts that have had unfilled shifts |
| Number and nature of workplace health and safety incidents | Number or extent of injury-free periods. Number of days lost time due to injury over a period of time |
| Number of terminated employees/levels of all classifications of staff turnover | Percentage or number of employees have separated from the business unit *I* service area over the last six months |
| Increasing frequency in the number of casual employees?  | Number of actual hours worked per casual employee per week for a representative period of time |
| Number of vacant positions | Number of vacant positions to be filled over a period of time |
| Backlog of work | Percentage of project milestones that have been met or failed to be met over a period of time |
| Changed work volume, practices and complexity | Percentage decrease or increase in work volume over a period of time |
| Number and nature of reported client/patient issues or complaints (includes issues related to quality and timeliness of service delivery) | Percentage or number of clients who have provided written or verbal compliments or complaints about the timeliness of service delivery over a period of time |
| Other: | Other: |

## **Worksheet 2: Analysis of workload issues**

|  |  |  |
| --- | --- | --- |
| Key issues(What are the contributing factors?) | Extent of impact(If temporary, how long, or ongoing?) | Other factors(E.g. within management or employee control, historical work trend, relative experience of work unit members, relationship with indicators?) |
| Implementation of a new policy initiative during the period (change management process) |  |  |
| Excessive work demands have reportedly inhibited the taking of accrued time – should this be placed differently |  |  |
| Organizational change has commenced as a result of a review of departmental or branch functions |  |  |
| Implementation of a new system during this period |  |  |
| Significant illness (e.g. flu season) during the period and backfill not possible (?availability of backfill) – Availability of backfill |  |  |
| Higher than average client service demands during the period (unfunded beds) – higher demands due to patient acuity |  |  |
| Role requirements have changed during this period due to organizational change (patient acuity) (possible changes due to professional associations) |  |  |
| Role requirements have changed during this period due to organizational change |  |  |
| Career opportunities for the specific occupational group have increased within the public and private sectors (recruitment and retention) |  |  |
| Advertised positions have failed to attract suitable applicant pools |  |  |
|  |  |  |

## **Worksheet 3: Risk assessment of workload issues**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ID | Key Issues(Including and identified “triggers”) | Impact on workload(Identified consequences) | Assessment of Likelihood | Assessment of seriousness | Level (Combined likelihood and seriousness) | Changes to grade since last assessment | Date of review | Mitigation actions (preventative or contingency) | Responsibilities for mitigation action(s) | Cost | Timeline for mitigation action(s) | Task breakdown structure |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

Example: Risk assessment matrix

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ID | Key Issues(Including and identified “triggers”) | Impact on workload(Identified consequences) | Assessment of Likelihood | Assessment of seriousness | Level (Combined likelihood and seriousness) | Changes to grade since last assessment | Date of review | Mitigation actions (preventative or contingency) | Responsibilities for mitigation action(s) | Cost | Timeline for mitigation action(s) | Task breakdown structure |
|  |

|  |
| --- |
| *Backlog in processing applications for housing assistance due to significant increase in applications over past 4 months.*  |

 | *Application process to be reviewed.**Minor Org restructure required to focus resources.**Some overtime required for 3 months.**Taking accrued time and rec leave will be limited for 3* | H | M | Medium High/Medium Low |  | *1 Sept 2011* | *Complete project plan including full workload analysis.**Review service prioritization and task allocation on a fortnightly basis.* | *Director**Team Manager* | *Nil**Nil* | *20 June 2011**Ongoing* | *Complete draft plan by 1 June.**Feedback from team by 12 June.**N/A* |

|  |
| --- |
| Rating for likelihood and seriousness for each risk |
| L | Rated as low | E | Rated as extreme (used for serious only) |
| M | Rated as medium | NA | Not assessed |
| H | Rated as high |  |  |
|  |  |  |  |
| Grade: Combined effect of likelihood/seriousness |
|  | Seriousness |
| LikelihoodH – HighMH – Medium HighML – Medium LowL – Low |  | Low | Medium | High |
| Low | L | ML | MH/ML |
| Medium | ML | ML/MH | MH |
| High | ML/MH | MH | H |

|  |
| --- |
| Recommended actions for grades of risk |
| Level | Risk mitigation actions |
| High | Mitigation actions, to reduce the likelihood and seriousness, to be identified and implemented as soon as possible. (Extreme) |
| Medium High | Mitigation actions, to reduce the likelihood and seriousness, to be identified and appropriate actions implemented within identified timeframe. (Urgent) |
| Medium Low | Mitigation actions, to reduce the likelihood and seriousness, to be identified and costed for possible action if funds permit. (less urgent)  |
| Low | To be noted - no action is needed unless grading increases over time. (Not urgent) |
|  |  |
| Change to grade since last assessment |
| New | New risk | ↓ | Grading decreased |
| \_\_ | No change to grade | ↑ | Grading increased |

**Worksheet 4: Options for resolving workload issues**

**Example solutions**

* + review task allocation within the team
	+ review work processes
	+ conduct skills analysis and relevant training
	+ review complexity and size of caseloads
	+ reprioritization of services
	+ monitor number of new clients and review workloads as required
	+ identify if former staff are interested in working part-time or as a mentor to less skilled staff
	+ consider spreading out staff start and finish times to cover peak periods
	+ consider flexible work arrangements, e.g. compressed working hours
	+ arrange for casual staff to be on call to provide additional resources e.g. when permanent staff are sick
	+ review processes to identify efficiencies
	+ cross train staff in the critical skills that have the most impact on producing outcomes
* Engage human resources unit to determine strategies to make the area more attractive to potential employees, e.g. job redesign, offer flexible work arrangements, etc.
* Consult with employees to determine impacts of new systems, organizational change, new policies, etc. on work demands prior to implementation.

|  |  |
| --- | --- |
| **Key Issue** | **Solution** |
|  |  |
|  |  |
|  |  |

## **Worksheet 5: Recommended actions for resolving workload issues**

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| --- |
| **Short term/Immediate actions** |
| Action | Who | When |
| Identify:* Tasks or procedures and allocation
* Interested parties
* Strategies for the reprioritisation of services where relevant
* Allocation of resources
* Performance measures
* Consultation and communication processes, change management
* Approved evaluation mechanism
* Maintenance of business as usual
* Impact on clients
* Governance requirements to be met
 |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Medium to long-term solutions** |
| Action | Who | When |
| Identify:* Tasks or procedures and allocation
* interested parties
* Strategies for the reprioritisation of services where relevant
* Allocation of resources
* Performance measures
* Consultation and communication processes, change management
* Approved evaluation mechanism
* Maintenance of business as usual
* Impact on clients
* Governance requirements to be met
 |  |  |
|  |  |  |
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|  |  |  |

## **Worksheet 6: Review**

|  |  |  |  |
| --- | --- | --- | --- |
| **Key Issues** | **Agreed action** | **Review period** | **Action officer** |
|  |  |  | Date:\_/\_/\_ |
|  |  |  | Date:\_/\_/\_ |
|  |  |  | Date:\_/\_/\_ |
|  |  |  | Date:\_/\_/\_ |
|  |  |  | Date:\_/\_/\_ |
|  |  |  | Date:\_/\_/\_ |
|  |  |  | Date:\_/\_/\_ |

## **Worksheet 7: Reporting**

|  |  |  |  |
| --- | --- | --- | --- |
| Key Issues | Agreed action | Achieved Yes/No | Reported to (who does this go to?) |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |