Appendix 5 – Summary of Review of Consumer Supports and Services, The Park

West Moreton Hospital and Health Service

TURNAROUND PLAN SERVICE REVIEW PROPOSAL

Consumer Supports and Services, The Park -Service Review

<Date>

DOCUMENT HISTORY

Version	Date	Prepared by	Comments



THE PROPOSAL

1. Proposal Details

1.1 Background (including current functions and structure)

Briefly describe the background to arriving at this point. Define the current functions/ roles of the service, the resources and model. Define any current problems, issues to be addressed/ gaps within the service area.

<Provide copy of current structure>

1.2 Proposed Initiative

Describe the initiative proposed to resolve the problem identified above, or to realise the opportunity identified.

1.3 Scope of Initiative

Describe the scope inclusions and exclusions of the initiative proposed.

1.4 Deliverables

Include the staging of key milestones and cost benefit. <*Provide copy of Turnaround Plan Spreadsheet>*

1.5 Potential Dependencies

Describe any potential dependencies relating to the proposed initiative, both internal and external dependencies (e.g. Broader Service Impacts, Partner initiatives).

1.6 Potential Impact of Initiative

Describe the potential impact of the initiative on customers/ consumers, services, public relations, regulatory/legislative compliance, people, processes, quality and safety.

<Provide workload impact assessment> <Provide copy of proposed structure>

2. Business Benefits

2.1 Business Benefits and Outcomes Provide a concise description in one to two paragraphs of the benefits (outcomes) that will be enabled by the proposal.

2.2 Non-Financial Benefits

Dot point key non-financial benefits

2.3 Financial Benefits

Dot point key financial benefits

3. Evaluation

Outline the Key performance Indicators (KPI's) that will measure the success of the proposal, and the timelines for evaluating the change benefits realisation and impact

4. Risk Management

Provide a Statement of the overall risk of the proposal considering the Integrated Risk Management Analysis Matrix.

5. Communication and Consultation

Provide a brief summary of internal and external stakeholders consulted and their commitment to the proposal. <Include strategies for communication/consultation with staff, unions and individual employees>

6. Recommendation

Summarise the recommendation.

RISK ANALYSIS

Risk Analysis

Describe the risks in the table below, noting that risks with a rating of high and above should be fully considered and included. Please refer to the Integrated Queensland Health Risk Management Framework and Policy:http://qheps.health.qld.gov.au/audit/IRM_Stream/policies.htm

An analysis of the proposal risk exposure against the Integrated Risk Management Framework identifies the following risk profile for the proposal.

No	Risk Event (what could go wrong)	Inherent Risk Rating	Mitigating Action (what are you going to do about it)	Owner	
1					
2					
3					
	Insert brief comment and identify any key assumptions relating to risks (Max – 10 lines)				

Insert brief comment and identify any key assumptions relating to risks (Max – 10 lines)

		CONSEQUENCES					
0		Negligible	Minor	Moderate	Major	Extreme	
OOD	Rare	Low	Low	Low	Medium	High	
<u>-</u>	Unlikely	Low	Medium	Medium	High	Very High	
KE	Possible	Low	Medium	High	Very High	Very High	
	Likely	Medium	High	Very High	Very High	Extreme	
	Almost Certain	Medium	Very High	Very High	Extreme	Extreme	

COMMUNICATION

Stakeholder Engagement	
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State the Primary or Key stakeholders consulted and their commitment to the proposal.

Name of Group/Person and Position		Consultation and communication method	Date	Comments on the proposal and key messages
<enter here="" text=""></enter>				<enter here="" text=""></enter>
<enter here="" text=""></enter>				<enter here="" text=""></enter>
<enter here="" text=""></enter>				<enter here="" text=""></enter>

SAVINGS WORKSHEET

abould						
snould	Direct Labour Savings (On-costs should include overtime if applicable)					
	Sala	Salary Costs (including On-Costs)				
FTEs	Cost Year 1	Cost Year 2	Cost Year 3			
	\$					
	\$					
	\$	\$	\$			
t any oth	ner interconnected po	ositions)				
	Sala	ry Costs (including Or	-Costs)			
FTEs	Cost Year 1	Cost Year 2	Cost Year 3			
	\$					
	\$					
vings	\$	\$	\$			
t	t any oth	FTEs Cost Year 1 \$ \$ \$ \$ t any other interconnected points \$ FTEs Cost Year 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	FTEs Cost Year 1 Cost Year 2 \$ \$ \$ \$ \$ \$ t any other interconnected positions) Salary Costs (including On FTEs Cost Year 1 \$ \$ \$ \$			

currently incurred ie PC I	evy, RAS, travel, fleet re	eductions)
Cost Year 1	Cost Year 2	Cost Year 3
\$		
\$		
\$	\$	\$
\$	\$	\$
	Cost Year 1 \$	\$

*Costings are calculated using corporate costing template

Individu	Individual Position Impact Analysis					
Cost Centre	Position ID	Position Title	Position Level	Budget	Incumbent	Change Management Plan

ENDORSEMENT AND VALIDATION

Endorsement

Endorsement confirms the workload impact and saving/ cost estimates are appropriate to the proposal given its scope and risk profile, and the benefits are realistic and can be delivered as outlined.

Name:	Signature:
Position: Executive Director <insert title=""></insert>	Date: / /
Division:	Contact No:
Comment:	

Validation

Validation Stage confirms the robustness of the Business Proposal.

Chief Finance Officer- West Moreton Hospital and Health Service		
Name:	Date: / /	
Contact No:	Signature:	
Endorsed	Not Endorsed	
Comments:		

Approval					
Chief Executive					
Name:	West Moreton Hospital and Health Service				
Date: / /	Contact No:				
Approved	Not Approved				
Signature:					
Comments:					

SUPORTING DOCUMENTS AND ATTACHMENTS

The following documents support this business change proposal and assist in reducing proposal risk			
Document Number/ Version Document Title			