



Department of Human Services

**PROACT**

**CORPORATE BUSINESS PROCESS**

**REFERENCE GUIDE v-Final**

Defined by the Nurse Rostering Operation Subcommittee

Content has been Endorsed by:

Members of the Nurse Rostering Operations Subcommittee;  
Members of the Nursing Information Systems Advisory Committee; and  
Directors of Nursing.

## TABLE OF CONTENTS

<b>PROACT DATA DEFINITIONS.....</b>	<b>3</b>
<b>PROACT NON-PRODUCTIVE CATEGORIES.....</b>	<b>4</b>
<b>PROACT PRODUCTIVE CATEGORIES .....</b>	<b>6</b>
<b>PROACT PRODUCTIVE HOURS/FTE.....</b>	<b>6</b>
<b>WORKED AND PAID TYPES (WP) CATEGORY.....</b>	<b>6</b>
<b>INDIRECT AND PAID (IP) CATEGORY.....</b>	<b>6</b>
<b>OVERTIME AND PAID (OP) CATEGORY .....</b>	<b>6</b>
<b>NOT WORKED AND NOT PAID (NN) CATEGORY.....</b>	<b>7</b>
<b>ADDITIONAL PROACT BUSINESS GUIDELINES.....</b>	<b>8</b>
<b>TOIL (Time Off in Lieu).....</b>	<b>8</b>
<b>“DESIGNATE” NURSES .....</b>	<b>8</b>
<b>STAFFING MOVEMENTS.....</b>	<b>8</b>
<b>ESCORTS/RETRIEVALS.....</b>	<b>9</b>
<b>WORKCOVER .....</b>	<b>9</b>
<b>PUBLIC HOLIDAY DECISION MAKING TREE .....</b>	<b>ERROR! BOOKMARK NOT DEFINED.</b>
<b>HRMS – CHRIS AND PROACT ISSUES LIAISON FLOW CHART.....</b>	<b>10</b>

## PROACT DATA DEFINITIONS

The following ProAct data definitions summarise the outcomes associated with the review of the ProAct Categories.

<b>Worked/Paid types</b>	<b>Description</b>	<b>Definition</b>
WP	Worked and Paid	Normal worked shifts.
IP	Indirect Paid	Worked, but not related to direct patient care
NP	Not Worked but Paid	Paid Leave Types
NN	Not Worked Not Paid	Unpaid leave of a specified duration
OP	Overtime and Paid	Paid overtime and call-backs
CO	Combination	A Worked/Paid type allocated by ProAct when a specific roster code has more than one segment with different worked/paid types.

### **AGENCY STAFF DEFINITION**

Is staff provided by a recognised organisation that supplies temporary and/or casual nursing relief staff on a need basis.

## PROACT NON-PRODUCTIVE CATEGORIES

The following table summarises the outcomes associated with the review of the suggested ProAct Non-Productive Categories.

Category	Description	Code Type	Comments
Annual Leave	All rostered Annual Leave	NP	<u>Leave Types:</u> <ul style="list-style-type: none"> <li>• Paid Annual Leave</li> </ul>
Long Service Leave	Paid Long Service Leave	NP	<u>Leave Types:</u> <ul style="list-style-type: none"> <li>• Paid Long Service Leave</li> </ul>
Paid Maternity Leave	All Paid maternity leave	NP	<u>Leave Types:</u> <ul style="list-style-type: none"> <li>• Paid maternity leave</li> </ul>
Public Holiday	All declared Public Holidays	NP	<b><u>Public Holiday Business Rules:</u></b> <ul style="list-style-type: none"> <li>• Not on Roster Public Holiday codes be defined in ProAct with 0.00 minutes.</li> </ul>
PH Day in Lieu	Public Holiday Day In Lieu	NP	
Work Cover	A person incapacitated/not able to work, not at work but incur payment for contracted hours.	NP	<b><u>Workcover Business Rules:</u></b> <ul style="list-style-type: none"> <li>• Only one non-productive category is required.</li> </ul> <p>(NOTE: Work modified/rehab time that has been worked is by definition paid productive time and should be coded as IP or WP or CO (combination of WP/IP and NP).)</p>
Miscellaneous Paid Leave		NP	<u>Leave Types Inclusive of:</u> <ul style="list-style-type: none"> <li>• Jury Duty,</li> <li>• Sports Leave,</li> <li>• Trade Union including Occupational Health and Safety Training,</li> <li>• Military Leave and</li> <li>• Community Service Leave (e.g. CFS work) (i.e. everything not included in the other leave categories)</li> </ul>

Category	Description	Code Type	Comments
Personal/Carers Leave	Total personal/carers leave (paid and unpaid)	NP	<u>Leave Types:</u> <ul style="list-style-type: none"> <li>• Personal illness,</li> <li>• Illness of Family Member as defined,</li> <li>• House Moving,</li> <li>• Bereavement as defined and</li> <li>• Urgent Pressing Necessity as defined.</li> </ul>
Professional Development Leave	Professional Development leave where the leave taken is greater than 1 hour	NP	<u>Leave Types:</u> <ul style="list-style-type: none"> <li>• Tertiary Leave – part of a university course,</li> <li>• Specialty Courses – eg. renal, paediatric ICU etc,</li> <li>• Graduate Nurse Study Day,</li> <li>• Conference Leave,</li> <li>• Seminar,</li> <li>• Mandatory Updates</li> <li>• Workshops,</li> <li>• Orientation – Corporate,</li> <li>• Inservice – including on and off campus</li> </ul>

Category	Description	Code Type	Comments
Time Owed In Lieu	No comment required	-	TOIL not to be allocated to a Non-Productive Category

NOTE: MMSS defines non-productive FTE as paid hours in which the employee is not physically present and carrying out their position responsibilities (MMSS Guidelines, Human Resources Statistics for all health units, p.7).

## **PROACT PRODUCTIVE CATEGORIES**

NOTE: MMSS defines productive FTE as the 'hours worked in a period during which the person is present and carrying out the position responsibilities expressed as a ratio of the agreed or award hours for a full-time employee' and excludes all time where the employee is not physically present and working (MMSS Guidelines, Human Resources Statistics for all health units, p.8).

The following summarises the outcomes associated with the ProAct Productive categories.

### **PROACT PRODUCTIVE HOURS/FTE**

Productive Hours/FTE has been summarised as the sum of direct, indirect and overtime hours/FTE and is defined using ProAct Worked and Paid types WP, IP and OP.

Examples include:

- all status categories;
- overtime; and
- call back

### **WORKED AND PAID TYPES (WP) CATEGORY**

Work and Paid Types (WP) relates directly to the service provided in a designated ProAct Unit\*.

- Patient care units – this time is defined as “direct” and included in the export of actual hours to Excelcare.

Examples include:

- direct patient care shifts and
- normal working day for employees in a non-patient care Unit.

NOTE: an exception exists to this.

### **INDIRECT AND PAID (IP) CATEGORY**

Supernumerary is not counted in the patient care numbers and/or demand.

Examples include:

- nurse educator role in clinical areas,
- management time (eg Level 3 in patient care area),
- ward orientation, and
- senior staff planning day.

### **OVERTIME AND PAID (OP) CATEGORY**

- Overtime
- Call Back

## **NOT WORKED AND NOT PAID (NN) CATEGORY**

Not worked and not paid (NN) are any hours attached to the ProAct codes would not inflate the FTE.

Examples include:

- not on roster,
- paid day off,
- leave without pay,
- rostered in another unit,
- TOIL

## **ADDITIONAL PROACT BUSINESS GUIDELINES**

### **TOIL (Time Off in Lieu)**

There is an award entitlement for time to be accrued in lieu of overtime payment Nurses (South Australian Public Sector) Award 1991 which states:

*"5.4.3(c) Time-off equivalent to the additional hours worked may be granted in lieu of payment for overtime worked by agreement of employer and employee."*

Hours worked that accrues towards TOIL is productive time and should be recorded as such.

#### Level 3 Registered Nurses - Management of TOIL is that:

- Clinical overtime worked is a WP Code;
- Non-clinical Overtime worked is a IP Code; and
- TOIL worked, is to be managed by the Level 3 RN in consultation with the health unit.

### **"DESIGNATE" NURSES**

It was acknowledged that many hospitals employ nurses in these types of roles. Discussion occurred around how these nurses should be captured with the complexities and issues relating to:

- the impact on NHPPD;
- budget and costing;
- data entry requirements;
- data integrity; and
- moving designate nurses into and out of units.

It is recommended that Designate Nurses be captured but due to the complexities outlined above it is not possible currently to capture this care accurately\* and this will impact in ProAct and other financial systems. Designate nurses are to remain and be managed in their home costs centres.

\*NOTE: an exception exists to this recommendation.

### **"FLOAT" NURSES**

Nurses who come from a 'float pool' and move through a number of wards in a shift are to have their movements captured in ProAct in the Unit in which they worked. The time is to be captured where it is 30 minutes and greater.

### **STAFFING MOVEMENTS**

Some health units have nurses who move through a number of wards in a shift. Different practices exist across health units in relation to the level of adjustment captured in ProAct eg only when a staff member is moved for a period greater than two hours.

For all staff movements of greater than 30 (thirty) minutes is to be captured in ProAct.

NOTE: Health units may choose to capture movements of less than an hour to meet specific reporting requirements.

## ESCORTS/RETRIEVALS

### a) Patient Retrievals:

The nurse is allocated to a separate ProAct Unit with the unit maintaining its own cost centre.

Note: No patient retrieval data is captured in Excelcare.

### b) Patient Escorts:

There are two different scenarios which are:

1. Admitted Patient - if a nurse goes with the patient the nurse is allocated a WP code.
  - Information is captured on Excelcare.
2. Discharged Patient - if a nurse goes with the patient the nurse is allocated an IP code
  - No information is captured on Excelcare.

Therefore:

- **If the patient is admitted and a nurse GOES with the patient** - the nurse should be moved to Worked Paid code in ProAct within the same cost centre.
- **If the patient is discharged and a nurse GOES with the patient** - the nurse should be moved to Indirect Paid code in ProAct resulting in no impact on the Actual Clinical NHPPD data.
- **If NO nurse is required** there is no adjustment made.

## WORKCOVER

An individual's return to work plan will determine if they are to be direct (WP) or supernumery (IP). This may have implications for practice at health units. From a Workcover management perspective, all Non Productive Workcover costs should be attributed to the Unit in which the injury occurred. As part of an employee's rehabilitation under the Workers Rehabilitation and Compensation Act 1986, supernumery time is considered Non Productive (and therefore paid as time/hours lost). This may have implications for work practices in relation to payment and costing. It will definitely have implications for comparative reporting between MMSS and ProAct.

### Workcover (where the employee is working in the area where the injury occurred)

- All the costs that are attributed to the unit where the injury occurred
- may be a combination of WP, IP and NP depending on the duties performed
- for example
  - an employee (hired to work an 8 hour shift) may have 3 hours of WP, 3 hours of IP and 2 hours of NP

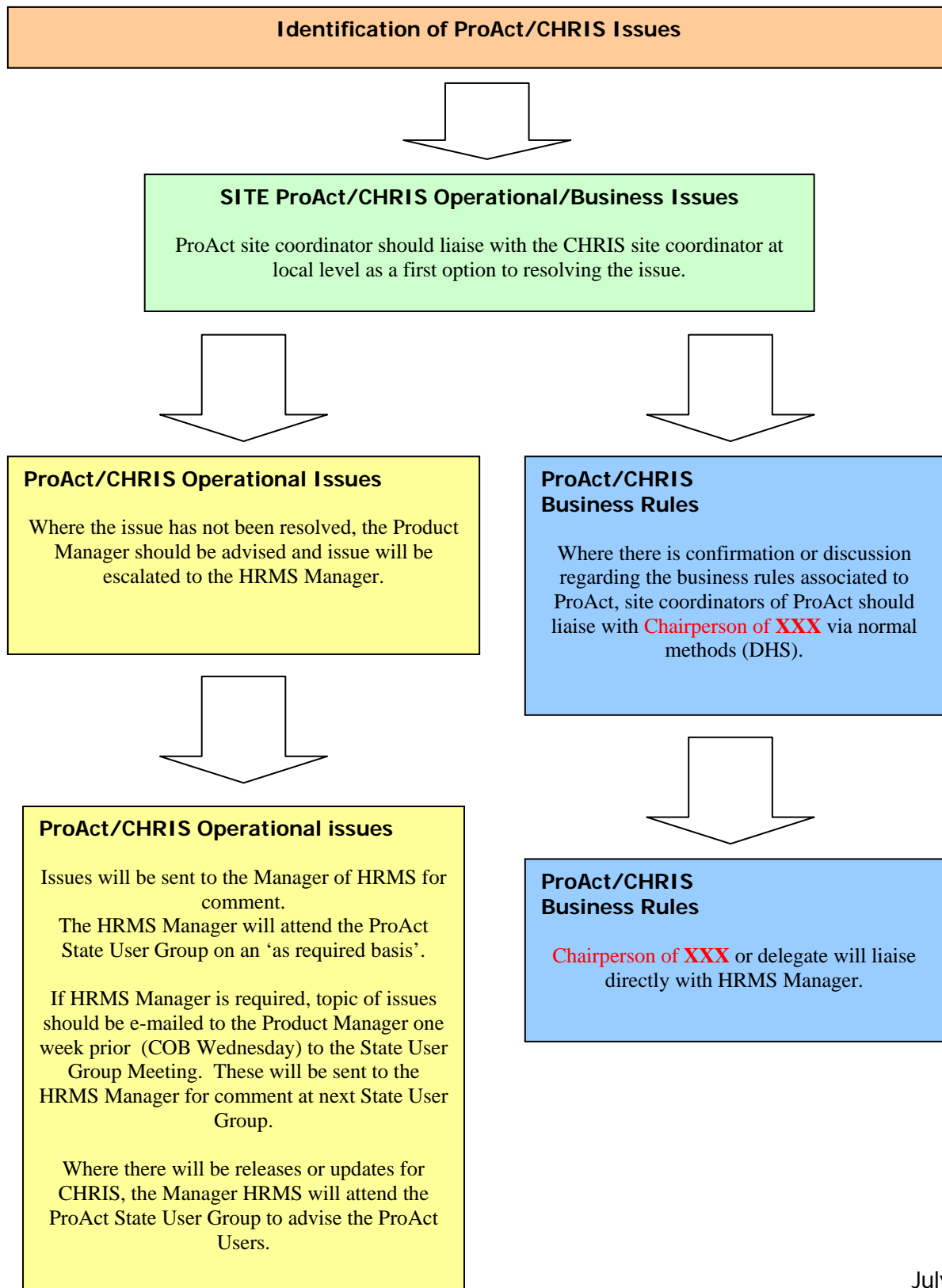
### Workcover (where the employee is working in another area)

- When the employee is working in an (non-injury) area in a funded position these hours will be rostered and therefore costed to the non-injury unit.
- Health units to determine where the indirect component is to be rostered eg the non-injury unit (where they are physically working) or the injury unit (where they are to be costed).

### Workcover (where the employee is working in an area that is not on ProAct)

- This can occur when an employee is moved to an administrative area for rehabilitation. These employees need to be captured on ProAct for reporting purposes and to facilitate payment.
- Such employees are to be moved to a "WORKCOVER" unit on ProAct and rostered accordingly. Payroll will need to manage appropriate costs.

## HRMS – CHRIS and PROACT ISSUES LIAISON FLOW CHART



July 2003