

**THE UNIVERSITY OF SYDNEY**

**REVIEW OF THE SCHOOL STRUCTURE IN  
THE FACULTY OF MEDICINE**

**December 2000**

# REVIEW OF THE SCHOOL STRUCTURE IN THE FACULTY OF MEDICINE

## INTRODUCTION

The Review Committee found the conduct of the Review of the School Structure within the Faculty of Medicine to be a very rewarding process. The starting point for the Review was the material considered by the Faculty of Medicine at its meetings in late 1999 where the creation of Schools, the assignment of responsibilities to Associate Deans and the establishment of three principal management committees were endorsed for the following year with provision for a review after 12 months of operation (attached as Appendix 1).

Inevitably, with new structures and processes, there are teething troubles but, importantly, the experience of operating in the new environment engenders new perspectives that may suggest modifications to decisions, policies or processes previously agreed; it may also raise issues not previously considered. The Review Committee believes that both of these scenarios have arisen in the Faculty of Medicine during 2000. Clearly, the Faculty made a wise prospective decision in proposing a review of the new school structure after one year of operation.

The overwhelming majority of submissions and comments made to the Review Committee supported strongly the continuation of the new School structure. Where there was felt to be a need for refinement, there was an encouraging commonality amongst the proponents of change about what the changes should be. The Review Committee hopes that it has achieved an appropriate balance in considering the views put to it and that that balance is reflected in its comments and recommendations. The Committee did not consider that it should provide a vision for the Faculty because the restructuring represented that vision. For this reason, its approach was primarily pragmatic.

Having read the submissions and met all those members of the Faculty who wished to interact directly with the Committee, the Committee felt that the views expressed in those meetings were very much in keeping with those included in the written submissions. A list of those who provided submissions is provided in Appendix 2; a list of those who met the Committee is included in Appendix 3.

It was perhaps inevitable that budgetary issues arose during discussions, particularly where individuals, departments or schools perceived an inequity. The Review Committee took the view that both the method of allocation of funds within the Faculty and the amounts allocated were not within the terms of reference of the Review. Such matters are the delegated prerogative of the Dean of the Faculty. The Committee was, however, interested to explore associated structural issues where the administrative structures of the Faculty impacted, either positively or negatively, on the use of financial resources.

Professor D Napper (Chair of the Review Committee)  
Mr A McCarroll  
Emeritus Professor J G McLeod, AO

7 December 2000

## SUMMARY OF RECOMMENDATIONS

### Recommendation 1:

That the School of Biomedical Sciences and the Department of Biochemistry (or the new unit created should the Department of Biochemistry and the Department of Microbiology merge) conduct negotiations with a view to recommending to the Dean how an academic association between them might be best achieved.

### Recommendation 2:

That the Children's Hospital at Westmead retain its present status as a separate School within the Faculty of Medicine .

### Recommendation 3:

That the Faculty appoint an Associate Dean based at Westmead Hospital with responsibility for the management of the Faculty's activities within the Western Sydney Area Health Service while retaining the Associate Dean based at Nepean as part of the proposed Western Corridor Clinical School

### Recommendation 4:

That in the Clinical Schools matters such as financial management and planning (including management of research grants, research data collection, allocation of PBL tutors, staff performance management, management and support of research students) should be the responsibility of the Associate Dean but that the Associate Dean ensure that an internal management structure is in place within the School to provide the necessary support so that the demands placed on the Associate Dean do not become unreasonable or excessively onerous .

### Recommendation 5:

- a) That the Dean assign to the Associate Deans of the Canberra Clinical School, Central Clinical School, Children's Hospital at Westmead, Northern Clinical School, Western Clinical School, School of Population and Health Service Research Sciences and the Education, Research and Development Support Unit the same delegations of authority as Heads of Schools under the University By-laws; and
- b) That the Faculty ensure that heads of the departments in the Schools listed in Recommendation 5(a) understand that they are no longer able to exercise the delegations of authority that are normally exercised by Heads of Department under the University's By-laws.

### Recommendation 6:

That the Faculty endorse the statement of Roles and responsibilities of Associate Deans (Schools) contained in Appendix 4 and incorporate it in duty statements of Associate Deans and advertisements for future appointments .

**Recommendation 7:**

- a) That, in due course, administrative arrangements within the School of Biomedical Sciences be adjusted so that they are similar to those outlined in Recommendations 4 and 5 and so that the statement of Roles and responsibilities of Associate Deans (Schools) contained in Appendix 4 applies also to the Associate Dean of the School of Biomedical Sciences;
- b) That the Faculty consider the possibility of a transitional period of no more than three years during which the staffing profile of the School of Biomedical Sciences would be determined by the Associate Dean in consultation with all the Heads of Department in the School and during which each Head of Department would be provided with a budget for non-salary expenditure; and
- c) That the costs and benefits of restructuring administration, not just financial administration, in the School be assessed – a first step in that restructuring could be the rationalisation of the administration of financial resources as proposed to the Committee by the Associate Dean.

**Recommendation 8:**

That the Faculty consider the future viability of the Department of Infectious Diseases taking account of the possible amalgamation of the Department of Microbiology with the Department of Biochemistry and developments in clinical infectious diseases in the health care system including, in particular, the strengths of clinical infectious diseases at Westmead Hospital.

**Recommendation 9:**

- a) That the heads of the smaller departments in the Clinical Schools receive an aliquot of funds through the Associate Dean of the School in which they are located. For 2001 the Associate Deans would need to make the funds available from within the budget allocation they have been given for that year;
- b) That, for 2002 and thereafter, the Faculty have separate lines in its budget for these head of department allocations with the relatively small sum involved added to the relevant Clinical Schools' formulaic allocations and earmarked for the head/s of department concerned; and
- c) That, in order to maintain the integrity of the budgetary process which allocates budgets to Schools, the heads of department be accountable to the relevant Associate Dean for the use of the funds provided.

**Recommendation 10:**

That each School Management Committee be structured and function in such a way that it conducts its business effectively and with the maximum possible amount of consultation and participation by staff, particularly junior staff.

**Recommendation 11:**

That, once the Faculty has concluded its own strategic planning process, each School develop its own Strategic Plan as a point of reference for future planning and activity.

**Recommendation 12:**

That significant management issues, e.g. the draft budget for the following year, be referred for comment to the Faculty Academic Committee before final decisions are taken.

### **Recommendation 13:**

**That membership of the Medicine Management Advisory Committee continue to include:**

- **Dean (Chair)**
- **Chair of the Budget Advisory Committee**
- **Associate Deans of the Schools (Biomedical Sciences, Canberra, Central, Children's Hospital at Westmead, Northern, Western (Nepean and Western Corridor) and Population and Health Service Research Sciences**
- **Associate Dean responsible for the Education, Research and Development Support Unit**

**to which the Committee recommends be added:**

- **Associate Dean (Western Clinical School, Westmead)**
- **A key person from the education committee structure of the Faculty and a key person from the research committee structure of the Faculty.**

### **Recommendation 14:**

**That the Faculty recognise the finance committee function of the Budget Advisory Committee and consider inserting a short preamble to its current terms of reference so that they become:**

**Providing accurate and timely advice to the Dean and Medicine Management Advisory Committee on financial and budgetary matters by, inter alia,**

1. **advising the Dean on the allocation of General Purpose Operating Funds within the Medicine budget unit, including the development of policy options**
2. **monitoring progressively, at Faculty and School (and, if appropriate, at departmental) level, budgets throughout the year and drawing issues requiring resolution to the attention of the Dean and MedMAC**
3. **liaising with the University's Budget Advisory Committee and preparing submissions to it.**

### **Recommendation 15:**

**That all units within the Faculty not funded by formula be subject to regular review and that their funding be determined by the Dean on receipt of advice from the Budget Advisory Committee and the Medicine Management Advisory Committee.**

### **Recommendation 16:**

- a) **That, from the academic point of view, the Department of Medical Education (DME) report to the Faculty through the educational committee structure and that administratively the Department be responsible to the Associate Dean in charge of Education, Research and Development Support Unit; and**
- b) **That servicing the educational needs of the Faculty remain the primary activity of DME but, that said, the Committee supports members of the Department undertaking appropriate project management activities and external consulting.**

### **Recommendation 17:**

**That duty statements for finance officers in Schools and departments continue to specify that they report to the relevant Associate Dean or head of department but that the duty statements also make clear that finance officers have a clear obligation to provide to the Faculty Accountant such information and reports as may be requested.**

## REPORT

### GENERAL STRUCTURAL ISSUES

Apart from recommended changes to which reference will be made below the Review Committee believes that the organisation of the Faculty into Schools is appropriate. The new structure has a number of significant benefits:

1. It brings together in the School of Biomedical Sciences the primarily medical science-oriented departments of the Faculty;
2. It associates with the Department of Public Health and Community Medicine a range of other units in the Faculty with cognate interests;
3. It provides, in the Faculty's teaching hospitals, a structure that reflects the organisation and delivery of the University of Sydney Medical Program;
4. It provides to each of the Area Health Services with which the Faculty deals a single interlocutor to discuss matters of common interest;
5. It is in accordance with the University's policy of reducing the number of administrative units and cost centres.

### Changes to the School Structure

#### School of Biomedical Sciences

The Review Committee received strong representations both from the Department of Biochemistry and the School of Biomedical Sciences that the Department of Biochemistry (or the new unit created should the Department of Biochemistry and the Department of Microbiology merge) be a member of the School of Biomedical Sciences. While the Department is assigned to the Faculty of Science for administrative and financial purposes, the staff of the Department of Biochemistry are already members of the Faculty of Medicine. The Committee sees considerable merit in strengthening the academic association between the Department and the School.

#### **Recommendation 1:**

**That the School of Biomedical Sciences and the Department of Biochemistry (or the new unit created should the Department of Biochemistry and the Department of Microbiology merge) conduct negotiations with a view to recommending to the Dean how an academic association between them might be best achieved.**

#### Western Clinical School and the Children's Hospital at Westmead (CHW)

The management of the Western Clinical School is a complex challenge for an Associate Dean under the present arrangements:

- It contains two major teaching hospitals 30 kilometres apart;
- Westmead is well established as a centre of teaching and research while Nepean is still growing and developing its teaching and research roles;
- Westmead is administered by the Western Sydney Area Health Service; Nepean is administered by the Wentworth Area Health Service;
- the salary of the Associate Dean is provided by Wentworth - the Associate Dean is consequently primarily based at and has clinical privileges at Nepean.

Proponents of change within the Western Clinical School put forward the following possibilities as ways of making its administration and development more manageable:

1. If the necessary Commonwealth funding is made available and the development of a Western Corridor Clinical School proceeds, Nepean Hospital would be an eastern focus for that School and should be a part of it, rather than part of the Western Clinical School.
2. If the Western Corridor Clinical School proceeds and includes Nepean, Westmead Hospital and the Children's Hospital should become one School.
3. The Faculty should appoint an Associate Dean based at Westmead Hospital while retaining an Associate Dean at Nepean as part of the Western Corridor and making no change to arrangements at the Children's Hospital.

Representatives of the Children's Hospital at Westmead (CHW), whether academic, educational or senior management, were unanimous in their view that merging the CHW school with any other would be detrimental to their esprit de corps, to their unique ability to provide paediatric educational support to all of the other Clinical Schools and possibly to the strong financial and other support provided by the Children's Hospital. The Review Committee was ambivalent about these issues which are not clear cut. On balance it feels it appropriate to recommend that no change be made to the administrative status of the Children's Hospital School.

### **Recommendation 2:**

**That the Children's Hospital at Westmead retain its present status as a separate School within the Faculty of Medicine .**

### **Recommendation 3:**

**That the Faculty appoint an Associate Dean based at Westmead Hospital with responsibility for the management of the Faculty's activities within the Western Sydney Area Health Service while retaining the Associate Dean based at Nepean as part of the proposed Western Corridor Clinical School**

This would align Faculty management with the current structure of the health care system. The Faculty may wish to reconsider this recommendation at an appropriate time should the Western Corridor not proceed.

The Review Committee received a submission that the Eye Hospital be made a Clinical School in its own right, but was of the view that this was not justified at present.

### **The School Structure and Departments**

A minority view put to the Review Committee was that the new School structure is undermining departments and weakening their integrity. The Committee believes that this view has arisen primarily out of the loss of budgetary control by heads of departments in the Clinical Schools and the need they perceive for access to funds to support their discipline. A contrary view put to the Committee by one interviewee was that: "Collegiality does not cost money".

The Committee has no doubts about the importance for departments that are geographically dispersed of the maintenance of good internal communication and departmental coherence across the Clinical Schools. That applies to all University departments and would apply even if there had been no restructuring contemplated by the Faculty of Medicine. The Committee was impressed by the strength of the comments emanating from the Clinical Schools in favour of the continuation of academic departments.

During 2000 there has been some lack of clarity over responsibilities within the Clinical Schools. In some cases Heads of Department have wished to continue to exercise financial management responsibilities as described in the University's By-laws.

The problem is that in the University's By-laws (Chapter 8) the terms 'School' and 'Department' are used synonymously. For this reason, elsewhere in the University, whenever a School has been formed by the amalgamation of Departments, the term 'Department' has been abandoned. In the longer term the Faculty may wish to follow these precedents.

The Committee, however, would not advocate the abolition at this stage of the use of the descriptor 'Department' and its replacement by 'discipline', 'division', 'group' or some other similar collective descriptor (although this would have the advantage of allowing the Faculty's School structure easily to comply with University legislation).

One way to deal with this matter is to conceptualise discipline units within Schools as 'departments' (i.e. lower case 'd') rather than as 'Departments' (upper case 'D'). Correspondingly, their leaders are 'heads of department' rather than 'Heads of Department'. It is the latter whose delegations are defined in the University's By-laws (Chapter 8). The roles of the former can then be determined by the respective Associate Deans and there is no conflict between the roles of Associate Deans and heads. If this semantic subterfuge is accepted with goodwill by all staff, it would not be necessary to abandon the use of the term 'Department' in the context of 'Schools' in the way that the term has been abandoned elsewhere in the University.

#### **Recommendation 4:**

**That in the Clinical Schools matters such as financial management and planning (including management of research grants, research data collection, allocation of PBL tutors, staff performance management, management and support of research students) should be the responsibility of the Associate Dean but that the Associate Dean ensure that an internal management structure is in place within the School to provide the necessary support so that the demands placed on the Associate Dean do not become unreasonable or excessively onerous .**

For the above recommendation to be effected the Committee believes that the Associate Deans should have the same delegations of authority as Heads of Departments.

#### **Recommendation 5:**

- a) **That the Dean assign to the Associate Deans of the Canberra Clinical School, Central Clinical School, Children's Hospital at Westmead, Northern Clinical School, Western Clinical School, School of Population and Health Service Research Sciences and the Education, Research and Development Support Unit the same delegations of authority as Heads of Schools under the University By-laws ; and**
- b) **That the Faculty ensure that heads of the departments in the Schools listed in Recommendation 5(a) understand that they are no longer able to exercise the delegations of authority that are normally exercised by Heads of Department under the University's By-laws.**

The Committee considers the roles and responsibilities of Associate Deans - other than the Associate Dean of the School of Biomedical Sciences - endorsed by the Faculty in 1999 (attached as Appendix 4) to be appropriate and suggests that they be incorporated in duty statements of associate deans and advertisements for future appointments.

#### **Recommendation 6:**

**That the Faculty endorse the statement of Roles and responsibilities of Associate Deans (Schools) contained in Appendix 4 and incorporate it in duty statements of Associate Deans and advertisements for future appointments .**

The Committee believes that in the long-term arrangements that apply within the Clinical Schools should also apply within the School of Biomedical Sciences. In the interim the functioning of that

School would be enhanced by ensuring that its Associate Dean is involved in decisions relating to staff and implements a restructuring of financial administration within the School.

**Recommendation 7:**

- a) **That, in due course, administrative arrangements within the School of Biomedical Sciences be adjusted so that they are similar to those outlined in the recommendations above and so that the statement of Roles and responsibilities of Associate Deans (Schools) contained in Appendix 4 applies also to the Associate Dean of the School of Biomedical Sciences;**
- b) **That the Faculty consider the possibility of a transitional period of no more than three years during which the staffing profile of the School of Biomedical Sciences would be determined by the Associate Dean in consultation with all the Heads of Department in the School and during which each Head of Department would be provided with a budget for non-salary expenditure; and**
- c) **That the costs and benefits of restructuring administration, not just financial administration, in the School be assessed – a first step in that restructuring could be the rationalisation of the administration of financial resources as proposed to the Committee by the Associate Dean.**

The Committee makes these recommendations fully cognisant of the benefits the Departments in the School profess to have achieved by working cooperatively in teaching and research. It commends to the Departments in the School the view that there are likely to be efficiencies to be gained from the Departments working together in administrative matters with consequent savings that could be used to strengthen the academic and research activities of the School. The Committee notes with approval the low proportion of salary expenditure absorbed by administrative salaries in the Department of Anatomy and Histology and draws to the attention of the School the percentages of salary expenditure spent on administrative salaries in other Departments in the School and the significantly lower percentage in the Faculty of Science (Appendix 5). If the School could lower its expenditure to that of the Faculty of Science, a very research-intensive Faculty, it would be able to spend an additional \$0.25M on academic activities (such as academic salaries). It is difficult for the School to mount a compelling case for a larger budgetary allocation when it appears at present not to use its current allocation optimally.

The Committee offers these recommendations and comments in the firm belief that proceeding as proposed would in no way harm relationships with other departments or faculties in the University. The Committee believes that the Faculty of Science would welcome a more unified structure within the School as it would simplify and improve communication between the Faculty and the School just as Area Health Services have welcomed a single contact point with Clinical Schools.

The Review Committee is aware that there has been much discussion for some years and again in the last several months about the Department of Infectious Diseases. In spite of significant reductions in staffing levels the Department is currently running a deficit budget.

**Recommendation 8:**

**That the Faculty consider the future viability of the Department of Infectious Diseases taking account of the possible amalgamation of the Department of Microbiology with the Department of Biochemistry and developments in clinical infectious diseases in the health care system including, in particular, the strengths of clinical infectious diseases at Westmead Hospital.**

An issue that has arisen since the introduction of the School structure and which is very clearly a source of frustration to the heads of the smaller departments in the Clinical Schools is the lack of a budget which heads of department can use to support their discipline. These funds are needed for purposes that cross school boundaries, such as maintaining departmental websites, arranging teleconferences amongst departmental members, travel expenses for attendance at departmental meetings, travel to national conferences of university departments, arranging conferences, etc. Examples were given of heads of department having to approach up to five Associate Deans to obtain

funds. This is clearly inefficient. From advice given to the Committee by heads of department it appears that allocations of funds of, say, less than \$20,000 p.a. would usually resolve this issue.

**Recommendation 9:**

- a) **That the heads of the smaller departments in the Clinical Schools receive an aliquot of funds through the Associate Dean of the School in which they are located. For 2001 the Associate Deans would need to make the funds available from within the budget allocation they have been given for that year.**

This would not cause any inequitable burden on any individual School as the heads of department are, at present, distributed across all Schools:

- Obstetrics and Gynaecology at Northern
- Psychological Medicine at Western
- General Practice and Ophthalmology at Central
- Radiology at Canberra.

The Review Committee has limited this recommendation to the departments specified above as it was these departments that raised the issue and appeared to need this assistance. The Faculty may wish to extend this to other departments should that prove necessary.

The Faculty will need to allow for the discipline headship to move from one school to another.

- b) **That, for 2002 and thereafter, the Faculty have separate lines in its budget for these head of department allocations with the relatively small sum involved added to the relevant Clinical Schools' formulaic allocations and earmarked for the head/s of department concerned; and**
- c) **That, in order to maintain the integrity of the budgetary process which allocates budgets to Schools, the heads of department be accountable to the relevant Associate Dean for the use of the funds provided.**

## INTERNAL MANAGEMENT OF SCHOOLS

The Review Committee does not wish to be prescriptive in its comments about the internal management of schools. The Committee received information about the management committees within several of the schools; they seem to function effectively.

### **Recommendation 10:**

**That each school management committee be structured and function in such a way that it conducts its business effectively and with the maximum possible amount of consultation and participation by staff, particularly junior staff.**

This is not only good management; it can be an important part of staff development and succession planning.

### **Recommendation 11:**

**That, once the Faculty has concluded its own strategic planning process, each School develop its own Strategic Plan as a point of reference for future planning and activity.**

## ASSOCIATE DEANS

The Review Committee has endorsed the Faculty's statement of the Roles and responsibilities of Associate Deans; that statement suggests that in making appointments of Associate Deans the Faculty would consider the administrative and financial management skills of potential appointees. As Associate Deans would presumably also be Professors of the University, those attributes should be an adjunct to the Faculty's usual expectations of achievement of Professors in the domains of education, research and service.

The Committee accepts the view that ideally Associate Deans should all be funded by the University but acknowledges that that ideal may be difficult to achieve in current financial circumstances. The current Associate Deans demonstrate, however, that the role can be filled with distinction by appointees from outside the traditional academic structure and by persons not funded or formally employed by the University. Recognition of this may facilitate future recruitment.

## FACULTY MANAGEMENT

In endorsing the creation of Schools in late 1999 the Faculty also endorsed the proposal of the Dean that he be assisted in the management of the Faculty by three principal committees, i.e.

1. Faculty Academic Committee (FAC)
2. Medicine Management Advisory Committee (MedMAC)
3. Budget Advisory Committee (BAC).

The Review Committee endorses in general terms the roles and compositions specified for those committees at that time, viz.

### Faculty Academic Committee (FAC)

The Faculty Academic Committee (FAC), replacing the current Faculty Management Advisory Committee, will deal with academic issues, e.g. curriculum, research, relations with other Faculties, advocacy of health issues, etc., i.e. academic issues, particularly those that distinguish a Faculty of Medicine from other Faculties.

The FAC will be chaired by the Dean and will comprise the Heads of Department and will meet monthly. Other members of Faculty, e.g. Associate Deans, Sub-Dean (Information Technology) will receive papers and be welcome to attend whenever they wish.

### Medicine Management Advisory Committee (MedMAC)

The Medicine Management Advisory Committee will advise the Dean on the development of policy for the management of the Faculty and the Schools and the implement agreed policy, particularly in relation to financial resources (primarily General Purpose Operating Funds) and human resources (particularly those supported by General Purpose Operating Funds).

The MedMAC will be chaired by the Dean and will comprise the Associate Deans of each of the eight Schools and the Chair of the Budget Advisory Committee. Initially, it will meet at least fortnightly.

#### Budget Advisory Committee (BAC)

The role of the BAC would include:

1. advising the Dean on the allocation of General Purpose Operating Funds within the Medicine budget unit, including the development of policy options
2. monitoring progressively, at Faculty and school (and, if appropriate, at departmental) level, budgets throughout the year and drawing issues requiring resolution to the attention of the Dean and MedMAC
3. liaising with the University's Budget Advisory Committee and preparing submissions to it.

The Committee will be expected to consult within the Faculty and to receive submissions, particularly in the first instance on the development of the new funding allocation mechanism recommended by the Resource Allocation Working Party.

The Committee will be chaired by the Pro-Dean and report to the Dean. It will be a small committee with up to eight members appointed by the Dean because of their interest and expertise. In addition the person appointed to the Faculty as Business Manager (as recommended by the RAWP) would also be a member of the Committee. The Committee will have authority to consult and co-opt as it considers necessary when particular issues are under consideration. It will meet as required but at least quarterly.

The Review Committee wishes to suggest some iterative changes, based on experience gained over past year, to improve the responsiveness and effectiveness of these committees. In doing this the Committee is aware that the Faculty has developed committee structures to support its education and research activities but points out that the Review Committee has confined its attention to the top stratum of management committees within the Faculty. The Committee commends to the Faculty the suggestion of the Dean that linkages between education and research on the one hand and Faculty management on the other be formalised.

The Review Committee offers the following comments about each of the three principal committees:

#### Faculty Academic Committee (FAC)

The FAC is a large non-executive but important consultative committee for the Faculty. Its diversity of membership allows a wide range of views to be expressed to inform the Dean, MedMAC and BAC. In the view of the Review Committee the FAC has the potential to be an effective means of communication amongst the senior members of the Faculty and notes, with approval, that in 2001 it will meet fortnightly rather than monthly as has been the practice in 2000.

The Review Committee believes that the role of the FAC would be enhanced if it had more opportunity to comment on major management issues being considered by the Dean and/or MedMAC prior to final decisions being taken.

#### **Recommendation 12:**

**That significant management issues, e.g. the draft budget for the following year, be referred for comment to the Faculty Academic Committee before final decisions are taken**

### Medicine Management Advisory Committee (MedMAC)

Mention of MedMAC was made in many of the submissions and interviews. The membership of MedMAC is clearly a matter of concern to some members of the Faculty. The Review Committee believes that the Dean of a faculty as complex as the Faculty of Medicine is well served by having a small, executive (but ultimately advisory only) committee.

The Committee noted, and is sensitive to, the views put to it that one section or another of the Faculty is over-represented on MedMAC. The Committee believes that relative budget size should not be a significant criterion for determining membership - other factors include the particular role of a school and the disadvantages of distance. The Committee noted that that some sections of the Faculty currently feel excluded from decision-making processes but felt that referral of major issues by MedMAC to FAC for its comment as recommended above would, to some extent, overcome these concerns. Wide electronic distribution of Minutes, as is now under consideration, would also help in this regard. In addition any member of Faculty is entitled to contact the Dean to request that a particular issue be debated at the management level.

The Review Committee believes that the benefits of a relatively small tightly focussed committee justify making no major change to the existing membership of the MedMAC other than by adding to it to allow representation of the Western Clinical School by a second Associate Dean and to give explicit recognition to education and research.

### **Recommendation 13:**

**That membership of the Medicine Management Advisory Committee continue to include:**

- **Dean (Chair)**
- **Chair of the Budget Advisory Committee**
- **Associate Deans of the Schools (Biomedical Sciences, Canberra, Central, Children's Hospital at Westmead, Northern, Western (Nepean and Western Corridor) and Population and Health Service Research Sciences**
- **Associate Dean responsible for the Education, Research and Development Support Unit**

**to which the Committee recommends be added:**

- **Associate Dean (Western Clinical School, Westmead)**
- **A key person from the education committee structure of the Faculty and a key person from the research committee structure of the Faculty**

This would give MedMAC a membership of 13 which is probably marginally too large. The Review Committee considered recommending that some of the smaller Schools have observer status only but in the end opted for the slightly larger body.

It is suggested that while ever the new MedMAC has two representatives from the Western Clinical School rather than one from the Western Clinical School and another from the Nepean/Western Corridor Clinical School, their nominal voting power be limited to one vote. The Chair of MedMAC would determine which Associate Dean would vote if the matter could not be resolved by the School. The Review Committee understands, and applauds the fact, that, as an advisory body, MedMAC does not usually operate by counting votes.

The Review Committee does not make a specific recommendation about the creation of a Service Committee and the representation of "service" on MedMAC. The Committee felt that the concept of a "Service Committee" had not yet fully evolved, noting that clinical service was well catered for by

existing clinical school-hospital/area health service relationships. The Faculty may wish to create a Service Committee on an experimental basis and decide later on its representation on MedMAC.

#### Budget Advisory Committee (BAC)

The Review Committee sees the BAC as acting as a finance committee or finance advisory committee and considered recommending a change of name accordingly, but refrains from doing so partly to avoid confusion of acronyms (i.e. confusion with the FAC – Faculty Academic Committee).

#### **Recommendation 14:**

**That the Faculty recognise the finance committee function of the Budget Advisory Committee and consider inserting a short preamble to its current terms of reference so that they become:**

**Providing accurate and timely advice to the Dean and the Medicine Management Advisory Committee on financial and budgetary matters by, inter alia,**

- 1. advising the Dean on the allocation of General Purpose Operating Funds within the Medicine budget unit, including the development of policy options**
- 2. monitoring progressively, at Faculty and School (and, if appropriate, at departmental) level, budgets throughout the year and drawing issues requiring resolution to the attention of the Dean and MedMAC**
- 3. liaising with the University's Budget Advisory Committee and preparing submissions to it.**

#### **EDUCATION, RESEARCH AND DEVELOPMENT SUPPORT UNIT (ERDSU)**

#### **Recommendation 15:**

**That all units within the Faculty not funded by formula be subject to regular review and that their funding be determined by the Dean on receipt of advice from the Budget Advisory Committee and the Medicine Management Advisory Committee.**

#### Department of Medical Education

The Committee received varied comments regarding the Department of Medical Education (DME), ranging from suggestions that the Department be reduced in size, to praise for the work it undertakes, to recommendations that its funding be increased so that it could provide more professional educational support in the clinical schools.

Given the overwhelming acceptance of the creation of Schools within the Faculty and the corresponding "de-emphasising" of the term "department", the Review Committee does not propose a change of name for the DME but it does expect that DME will continue to provide service for the Faculty as a whole.

From the academic point of view DME should report to the Faculty through the educational committee structure; administratively the Department should be responsible to the Associate Dean in charge of ERDSU.

The Committee agrees with comments put to it that as a primary responsibility DME should work to keep the University of Sydney Medical Program, and the infrastructure that supports it, contemporary and innovative. The project management activities and external consulting undertaken by members of the Department may contribute to the fulfilment of that responsibility, but the Associate Dean of ERDSU and the Head of the Department should ensure that servicing the educational needs of the Faculty remains paramount. These needs may extend beyond the USydMP to include coursework Masters programs and other educational projects of the Faculty.

**Recommendation 16:**

- c) **That, from the academic point of view, the Department of Medical Education (DME) report to the Faculty through the educational committee structure and that administratively the Department be responsible to the Associate Dean in charge of Education, Research and Development Support Unit; and**
- d) **That servicing the educational needs of the Faculty remain the primary activity of DME but, that said, the Committee supports members of the Department undertaking appropriate project management activities and external consulting.**

**FINANCIAL REPORTING**

Although possibly not within the terms of reference of this review the Review Committee wishes to draw to the attention of the Faculty the importance of effective lines of financial reporting within the Faculty (as elsewhere within the University). This is not to say that the Faculty is unaware of this issue or that it is not acting accordingly; moreover, the Committee expects that the issue will be the subject of recommendations arising from the review of financial administration within the College of Health Sciences recently initiated by the Pro-Vice-Chancellor.

On the one hand the Faculty of Medicine Accountant is responsible through the Faculty's Executive Officer, the Associate Dean of ERDSU and the Chair of the Budget Advisory Committee to the Dean as well as reporting directly to the Dean. The position also has reporting obligations to the College of Health Sciences and through the College to the University. In fulfilling his/her obligation to the Faculty and to the College the Faculty Accountant is, to a significant extent, dependent on the information provided to him/her by the finance officers in the Schools and departments of the Faculty.

The Committee understands that, at present, duty statements for finance officers in schools and departments specify that they report to the relevant Associate Dean or head of department.

**Recommendation 17:**

**That duty statements for finance officers in Schools and departments continue to specify that they report to the relevant Associate Dean or head of department but that the duty statements also make clear that finance officers have a clear obligation to provide to the Faculty Accountant such information and reports as may be requested.**

## Memorandum to Members of the Faculty of Medicine

### Review of Schools Structure

Members of Faculty will be aware that, at the meetings of our Faculty on 4 November and 13 December last year, the Faculty resolved to adopt administrative restructuring of the Faculty into Schools and roles and responsibilities of Associate Deans for a period of twelve months after which time the Faculty would review the structure to determine whether or not it met the needs of the Faculty.

In brief, the structure that we adopted was one in which we gave budgetary authority to eight Schools, the Clinical Schools (which had been in existence since the early 1990s), the New Children's Hospital and three new Schools, i.e. School of Biomedical Sciences, School of Population and Health Service Research Sciences and the Education, Research and Development Support Unit. We also created a new management structure for the Faculty with three principal committees: the Faculty Academic Committee (FAC), Medicine Management Advisory Committee (MedMAC) and Budget Advisory Committee (BAC). I enclose the relevant section from the Faculty papers (Attachment A) and a summary of the school structure (Attachment B).

In consultation with the Medicine Management Advisory Committee I have appointed a Committee to conduct the review:

Professor Don Napper (Pro-Vice-Chancellor, College of Sciences and Technology) (Chair)

Mr Alan McCarroll (Chief Executive Officer, Western Sydney Area Health Service)

Emeritus Professor Jim McLeod

Administrative support: Mr T Rubin/Ms R Deamer

and drawn up terms of reference (Attachment C).

The Committee will meet over three (non-consecutive days) in November and will have some limited time for interviews and visits.

The Committee's report will be considered by the Standing Committee of the Faculty on 11 December and by the Faculty at a meeting at 4.00pm on Monday 18 December 2000.

**All members of Faculty are invited to make submissions to the review. Please forward submissions by email and hard copy to Tom Rubin ([tom@med.usyd.edu.au](mailto:tom@med.usyd.edu.au)) no later than Friday 10 November 2000.**

Stephen Leeder  
Dean

16 October 2000

⑤7. **Report of the Resource Allocation Working Party**

By late 1998 projections indicated that the Faculty faced considerable financial difficulties in 1999 and beyond. After consultations with the Vice-Chancellor and the Pro-Vice-Chancellor (Health Sciences) in January of this year the Dean appointed a Resource Allocation Working Party (RAWP) to review the distribution of recurrent funds within the Faculty of Medicine.

The Report of RAWP contained recommendations concerning the allocation of resources and the broad structures of the Faculty. Specifically, the Report recommended that the Faculty create multi-disciplinary schools to facilitate more efficient and effective management of resources, and to improve the integration and coordination of education, research and service leadership activities. By facilitating the development of cross-departmental relationships in teaching and research, the Schools would help consolidate the integrated teaching program that is a defining feature of the University of Sydney Medical Program and promote, the identification of new research themes which transcend disciplinary boundaries. Both these objectives were considered important for the future health of the Faculty.

[The full RAWP report is available on the Faculty of Medicine Web site at <http://www.med.usyd.edu.au/medfac/docs/RAWPrep.pdf>].

**Creation of Schools**

To facilitate the administration of the Faculty of Medicine the Resource Allocation Working Party recommended the grouping of departments, clinical schools and other units within the Faculty of Medicine into eight “Precincts” or Schools. The RAWP Report does not, however, advocate the abolition of departments. The Dean, in support of appropriate groupings of departments as recommended by the RAWP Report, recommends that the Faculty endorse the creation of eight Schools, each headed by an Associate Dean, as follows:

School of Biomedical Sciences

Departments of Anatomy and Histology, Infectious Diseases, Pathology, Pharmacology and Physiology

School of Population Health and Health Service Research

Department of Public Health and Community Medicine, Department of Rural Health, NHMRC Clinical Trials Centre, Australian Centre for Health Promotion, Centre for Health Economics Research and Evaluation, Australian Centre for Agricultural Health and Safety, Australian Centre for Effective Healthcare, Family Medicine Research Centre and the NSW Pregnancy and Newborn Services Network

Canberra Clinical School

Central Clinical School

(includes Department of Behavioural Sciences in Medicine and Department of Clinical Ophthalmology and Eye Health)

New Children’s Hospital

Northern Clinical School

Western Clinical School

### Education, Research and Development Support Unit

Dean's Unit/Student Services/Postgraduate Student Administration/Faculty Accountant,  
Department of Educational Development and Evaluation, IT development, Postgraduate  
Committee in Medicine

#### **Recommendations :**

1. That the Faculty endorse the creation by the Dean of eight Schools, each headed by an Associate Dean.
2. That the Faculty note that Associate Deans for the four clinical schools are already in place, i.e.

Professor P Gatenby - Canberra Clinical School

Professor D Tiller - Central Clinical School

Professor K Goulston - Northern Clinical School

Professor S Naraqi - Western Clinical School

3. That the Faculty discontinue the position of Sub-Dean (New Children's Hospital), create in its place the position of Associate Dean (New Children's Hospital) and elect Associate Professor E Elliott to the position until 31 December 2001.
4. That the Faculty create the position of Associate Dean (School of Biomedical Sciences) and elect Associate Professor D Davey to the position until 31 December 2000.
5. That the Faculty create the position of Associate Dean (School of Population Health and Health Service Research) and elect Professor D Nutbeam to the position until 31 December 2001.
6. That the Faculty create the position of Associate Dean (Education, Research and Development Support Unit) and elect Professor J R Turtle to the position until 31 December 2001.

### Headship of the Department of Physiology and of the Department of Public Health and Community Medicine

Associate Professor Davey and Professor Nutbeam are currently Heads of Department. Should Faculty resolve to elect Associate Professor Davey Associate Dean as recommended above, the Dean will undertake the usual process of consultation within the Department of Physiology prior to recommending the appointment of a new Head of Department to the Pro-Vice-Chancellor (Health Sciences). In the meantime Associate Professor Davey has stood down from the position of Head of Department and Professor R Dampney has been appointed Acting Head.

The structure of the School of Population Health and Health Service Research differs from the other Schools in that the Department of Public Health and Community Medicine, the largest of the constituent groups and the only unit within the School in receipt of DETYA funding, already has academic relationships with the other units in the School and has academic and administrative structures which can be adapted with minimal administrative change to meet the needs of the School. Accordingly, the Dean has asked Professor Nutbeam to continue to serve as Head of Department for the balance of his term concurrently with his appointment as Associate Dean (School of Population Health and Health Service Research).

**Recommendation:** That the Faculty note the above information and endorse the Dean's actions

#### **Roles and responsibilities of Associate Deans (Schools)**

The resolutions of Senate (Chapter 9) state that "an associate dean has such duties and powers as may from time to time be assigned to him or her by the dean". The Dean proposes that the

Associate Deans heading the Faculty's eight Schools have the duties and powers as set out in the following statement:

Roles and responsibilities of Associate Deans (Schools)

**A.** Subject always to the over-riding authority of the Dean and in consultation with the heads of departments and/or disciplines within their School Associate Deans responsible for the:

- School of Population Health and Health Service Research
- Canberra Clinical School
- Central Clinical School
- New Children's Hospital
- Northern Clinical School
- Western Clinical School
- Education, Research and Development Support Unit

have the following roles and responsibilities:

1. Facilitate the further development of inter-disciplinary relationships in teaching, research and service leadership which fit the Faculty's education and research priorities
2. Advise the Dean on the development of policy for the management of the Faculty and the Schools
3. Implement agreed policy for the management of the Faculty and the Schools
4. Manage, in consultation with the heads of departments and/or disciplines within their School, their School's financial and human resources in accordance with decisions and policies of the Dean and the Medicine Management Advisory Committee
5. Represent the interests of their School in the various fora of the Faculty
6. Serve as members of the Medicine Management Advisory Committee
7. Other duties of a similar nature as determined by the Dean.

**B.** Subject always to the over-riding authority of the Dean and in consultation with the heads of departments within the School, the Associate Dean of the School of Biomedical Sciences has the following roles and responsibilities:

1. Facilitate the further development of inter-disciplinary relationships in teaching, research and service leadership which fit the Faculty's education and research priorities
2. Advise the Dean on the development of policy for the management of the Faculty and the Schools
3. Chair regular meetings of the Heads of the Departments in the School to discuss, formulate and act on policy related to academic, financial and personnel issues in the School
4. Assist the Heads of the Departments in the School with their management of academic, financial and human resource issues in accordance with decisions and policies of the Dean
5. Represent the interests of their School in the various fora of the Faculty
6. Serve as a member of the Medicine Management Advisory Committee
7. Other duties of a similar nature as determined by the Dean, after consultation, where appropriate, with the Heads of the Departments in the School.

**Faculty Management Structure**

The Dean proposes that he be assisted in the management of the Faculty by three principal committees, i.e.

4. Faculty Academic Committee (FAC)

5. Medicine Management Advisory Committee (MedMAC)
6. Budget Advisory Committee (BAC)

#### Faculty Academic Committee (FAC)

The Faculty Academic Committee (FAC), replacing the current Faculty Management Advisory Committee, will deal with academic issues, e.g. curriculum, research, relations with other Faculties, advocacy of health issues, etc., i.e. academic issues, particularly those that distinguish a Faculty of Medicine from other Faculties.

The FAC will be chaired by the Dean and will comprise the Heads of Department and will meet monthly. Other members of Faculty, e.g. Associate Deans, Sub-Dean (Information Technology) will receive papers and be welcome to attend whenever they wish. A listserver will be established to facilitate the discussion of issues by email as a supplement to regular meetings.

#### Medicine Management Advisory Committee (MedMAC)

The Medicine Management Advisory Committee will advise the Dean on the development of policy for the management of the Faculty and the Schools and the implement agreed policy, particularly in relation to financial resources (primarily General Purpose Operating Funds) and human resources (particularly those supported by General Purpose Operating Funds).

The MedMAC will be chaired by the Dean and will comprise the Associate Deans of each of the eight Schools and the Chair of the Budget Advisory Committee. Initially, it will meet at least fortnightly.

#### Budget Advisory Committee (BAC)

The Resource Allocation Working party recommended the creation of a Budget Advisory Committee.

The role of the BAC would include:

4. advising the Dean on the allocation of General Purpose Operating Funds within the Medicine budget unit, including the development of policy options
5. monitoring progressively, at Faculty and school (and, if appropriate, at departmental) level, budgets throughout the year and drawing issues requiring resolution to the attention of the Dean and MedMAC
6. liaising with the University's Budget Advisory Committee and preparing submissions to it.

The Committee will be expected to consult within the Faculty and to receive submissions, particularly in the first instance on the development of the new funding allocation mechanism recommended by the Resource Allocation Working Party.

The Committee will be chaired by the Pro-Dean and report to the Dean. It will be a small committee with up to eight members appointed by the Dean because of their interest and expertise. In addition the person appointed to the Faculty as Business Manager (as recommended by the RAWP) would also be a member of the Committee. The Committee will have authority to consult and co-opt as it considers necessary when particular issues are under consideration. It will meet as required but at least quarterly.

**Recommendation:** That the Faculty endorse the proposed new management structure as set out above.

**MEDICINE MANAGEMENT ADVISORY COMMITTEE**

(as endorsed by the Faculty of Medicine on 13 December 1999)

The RAWP Report recommended the reduction of cost centres within the Faculty and the creation of eight schools. Each is headed by an Associate Dean.

Terms of Reference

The Medicine Management Advisory Committee advises the Dean on the development of policy for the management of the Faculty and the Schools and implements agreed policy, particularly in relation to financial resources (primarily General Purpose Operating Funds) and human resources (particularly those supported by General Purpose Operating Funds).

The MedMAC is chaired by the Dean and comprises the Associate Deans of each of the eight Schools and the Chair of the Budget Advisory Committee. It meets at least fortnightly.

Membership

Dean - Professor Stephen Leeder

Pro-Dean – Professor J P Seale

School of Biomedical Sciences – Associate Professor C dos Remedios (previously Associate Professor D Davey)  
Departments of Anatomy and Histology, Infectious Diseases, Pathology, Pharmacology and Physiology

School of Population and Health Service Research Sciences – Associate Professor R Cumming (Acting Associate Dean) (previously Professor D Nutbeam)  
Department of Public Health and Community Medicine, Department of Rural Health, NHMRC Clinical Trials Centre, Australian Centre for Health Promotion, Centre for Health Economics Research and Evaluation, Australian Centre for Agricultural Health and Safety, Australian Centre for Effective Healthcare, Family Medicine Research Centre and NSW Pregnancy and Newborn Services Network

Education, Research and Development Support Unit – Professor J R Turtle  
Dean's Unit, Department of Medical Education (including the Postgraduate Committee in Medicine), IT development

Canberra Clinical School – Professor P Gatenby

Central Clinical School – Professor D Tiller  
(includes Department of Clinical Ophthalmology)

Northern Clinical School – Professor K Goulston

Western Clinical School – Professor S Naraqi

New Children's Hospital – Professor C Mellis

**FACULTY OF MEDICINE**

**Review of School structure**

The Committee appointed by the Dean to review the administrative arrangements endorsed by the Faculty on 13 December 1999 shall review and make recommendations on matters pertaining to the administrative and financial structure of the Faculty during 2000 and make recommendations for the future.

During 2000 a School structure has been functioning through the cooperation of members of the Faculty and with the approval of the Vice-Chancellor but has not been recognised in University legislation. This structure includes three principal management committees, viz. the Medicine Management Advisory Committee, the Budget Advisory Committee and the Faculty Academic Committee.

In conducting the review the Committee is empowered to interview members of the Faculty and others, to accept submissions and make such other enquiries and undertake such other activities relevant to this task as may be approved by the Dean.

The report of the Committee shall initially be shown to the Dean as a draft for comment on matters of fact; the final report shall be made available to the Dean, the Faculty, the Pro-Vice-Chancellor (Health Sciences), the Vice-Chancellor and other appropriate senior officers of the University.

Membership of the Review Committee

Professor Don Napper (Pro-Vice-Chancellor, College of Sciences and Technology)

Mr Alan McCarroll (Chief Executive Officer, Western Sydney Area Health Service)

Emeritus Professor Jim McLeod

Administrative support: Mr T Rubin/Ms R Deamer

**Terms of Reference**

1. Review the effectiveness and efficiency of the School structure endorsed by Faculty, including the number of Schools and their composition
2. Make recommendations on any variation of the structure considered appropriate
3. Review and make recommendations on the impact of the new structure (and of any variation of it recommended as part of this review) on the central management of the Faculty and its principal committees, on the Schools and the Associate Deans and on Departments and Heads of Department
4. Recommend amendments, if necessary, to the University's legislation (e.g. delegations of authority, resolutions of Senate, resolutions of the Academic Board, etc.) to take account of the new structure (and of any variation of it recommended as part of this review)

Stephen Leeder  
Dean

12 October 2000

The Review Committee interviewed the following members of Faculty:

Professor E L Bokey  
Professor P Boyce  
Professor W Britton  
Associate Professor M Christie  
Professor R Christopherson  
Professor Y Cossart  
Professor R Dampney  
Professor C dos Remedios  
Professor M J Field  
Professor K Gaskin  
Associate Professor J Gordon  
Professor K Goulston  
Associate Professor C Harbour  
Professor J Harris  
Dr E Hibberd  
Professor N Hunt  
Professor R Kefford  
Professor M Kidd  
Professor S R Leeder  
Professor R Lusby  
Dr G Mann  
Associate Professor N Manolios  
Professor C Mellis  
Professor S Naraqi  
Associate Professor K North  
Professor R K Oates  
Ms W Oldmeadow  
Professor J P Seale  
Professor A Sefton  
Dr E Sherry  
Professor D O Sillence  
Professor J Stone  
Professor D Tiller  
Professor T Usherwood  
Professor J A Young

## Appendix 3

The Committee received the submissions from the following:

Professor P J V Beumont

Professor F A Billson

Professor E L Bokey

Professor P Boyce

Professor W Britton

Professor Y Cossart

Associate Professor R Cumming

Professor C dos Remedios

Professor P A Gatenby

Professor K Goulston

Professor J Harris

Professor R Kefford

Professor M Kidd

Professor S R Leeder

Professor C Mellis

Professor J Pollard

Professor J Stone

Professor D Tiller

Professor T Usherwood

Department of Biochemistry (Professor I Caterson, Professor R Christopherson, Professor P Kuchel)

Department of Medical Education (Associate Professor J Gordon)

Medical Genetics Discipline Group (Professor D O Sillence)

Roles and responsibilities of Associate Deans (Schools)

Subject always to the over-riding authority of the Dean and in consultation with the heads of departments and/or disciplines within their School Associate Deans responsible for the:

- School of Population Health and Health Service Research
- Canberra Clinical School
- Central Clinical School
- New Children's Hospital
- Northern Clinical School
- Western Clinical School
- Education, Research and Development Support Unit

have the following roles and responsibilities:

8. Facilitate the further development of inter-disciplinary relationships in teaching, research and service leadership which fit the Faculty's education and research priorities
9. Advise the Dean on the development of policy for the management of the Faculty and the Schools
10. Implement agreed policy for the management of the Faculty and the Schools
11. Manage, in consultation with the heads of departments and/or disciplines within their School, their School's financial and human resources in accordance with decisions and policies of the Dean and the Medicine Management Advisory Committee
12. Represent the interests of their School in the various fora of the Faculty
13. Serve as members of the Medicine Management Advisory Committee
14. Other duties of a similar nature as determined by the Dean.

**School of Biomedical Sciences**

<b>Department</b>	<b>\$ admin/\$ total salary excluding non-payroll<sup>1,2</sup> %</b>	<b>\$ admin/\$ total salary excluding non-payroll<sup>1,2</sup> %</b>
Anatomy & Histology	7.51	10.21
Infectious Diseases	15.65	16.83
Pathology	13.20	15.16
Pharmacology	11.95	13.10
Physiology	10.33	11.89
<b><u>Biomedical Sciences</u></b>	<b><u>10.74</u></b>	<b><u>12.56</u></b>
<b>Faculty of Science</b>	<b>8.6</b>	Not available

1. Assumes 50% of non-payroll costs relate to administrative staff

2. Non-payroll items include overtime and casuals