



CSIRO
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22 April 2024

Susan Tonks
Secretary, CSIRO Staff Association
Level 3, 99 William Street
Melbourne VIC 3000
By Email: Susan.Tonks@cpsu.org.au / Louise.Jarman@cpsu.org.au

Dear Ms Tonks,

Re: Human Health, Health and Biosecurity – Invitation to commence consultation

I write in relation to the above matter, and to provide the Staff Association with relevant information regarding proposed changes to occur within the Human Health program, Health and Biosecurity Business Unit.

The purpose of this correspondence is to provide the Staff Association with relevant information regarding the proposed changes, and to invite the Staff Association to consult with CSIRO in relation to any proposed decisions on this topic.

Background

As part of the *Health and Biosecurity 2020-2024 Strategy*, CSIRO has aimed to deliver two-key strategic shifts, being (a) closer alignment to Government priorities, and (b) improved competitiveness of Research and Development functions required for technology translation. In response to the emerging *CSIRO Health Challenge Strategy*, Health and Biosecurity formed the Human Health program (**the program**) in 2021 to consolidate capabilities covering pandemic preparedness and infectious diseases, amongst other functions.

The Human Health program currently supports 124 staff members allocated across seven CSIRO sites.

The program has benefited from strategic appropriation and revenue relief to support efforts to actively shift and strengthen the portfolio by moving away from small service projects to larger more strategic and enduring opportunities, increasing external revenue, exploring ways to build equity, better engaging with governments and striving to create an undeniable value proposition.

This support has enabled some incremental shifts, but the investment on its own has been insufficient to consolidate capability relative to market need and national priorities and build a sustainable and impactful pipeline.

Over the last 18 months, the program has been actively working to refine its focus on national priorities and growth markets. The *HH Strategic Priorities (2024-2028)* (**the HH Priorities**) seek to address current portfolio fragmentation, maximise scientific impact and ensure long-term sustainability.

Notwithstanding efforts to pivot, CSIRO considers that the program structure must evolve to enable this shift in strategic focus, noting the structure cannot be sustained in its current form given the current lack of sufficient opportunities.

As a result, CSIRO is proposing to restructure the program, which would involve an anticipated reduction in staff numbers and service units. The purpose of the proposed changes are designed to achieve the following objectives:

- enable the *HH Priorities* and concentration on priority growth areas;
- deepen and consolidate capabilities in key areas of national priority; and
- better align with the *CSIRO Health Challenge Strategy*.

This proposal is a product of considered internal and independent analysis, and explorations of options to minimise the impact on staff, including exploring opportunities to redeploy or transfer staff to other Business Units.

Nature of the proposed changes

The proposed changes involve contracting the program to concentrate on capabilities that enable disease (communicable and non-communicable) prevention, preparedness and response. The proposed changes are intended to re-focus the program on disease surveillance, detection, prevention, prediction and control, as well as population interventions to support well-being and resilience.

The proposed changes will result in several changes to the program's structure, and will result in CSIRO taking the following actions:

- Reduction in nutrition capabilities to focus on key asset maintenance (i.e., Total Wellbeing Diet) with an active shift into behaviour, population health, system impacts and community resilience.
- Exit from agriculture and food related pre-clinical analytical studies.
- Exit from clinical trial services including the closure of two units at Westmead and SAHMRI, Adelaide.
- Exit from biomarker and molecular diagnostics and shift to support non-animal models and biosurveillance.
- Reduction in project management requirements to align with the size of the program.

As part of the proposed changes, the number of staff engaged within the Human Health program would be reduced from 124 staff members in the current structure to 81 staff members. This means that CSIRO has identified that there are approximately 40 indefinite (with 4 impacted indefinite positions subject to assessment) and 3 term staff impacted by the proposed changes.

I have also enclosed copies of the following documentation for your reference:

- Proposed organisational chart – [Annexure 1](#);
- Staff communication materials – [Annexure 2](#).

Rationale for potentially impacted positions and groups

I have included further details regarding the rationale and methodology for the potentially impacted positions and groups below.

Nutrition (Value Added Nutrition / Public Health and Wellbeing)

CSIRO considers that there is current an overinvestment in nutrition support capabilities relative to opportunities and projects, including clinical trials. The reshaping of this capability will be focused on the provision of ongoing support for the CSIRO TWD and associated broader public health and wellbeing-oriented interventions focused on chronic disease and behavioural science. There are 22 positions within this capability, and 13 positions located across SAHMRI and Kintore Avenue are potentially impacted by the proposed changes.

CSIRO Clinical Research

CSIRO considers that the existing clinical trial capability is specialised in nutrition and food substantiation and does not address an area of market failure. CSIRO also considers that there is a declining pipeline for these specialised trial services and existing competitors for industry and academic sponsored trials. The existing Site Management Organisation and Clinical Research Organisation sector is highly competitive and there is no clear gap that CSIRO would fill, nor is there a point of differentiation. All 14 staff in CSIRO Clinical Research group at both SAHMRI and Westmead are potentially impacted, including those engaged on a specified term basis.

Pre-clinical and Analytical Studies

This capability is specialised in the analysis of samples for pre-clinical agri-food nutritional studies and clinical trials. As part of the proposed realignment, CSIRO proposes to exit this capability due to low demand from the agri-food manufacturing industry for pre-clinical and analytical work and the fact that the Agriculture & Food Business Unit have advised that this in-house service is not essential. All 11 staff within the team with this capability in the Value Added Nutrition group at Kintore are potentially impacted by the proposed changes.

Human Diagnostics

CSIRO considers that the Future Science Platform (FSP) and APaIR investments have not developed a sufficient expertise base or a pipeline of assets to sustain the human diagnostics capability. This support has enabled some incremental shifts, but the investment on its own has been insufficient to consolidate capability relative to market need and national priorities and insufficient to develop a sustainable pipeline of opportunities and projects. There are 22 positions within this capability, and 4 positions located across Westmead, Kintore Avenue and Black Mountain are potentially impacted by the proposed changes.

Portfolio Management

Reduction in project management requirements to align with the size of the program. One specified term position will potentially be impacted by way of an early cessation.

Indicative implementation timeframe

Once the Consultation Period has concluded, CSIRO will consider all feedback and will be aiming to advise all staff of decisions related to the change by the end of May, including whether the changes will be implemented as proposed. CSIRO anticipates that the proposed changes will be implemented by approximately September depending on the feedback received during the consultation period.

Employee communication strategy

CSIRO commenced consultation with staff and the Staff Association today, Monday 22 April 2024, having engaged with the potentially impacted staff from Tuesday 16 April 2024 prior to the commencement of consultation. During the Consultation Period, employees will be encouraged to provide feedback through the following means:

- in writing via a dedicated Human Health – Proposed Structural Changes – Consultation [Form](#);
- email directly to the Research Director, Deputy Research Director and H&B Strategic HR Partner;
- at one of several Information and Q&A Sessions to be arranged, or additionally requested; and
- anonymously via the Human Health existing online feedback form ([HHAnon](#)).

If employees have any questions or require further clarification regarding the proposed changes, then they are encouraged to discuss those matters with their line manager in the first instance. Myself and Alisha Anderson, Deputy Research Director together with Cory Mathieson, H&B Strategic HR Partner are also freely available to take queries and facilitate discussions.

Employees are encouraged to access CSIRO's Employee Assistance Program (EAPs) as needed during the consultation process. CSIRO's EAP provider is Converge International. Employees can book an appointment via phone on 1300 687 327 or online at <https://convergeinternational.com.au/> <https://convergeinternational.com.au/>.

CSIRO's commitment to consultation with staff and the Staff Association

CSIRO is now in a position to commence consultation with staff and the Staff Association. The consultation period will commence on 22 April 2024 and will conclude at 5:00 PM on 10 May 2024. During that time, CSIRO intends to arrange multiple opportunities and meetings for staff to engage on the proposed changes. The first to many information and Q&A sessions is already planned for Tuesday 23 April and Wednesday 24 April.

- Senior CSIRO officers are available to meet with the Staff Association to discuss the above matters in further detail. To that end, CSIRO officers are available to meet on the following dates and times: Wednesday 24 April at 2:30 – 3:30pm (AEST); or
- Monday 29 April at 4:00 – 5:00pm (AEST).

Please advise if either of the above times are suitable for the Staff Association or if the Staff Association wishes to propose an alternative meeting time during the consultation period. CSIRO's contact officer for this matter is Dean Astley who can be contacted on (02) 9490 5553 or via email (dean.astley@csiro.au). Please advise us as a matter of priority should you have any questions or concerns with respect to the proposed changes or if you require any further information with respect to these matters.

Once the Consultation Period has concluded, CSIRO will consider the feedback received from staff and unions during that time. CSIRO will take that feedback into account when making its final decision with respect to the proposed changes. CSIRO will also complete a Consultation Feedback Report after the conclusion of the consultation period and provide a copy of that to staff and the Staff Association.

Yours sincerely,



Erica Bremner Kneipp
Research Director, Human Health