

**IN-CAMERA PROCEEDINGS BEFORE**

**GENERAL PURPOSE STANDING COMMITTEE No. 2**

**INQUIRY INTO THE MANAGEMENT AND OPERATIONS OF  
THE NEW SOUTH WALES AMBULANCE SERVICE**

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**At Sydney on Monday 28 July 2008**

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**The Committee met at 9.45 a.m.**

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**PRESENT**

The Hon. R. M. Parker (Chair)  
The Hon. A. Catanzariti  
The Hon. G. J. Donnelly  
The Hon. M. A. Ficarra  
Ms L. Rhiannon  
The Hon. C. M. Robertson

**CHAIR:** Thank you for coming today. I apologise that we are running a little bit late. Welcome to the inquiry into the Ambulance Service. My name is Robyn Parker, I am the Chair of the Committee and other Committee members are here and are very keen to hear your suggestions in terms of improving the Ambulance Service. Individual cases are good as a way to highlight the issues but we do not aim to solve individual problems, as much as are trying to aim to solve the whole problem with some solutions. The Committee has agreed to have your evidence in camera, that is, it is confidential. The Committee will give you an option of either having your transcript published partially confidentially or totally confidential, and you may choose to have a look at that transcript before you make that decision. We will ask you that at the end of your evidence.

**WITNESS L,** [REDACTED]

**CHAIR:** In what capacity do you appear before the Committee?

**WITNESS L:** As a paramedic.

**CHAIR:** Do you want to make a statement?

**WITNESS L:** I have a short statement and a couple of documents to hand out. I have brought eight copies and I have highlighted the relevant area.

**Documents tabled.**

**WITNESS L:** Hello, and thank you for inviting me to attend this Committee hearing. My name is [REDACTED] and I am a paramedic working at Taree Ambulance Station, and I am currently 32 weeks pregnant. I started suitable alternate duties [SAD] on 10 June and it has been a requirement of the Northern Division management that I travel to Port Macquarie 1 to 1½ hours drive, 85 kilometres north to perform these duties. I have brought with me today a copy of page 26 of the Ambulance Officers State Award which relates to fitness to continue working during pregnancy, and alternative duties, as well as the Ambulance Service New South Wales Standard Operating Policy [SOP] which relates to alternative work for pregnant ambulance officers as I was unsure whether the Committee has seen those documents.

I have also brought copies of all the correspondence relating to my SAD. During all correspondence management has repeatedly stated SAD must be meaningful duties and in a supervised environment. Those terms are not referred to in either the Ambulance Service SOP or the award. These documents do state a position to which an employee is transferred must be as close as possible in status and salary to her substantive position. Also, any alternative duties must be within a reasonable travelling distance from either the employee's current work location or their home address. I believe that management has been discriminatory and obstructive in regards to my request to perform SAD at my home station. For the seven weeks I have been performing SAD at Port Macquarie the vast majority of them have been Internet-based. There is no reason why I could not have done them at Taree station.

My duties as an active ambulance officer require me to work unsupervised, and also include meaningful station administrative duties. I believe I have proved myself to be an honest, reliable and actively interested member of the Ambulance Service. For fear of inflexible working arrangements on my return to work after maternity leave I choose not to take this discrimination any further, like most of the women in the Ambulance Service to whom I have spoken. Hopefully from this hearing some big changes can be made for pregnant women working as Ambulance officers with the Ambulance Service New South Wales.

**CHAIR:** In relation to duties in a station in the country is there a way in which more duties could be provided on station? I guess in metropolitan areas there would be more opportunity for that than in rural areas?

**WITNESS L:** Yes, I think with the technology we have today with the use of Internet access and fax machines and a courier transport system—I mean we are located on the Pacific Highway, surely work can possibly be brought up from Sydney or down from Port Macquarie to where I work. One of the managers who works at Port Macquarie lives at Taree and commutes every day in an operational vehicle. He already drives back and forth on a regular basis, so there are basically two vehicles going to Port Macquarie.

**CHAIR:** When you return to work after your maternity leave is there any capacity to work part time? We know there are light duties.

**WITNESS L:** When you return to work after your maternity leave you have the option of taking up part time work until the child is school age, but that is in consultation with management. So you have to negotiate days, hours and rosters with management.

**CHAIR:** Is part time work available to everybody or only those returning from maternity leave?

**WITNESS L:** I am not too sure how flexible that policy is. I have read there is a flexible work practise policy, which is sent out to NSW Health. No, I am not sure how strictly the Ambulance Service follows that policy.

**The Hon. MARIE FICARRA:** Are you aware of other women who have been in similar circumstances in rural New South Wales? I imagine it would be easier to accommodate such women in metropolitan areas: Is it common for pregnant ambulance officers to find it difficult to be employed in rural areas?

**WITNESS L:** Yes, it is. [REDACTED]

[REDACTED] Of the women I have spoken to none of them have been entirely happy with the way that they have been treated during their pregnancy but, as I say, they have to deal with these same managers when they come back so, you know, you do not want to cause any problems.

**The Hon. MARIE FICARRA:** Burn your bridges?

**WITNESS L:** Yes.

**The Hon. MARIE FICARRA:** How much leave will you take off before you return to work?

**WITNESS L:** I will take the full year.

**The Hon. MARIE FICARRA:** Do you do anything in Port Macquarie that you cannot do in Taree? Is anything crucial for you to be on the spot in Port Macquarie?

**WITNESS L:** The only thing I did do was take some identification photographs for ID cards for people in Port Macquarie but everything else has been something I could have done at Taree. I have been doing station profiles so when people apply for a job with the Ambulance Service or apply for a transfer—basically wherever there is an ambulance station they can look up on the Internet and see a bit of a town profile: how many people work at the station and how many vehicles they have.

**The Hon. MARIE FICARRA:** You have been working on that profile?

**WITNESS L:** I have been working on that.

**The Hon. MARIE FICARRA:** Which you could have done on the Internet from Taree?

**WITNESS L:** Yes.

**The Hon. MARIE FICARRA:** Instead of having to spend all that time on the road.

**WITNESS L:** Yes, but the argument is management say I have to be supervised.

**The Hon. CHRISTINE ROBERTSON:** What does that mean?

**WITNESS L:** Supervised, you just need to be under the supervision of one of your sector managers.

**The Hon. MARIE FICARRA:** Can you do that in Taree?

**WITNESS L:** In Taree you have your station officer. I have got an acting station officer at the moment who was supportive of me doing duties in Taree. I compiled a list of duties I could do in Taree. He was supportive of me doing those duties but it was blocked at the next level of management.

**The Hon. MARIE FICARRA:** There has got to be greater flexibility in the modern age of technology?

**WITNESS L:** Yes, the other thing I wanted was the hours to be a bit more flexible. Because I am used to working shift work arrangements—I have a 2½ year old who is not used to going into care five days a week. I really, if I could avoid it, did not want to put her in five days a week. So I was hoping to do one day on a weekend, either a Saturday or a Sunday, a longer day, say a 10-hour day, and then another three week days. So that would make four shifts which is what we do anyway—four on, four off. I wanted

to do my four shifts and then I would only need child care for two days but management was totally inflexible. It was "No, you have to work Monday to Friday".

**The Hon. MARIE FICARRA:** So you could have still delivered the same productivity, apart from the photographing of people in Port Macquarie station that somebody else could have done and sent it to you via email, and not disturbed your family?

**WITNESS L:** More productively because of the travel time and resources. You know, the price of petrol, another vehicle!

**The Hon. CHRISTINE ROBERTSON:** I can see there is a separate policy for persons who are having babies but are the SAD the same for all with disability?

**WITNESS L:** I understand they are, yes. They are for people coming back from workplace injuries as well, yes, that is my understanding.

**The Hon. CHRISTINE ROBERTSON:** And also non-copers? Your recommendations are quite sensible.

**WITNESS L:** I hope so.

**The Hon. CHRISTINE ROBERTSON:** Do you perceive more work should be done on doing SADs for different issues if management is going to adhere to regulations so fiercely?

**WITNESS L:** I think so. As I said in my opening statement, it is normally a designated timeframe. Normally we can give a good date of when we are going to start our SAD and the latest time frame when we are going to start on our maternity leave. Like, there is a timeframe, unlike an injury, which could go on for quite a long period of time, this will not go on for a long time. I have said "This is the date I am going to be finishing. This is the date I am going to be starting." Sure, it may change depending on how the pregnancy is going.

**The Hon. CHRISTINE ROBERTSON:** People from Health have told us they are going to do some more resourcing and educational work for the station officers themselves in order that they can be more skilled for the people management they have to deliver. It sounds as though you have a station officer that actually already has a fairly highly skill level, but some do not.

**WITNESS L:** He is acting in that position.

**The Hon. CHRISTINE ROBERTSON:** If this should happen do you think if the courses and information actually related to the management of individual workers in SAD situations it would be make a difference to the process?

**WITNESS L:** Sorry would you repeat that?

**The Hon. CHRISTINE ROBERTSON:** People from Health have said they are going to give more resource and education and skills for station managers so less issues arise from the station and fly into mid-air. Do you think that a program in relation

to the SAD issues in individual workplaces might actually mean that they can become supervisors in their own area?

**WITNESS L:** Definitely. Yes, I think that would definitely help.

**The Hon. CHRISTINE ROBERTSON:** The sector person can give over the responsibility, but still be responsible?

**WITNESS L:** Yes.

**The Hon. GREG DONNELLY:** Thank you very much for the material. That is very useful for us because I for one, if not most of us, have not seen some of the policies before. I just wish to clarify in my mind with respect to needing to go off onto suitable alternative duties [SAD] whether you had some medical evidence that you were able to use to explain to management that you needed to have lighter duties. Was that something that you saw—

**CHAIR:** Pregnancy.

**The Hon. GREG DONNELLY:** No. Let me be very clear. There are special maternity leave provisions in most awards and agreements. Special maternity leave is different from the normal maternity leave provisions. I am trying to tease out, not as a personal question but as a general question, whether there were some specific circumstances requiring you to take SAD leave because of the nature of the pregnancy?

**WITNESS L:** At 24 weeks pregnancy, as an ambulance officer, you have to provide proof that you are able to work on the road. There are two documents that you have to provide to your GP which list all the manual handling tasks and all the duties that you will be asked to perform.

**The Hon. GREG DONNELLY:** At that 24-week period?

**WITNESS L:** At that 24-week period you then have to provide a doctor's certificate. Most doctors, looking at these documents, would be probably reluctant, and rightly so, in advising that you stay on the road.

**The Hon. GREG DONNELLY:** In terms of a woman who might be having some particular difficulties with pregnancy well before the 24-week period, do you know if there is any provision within the regulations or procedures to enable such a woman to go onto so-called lighter duties?

**WITNESS L:** As far as I am aware, and you can start your light duties at any stage during your pregnancy if you have a medical condition.

**The Hon. GREG DONNELLY:** Sure. That is generally the case?

**WITNESS L:** Yes.

**The Hon. GREG DONNELLY:** We will go to the third stapled page of the standard operating policy document, page 1121 at 1.16. You have not highlighted the first paragraph, but that is pretty straightforward. It covers a risk-associated pregnancy. If we

go to the second paragraph, which is highlighted, the second sentence seems to be fundamentally wrong in terms of a word in it. It states, "In certain circumstances, for example in some locations, this may or may not be impossible." I think that should be possible, should it not?

**WITNESS L:** Yes, I think so.

**The Hon. GREG DONNELLY:** So there is a fundamental typographical error there. It says, "In this case, a compromise, which does not unlawfully discriminate against the employee, should", not may, "be negotiated." That seems like a pretty clear requirement in terms of negotiation with the individual woman. You are saying you had that sympathy at the local level in terms of your particular circumstance, but essentially it got knocked on the head the next level.

**WITNESS L:** Yes.

**The Hon. GREG DONNELLY:** What were the reasons you were told why it was basically knocked on the head?

**WITNESS L:** There is a letter here dated 7 May.

**The Hon. GREG DONNELLY:** That is in the documents we have here?

**WITNESS L:** Yes, in the correspondence, and that is where the operations manager has listed the reasons.

**The Hon. GREG DONNELLY:** Can you just take me to where that is said in that document? It is among the paragraphs, is it?

**WITNESS L:** No, in with the correspondence. Can you find that?

**The Hon. GREG DONNELLY:** Yes, I have it. Whereabouts does the operations manager say that it is not possible? Can I just take you to this? In the third paragraph it says, "It is deemed that SAD is at the employee's request and wherever possible attempts to provide appropriate work will be undertaken."

**WITNESS L:** Yes.

**The Hon. GREG DONNELLY:** "Should this not be feasible, then the employee has a number of alternatives." That seems to contradict this requirement of "should be negotiated", so I am not quite sure whether the two come together. If one says "should be negotiated", and this is saying something different—

**WITNESS L:** I have requested to do my duties in Taree. At one point I did state that the travelling was causing me back pain and I preferred to do them in Taree. I was told by management that, yes, you can request it, if you provide a doctor's certificate and say you are medically unfit to do the driving. You can provide documentation of that, but the risk that you face in doing that is that we may not be able to find duties for you at Taree, in which case you have to start your maternity leave.

**The Hon. GREG DONNELLY:** That was put to you by someone in management, was it?

**WITNESS L:** By management, yes: "You may have to start your maternity leave early." I did not want to do that for financial reasons, so I just—

**The Hon. GREG DONNELLY:** Do you mind telling the name and putting on the record who said that to you?

**WITNESS L:** [REDACTED]

**The Hon. GREG DONNELLY:** [REDACTED]

**WITNESS L:** [REDACTED]

**The Hon. GREG DONNELLY:** [REDACTED]

**WITNESS L:** [REDACTED]

**CHAIR:** Thank you for bringing this situation to us. I have a general question about women and the Ambulance Service. We have had submissions saying quite often it is not necessarily a friendly place for women—this is what people have said—and that some of the facilities in ambulance stations are not appropriate for women. As a woman, how have you found that to be in the Ambulance Service, apart from the maternity leave issue, generally?

**WITNESS L:** In regard to colleagues or facilities or both?

**CHAIR:** Have you found it an accepting place for women to work in?

**WITNESS L:** I have, yes. I have found at that station level everyone is fantastic.

**CHAIR:** Have you just worked with the one station?

**WITNESS L:** No. I was in Sydney for my first 12 months.

**The Hon. CHRISTINE ROBERTSON:** [REDACTED]

**WITNESS L:** I got posted to the bush. I was in Wee Waa for 12 months and then I applied for Taree.

**CHAIR:** So you have not found the treatment of women any different from the treatment of men?

**WITNESS L:** Me personally, I have not. I have not had any negative experiences.

**The Hon. TONY CATANZARITI:** Just on that, you said, "At that station level". Is there any level where you thought you were uncomfortable working?

**WITNESS L:** I felt that my treatment during pregnancy—



**The Hon. TONY CATANZARITI:** Apart from that though?

**WITNESS L:** Apart from that, no.

**CHAIR:** In terms of attracting women into the service, do you think that it is a job that is attractive to women? Do you think that after maternity leave women leave, or are you not in a position to make an assessment on that?

**WITNESS L:** I am not too sure. Personally, I do love the job, and will come back. I do not know whether other people will choose to.

**CHAIR:** That is great. Thank you very much for bringing this case to our attention. It is really terrific. We appreciate your travelling down here to do that, and all the very best with your pregnancy.

**WITNESS L:** Thank you.

**CHAIR:** We wish you all the best, and we will certainly take this issue on board.

**WITNESS L:** Thank you.

**The Hon. CHRISTINE ROBERTSON:** You have done a very sorted piece of work.

**WITNESS L:** Thank you.

**(The witness withdrew)**