

Submission
No 9

**THE MANAGEMENT AND OPERATIONS OF THE NSW
AMBULANCE SERVICE**

Name: Suppressed
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Partially Confidential

I would like to make the following submission to the inquiry.

I have been an operational Ambulance Officer for 23 years and have served in both Metropolitan and Country areas. I currently serve on the NSW South Coast at

My attitude and approach to duty has most definitely changed over my time with the service.

The Ambulance Service that has evolved over the last 23 years has survived on the dedication and drive, particularly of senior staff.

Whilst the clinical skills available to the public which we serve have undoubtedly developed and progressed, sadly the same can not be said of the skills of management.

The operation of today's Ambulance is complex and requires skills in finance particularly and management that current managers are in the whole unable to provide.

Upper management positions are held solely by "promoted" uniform officers who have attempted to adapt or mould themselves to a position with demands that are outside their field of experience or expertise. As a result budgets are continually overrun which leads to shortages in equipment, fleet and repair/maintenance of ambulance stations.

Generally the country stations we work in are in a dilapidated state with many issues requiring what any reasonable person would consider immediate if not urgent repair.

Poor heating/cooling, poor lighting, substandard floor coverings, no insulation and inadequate parking are just some of the issues on my station alone. These sorts of problems are common on many stations and lead to poor morale. Staff in country areas spend much time on these stations and are deserving of a comfortable and healthy work environment. Frequent requests to management for action are met with the usual concerns about costing. All too frustrating when it must be remembered that there was little capital outlay by the Ambulance Service for the construction of these stations initially. Most Stations were constructed in the 60's and 70's from public efforts handing the service an asset in often prime locations which in today's terms has a high value. Staff are reluctant to resort to OH & S submissions for building maintenance and in fact do much in the way of "cosmetics" on our stations purely for pride. The ability of senior management to operate a budget must seriously be questioned.

Management has also failed operational officers in the provision of front line supervision and access to managers able to accommodate concerns. There is a definite lack of "activity" from middle managers and supervisors who are tied down by administrative matters. More field supervision and access to management is required.

I believe that the qualification and expertise of upper management needs to be subjected to closer scrutiny. Higher level skills are required than those of what were or are essentially ambulance officers who have obtained a degree by further study later in life. These positions could be vacated and opened to external applicants so that a greater access to expertise is obtained. This is vital for the survival and morale of the service.

My other main issue is the threat to health and safety of our staff resulting from accumulated fatigue and poor operational deployment. Rosters are in a deplorable state, particularly in rural areas, where officers are required to spend many hours on road and travel vast distances with ineffective management of resultant fatigue. A 24hr service is maintained by an archaic On call system which is fragile at best. There is general agreement that rosters require boosting to allow for flexibility in shift hours that provide for extended on duty coverage as opposed to relying on the on call system that has remained in place for decades.

Unfortunately, our staff can be our own worst enemy. Many have become accustomed to earning substantial pays and are committed as such. The Catch 22 is that without the large overtime payments generated by the on call system many officers would find themselves in serious financial difficulty. Hence, most officers tend to keep quiet about the fatigue issue as any adjustment to the present system would impact on earning capacity. Perhaps the best solution would be a complete review of Ambulance Officers pay rates with a progression to a composite wage that takes the emphasis off overtime payments. The perception is that the

government is reluctant to boost rosters as it is an acknowledged point that overtime payment to existing staff is cheaper than employing additional staff. This is a dangerous practice for all concerned and with increasing workload can only lead to further problems in regard to health and safety. **An urgent review into rosters and staff levels is imperative.**

It would also be of interim assistance if more effective deployment of existing staff is made by operations centre.

I believe that morale within the service is the lowest I have seen it in my 23 years. Ambulance Officers feel tired, stressed and frustrated by all the above and a myriad of lesser issues that are all cumulative. The service seems to be under increasing scrutiny from the public and the media and this is causing an increase of stress on staff. There seems to be little support for us in the wider community anymore and we are no longer held in the high esteem that some people seem to believe. Violence against us is on the increase and grievance/harassment/bullying in the workplace is also on the rise.

My feelings towards my career are certainly not all negative and I fortunately still have enough drive to continually front up to work. I believe we do make a positive difference to many of the people we serve. The effects of my fatigue and stress have impacted on my family and social life and if asked the age old question "if you could turn back the clock would you do it all again?" ..I would have to honestly answer no. I would not choose this Ambulance Service as a career nor could I recommend it in it's current form to anyone thinking of employment. Asked that same question 10 years ago and the answer would probably have been different.

This Ambulance Service is very sick. Not quite terminal because of the good people in operational positions but definitely in need of quick and urgent resuscitation.