

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

Name: Suppressed
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Partially Confidential

19 June 2008

TO WHOM IT MAY CONCERN

Re: The General Purpose Standing Committee No. 2 – Inquiry into the Management and Operations of the N.S.W. Ambulance Service.

I have been employed for years by the New South Wales Ambulance Service as a Paramedic, am now a officer stationed at , and I wish to tender a submission to the above Standing Committee. I apologise for the length of the submission but feel the length was necessary so as to convey to the Committee the reason for discontent amongst the ranks. I, as well as other Paramedics, fear that if the Service was aware I tendered a submission, retribution would follow. I am happy to forward this to yourselves with my name below but request that if this is forwarded onto the Service that it be done with no indication it came from me.

The first section is the submission itself. I have taken extracts from the Operational Ambulance Officers (State) Award (which is divided into schedules) and from the Operational Ambulance Officers (State) Award – Industrial Relations Commission of New South Wales (which is divided into clauses). I received both these publications via email from the Health Services Union, of which I am a member. I am sure the Committee would already have copies of these documents.

I have constructed responses to these extracts in an attempt to show the Committee how the Ambulance Service Management has responded to issues such as staff occupational health and safety, operational health and safety and attempts by staff to access award entitlements.

My main purpose in tendering this submission is to show how the Ambulance Service of NSW has, on a number of occasions, acted contrary to State Awards, Occupational Health and Safety principles and its own policies and operating procedures. Some of the issues in this submission (see Addendum I) have affected me personally but I have severely attempted to be objective in my responses.

To reiterate Ms Parker when she announced the commencement of this inquiry, "Ambulance Officers play a vital role in the health system. The public need to be confident that this service is functioning at its very best". At the moment the Ambulance Service is not functioning at its very best due to low morale, despondency amongst its ranks, ignorance and arrogance amongst its management and upper echelon. There are many reasons for the poor staff retention rate within the Ambulance Service. I hope I have addressed some of these reasons. I am certain other submissions will address other reasons that I have missed. The Committee then will get a full and thorough idea as to why the N.S.W. Ambulance Service is failing both its staff and the public.

I hope this submission, as well as the many others submitted, will result in positive changes within the N.S.W. Ambulance Service and make the continued employment of many Ambulance Officers and Patient Transport Officers more enjoyable and rewarding.

I look forward to reading the finding of the Committee.

Yours sincerely,

N.S.W. Ambulance Service

SUBMISSION

Operational Ambulance Officers (State) Award

SCHEDULES

Attachment A — Duties of an Ambulance Officer/Flight Nurse

The pre-hospital treatment and transport of patients may involve:

- (a) Carrying diagnostic and treatment related equipment of varying weights (e.g., first-aid kit: five kilograms, oxy viva: 12 kilograms, Heartstart: five kilograms) to the patient.

Attachment B — Ambulance Officers and Flight Nurses Manual Handling Tasks

- (6) Most Commonly Handled Articles and Weights —

First-aid kit	5 kilograms
ALS Kit.	11 kilograms
Oxy Viva	12 kilograms
Oxygen Cylinder "D" Size	12 kilograms
Entonox Unit	5 kilograms
Heartstart Monitor	5 kilograms
Stretcher	45 to 50 kilograms
Humidicrib	25 kilograms
Neo-natal retrieval units (4 person lift)	90 to 165 kilograms

Response

There have been significant changes to the list of articles commonly handled without updating of the State Award.

- New oxy vivas in the blue hard case weigh more than 12 kgs. A number of IIMs have been lodged regarding the weight of the case. They are still being used.

- Heartstart monitors are no longer used. The new Zoll weighs significantly more than the Zoll monitors that have been in use for some time, and even more than the obsolete Heartstart.
- The new Hero 304 stretcher weighs significantly more than the stretchers in use at the time of writing this attachment and many officers have significant problems taking the stretcher out of the vehicle when loaded with a patient due to the greater weight and heavier back legs. A large number of IIMs have been lodged citing this problem, some also reporting injuries. The OH & S Department and the Manual Handling Section in Administration are aware of the problems but as at 19/6/08 the stretcher is still in use.

This indicates the Service has a blatant disregard for its own O.H. & S. principles and for the well being of their on-road staff. Any attempts, i.e. via IIMs, to report the extra weight of equipment and the potential for injury have gone unanswered and not rectified.

OPERATIONAL AMBULANCE OFFICERS

(STATE) AWARD

INDUSTRIAL RELATIONS COMMISSION OF NEW SOUTH WALES

REVIEWED AWARD

1. Arrangement

1. Hours of Duty

- (a) Employees working shifts that incorporate a meal break shall be allowed a meal break of not less than one hour, no later than four hours nor more than six hours from the starting time of shifts, unless otherwise agreed between the parties. In respect of shifts of eight hour and nine hour duration, which include a one-hour meal break, employees shall be given the one hour meal break, not less than four nor more than five and one half hours from the starting time of shifts unless otherwise agreed between the parties.
- (b) Employees working shifts that incorporate a meal break who are recalled to duty from their meal break shall be paid in respect of the first call out, one hour at ordinary rates and in respect of any subsequent call out, ordinary rates extra for the time so worked; provided, that the subsequent call out occurs prior to him or her having completed the meal break. At the beginning of the seventh hour, the meal is considered to have commenced and one hour's penalty at ordinary rates is to be paid for the first case. Subsequent cases referred to in the subclause will attract ordinary time extra until the full meal break has been taken.

This penalty shall also apply where an employee is sent to his or her meal prior to the completion of the fourth hour. This provision will not apply to employees on night shift

although the appropriate meal break, in accordance with the provisions contained in subclause (b) of this clause, shall be given unless otherwise agreed between the parties.

Response (to the underlined and italicised section)

Day shift hours of duty are: 08:00 to 18:00 or 19:00 (10 or 11 hour shift)

Afternoon shift hours of duty are: 12:00 to 00:00 (12 hour shift)

Night shift hours of duty: 18:00 to 08:00 (14 hour shift)

These starting and finishing times may vary slightly at some other stations around Sydney and may differ significantly in the rural areas. The hours on duty, however, are pretty much the same. There is a 1 hour unpaid meal break on day and afternoon shifts and penalties apply to that meal break if it is interrupted by allocation of a job. The implementation of this section of the award regarding meal break on night shift has long been neglected. Officers on night shift are consistently denied their award entitled meal break and generally work through it unpaid. Although night shift is of 14 hours duration, officers only receive 13 hours pay. Attempts to take this meal break some time ago resulted in abuse, both personally over the phone and broadcast over the 2-way radio, directed at the officers involved. Addendum I will offer more information on this section.

2. Roster of Hours

- (c) There shall be a minimum break of ten hours between shifts, except in case of an emergency or agreement between the Service and the employee.

Response

There is plenty of anecdotal evidence to prove that the Service is refusing to implement the required ten hour break.

A number of employees, some still at _____, can confirm that their shift was extended by at least 4-6 hours overtime. The hours of duty for standard shifts are listed on page 4. These officers were due to commence either their second day shift or second night shift 6-8 hours later. Upon contacting the DO on duty at the time, a request was made to start their next shift 10 hours from knock off time. This was denied and they were instructed to commence at the normal time. After some negotiation, an agreement was reached whereby the officers started their next shift 8 hours after knock off.

The union was contacted sometime after this to clarify if the ten hour break was to commence at the end of the rostered shift or at knock off time after overtime. The union confirmed it was the latter, the ten hour break was to commence at knock off time, irrespective of what time that was. However the union also added that there was a "gentleman's' agreement" between themselves and the service that this break between shifts would be 8 hours. This is obviously contrary to the awards, any OH & S issues and contrary to the knowledge of officers on road.

13. Overtime

- (d) Employees shall, when required, work reasonable levels of overtime to meet the needs of the Service.

See also Clause 45. Reasonable Hours

Response

This requirement is repeated in Section 45 (i) and (ii), on page 11. The Service refuses to give a definition of "reasonable". Management considers 2 hours overtime as reasonable, but there is plenty of documentary evidence, in the form of employees' timesheets, that prove that this limit has been greatly exceeded, particularly after a 14 hour night shift. This also occurs, on occasion, when employees are due to commence their second day or night shift some time after. (Please see response to 11. Roster of Hours). On occasion an employee will be asked if they would like more overtime and their negative response is accepted. On other occasions further work is allocated to two already exhausted officers and upon these officers indicating that they are a certain finish time which has passed, the Despatch officer then will intimate that they are refusing to do their duty. Section 11 should then come into play and, as stated above, this is not happening.

Patient Transport Officers also have many complaints regarding this clause. The Service prides itself on having "A Family Friendly Working Environment" and requests from officers, particularly PTO's, for an on-time finish as they have child care to consider will invariably be ignored and overtime will be given, sometimes it appears out of spite. Questions and comments regarding an officer's refusal to their duty will then predictably arise.

Most other industry awards consider overtime as optional for an employee, not mandatory as in the case of the Ambulance Service. Understandably an officer must complete the job he/she is currently on when normal end of shift time occurs. However, the despatch centre then takes advantage of 2 officers, out and about in a fully equipped car, and assigns them another job, usually without asking, regardless of how long they have already been working.

Part of the Ambulance Service's duties is to transport patients to and from their place of individual treatment. These patients need to have routine dialysis, further treatment for an existing condition or specialist treatment. Sometimes this treatment requires any early start, in particular the dialysis centres which open very early due to their high work load. These transport jobs invariably fall to the night shift crews who have already worked 12-13 hours without adequate meal breaks or rest. Some of these transports are local or are of a short distance and can be carried out with little complaint. However, some of these transports require the officers involved to drive significant distances; e.g. Bankstown to Padstow then onto RPA, Campbelltown to Camden then onto Sydney Eye Hospital; in peak hour traffic, and then drive back to station. On occasion on the way back to the officers' station, a new job will be allocated without notice and will inevitably draw further overtime.

The despatch centre needs, and fails, to consider the conditions of the officers assigned the job, the distance to be travelled, the anticipated traffic conditions, the time of the appointment, what time the specialist starts and whether the day shift, or even the PTO's starting at 6:00am, can do the job.

A number of attempts were made, at various station meetings at _____ in the past 1-1 1/2 years, to inform the attending DO that the workload at our particular station, and most certainly at other busy stations within Sydney, on night shift was debilitating and that the fatigue experienced was compounded by too few staff, enforced overtime and long drives. His advice was that we must use caution when using the term "fatigue" because the Service will then use that as an excuse to change the rosters and stop the 4x4 rostering already in place. No attempt was made by Management to address the staffing problem, to talk to the Despatch centre to alleviate the enforced overtime and travel situations, or to come up with any sort of solution.

Night shift, particularly in some areas of Sydney, is especially debilitating. No matter what precautions an officer takes, i.e. nap before first night shift, sleep all day between 2 night shifts; a 14 hour shift with no respite, no rest, usually no adequate meal break, is exhausting and toward the end of the shift, dangerous. When enforced overtime is added to this the combination can become lethal. This mixture of elements is basically an accident waiting to happen. If a job allocated before end of shift runs into overtime, then ¾ hour to 1 hour overtime is reasonable. The Service may consider 2 hours overtime as reasonable, but even this length of time after an already long shift is extremely unreasonable.

25 Annual Leave

- (e) (i) Annual leave shall be given and shall be taken within a period of six months after the date when the right to annual leave accrued, provided that the giving and taking of such leave may be postponed by mutual agreement between the parties for a further period not exceeding six months.
- (vi) Employees may exchange/split annual leave by mutual arrangements with the approval of the Service, provided that such exchange complies with paragraph (i) of this subclause.

Response

The Service has implemented a system for the annual leave in that (i) the year has been divided into 3 week blocks and (ii) employees are allowed only to take 3 or 6 weeks at a time within those blocks. These blocks do not always cover entire 2 week school holiday periods. These arrangements are not by mutual agreement.

It is agreed that staffing numbers need to be maintained but that is not the issue. There is nothing in the awards to state that annual leave must be taken in periods of only 3 or 6 weeks, nor within the specified blocks.

The Service advertises itself as a Family Friendly Employer but this Annual Leave policy of taking specified amounts of leave only within certain blocks makes a mockery of this policy. If an employee does not request his/her annual leave within these boundaries, an application is refused and an alternative time is allocated to this employee whether he/she wants it or not. Management will not compromise.

36. Uniforms

- (a) (i) The Service shall provide each new employee with sufficient, suitable and serviceable uniforms as agreed to by the Service and the Union as at 6 February 1998.

Response

New uniforms have recently been distributed to all staff. Despite statements to the contrary, staff were not consulted as to the design and fit. Most officers will tell you:

- the uniform looks scruffy and unprofessional,
- it fades quickly,
- it shrinks on washing,
- the Velcro on the overshirts scratch legs when tucked in,
- the waist adjusters on the trousers stick into hips or break easily and frequently,
- the undershirt is too hot in summer and this is before the overshirt is put on,
- the sleeves of the overshirt are too long and need to be rolled up at least once before a jacket is put on,
- the sleeves of the overshirt are too wide, even when rolled up, and get caught on things like stretcher handles, equipment in the vehicle, beds in hospital, vehicles involved in MVA's, etc.
- there is nowhere to keep pens which are constantly required on the job,
- the Velcro strips on the web belt make it very hard to slide any belt-attaching equipment on or off, and the Velcro eventually starts coming off. The belt itself is very hard to adjust to suit everyday requirements, mainly due to the long Velcro strips,
- The overshirt and trousers are of poor quality and fall apart quickly, i.e. zippers breaking, stitching coming undone. Stores then take a long time to replace. This problem alone affects how unprofessional the uniform looks to the public.

Many other employees can in all probability come up with other issues they have with the uniform.

Many of these problems are OH & S issues.

45. Reasonable Hours

See also Clause 13. Overtime (page 6)

- (i) Subject to sub-clause (ii) an employer may require an employee to work reasonable overtime at overtime rates.
- (ii) An employee may refuse to work overtime in circumstances where the working of such overtime would result in the employee working hours which are unreasonable.
- (iii) For the purposes of sub-clause (ii) what is reasonable or other wise will be determined having regard to:
 - (a) Any risk to employee health and safety.
 - (b) The employee's personal circumstances including any family and carer responsibilities.
 - (c) The needs of the workplace or enterprise.
 - (d) The notice (if any) given by the employer of the overtime and by the employee of his or her intention to refuse it; and
 - (e) Any other relevant matter.

Response

As stated in response to clause 13 (on pages 6 and 7) the Service continues to:

- refuse to define "reasonable",
- allocate overtime without notice,
- allocate overtime after long hard shift without regard to employee health and safety or employee's personal circumstances,
- Threaten reprimands if overtime is refused.

Summary

The Service will continue to use “the needs of the workplace or enterprise” as an excuse to consistently abuse the rights and working conditions of the on-road Paramedics and Patient Transport Officers. There is a plethora of anecdotal evidence that shows that The N.S.W. Ambulance Service has a long history of:

- Intimidation, bullying and harassment when an officer has attempted to claim award entitlements,
- Publicising its “Non-Harassment and Bullying” Policy and “Family Friendly” Policy without practising it, as was so publicly evident in the events surrounding officers at Cowra station a few years ago,
- Persecuting and suspending officers without full investigation of facts, i.e. guilty until proven innocent,
- Denying officers adequate counselling and support in times of stressful and distressing events whilst on the job, and in effect forcing them to carry out further duties without said counselling and debriefing,
- Providing inadequate training before placing Paramedics on road,
- Blaming and persecuting those officers when the same training and education has resulted in sub standard treatment of patients, e.g. meningococcal death of a young female 2 years ago. This in effect resulted in a knee-jerk reaction from the Service which concluded in hastily drawn up protocols and pharmacologies with only a CD as training,
- Implementing policies that require a response from officers to treat patients without regard to level of training or distance that car has to travel to get to that patient, so long as the numbers look good in the Despatch centre and a car is on the job,
- Implementing policies that will take cars out of their allocated sector, which requires other vehicles to travel out of their sector to cover the original cars, etc. A domino effect. It is painfully obvious that there is a severe shortage of staff and cars. Those on road are unable

to cope with the workload and are relentlessly allocated worked, without rest or even opportunity to obtain food.

The many other submissions this Standing Committee will receive will highlight the same, and many other, inadequacies and negligent behaviour perpetrated by the N.S.W. Ambulance Service over the years. Management has never attempted to rectify any of the many problems presented to them; in fact they have ignored them and swept them under the carpet hoping they will go away. In some cases those who have the courage to speak out have been persecuted and bullied into leaving. Many others just give in under the relentless bullying and intimidation. Many, many Paramedics and Patient Transport Officers are out on the road, trying to do a very difficult job with limited resources, no support and low morale. No wonder the turnover of staff is huge.

The top heavy, boys-club-mentality of Management needs to be expunged. We need to start from scratch. We need to install a pro-active, intelligent, modern system of Management that focuses on excellent patient care to those who need it and providing support and a healthy working environment for its staff.

It may also be necessary to note that the Health Services Union is impotent when it comes to advising the Service that they are acting contrary to award provisions. In fact the union is negligent in not acting on behalf of its members when it deliberately fails to act when the Service acts in flagrant violation of award entitlements or even the Union's own directives.