

Submission
No 198

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

Name: Suppressed

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Partially Confidential

Dear Sir/Madam,

In making this reply to the parliamentary inquiry I wish to remain anonymous for fear of negative outcomes, and yes these outcomes do happen.

So you have opened the bag!, Where do I start? And how much time do you have?.

I have seen a lot of changes to the ASNSW, but this is utmost lowest point I have seen ambulance officers moral and the ASNSW disinterest. I do not normally speak out against the ASNSW but enough is enough! this is just pathetic!!

My views in point form.

1/ wage/monetary rates. This is why we work, were not here just for the love of it! We have families and mortgages too. As I stated above I am a level officer with years experience and a for the past years. My hourly rate is \$27.42 per hour, plus penalties for weekend work and shift work. (officially that's around \$50,000 per annum, including penalties around \$60,000) . well that's not too bad I hear you all say, well lets break that down to our level. Shift work includes weekend work, so that's time away from my family and friends, weekends, holidays, Christmas etc.. At this stage I can give 22 different drugs to my patients, ranging in their condition from a simple transport to a cardiac arrest. Most of these drugs and procedures (cannulating, (needle in a vein) intraossious (needle in a child's bone) lma (tube in a collapsed persons airway) etc.. is what a doctor does in the emergency department of the hospital (and they may be on \$100 per hour) Lets compare that to nurses, they start at \$30 per hour, work in a nice controlled environment, set temperature at 22 degrees, they give drugs charted by the doctor, these need to be checked and rechecked by another nurse before they are administered. Lets look at the ambo again, works in an uncontrolled environment, hot, cold, pouring rain, pulling people out of smashed vehicles, work at the sides of cliffs, etc no one to make our drug decisions but us, we do not have the luxury for someone to check our drugs as we quite often work single and most times our partners are junior to us and unfamiliar with these drugs. We quite often get abused, spat at, and assaulted, just like the police. (and while we talk about police our highest rate after 9 years in the ambulance service is what a probationary constable gets in his first year of police service) so why are we left behind in the pay scale, because the government thinks we will do the job regardless. Well I can tell you that the ASNSW is in trouble, when I joined it was 3 thousand applicants for 100 positions, now the recruitment is ongoing because they cannot get the applicants. There is a saying that if you pay people peanuts you get monkeys and that is what were are seeing now! And who wants to do this job now, shit money, poor management, poor morale, and yes I am looking for another job too. I have taken my car in for its normal service where they charge \$80. per hour plus parts, hmmm, thats \$40 for the mechanic and \$40 for the company.

2/ conditions - well in we work 4 on and usually 5 days off. That's still equivalent to 38 hours a week on a rotating roster. Out of a 10 hour day shift we are on the road for at least 8 of that 10 hours. We are so busy that we quite often do not get a lunch break, no toilet break, no time to restock the vehicle and certainly no time to debrief with a cup of coffee or time to reflect about a serious case. Statistics 10 years ago show we have one extra vehicle on the day shift now and the same on night shift, sure we are doubled up or two on a vehicle (most times) but that is common sense is it not? 10 years ago we were doing about 300 jobs a day, now its close to 850 a day, with Fridays and Saturdays approaching 1000. So a little maths here, the population has increased 10 fold, the jobs have increased 2 to 2 and half times, and yet the staffing levels have stayed the same, no wonder officers don't get lunch, no time for a coffee, and certainly no time to sit down after a bad case. Which goes to

explain some of the poor morale out there!

There is a dispute to cover all ambulances with double crews out of the hunter at the moment. Well the public is under the impression that this is just Stroud, Merriwa, and scone. Well let me tell you that every time someone calls in sick at Nelson Bay and Cessnock stations, the service and all its wisdom refuses to maintain these shifts on overtime and is quite happy to let these stations work single as well. The amount of transfers that come out of _____ to _____ is horrifying; the _____ cannot handle or keep anything in its doors and transfers everything to _____ hospitals. This means that the double crew does the transfer to _____ which some times takes up to 2 hours and the single officer left on station is working alone with the nearest backup at least 30 minutes away, if they are on station, then _____ some 40 minutes away and it gets worse sometimes the single person is waiting hours on scene for back up. If that's a cardiac arrest then the person is deceased, yes people have died and will continue to do die. What an absolute joke of a hospital, they cannot even attract a full time doctor there, and how appalling is the ambulance service they know everything is transferred out of there, their staff is being flogged, response times have almost doubled, stress through the roof, but what has our managers done, A BIG FAT ZERO.

On a night shift when _____ does a transfer to _____ (remember only one car on a night shift for 20,000 people swelling to 100,00 during holiday periods) the ambulance service recognises that such an area cannot be left uncovered for such a long period of time, so _____ if on station, otherwise _____ will have to leave their area and close its station to go to _____ and cover that area, No one then covers _____ or _____ stations. As stated _____ is 30 minutes away from its next closest vehicle, so during a shift, cars are shafted to _____ some 2, 3, and even 4 times during a shift. This puts pressure on officers, driving those extra kms, usually time is critical putting the public's lives in danger on a casualty run, the patient is waiting longer periods until the ambulance arrives. Some times we get to _____ and then a job goes down in the town we left, and its usually a serious case, so then the public then waits for up to 30 minutes for another car to arrive from another station. This is only the start of lack of ambulances on road and poor attitude of management towards maintaining rosters by budgetary constraints. Is this an occasional health and safety issue? of course it is, a single officer going on a case open to get assaulted, hurt on the way or on the job, open to allegations from the public looking to make a quick dollar, under enormous stress if attending a cardiac arrest, motor vehicle accident with people trapped, a child drowning, an intoxicated person, attending fights, abusive people on scene etc etc.. lets face it we don't get called to mrs browns place for a cup of coffee, when people want an ambulance all people involved are under stress and sometimes out of character. What has the ambulance service done about this, absolutely nothing.

3/ management. In a single word - poor. I had a conversation with _____ when he arrived into the area some _____ or so years ago. It was about single officer crewing and how much stress it puts on officers to respond to cases. I talked about a cardiac arrest which was performed single until backup arrived some 30 minutes later. He was not at all interested in the case nor the family involved, the last memories of a loving marriage performing cpr on your partner until another ambulance arrived to take over. I stated this is extremely poor of the service, he stated to me to tell the family that you are the first responder and back up is on the way. This statement is ludicrous as two officers should be maintained on a car, he said well your partner let you down by calling in sick, he done his best to fill the roster by putting two officers on but your partner let you down by taking a sick day. In England we call each other when we are sick and get someone to come in and cover the shift. I tried to explain that here we have sick days for a reason. I then explained how much pressure and stress it puts on officers and we are extremely unhappy and officers are leaving the job. He stated that we are just bums on seats and we could be replaced just like that. (as he clicked his fingers) he also stated he would like to see a turn over of staff every four years, what a joke, how much experience does an ambo get in four years, he is thinking of burnout factor, get them in flog them and then get rid of them, these are our managers!

4/ money issues! We hear it every day, no money for this, no money for that. Well the time has come to push the government _____ and other senior management, dont worry about your bonus or wheather your contract will be renewed, you have screwed us all too much. Get extra staff, fully maintain all shifts, and get extra ambulances on the road, and while your at it, give us a decent pay increase. Its bad enough our union is weak as

water as well, dont want to upset the apple cart or upset the labour government, so once again the ambo is screwed!

On a local level, we have \$19,000 in taniba bays trust fund, donated by the community headed by mrs Doreen Bradley. this lady has raised to date with the community some \$80,000 plus dollars. I quote her this money is to be spent on a local level, for our ambulance officers and may be spent for ambulance equipment or leisures of comfort which makes their job easy. i have put in submission after submission to purchase items such as a second tv, digital reciever, gps units, cupboards, closing in the pergola etc ec. all of which came back from management with a no. I even spoke to Mrs Bradley who said thats what the money is donated for, she then rang our management to have funds released, she was amazed that not only were funds not released, she was told to butt out of ambulance business.(why dont you have a chat to her, i will gladly give you her number and im sure she will gladly speak to you too!) We have a civilian running our funds here in who has no idea about ambulance equipment.

I have faxed quotes in 3 times because these quotes were lost, did not recieve, etc etc. I actually recall sitting in their office one friday and approval was granted to purchase equipment, then arrive back on station on monday morning to read emails where approval had been withdarwn. This is our management team, what a joke, if they were in the public sector theyd be sacked due to incompetence. Their tactics is too stall, deny, stall etc. Im glad is now gone too, yet another person who denies funds to be released.

5/ Health wise, why dosent the service look after its workers by keeping them fit and healthy. the fire brigade has a gym on every station. Ah yes one ambo hurt themselves during a backcare programe so lets can/stop everything! If the ambos worked out with a gym, we would become fitter, healthier, friendlier attitude frame of mind, and maybe even reduce back injuries, shoulder injuries etc.. less workers comp claims, more time at work, less sick leave, etc.,, Oh i forgot no money thats right, well the fire brigade has money but we dont. Then when we go back to workers comp on your basic pay of \$25 - 27 per hour because there is no penalties on workers comp, we can then just sit back and watch our mortgages go through the roof, extra stress on marriages, children, etc.. Well why dosent the ambulance service become pro active and pay for our gym fees, pool fees etc, its a win win situation, we keep fit, less time off work and reduced injuries.

6/ Training is a big issue, in the old days you were taken off the road every two years to train, sit exams etc. Now you get ctp points for being at a meeting, holding a lecture etc. you dont need to even look at protocols any more, is this because the ambulance service does not want or cannot afford to have officers off road to train?

As for training its managers, well im still waiting to be trained in most things, oh yes there is computer training and dealing with staff etc..but you will have to do this in your time, because the rosters are so short. occasionally if there is an extra on they will allow you to go. Im sorry, train your managers so they can manage the station, staff, issues, etc.. This should be mandatory.

7/ I am also sick of the extra responsibilities being placed upon us. New skills, p1, extra drugs and procedures, lma, fentanyl, morphine, 12 lead ecg, cardiac drugs, the list continues, when i joined we could give about 10 drugs, now its up to 22 and more coming, no increase in pay though, all i can say is that if there is no great increase in pay with this pay dispute now there will be a lot of vacancies adn a lot of unhappy ambos to say the least.

And what about the extra responsibilites on the poor station officer, he/she has to work the road, as i said before we are constantly on the road most of shift. Then when we come back to station, do the station duties. Paperwork, running of staff, vehicles, stores, emails, filing, there is just not enough time to do it any more. and when something goes wrong you know who is too blame. All this for an extra < \$1.00 per hour, what a joke, and how much can we screw our workers once again...

8/ lets talk about the polies pay rise of 7%, yes well done, lets give the other public servents 2.5% is it getting through we are being screwed from everone!!!

ive seen alot of ambos under endue stress. this job puts pressure on mariages, families, mortgages, mental states, ive 2 seen friends successfully commit suicide in the last 18 months with other attempting it. its not all the services fault. its a stressfull job, we see more death and pain in a week than a normal person would in a life

time. but its time the service recognised we need more ambulances on road, fully maintenances on all shifts including extra ambulances, a huge increase in funds for more ambulances, staff, equipment, proper training and ambos well being, and a reasonable/ much better monetary reward for what we do.

thanks for taking the time to read this and i can only hope something is done. there is much more to talk about but im out of time. bullying of staff, transfers, country positions, ive worked at and seen some of it.

any way thankyou.