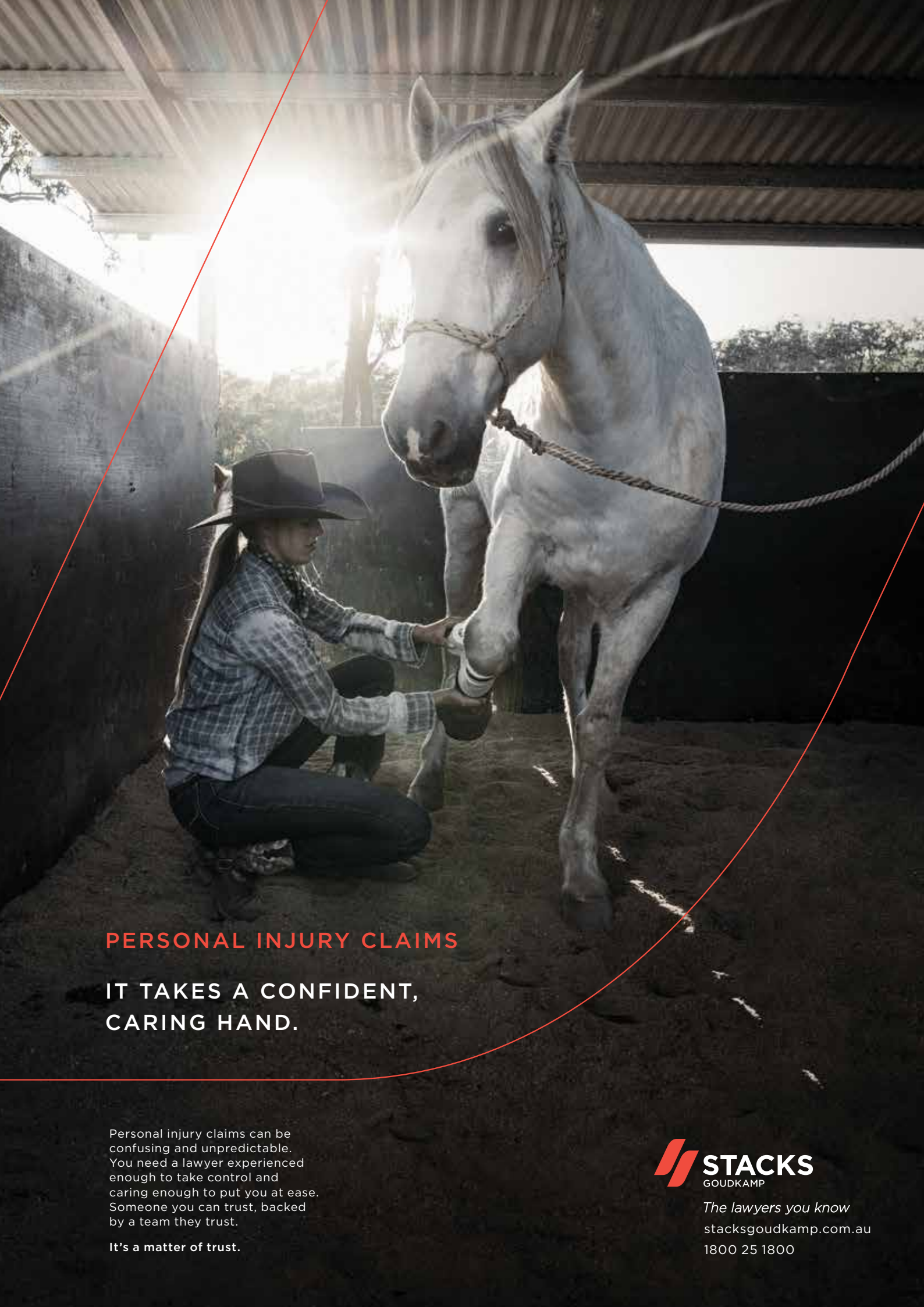


32 2023

AMBULANCE ACTIVE

THE OFFICIAL JOURNAL OF THE AUSTRALASIAN COUNCIL OF AMBULANCE UNIONS





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VOLUME 14 ISSUE 1 2023

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ON THE COVER:

There are now more than 1,700 ADHSU paramedics pledged to boycott registration this year and this number continues to rise.



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If you're hurt at work, you need specialist help.

It's not just a matter of processing a workers comp claim. It's about claiming absolutely everything you're entitled to and with ambulance workers, that gets complicated.

Did you know that the risk of serious injury among Australian paramedics was found to be more than seven times higher than the Australian national average?

When it comes to NSW ambulance workers compensation claims, it would be very hard to find a more experienced solicitor than Chantille Khoury. Chantille is a principal at Australia's largest specialist personal injury firm, Law Partners, where she specialises in emergency service worker claims.

"When paramedics are injured at work, either physically or mentally, many are reluctant to seek compensation, or they don't know who to turn to."

As a member of NSW Ambulance you put yourself at risk every day and injuries from aiding immobile patients, drug-affected patients, motor vehicle accidents and exposure to traumatic events are all too common. If you're hurt at work, it's important to get good advice on your options.

"With ambulance workers, it's not just a matter of processing a workers comp claim. They have their own set of rules relating to workers comp,

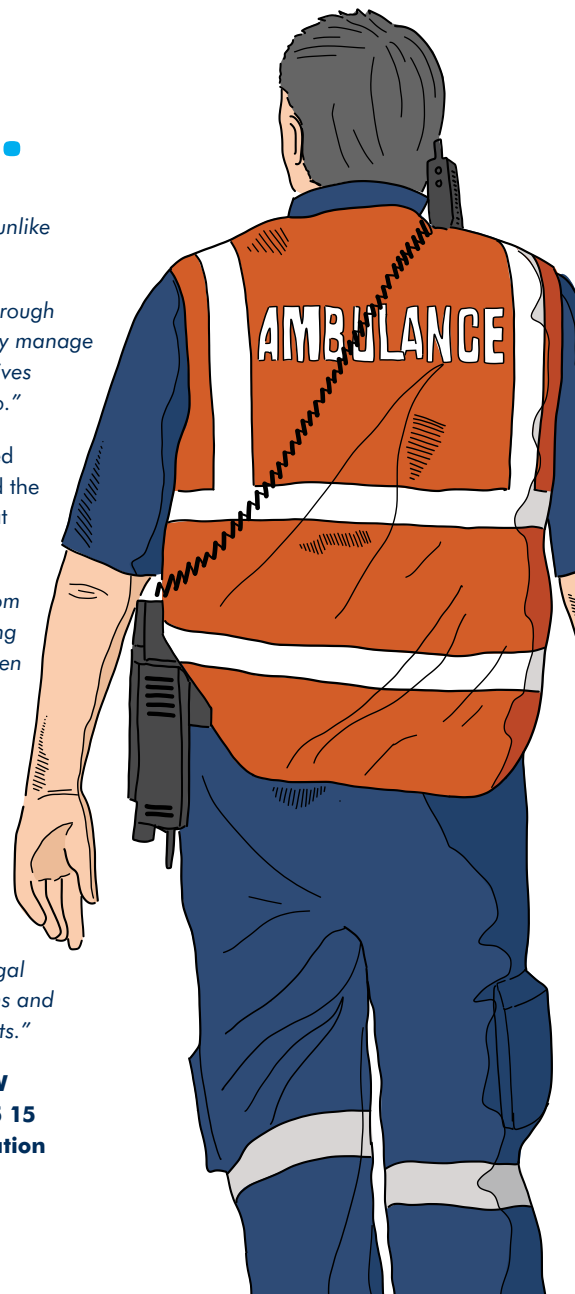
TPD and income protection which are unlike any other worker in NSW."

"It takes extensive experience and a thorough understanding of the system to properly manage a claim and make sure the officer receives absolutely everything they're entitled to."

Unfortunately claims are often processed as a standard workers comp claim, and the ambulance worker will never know what they missed out on.

"In particular, PTSD claims can result from exposure to traumatic events over a long period of time, so care needs to be taken to build these cases thoroughly. Many PTSD paramedics come to me in their 40s and 50s and they're broken. They start their careers very optimistic about their future, but by the time I see them they're changed people. They can't continue doing the job they know and love and are at a loss, not knowing where to turn. I can at least provide them with a dedicated legal team, support them through their claims and make sure they get their full entitlements."

If you've been hurt at work in NSW you can call Law Partners on 13 15 15 to arrange a confidential conversation with Chantille.



Chantille Khoury – Principal, Law Partners

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FROM the PRESIDENT

ACKNOWLEDGEMENT

I would like to take a moment to send my thoughts and condolences to our members in Western Australia for the tragic passing of your colleague recently. It is never easy losing a workmate, but in such circumstances is truly heartbreaking for you all. Please look out for yourselves and each other, take all the time you need to heal and grieve. You have Paramedics right around Australia and New Zealand holding you up and supporting you.

CONGRATULATIONS TO ALL MEMBERS

and delegates who attended the annual ACAU conference for 2023. A very big thankyou to the TWU ACT who were this year's hosts. I say it each year I go, but as a paramedic and a unionist, this conference is one of my yearly highlights. Paramedics, PTOs, dispatchers, call takers from around Australia and New Zealand, talking about the issues they are facing, the fights they are fighting and the amazing wins they have had.

The conference reminds us that we're not alone in dealing with the nitty-gritty of workplace challenges, and highlights the practical benefits of unions joining forces in elevating the paramedicine profession.

The real power of a union isn't just in numbers but in members standing firm for the rights and well-being of their peers. And hearing reports from South Australia

to Western Australia and across the ditch in New Zealand about members doing just this gives real hope for where we are headed.

In the world of paramedicine, our joint strength is crucial. By teaming up with unions nationwide, we can push for changes that go beyond local issues. A united front lets us tackle big problems – fair pay, decent working conditions, and the recognition paramedics deserve. By combining resources, sharing know-how, and working together, we can lift the standards of paramedicine.

As unionists, we're not spectators. Our role is not getting perks for individuals; it's about making a path for a better, more fair future for everyone. With that in mind, we begin again for another year and look forward to seeing new and familiar faces next year when we report back to each other in New Zealand.



Tess Oxley
ACAU President



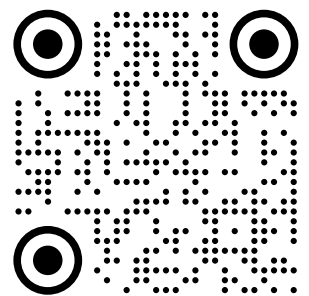
Keeping Australia's emergency service workers mentally fit and strong.

National Emergency Worker Support Service

Australia's emergency service workers and volunteers keep our communities safe, but stress and anxiety are often part of the job. Experiencing mental health challenges after a traumatic event is normal and very common — and it's treatable, too.

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- Access information and resources to help manage your symptoms.



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FROM the SECRETARY

ACAU CONFERENCE 2023

The ACAU Conference for 2023 was hosted by the TWU in Canberra over 3 days in September. Over 50 delegates from across Australia and New Zealand enjoyed the unseasonably warm Canberra sunshine. The venue for the conference was the National Museum of Australia, overlooking stunning Lake Burley Griffin. A moving Welcome to Country was conducted by esteemed Ngunnawal Elder Auntie Violet. The conference was officially opened by the ACT Minister for Emergency Services, Mick Gentleman. Highlights of the conference included joining the final leg of the Heart-to-Heart Walk up to Parliament House to highlight first responders mental health and the lack of action on the Senate Inquiry Recommendations; a presentation by Senator David Pocock on his efforts to legislate Presumptive Legislation for First Responders and a glamorous Conference Dinner in the Aircraft Hall of the Australian War Memorial. Thank you to everyone who contributed to making the conference happen. A big shout out to Country Wide Austral, our publishers, for their ongoing financial support of the Conference and Dinner.

ACAU'S ABILITY TO INFLUENCE NATIONAL AND TRANS-TASMAN PARAMEDIC & AMBULANCE ISSUES

Since our inception as the National Council of Ambulance Unions in 2008, ACAU has focused on big picture issues that we mutually agreed were best

coordinated and campaigned for on a National and Trans-Tasman basis. Initially the achievement of National Registration was our focus. Recently the Chair of the Australian College of Paramedicine, Ryann Lovett, conceded that national registration would not have been achieved in 2018 without our constructive and targeted lobbying. Once registration was achieved, we agreed the mental health and wellbeing of paramedics should be our ongoing primary focus.

ACAU contributed significantly to Beyond Blue's landmark survey into first responders mental health. The biggest ever conducted internationally. Its report painted a heartbreaking and damning picture of what was happening in this space including an epidemic of suicide and mental ill health. Through the efforts of ACAU and Tasmanian HACSU Delegate Simone Haigh, an Australian Senate Inquiry was established in 2017 to examine issues surrounding the mental health and wellbeing of first responders. ACAU tabled a major submission on behalf of paramedic and ambulance industry members and appeared in person to speak to the committee in public hearings in Canberra. The resulting recommendations incorporated several of those first proposed by ACAU. Disappointingly the then Liberal-National Coalition Government and now the Albanese Labour Government have chosen not to action these recommendations.

ACUA's effectiveness has always been predicated on our ability to put aside

big union politics and concentrate on advancing the issues that impact directly on our paramedic and ambulance members. We've done this by ensuring smaller jurisdictions and unions with fewer ambulance members have an equal say on our direction and what is important to us and our ambulance and paramedic members collectively. Rarely, but on occasions, this approach clashes with wider agendas of parent unions. If we are to continue the legacy of success we have achieved to date, to ensure the future viability of the ACAU, each of us needs to remember what our success has been founded upon, namely, respectful discussion of all issues but with a primary focus and concentration on those that impact on our paramedic and ambulance members. Our continuing ability to Influence National and Trans-Tasman Paramedic & Ambulance Issues depends on this.

NZ 2024

Finally, we are all hugely excited to be taking the ACAU Conference offshore next year to New Zealand. Dates and duration are being organised as we speak, but the location will be in Auckland. We look forward to taking the Australasian Council over the ditch and experiencing some kiwi hospitality!

Jim Arneman

ACAU Secretary



About Jim: Jim is a Registered Intensive Care Paramedic who works for the ACT Ambulance Service. He was the inaugural Secretary of the National Council of Ambulance Unions, a position he held for three years, before taking on Project Officer roles for NCAU covering National Registration and Paramedic Mental Health. He has worked as a paramedic for over three decades in metropolitan, rural, regional and remote settings in several ambulance services. He is currently a member of the ACT TWU Ambulance Delegates Caucus and has been the Secretary of the Australasian Council of Ambulance Unions since being elected unopposed in 2019.

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INDUSTRIAL REPORTS

Australian Capital Territory

44 HOUR ROSTER CAMPAIGN

In what will be the most significant work practice change in any ambulance jurisdiction since the introduction of the original 10/14 rosters, which moved paramedics away from 7 x 8 hour shifts in the mid 1980's, the ACT is set to introduce its new 44 hour roster on February 29th 2024.

Unprecedented industrial action in 2022 by members helped secure this extraordinary result, which will hopefully set the benchmark for safer ambulance rostering practices moving forward.

The roster will see the hours worked dropped from 48 to 44 hours with no loss of pay or leave. The roster will incorporate slow moving forward rotating shifts which are predictable and regular, along with adequate rest between shifts including longer fatigue breaks for night shifts and between shift rotations.

To underpin the broader ACTAS Modernisation and Sustainable Service Delivery Plan, the roster will incorporate 5 hours of professional development time built in to the commencement of each afternoon shift. The PD component will be used to facilitate regular and ongoing clinical, personal and operational development initiatives to assist paramedics maintain their professional currency.

The inbuilt benefits of the roster will include

- a single 10-hour night shift
- pay parity with existing 10/14 roster
- the same number of blocks of leave as existing 10/14 roster
- inbuilt personal development and wellbeing time in all options
- 44-hour blocks instead of 48-hour blocks (work 4 hours less per block)
- staggered start times to minimise occurrences of shift extensions
- staggered meal breaks to increase access to rest periods on shift

ACTAS 44 Hour Roster Commencing 29/2/2024: 10-12-12-10

24 Hours in Operations																							
0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
2100-0700																							
						0630-1630																	
									0900-2100														
											1100-1600					1600-2300							
																					2100-0700		

Afternoon Shift - 1600 Personal Development Time (PADP, CPD, Wellbeing, etc.)

Morning	0630-1630	10 Hours
Break between shift		16.5 hours
Day	0900-2100	12 Hours
Break between shift		14 hours
Afternoon	1100-2300	12 Hours
Break between shift		22 hours
Night	2100-0700	10 Hours

Features:

- Significantly shorter night shift
- Good overlap from 0630 hours to reduce incidence of late case overtime at end of night shift
- Good overlap from 0900 to 2300 hours to provide meal break coverage
- Good overlap from 1600 to 2300 to reduce incidence of late case overtime and end of Morning, Day & Afternoon shifts
- 5 hours rostered personal development time on afternoon shift (including meal break)

Several final issues are being jointly worked through to underpin the rosters introduction. Once these are agreed, a new ACTAS Enterprise Agreement will be put out for a vote to underpin the initiation date on February 29th 2024.

AMBULANCE COMMUNICATIONS CENTRE REINTEGRATED UNDER ACTAS CONTROL

Members enthusiastically welcomed seeing our COMCEN sisters and brothers back in green in October 2023 after a backflip by the ACT Government that saw the Communications centre returned to ACT Ambulance Service control.

The Emergency Services Agency (ESA) as part of its failed OneCOMCEN reform, had attempted to run the ACTAS side of

the communications centre for a number of years in what was an ill-conceived and ultimately ham-fisted attempt at change that delivered nothing except a change of uniform colour, increasing response times and plummeting staff morale. Industrial action in 2022 as part of the TWU's OurACTAS campaign saw the pressure piled on to the ESA and the government to reverse their decision. The return of our communications centre, as well as the key enabling Operational Support Services and Workforce Planning departments has been a great win for members. It will importantly underpin the ongoing efforts to modernise ACTAS and its sustainable service delivery into the immediate future.

Jim Arneman



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New South Wales

PROFESSIONAL PAY CAMPAIGN

The NSW government has been distracted by issues of its own making of late - and the polls are showing it.

One upcoming issue of its own making is the showdown with the state's paramedics, who continue to be the lowest-paid and highest-injured in the country.

We thank all MPs who rose to speak in support of the professional recognition petition debate in Parliament. Non-government MPs made it clear that professional recognition for NSW paramedics is long overdue

More than 1,700 ADHSU paramedics are pledging to boycott registering this year - why should we? The premier has said he'd defer his election promise to address paramedic professional recognition so we will defer professional registration.



The Ministry has been served with ADHSU members' minimum requirements regarding pay. There are now more than 1,700 ADHSU paramedics pledged to boycott registration this year (this number continues to rise).

Rather than respond with an offer, the Ministry of Health has responded with threats. These tactics have only fuelled and encouraged our members and the strength that their solidarity is having.



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PHYSICAL
FITNESS



PURPOSEFUL
VOLUNTEERING



SOCIAL
EVENTS



VIRTUAL
EVENTS



We are a community where you can get fit, be inspired, learn, connect and help others in the community. We do this because we are proud veterans and first responders. It's living life with the same Aussie spirit that made us want to join the military or emergency services in the first place.

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WELCOMING THE INTERNATIONAL PARAMEDIC OF THE YEAR

We are honoured to have His Excellency Vasyl Myroshnychenko, the Ukrainian Ambassador to Australia, as an honorary member of the HSU. In a remarkable collaboration, he suggested bringing together Yulia "Taira" Paievskia, the International Paramedic of the Year and a frontline medic in Ukraine, with our ADHSU members and delegates.

Top left pic has, from left to right, Co-chair of the Australian Federation of Ukrainian organisations, Kateryna Argyrou, Ambassador to Australia, His Excellency Vasyl Myroshnychenko, Yuliia "Taira" Paievskia, Health Minister Ryan Park, Gerard Hayes Health Services Union Secretary, NSW Health Secretary, Susan Pearce, and junior vice-president of HSU, Tess Oxley.

Taira's speech was captivating, at times gruelling, but always inspiring.

MAINTENANCE OF ROSTERS

ADHSU members have been fighting for maintenance of rosters in one form or another for decades. Conversely, NSW executives have been doing everything they can to short-change the community and leave rosters unfilled – whenever they can get away with it.

The community is funding core station/centre rosters around the state, and the community expects those rosters to be filled.

The maintenance of station/centre rosters is not only important for ambulance coverage – it also has a direct effect on paramedic and control centre officers'

work life. NSW staff are not just the lowest paid in the country, but also the highest injured, with the second highest work intensity after WA.

We know that every time a local roster isn't filled, members are less likely to get their breaks or get off on time – so it matters.

NSW has recently introduced new roster enhancements but has indicated those rosters will only be maintained on an ad hoc basis. This is not good enough.

Members feel this issue is too important to let lie. They are awaiting a meeting with the health minister, but have voted to take industrial action if this is not dealt with appropriately.

Northern Territory

TENNANT CREEK

After nearly two decades the 96 hour roster in Tennant Creek ambulance station has ceased. Rosters are now the same as Alice Springs and Darwin stations.

It is no longer an on call station.

The decision to change the rosters was due to the ongoing attraction and retention issues (fatigue, remoteness, on call roster) of paramedics at Tennant Creek and was part of the enterprise agreement review into Tennant Creek as campaigned by members.

St John also have received negative media about the lack of service to the community due to only one permanent

paramedic in Tennant Creek for a large portion of 2023: <https://ntindependent.com.au/only-one-permanent-paramedic-in-tennant-creek-union-says-st-john-refuse-to-answer-questions/>. This media exposure contributed to St John finally agreeing to make the necessary changes to the dangerous roster arrangement.

Members in Tennant Creek stood united to achieve this significant roster change - something which has been ignored by St John for far too long.

Erina Early

New Zealand

BEDROOMS ON STATION:

St John is wanting to remove bedrooms from ambulance stations due to the increased cost of fireproofing requirements; although it is usually the area committees who pay for a large portion of the new builds through community fundraising. They are hoping to remove beds and instead have "rest areas" with the definition of a rest area yet to be determined.

BACKPAY:

There are ongoing issues regarding back pay from the last operation collective settlement with St John not wanting to pay the difference between the rate staff get from their ACC payments (when they have been injured and unable to work) and 100% of their base rate as per the collective agreement. Some members have been injured at work and have now been disadvantaged by this move due to the delayed settlement which was outside of members and the unions control.

PRECEPTING:

Previously staff who were precepting to help train paramedics, ICP's or ECP's were paid both a mentoring and precepting allowance but recently the mentoring allowance has been removed. This has resulted in our preceptors, who are also expected to complete reports outside of work hours, being paid less than mentors who are able to complete everything during work hours. This will be a hot topic in the upcoming negotiations.

COLLECTIVE BARGAINING:

Collective bargaining is currently ongoing for Wellington Free Ambulance, St John Operational Collective and a new St John collective for Watch Operation Managers and Group Operation Managers.

Queensland

In January this year we had delegates representing UWU in an announcement by the Premier and Minister for Health and Ambulance in welcoming 200 more front line ambulance staff, funded by the Palaszczuk government.

These new staff would go some way in assisting the QAS implementing the Finish on Time measures and would allow more experienced staff to be freed up to take on roles in the Clinical Hub and other triage and hospital diversion functions.

It is a good start but we need more to combat excessive unplanned overtime, to be able to access an uninterrupted meal break and to fill unfilled shifts.

EB 2022

In February our EBA went to ballot. We had one of the largest uptakes of participation in the vote with 97% voting yes and 3% voting no.

The Queensland Ambulance Service Certified Agreement 2022 was formally certified on the 17th of March 2023 ensuring ongoing maintenance of wages confirm that QAS employees continue to be amongst the highest paid in the industry.

The EB also contained more focus on important issues around reasonable shift lengths and the quality of life for those working on call.

THE KEY OUTCOMES

- Wage increases of 4%, 4%, 3% + up to 3% CPI top up (COLA).
- Wage increases back paid to 1 September 2022.
- As part of Wages Policy negotiations, the inclusion of shift penalties or Agg rate in Superannuation contribution calculations. Along with an increase to the % of Superannuation paid by the employer. (12.75% employer super contribution)
- Removal of clause for increase of meal break window.
- Maintenance of all Meal Overtime arrangements.
- Professional development allowance payable from 1 September 2024.
- All mandatory training to be performed in paid time.
- Inclusion of workforce and workload management in the Terms of Reference for RCC and SCC forums.
- Finish on time initiatives:
 - focus on the last hour of shift to provide greater ability to finish on time;
 - improved support for employees on-call;

- implementation of Mandatory Out of Service and Fatigue Management Procedures;
- adopting strategies such as staggering shift start/end times;
- review of Operation Centre rules, expansion of the Clinical Hub and regular review of station categorisation.

In order to ensure commitments around these initiatives are being met, all the following initiatives will be reportable to the Regional and State Consultative Committees:

- Removal of time-based increment progression for part-time employees and removal of the requirement of maintenance of skills/Certificate of Practice for increment progression.
- Opportunity for a LARU qualified employee, who is not in a LARU designated position but regularly uses their LARU skills, to be paid at Level 3, Band 1
- Commitment to review during the first 12 months of the agreement. the appropriate utilisation of PTOs with Certificate IV qualification.
- Clarity around the eligibility and application of the Flexibility Allowance.
- Clarification about the entitlement to access single day accrued time.
- Clarification regarding the availability and response by employees whilst on-call with increased focus on supporting employee's fatigue levels and reasonable access to hygiene and sustenance breaks.
- Clarification for when a call-back payment commences for EA staff from the time of receiving and acknowledging receipt of the call.
- Remote call back for level 4 or 5 supervisors not in receipt of a flexibility allowance or 20% unlimited loading when performing approved overtime without being recalled to the workplace.
- Inclusion of Indigenous and Culturally and Linguistically Diverse Program in Progression and Maintenance arrangements.

STRENGTHENING MEMBER UNION RIGHTS

In addition to these great outcomes, UWU has ensured that Union encouragement clauses have been enshrined into the certified agreement with QAS recognising United Worker's Union as the only registered industrial organisation representing Ambulance Officers in Queensland.

As well as...

- Staff access to UWU delegates and officials during working hours.

- Ability for UWU delegates to make public comment on Union issues.
- Access to new starters for union encouragement conversations.
- Paid industrial relations leave of 5 days per calendar year.

GRADUATES

In 2020 when COVID-19 gripped the world, QAS a key state player in the pandemic response, made a number of changes to a range of practices.

This was to ensure QAS remained agile and had the flexibility to respond to a very uncertain environment during this once in a century health crisis.

One of the initiatives implemented in order to fast track as many as possible new graduate paramedics into the system, was the compression of the graduate induction at Whyte Island.

This strategy enabled QAS to deal with the predicted furloughing of up to 30% of their workforce and the predicted increases in demand for service. UWU worked collaboratively with QAS during this process, commending them for employing additional staff, rather than relying on a volunteer workforce.

As the world transitioned to a "living with COVID" status, United Workers Union advocated to a return to the pre-pandemic process. We commenced advocating for a wholistic review of the graduate program to ensure it remained fit for purpose and provided an appropriate level of support to members.

QAS agreed and embarked on a comprehensive review of the current program, surveying recently inducted staff, staff who work with graduate paramedics during their supervision phase and staff who train the graduates at Whyte Island training academy as well as consultation with UWU delegates.

In early March 2023, the review was published with the recommendations:

- Review of program length, content and structure
- Extension of total graduate program length to 12 months (6 month 'sheltered' phase, followed by 6 month 'light' program)
- Perform broader review of education and regional support roles to provide appropriate mentoring and support structures in the Regions
- Undertake system reform to scaffold 'transition to practice' into an ongoing clinical professional development framework for all officers

The recommendations out of the review are about to be implemented with the October graduate intake.

FATIGUE MANAGEMENT

In late 2022, the Queensland Ambulance Service (QAS) engaged the Appleton Institute to undertake a review to further enhance current QAS fatigue risk management processes, focussing on the current fatigue management policy, procedures, training, staffing models and triggers.

On 09 January 2023, the Appleton Institute released its Final Report to QAS that set out recommendations to enhance the existing QAS policy / procedure framework for fatigue management, enhancing the existing QAS approach to decision-making with respect to staffing models at various types of locations, and enhancing the existing QAS training framework for fatigue management.

The report found that the current QAS overarching fatigue management policy and procedure structure lacked an overarching framework for the management of fatigue-related risk across all QAS. That is, there was a lack of clear enterprise level framework for strategic management of fatigue-related risk with most of the activity in that regard occurring at a tactical day-of-operations level.

The Appleton Institute Review identified 18 recommendations. These 18 specific recommendations were made within 4 key areas that aim to improve a whole of organisational approach to fatigue risk management across the QAS to ensure a safer system of work for QAS staff and changes / improvements to fatigue management activities.

The project will firstly develop a separate overarching document (QAS Fatigue Risk Management System) that will be created from the report's recommendations. This document will set out the revised organisational approach to fatigue risk management across QAS.

UWU and QAS have examined the report and accordingly, will participate jointly to oversee the revision for the overall framework for managing fatigue-related risk to meet contemporary best-practice and ensure a systematic and comprehensive approach to fatigue-risk management across the organisation.

As part of the measures in 15.4(b) of the Certified Agreement – Improved support to employees on-call, an SOP has been provided to Operation Centre Staff regarding the Out of Service code to be applied when crews find themselves away from their local response area whilst on call.

This can occur when transport to hospital is required, taking the On Call crew out of the local area and into busier locations in the region.

This can often result in those On Call crews who have already performed 10 or 12 hour shifts during the day, then being used as part of the night shift response in the more built-up areas across the state. This results in periods of time worked far exceeding what is safe.

The Fatigue Management Working Group continues to meet regularly to look at better processes and practices in supporting those employees working in On Call environments. One of the UWU delegates on this group is currently studying in the field of Fatigue risk management and is assisting QAS in the project.

SICK LEAVE PENALTY

The pandemic-related sick leave provisions currently in place:

- No reduction in Agg rate when off on sick leave over a weekend
- 10 hour cap on hours deducted from sick leave balances regardless of length of shift
- Access to pandemic leave for isolation purposes when COVID positive.

This penalty is under threat of removal.

These provisions need to continue, to allow for the fact that Ambulance employees are placed in an environment where far greater risk exists to contract communicable disease as part of the job. To remove these provisions would mean real reductions in both pay and entitlements for Ambulance Employees.

UWU don't think staff should be penalised for falling sick on a weekend, and we don't think staff should be using their sick leave at such a drastic rate because of the long shift patterns they can work, and we don't think they should have to use 7 days of their personal leave if they happen to contract COVID and are directed to isolate.

After a recent survey, hundreds of UWU Ambulance members have said they want to take action by meeting or writing to their local member to ensure these sick leave penalties remain in place. Watch this space.

MINISTER FOR HEALTH MEETS WITH STATE COUNCIL

State Councillors met with the Hon Shannon Fentiman Minister for Health, Mental Health and Ambulance Services, Minister for Women to discuss key points from their Regional areas or state wide issues they wanted to ensure were brought to the Ministers attention.

These issues included –

- Retention of current sick leave arrangements as per the employment directive,

- Commitments to Finish on Time,
- Public Sector Directives and application to the QAS environment,
- QAS integrity issues, acting in the public interest and the optics of the agency self-managing these issues,
- Utilisation of Casual paramedics,
- Impact Hospital flow has on ambulance service delivery,
- Progress of the build for Cairns Station and Op-Cen,
- Progress of the build for Caloundra "superstation" given rapidly increasing population in that area,
- PTS services across the state and the impact using PTS as a paramedic pathway has on devaluing the important work of those members.

Pleasingly, the Minister was appropriately briefed on a number of these issues and was able to engage in meaningful discussions around these. The issues she wanted to understand better have already started to be followed up on and we look forward to continuing to ensure the Minister gets the views of those working in the system to balance the advice of those running it.

NATIONAL HEALTH SECTOR DISCUSSIONS

UWU have many members across different parts of the health system.

We have shared issues like, workload, health and safety, attraction and retention to name a few.

Delegates from Ambulance and other health other professional roles along have recently participated in promising discussions with the Federal Health Minister Mark Butler, around what working to top of scope could look like and how that can assist with the current health workforce shortages across the country.

The minister has committed to consult with UWU in further discussions.

IN CONCLUSION

- We continue to grow in membership having recruited almost 300 new members this year.
- Our delegate structure is increasing with more members stepping up into leadership roles.
- Our delegates sit on consultative meetings, some of which include Fit For Duty; Fatigue Management; Prevention of Occupational Violence; Mental Health Management; Station Classification, Fleet and Equipment
- Across the private sector we have grown and currently in the process of negotiating enterprise agreements for QGair and LifeFlight.

South Australia

EMPLOYMENT TRIBUNAL SETTLEMENT OF ARBITRATION CASE – UTILISATION RATE AGREEMENT SECURED

The AEA has reached agreement with the SA Labor Government that ensures safe operability and transparency of the Ambulance Service, and improved safety provisions for members across the state – resolving long-running dispute proceedings lodged in the SA Employment Tribunal (SAET) in 2019 under the former hostile State Liberal Government.

Core issues to the dispute were late meal breaks, over-reliance on overtime, fatiguing on-call rosters, ramping and ongoing health and safety impacts to our members and the SA Community. The former Liberal State Government refused to work with the AEA and its members and refused to share vital data and reports into the state of the ambulance service which led to this dispute. Copious amounts of evidence were tendered in the form of hundreds of documents and weeks of witness testimony.

Upon the election of the new State Labor Government in 2022 and the case still reserved for judgment, the AEA sought to revisit the prospects of negotiating some reasonable changes to resolve our long-running dispute. The parties have been consulting and negotiating in a determined effort to reach an agreement that looked after our members and the South Australian community. True to their word the new Government have listened to its ambo, and worked with us, to reach this agreement which delivers on patient safety and ambo safety.

The AEA has managed to secure the following agreement which will deliver a safe, transparent Ambulance Service with strengthened safety provisions for members:

'UTILISATION RATE' AGREEMENT;

- Agreement in the form of an Industrial Referral Agreement (IRA) requiring SAAS to aim to meet an average metropolitan emergency ambulance utilisation rate of 55% or less – to take effect from 1st January 2024,
- Requirement for SAAS share any relevant data and information,
- Consultation with the AEA on what measures SAAS proposes to take to reduce the rate and consultation on AEA proposes to meet this aim.

- The following agreed times are now formally accepted and defined as part of the IRA.
 - *'The Aggregated Metropolitan Ambulance Emergency Crew Utilisation Rate is a tool relevant for the purposes of assessing the capacity of the SAAS to maintain availability to respond to a need for a Priority 1 to Priority 5 Response from the community and is useful in understanding the causal factors of operational performance e.g. response times.'*

STAGED REMOVAL OF ALL REMAINING FATIGUING ON-CALL ROSTERS ACROSS THE STATE AND CONVERSION TO 24/7 ACTIVE SHIFTS;

- Conversion of Barossa Station to an active shift roster from November 2024 and Port Pirie in November 2025.
- Barmera and Loxton stations in the Riverland as the last remaining on-call teams in SA to convert to active shift rosters from 2026 in a second term of Government.

STRENGTHENED OVERTIME AND FATIGUE PROTECTIONS:

- Stand-down for crews after completion of current event who, by their last hour of shift, have not had a crib break. In addition to current stand-down provisions relevant earlier in the shift.
- Right to refuse any case in the last hour of shift, other than a P1 or P2.
- Commitment to review abstraction rates for all operational rosters across SAAS.

STRENGTHENED CRIB BREAK PROTECTIONS;

- Right to refuse any tasking other than a Priority 1 or 2 within the 'crib window'
- Commitment to continue meal vouchers for crews ramped at major metropolitan hospitals 24/7.

This agreement reflects the closure of a dispute case that has been running over many years. It is the culmination of years of hard work. We're excited to now see the benefits that this agreement will have for our members and the South Australian community.

PRESUMPTIVE PTSD LEGISLATION (SA)

The AEA's advocacy for the mental health and wellbeing of members is long-running, dating back to the AEA's push for the introduction of SAAS's own Employee Assistance Program which was realised in 1990.

In 2016 the AEA State Council voted to sponsor a research project by Dr Keith Townsend from Griffith University titled 'Improving People Management Systems

in Emergency Services' This research, which AEA members participated in, had some significant findings, including:

- 8.5% of SA participants meet a provisional diagnosis for PTSD.
 - *(It should be noted that during the research project the DSM-IV was updated to the DSM-5. If the DSM-IV criteria was used, 40% of participants would have qualified for a provisional diagnosis of PTSD)*
- 40% of participants identify symptoms that indicate severe or extremely severe anxiety
- 17% of SA participants identify symptoms that indicate severe or extremely severe depression
- More PTSD symptoms were reported by employees with longer tenure of employment

The results were stark – the levels of mental health issues within ambulance worker participants (which included EMDSOs) was alarmingly high. It gave credence to what we all knew intuitively; that ambulance workers suffer much higher rates of mental health issues and psychiatric injury than the general population.

In 2019 the AEA, along with the Australasian Council of Ambulance Unions (ACAU), engaged in the 2019 Senate Inquiry into the Mental Health of First Responders. The inquiry tabled a Report that included 14 recommendations to improve the mental health and wellbeing of first responders. Recommendation 8 of the Senate Inquiry is as follows:

The committee recommends that the Commonwealth Government establish a national stakeholder working group, reporting to the COAG Council of Attorneys General, to assess the benefits of a coordinated, national approach to presumptive legislation covering PTSD and other psychological injuries in first responder and emergency service agencies. This initiative must take into consideration and work alongside legislation already introduced or being developed in state jurisdictions, thereby harmonising the relevant compensation laws across all Australian jurisdictions.

Also in 2019, the AEA met with members of SA Parliament to advocate for presumptive PTSD legislation which would make it easier for first responders to make a Return to Work claim when they suffer PTSD. It would mean that members would need to satisfy SAAS that they have PTSD, but they would no longer need to prove a work-

related cause – that causal connection between work and the injury would be “presumed”. SA Best tabled a draft bill in Parliament but it was not supported by the former State Liberal Government so it was not progressed.

Wanting to get this issue back on Parliament’s radar, the AEA wrote to all political parties prior to the 2022 State Election, calling for them to support presumptive PTSD legislation.

In March 2023, SA Best re-introduced their bill. In May 2023, the AEA met with SA Best and other first responder unions to provide feedback on the bill. This feedback was not initially adopted and there was no movement on the bill. However, in October this year, following the Federal Labor Government’s support of presumptive PTSD legislation (as part of the Fair Work Legislation Amendment ‘Closing the Loopholes’ Bill 2023), SA Best put the focus back on the bill.

We considered it vital that we did our due diligence on the bill to ensure that, if it passes, it adequately protects all of our members who are exposed to trauma in their work. Therefore the AEA has proposed amendments to the current bill in SA Parliament. These proposed amendments primarily relate to:

- 1 Ensuring all of our operational members, including both those who work on-road and in the EOC, can benefit from the presumption (whereas the current bill relates only to “ambulance officers”).
- 2 Ensuring members are not disadvantaged in relying on the presumption or in accessing their full entitlements where they experience delayed onset PTSD or are diagnosed with a mental health condition other than PTSD arising from their exposure to trauma at work.

The AEA is continuing to meet and discuss our amendments with Members of Parliament and will continue to advocate for the bill. While we do not think that presumptive PTSD legislation will be a panacea for all the issues our members who have suffered psychological injuries may experience when engaging with the Return to Work system, it is an important start. We hope to see legislation remove any initial hurdles that members currently face in having their psychological injury claims accepted.

We watch on as other States, Territories and the Commonwealth progress similar legislation – we must ensure that any bill that is proposed provides adequate support for our members.



HACSU and the United Firefighters Union Tasmania are kicking off our campaign to lobby the Federal Government for fairer superannuation for paramedics and firefighters.

Tasmania

MANDATORY OFFLOAD PROCEDURE BECOMING A REALITY

After 15 years of wearing the brunt of capacity constraints across health and particularly in emergency departments, paramedics in Tasmania are one step closer to implementing a mandatory offload procedure for patients after arrival at hospital.

We have seen some horror stories with adverse patient outcomes and to compound the issue, it causes significant psychological harm to paramedics who have to deal with ramping and deteriorating patients.

As part of the agreement reached with government last year, it was agreed that a mandatory offload procedure would be developed and implemented within 12 months of the agreement being registered. That puts us on a timeline of May 2024 and the start of the process was not positive.

The reality is that ambulance ramping is a symptom of a much larger problem; the inability of governments to design and fund health services that meet demand. This means greater investment not only in emergency departments but in primary and allied health services to keep people out of ambulances and hospitals.

We’re hopeful that the procedure can be implemented without any issue but HACSU Ambulance members have made it more than clear that ambulance ramping must stop.

BETTER SUPER FOR EMERGENCY SERVICE WORKERS

Early in November, HACSU and the United Firefighters Union Tasmania commissioned the Australia Institute to investigate how adequate superannuation is for paramedics and firefighters right now.

In short, it’s not.

Now, we’re kicking off our campaign to lobby the Federal Government for compulsory superannuation contributions to be increased to 15% for all paramedics and firefighters.

The fact is that paramedics, firefighters and emergency workers like communications staff often leave paid work earlier because of how stress, trauma and the physicality of their jobs affect their health – and even if they keep working, they often find it hard to transition into other work that properly recognises their specialised skills and education.

What it means is that emergency services workers retire earlier, and in turn with less super than other workers.

To launch our campaign, earlier this week we held an event at Parliament House in Canberra to take these issues to politicians and tell them what we’re fighting for.

Greg Sullivan, a paramedic based on the north west coast, came along with me to Canberra, and together we had many valuable conversations with politicians and their advisors – and the responses so far have been promising.

The full report from the Australia Institute will be out next month and we’ll be out talking to you about it more as we begin to step up our campaign.

In the meantime, make sure you check out our petition here - <https://www.megaphone.org.au/petitions/first-responder-superannuation> - for better super, and pass it on to your family and friends to sign.

CONSOLIDATING TEMPORARY CONTRACTS STILL A HUGE PROBLEM

In late October, Ambulance Tasmania advertised a number of permanent paramedic and ICP on the government’s jobs website despite the fact that there are still dozens of paramedics without a permanent job.

The government need to stop this charade and appoint all of the workers who have had so-called fixed-term arrangements on an ongoing basis to permanent positions. The State Service Management Office told us that agencies like Ambulance Tasmania would be given approval to recruit above establishment,

but this still doesn't seem to have occurred.

We'll keep fighting until the scourge of fixed term employment is ended except in the rare cases where it's legitimate.

We met with AT executives and the Department of Health to discuss the current advertisement. There are 2.5 FTE jobs in the south, 4 FTE in the north and 8 FTE in the north west. We have demanded that at the very least, these positions should initially only be open to current fixed-term workers. We hope they agree to that, because anything less would be a slap in the face.

We need at least 126 more paramedics in Tasmania and that's just a start. The charade of insecure employment of essential workers needs to stop. We'll keep fighting for permanent jobs and we'll keep you updated as we know more.

UNION DELEGATES COMMIT TO CAMPAIGN AT STATE ELECTION

At our recent delegates conference, HACSU Ambulance delegates joined their public sector comrades to come up with a plan to campaign in the next state election for issues that matter to them. In workshops, delegates designed the following motion and have committed to planning and campaigning to hold both elected members and other candidates to account. We look forward to joining them in the fight for a better deal for working people.

The motion outlined below is the product of the delegate discussions and we know things in other states aren't much better.

HACSU delegates condemn the state of the Tasmanian health system and public community services at the hands of the State Liberal Government. We are committed to providing the very best services to our patients and our communities and we demand a full-time Health Minister who can actually focus on this vital work. The government have created an ongoing health crisis, and we will no longer accept inaction from them. HACSU delegates are committed to taking whatever action is needed in our fight to fix our health system and our community services.

Delegates resolved to doorknock, write letters and meet with politicians to campaign for:

- Public money to go to funding public services, not private hands
- More funding in allied health and primary health
- Pay parity between public servants across Australia to help attraction and retention issues



Victoria Ambulance Union

ST JOHN PRIVATE SECTOR ENTERPRISE BARGAINING

The Victorian Ambulance Union secured our first ever enterprise agreement with St John Ambulance Victoria.

After 19 months at the bargaining table and a campaign of protected industrial action, where managers turned up to branches to intimidate people against taking action and liquid chalk pens went missing, the members achieved an EBA which gets them off the minimum award standard and delivers:

- Pay increases of 3% or Annual Wage review whichever is greater
- Addition of more Years of Service with pay increases
- New ATA supervisor allowance
- Extensive dispute resolution clause
- Improvements to rostering
- New Observer supervision allowance – paid to both crew members
- Large increase to Personal leave from the NES 76 hours per year to 114 hrs per year essentially, an extra week of personal leave per year
- Addition of 4 weeks paid parental leave.
- Addition of union representative leave
- Increased annual training from one day per year to two days per year
- Commitment to up to 10 places per year on in-house ATA Pathway training for existing employees

NATIONAL PATIENT TRANSPORT ENTERPRISE BARGAINING

We also secured an enterprise agreement with NPT which delivered:

- Pay increases – indexed at 2% pa or CPI whichever is greater
- Addition of more years of service (creating new and higher pay-points)
- Greater relativity between ATA and PTO

- ATA supervisor allowance
 - Increased Parental leave entitlement
 - Re-introduction of paid meal breaks
 - Optional extra leave of two weeks and two days in lieu of overtime when working a 40 hour roster
 - Increased annual training from one to two days per year
 - Footwear allowance
 - Improved disciplinary clause
 - A better defined process for dispute resolution
 - Increased shift allowances
 - Inclusion of shorts as part of uniform in the agreement
 - Increased representative leave
 - Higher duties allowance
- This was completed without our members having to take industrial action!

ESTA ENTERPRISE BARGAINING

The VAU has continued to bargain on behalf of our ESTA members alongside UFU, UWU and CWU. Bargaining is continuing to be facilitated by former Fair Work Commissioner, Julius Roe. ESTA members are seeking:

- Improved access to leave entitlements
- Increased annual leave in line with other emergency services
- Increased personal leave in line with other emergency services.
- Improving staffing levels and ensuring better enforcement of those levels through the agreement.
- Improving training standards to ensure trainers have the appropriate support to train new recruits.
- A better classification structure that takes into account years of experience at ESTA
- Increasing the base rate for trainee call takers

We know a deal won't be done with our ESTA members without significant improvement in these key areas. The unions have put forward joint claims



that would see staffing levels enshrined into the Agreement and a classification structure that would recognise more years of service. Unfortunately, ESTA has failed to put forward a position that would meet these claims. Instead, they have spent months considering the proposals. Given this, the unions are starting to prepare for the potential taking of protected industrial action.

AMBULANCE VICTORIA

The VAU has continued to for a new agreement to replace the Ambulance Victoria Enterprise Agreement 2020. We have a 12-month renegotiation clause and have had 54 meetings so far.

There has been some positive movement on some conditions including:

- Improved access to individual Single Days of Off (SDOs)
 - Ability to lock in well ahead (eg. 6 months).
 - Cash out option.
 - AV will not unreasonably refuse requests.
- Creating a meal break provision for the on-call period (after 4 hrs).
- On-call protected first hour (crews on code 1 warning for first hour of call period).
- ACO meal breaks to be 30 minutes.
- All shifts 6 hours or more to get 30 minute meal break.
- Payment for ACO team leaders when doing approved team leader duties.
- If a paramedic shift is filled by an ACO, and a paramedic becomes available, the paramedic will be put into the shift, and ACO paid minimum 4 hour payment or reassigned.
- Jan 2022 End of shift management policy to be put in EBA.
- An improved process for allocation of Graduates and AP12 paramedics
 - Targeted rural recruitment.

- Incentivising working in remote rural areas.
- Recognition of time in acting roles and secondments for the purpose of progression through wage bands, while acting and upon appointment.
- Broader payment to CI allowances (to be renamed Direct Supervision allowance) while providing Direct Supervision or approved operational training to Graduates, MICA Interns, and other roles including Driving Standards, RSTPs, CSPs.
- Access to screen breaks for screen intensive roles.
- Addition of a heavier soft-shell jacket to uniform entitlement.
- Rolling living away from home allowance into Reliever rate of pay.
- Primary location for ALS AAV paramedics when working reserve aligned to MICA Flight arrangement.
- Improvements to CI Fast Track classification progression.
 - To apply from level 3 instead of current level 4.
 - Expand to other roles.
- Keeping in touch days able to be undertaken as observer shifts.
 - 10 days per 12 month period.
 - Paid at ordinary rate of pay.
- Structured training for managers.
 - 4 days face to face as well as online components.
 - Total 50 hours of learning.
- Increase to fuel allowance to \$0.85 per km for all engine sizes including electric vehicles.

Key areas still outstanding relate to an improved rural shift allocation model that incentivises voluntary flexibility across rural Victoria, stronger end of shift management and wages and allowances which are yet to be confirmed. Again, industrial action will likely be necessary to bring this home.

Danny Hill

AEA Victoria

AV BARGAINING UPDATE

The Victorian Government's reluctance to further fund the public sector is hampering bargaining negotiations on claims tied to investment. FRV and VicPol face the same problem as the ambulance unions, and they are preparing for industrial action.

The AV Operational Agreement expires on 31 January 2024.

AEAV Members are now facing a critical phase in negotiations with AV. Are you ready to take industrial action? Call Lauren on 0425 755 903.

DJCS RESTORATIVE ENGAGEMENT SCHEME

The Department of Justice and Community Safety (DJCS) has commenced work on developing options for a restorative engagement scheme for Ambulance Victoria.

As part of this process DJCS is currently conducting an online survey to hear views from current and former Ambulance Victoria employees and volunteers to understand what's important to them for the scheme.

The survey closes at 11:59pm 20 November 2023.

ESTA CASUALS?

ESTA continues to struggle with understaffing and is again resorting to non-standard rosters to address employment gaps. An email has circulated outlining ESTA's intention to hire student paramedics on a casual basis without ESTA properly consulting unions through formal consultation pathways. ESTA refers to this funding model as an "Immediate Workforce Uplift", but it's essentially an attempt to address longstanding staffing shortages with the hiring of 30 casual staff over the next two years.

The union would love feedback from members on the utilisation of casual staff at ESTA. Please email the union team at aea.vic@unitedworkers.org.au with your experience and opinion on this matter.

Western Australia

STATE OPERATIONS CENTRE BARGAINING

St John offered a wage increase of 5,5,4, and that they to find savings elsewhere if they were going to offer the extra personal leave days per year.

UWU remained insistent that there should be further progression for COs, and we went to work with St John to try and come up with different solutions.

St John suggested a 1, 3, 5 and 7 year progression table. We thought this had merit, but that those who were already in the system (therefore if you are sitting at year 1.5, 3.5), should be grandfathered and this new progression system apply to new employees, and those who are due for year 5 or 7 progression.

St John had reservations this might be costly. Your reps described that St John should give appropriate financial reward for those who remain in the company, and that this might go some way towards staff retention.

Mindful that we didn't want to impact on a wage increase, we also suggested an alternative that could be considered, and that would be to keep the current yearly progression year 1 – 4 and add another progression at year 6.

We asked that St John cost these, with a focus on what their current retention is past year 4. It may be a number that is not significant enough that would impact on cost in such a way that the wage offer/personal leave days need be impacted.

St John reverted to UWU, and advised the following:

That they would introduce a Communications Officer Year 6 at \$38.99 per hour (prior to wage increases), at a cost of \$0.5m. This contemplates approximately 38 FTE who would meet these criteria (which is the number of eligible people today whose tenure is 6 years or longer).

In order to offset this, the following adjustments would need to be made:

Wages and Allowance to increase by:

- Year 1 (4.5%) – back paid to 1 July 2023.

- Year 2 (4%) – 1 July 2024.

- Year 3 (3%) – 1 July 2025.

Increase Personal/Carer's leave by:

- 1 shift per annum in the first year of the Agreement (totalling 11 shifts per annum); and
- 2 shifts per annum from the third year of the Agreement (totalling 12 shifts per annum).

Our members were not happy with the resultant decrease in wages offer and have put to St John that they want both the original wage offer and the progression to year 6.

We await St John's response.

TRANSPORT BARGAINING

We have reached in principle agreement, dependant on drafting, with the main matters outlined below:

WAGE INCREASES

- Wage increase of 5% back paid to 1 July 2023;
- Wage increases of 5% to apply from 1 July 2024; and
- Wage increases of 4% to apply from 1 July 2025.

PROGRESSION

- Amend subclause 9.1 to introduce the following new pay points:
 - Medic: Year 1, 2, 3 and 5.
 - MHTO: Year 1, 2, 3 and 5.
- Amend subclause 9.2 to include the Medic and MHTO classifications.

TRAVEL ALLOWANCE (CLAUSE 17.1)

- Introduce subclause (f) to reflect that St John will provide a means of travel for employees where required when there is a roster change within 2 hours of the commencement of shift.
- Introduce subclause (g) to reflect that travel allowance is payable to casuals if they are directed to report to another Station within 2 hours of the commencement of shift.

WATCHES AND GLASSES ALLOWANCE (CLAUSE 17.10)

- Increase the Watches / Glasses allowance by 10%, bringing the value to \$220.

FUNERAL EXPENSES (CLAUSE 17.12)

- Introduction of a new clause to reflect that where an employee dies due to an accident arising out of their employment, reasonable costs of funeral expenses will be paid by St John.

SPECIALIST VEHICLE ALLOWANCE (CLAUSE 17.13)

- Introduction of a new specialist vehicle allowance of \$20 payable per shift, for working on the following vehicles:
 - Newborn Emergency Transport Vehicle
 - Complex Patient Ambulance Transport Vehicle
 - Multi Patient Transport Vehicle
 - Wheelchair Vehicle

COUNTRY ALLOWANCES (CLAUSE 17.14)

- Introduction of Country Allowances, including:
 - Zone and Location Allowance
 - Air-conditioning Allowance
 - Removal Expenses Reimbursement
 - On Call Phone Allowance
 - On Call Roster Allowance
 - Country Travel Reimbursement and Allowance
 - Country Posting Rent Assistance
 - Country Relief Employee Expenses Allowance
 - Country Relief Accommodation Expenses Allowance
 - Country Allowance – Remote Location Allowance
 - Country Allowance - Country Training Travel Allowance - Introduce subclause to reflect that all seconded roles initiated by Patient Transport Services will be advertised along with the intended start date and end date of that position.

MEAL BREAKS

- Introduction of a spoiled meal break penalty of \$15 per shift for meal breaks which are broken, spoiled, or not provided.
- Amend subclause 23.1 (e) to include as part of the new Meal Breaks clause, and to reflect that meal breaks cannot be taken in the first two and a half hours, or last two hours of a shift.

ANNUAL LEAVE

- Introduce a new subclause to reflect that an employee on annual leave who is sick, is entitled to personal leave in accordance with clause 27.2 of the Agreement, for the period where they can produce a certificate from a registered medical practitioner.
- Amend subclause (e) to remove reference to worker's compensation to align with current legislation.

PERSONAL LEAVE

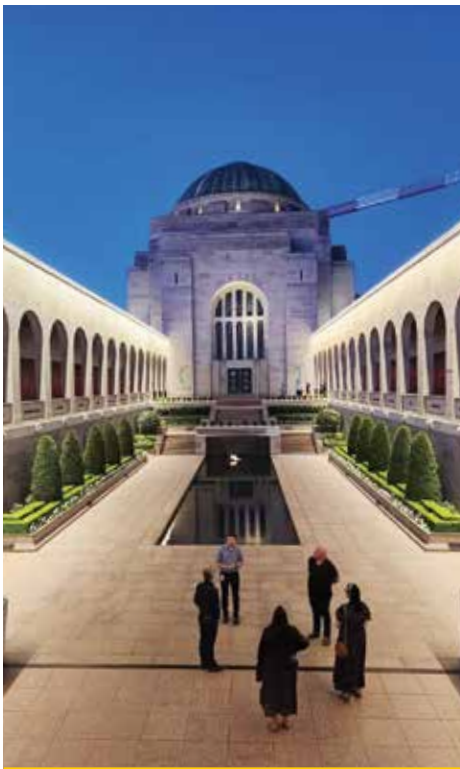
Amend subclause 27.2 to reflect that Personal/carer's leave increases by:

- 1 additional shift per annum in the first year of the Agreement (totalling 11 shifts); and
- 2 additional shifts per annum from the second year of the Agreement (totalling 12 shifts).

ACAU CONFERENCE



ACAU Conference 2023 - Delegates.



Dinner venue.



Delegates Dinner Aircraft Hall AWM.



Delegates listening.



Supporting Heart2Heart Walk.



ACAU Conference Dinner 2023



Senator David Pocock



ACT Report given by Darren Neville.

HEART2HEART WALK CONCLUDES WITH HUGE ACAU SUPPORT

They're harrowing statistics: first responders are twice as likely to report suicidal thoughts and three times more likely to have a plan.

FURTHER, THOSE WHO HAVE BEEN IN the job for more than 10 years are six times more likely to experience symptoms of PTSD, all according to Beyond Blue's seminal Answering the Call report.

The Heart2Heart Walk was conceived to spark urgent action for those on the frontline. Walkers, predominantly first responders, many with mental health challenges as a result of their service, took part in a 3000 km walk linking Lambert Centre of Australia in the NT to Parliament House, aiming to draw attention to challenges around first-responder mental health and wellbeing.

The event, launched by independent Senator David Pocock in July, will hopefully spur action to implement all 14 recommendations from the 2019 Senate Inquiry into first responder suicide, PTSD and premature mortality.

On September 28th, after 3000 gruelling kilometres, the Heart2Heart Walkers arrived in Canberra to a rapturous welcome. The delegates from the ACAU Conference, including Simone Haigh who helped initiate the Senate Inquiry, joined the walkers on their final leg from the National Emergency Services Memorial on the shore of Lake Burley Griffin to the Forecourt of Parliament House. An official welcome was conducted and the massive efforts of the walkers acknowledged.

ACAU will not rest until the Recommendations of the Senate Inquiry are actioned. We are working closely with Senators David Pocock, Jaquie Lambie and Ann Urquhart to ensure this outcome is achieved.



Image: Senator David Pocock launching the Heart2Heart Walk at Parliament House in July 2023.



SENATOR POCOCK CALLS FOR IMMEDIATE ACTION ON PRESUMPTIVE LEGISLATION FOR FIRST RESPONDERS



ON SEPTEMBER 12TH 2023 JIM

Arneman, representing the ACAU, joined Senator David Pocock, Senator Jaquie Lambie and representatives of the Australian Federal Police Association at a press conference in Parliament House to call for the fast tracking of Federal Presumptive Legislation to protect the mental health and wellbeing of first responders, including paramedics and ambulance workers.

The proposed legislation would see the Safety, Rehabilitation and Compensation Act 1988 amended to make compensation claims for police and emergency service workers "presumptive", removing the often combative and re-traumatising, process of having claims for PTSD assessed and often rejected by so called 'independent' medical examiners working for insurance companies.

Mr Arneman spoke first hand to the impact of families of first responders whose loved ones struggle with PTSD whilst dealing with insurance companies.

"At the very time paramedics and other first responders' reasoning brain is shut down by PTSD related impacts, they are expected to deal with assessors who are looking for any excuse to disallow a claim. This often results in re-traumatisation and further damage to the individuals mental health which could be avoided if presumptive legislation was in place", Mr Arneman said.

Senator Pocock, advocating passionately stated

"These reforms will be life-changing and they should pass at the earliest opportunity, preferably with bipartisan support. The Parliament needs to be mindful that the people who have advocated for these reforms are living with PTSD. To add unnecessary political uncertainty



to these reforms is dangerous and deeply upsetting to those police, paramedics and firefighters that have been fighting for these changes for years."

The proposed changes will mean first-responders would not have to prove their job significantly contributed to their PTSD when seeking to claim compensation.

This is referred to as "presumptive provisions" – effectively reversing the onus of proof from the injured worker to the employer. These reforms cover Commonwealth and ACT Government first responders including Australian Federal Police employees and paramedics. It also includes firefighters, emergency service communications operators and any other members of an emergency service as defined in the Emergencies Act 2004 (ACT), including ACT State Emergency Service employees, and associated volunteers.

The ACAU endorsed the TWU ACT to take the ongoing lead on advocating for the full implementation of the Senate Mental Health Inquiry Recommendations. The ACAU is calling on the Albanese Labor Government to fast track this reform as part of a commitment to the implementation of the wider recommendations of the 2019 Senate Inquiry into the Mental Health of First Responders.

SOBERING FACTS:

- A 'Completed' suicide in Australia costs approximately \$1.6m;
- For each suicide, there are approximately 18-20 'uncompleted' suicides;
- Approximately 17% of these end in total incapacitation, each costing over \$2.7m;
- In excess of 115 persons are directly impacted by a single suicide.

In relation to first responders' mental health and wellbeing, some facts are especially concerning:

- First responders are twice as likely to report suicidal thoughts and three times more likely to have a plan
- Information regarding AFP suicides are premature mortality (i.e. under 75 of serving and retired members over the past five years is not readily available;
- The median age at death in Australia is 78 for males and 84 for females;
- The AFP veterans' Association (AFPVA) quotes the anecdotal average age at death (former member) at 62.17;
- Safe Work Australia reports that Australian Defence Personnel and first responders (including police) are the occupations most at risk of 'mental health conditions' claims;

According to the most recent Safe Work Australia Report regarding first responders (2015-16):

- Post-traumatic stress disorder (PTSD)/mental stress makes up 13% of all claims;
- Serious claim rate is 4 times higher than all occupations (37.9 claims per 1000 employees)
- First responders (including police) are a 'most-at-risk occupation' with repeated 'work-related stressors', and mental disorders. This is also confirmed by the Beyond Blue 'Answering the Call' report;
- The typical mental disorder claim payment is \$22,000, including 13.3 weeks' times off work; and,
- The cost are human/emotional, financial and reputational.

WAITING YEARS FOR A MATERNITY UNIFORM, AND OTHER REASONS PARAMEDICS ARE FED UP WITH ESA 'BUREAUCRACY'

Canberra's pregnant paramedics having to make do with oversized shirts and trousers rather than a proper uniform is another sign of "systemic failure" within the ACT's Emergency Services Agency (ESA), according to their union.

GEORGEINA WHELAN QUIT HER JOB

as ESA commissioner on 21 July after a string of blows to her management of the organisation that looks after the ACT's firefighting, ambulance and emergency response services.

An independent report released earlier this month described a "chaotic environment" with a "culture of blame and fear", bullying and lack of trust among executives within the ESA.

Paramedics have passed two no-confidence motions in Ms Whelan over the past year, including as recently as six weeks ago at a meeting of the ACT Branch of the Transport Workers Union (TWU ACT).

The union is calling for the ESA to be dissolved and replaced by a new body – one out from under the government's Justice and Community Safety (JACS) directorate and headed up by "someone who understands how to support and resource emergency services".

It claims red tape is seriously hampering day-to-day operations.

"For example, uniforms overall have been a complete and utter disaster," TWU ACT official Ben Sweaney says.

"There has been a systemic failure over the last three years to provide a fit-for-purpose maternity uniform. And we're getting winter uniforms in January, while in the middle of winter, you're lucky if you can get a summer uniform.

"The commissioner has failed to iron out those problems."

In addition to how Ms Whelan "often unnecessarily involved herself in operations", there are allegations of "inappropriate behaviour" towards staff including yelling at them. One paramedic told *Region* he had never "been to a meeting that didn't involve her yelling".

"This was their leader and our members' concerns went unaddressed, so how can they have confidence?" Mr Sweaney says.



ACT paramedics drew messages on ambulances in 2022 as part of a protest for an improved rostering system and better working conditions. Photo: Transport Workers' Union ACT Branch (TWU ACT).



ESA Commissioner Georgeina Whelan. Photo: Michelle Kroll.

Emergency Services Minister Mick Gentleman has said the government would "certainly not" consider divvying up the ESA.

"The ESA was formed quite deliberately after the 2003 fires," he said.

"We found from the McLeod Report that these agencies were not working well separately and an ESA was required to oversee and actually drive direction through the different sub-agencies of the ESA."

The report Mr Gentleman referred to came out in the aftermath of the



The 2003 bushfires led to the formation of the Emergency Services Agency (ESA). Photo: File.

January 2003 bushfire, and found ACT emergency services "performed creditably, but ... were overwhelmed by the intensity of the fires and the unexpected speed of their advance".

It proposed an 'ACT Emergency Authority' be formed to guide strategy

and manage communication for future emergencies.

However, the union argues the McLeod Report is now 20 years old and negated by several reviews since then, including the Walker Review and Blueprint for Change Review, both of

which point to management issues within the ESA.

"We think it's time to start afresh," Mr Sweaney says.

"We believe that the ESA creates another level of bureaucracy that's unnecessary, unhelpful and hinders day-to-day operations."

He cites an alternative in NSW, where a board of paramedics or firefighters outline issues with external stakeholders, who then provide advice. But whatever it looks like, he says it's important work on a way to cut the red tape and provide "life-saving services" starts now.

"We call on the minister to commit to a new review so we can examine what's changed since 2003."

The union adds that it "welcomes the resignation and wishes Ms Whelan and her family well into the future".

Assistant Commissioner Jason Jones will guide the ESA until a new full-time Commissioner is found.

James Coleman
the-riotact.com

David Smith MP

Federal Member for Bean

Labor

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'TIPPING POINT' IN PARAMEDIC PAY ROW AS BUDGET NEARS

Paramedics are threatening further industrial actions as pay negotiations reach a crunch point ahead of the NSW Labor government's first budget.

ABOUT 100 PARAMEDICS TOOK PART in a rally near state parliament on Tuesday in the lead-up to the budget, in a push to recognise the increasing demands on workers and the potential exodus of skilled staff to other states.

Health Services Union NSW secretary Gerard Hayes said paramedics were not being recognised for their skills and essential work under current pay arrangements.

As a result, many were moving to other states on the eastern seaboard that provided better rates of pay and conditions.

Union members last month refused to staff major sporting events during the pay dispute and Mr Hayes said further industrial action was on the table.

"I think the government is listening to us, but listening is one thing and doing is another," he told AAP.

Mr Hayes said he hopes the upcoming budget would include details about a funding commitment for the sector given paramedics' skill sets had changed dramatically.

"We're at a tipping point now where a lot of the work has been done to get across how proactive, pre-hospital care can take pressure off the system," he said.

"The heavy lifting in recognising the profession of paramedics is there, it's now a matter for the government."

Union members have deferred a decision on a proposed four per cent pay rise, which they say fails to reflect their increased clinic responsibilities.



The union representing NSW paramedics says negotiations over pay have reached a "tipping point". Source: AAP Image.

Nurses and midwives last month narrowly agreed to a similar offer, which will be back-paid to July.

Industrial Relations Minister Sophie Cotsis said the government was undertaking talks with the union in good faith.

"We are negotiating and we are talking, the door is open and we are sitting down and going through systematically, methodically and we are listening," she said.

Health Minister Ryan Park acknowledged paramedics were an important part of the state's health system but would not be drawn on details of the ongoing pay discussions.

"We know that there are some challenges ahead in terms of the budget, but we also know that we have to continue to focus on our central healthcare workers," he said.

"I've also got to make sure that as a cabinet minister, we continue to deliver the health services we need in a sustainable way."

Earlier on Tuesday, Mr Park announced a budget measure to entice current and future healthcare students to join the workforce.

Study subsidies worth \$4000 a year for new students and a one-off \$8000 payment for existing students will be provided in a bid to address the sector's recruitment crisis.

A total of 12,000 health student subsidies will be available under a \$121.9 million budget allocation over five years from January 1, 2024.

The program will be open to all healthcare degrees and the government hopes to attract 850 student nurses, 400 medical students and 150 people studying midwifery each year.

Students in paramedicine, Aboriginal health, physiotherapy and occupational therapy are also expected to benefit.

Those already studying will be eligible to apply for an \$8000 one-off payment upon graduation to ensure existing students are also recognised.

AAP Newswire
sheppnews.com.au



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WOMEN MAKE UP MORE THAN HALF OF NSW AMBULANCE RANKS

NSW Ambulance has become the first NSW emergency service to reach gender parity in its ranks, with women now making up more than 50 per cent of the NSW Ambulance workforce.

NSW HEALTH MINISTER RYAN PARK

was joined by NSW Minister for Women Jodie Harrison and Member for Coogee Marjorie O'Neill to mark the milestone at Randwick Ambulance Superstation in Sydney.

"Today is about acknowledging the important contribution women make across all areas of the service," Mr Park said.

"Dedicated and skilled women work across NSW Ambulance in many roles, including as paramedics, aeromedical crews, nurses, doctors, specialist rescue crews, call takers and dispatchers, and corporate and support staff.

"We are incredibly grateful for their contribution to the health system in New South Wales and thank them for their service to their communities."

NSW Minister for Women Jodie Harrison said it is important that workforces reflect the people it serves.

"Workplace gender diversity matters and it is pleasing to see NSW Ambulance has achieved this," Minister Harrison said.

"It is an important step for NSW Ambulance as an employer and for patient trust and care. We know that a diverse and inclusive workplace is beneficial to all employees - not just women - and has a positive impact on the organisation as a whole."

NSW Health Secretary Ms Susan Pearce AM said women now occupied almost 45 per cent of all leadership roles across the organisation, and made up the majority of the executive leadership team.

"NSW Health is committed to building a workforce that is representative of the community it serves, so I want to commend NSW Ambulance on reaching such an important milestone," Ms Pearce said.

"Gender diversity is so important because it brings a breadth of perspectives, experiences and skills that enhance the quality of care we provide to our patients."

NSW Ambulance Chief Executive Dominic Morgan congratulated the women who have helped grow NSW Ambulance into the respected, skilled and diverse organisation it is today.

"I want to extend my sincere thanks to each and every one of the devoted women who helped us achieve this milestone," Dr Morgan said.

Lee Clout was the first female paramedic in NSW - joining the ranks in May 1979 at Wagga Wagga ambulance station.

"I'm really pleased that people are now being employed for their skills and experience, with women receiving the same opportunity," Ms Clout said.

"Gender has got nothing to do with it. It's just about what you can bring to the job."

Member for Coogee Dr Marjorie O'Neill joined Ministers Park and Harrison to mark the occasion.

"This is a fantastic achievement," Dr O'Neill said.

"Workforce parity better enables our health services to meet the needs of the communities they serve."

NSW Ambulance implements a range of support programs to ensure a welcoming and inclusive workplace, including tailored training programs, mentoring initiatives and ongoing professional development opportunities.

WAGGA'S FIRST FEMALE PARAMEDIC THRILLED WOMEN MAKE UP MORE THAN HALF OF NSW AMBULANCE RANKS

NSW's first female paramedic, Lee Clout, is pleased that NSW Ambulance has become the first emergency service in the state to reach gender parity in its ranks.

"IT'S AMAZING. IT REFLECTS OUR society and communities that it's 50/50," Ms Clout said.

"Being a paramedic is not orientated on gender, religion and culture. It is orientated on the skills and knowledge to do the job."

Ms Clout said it is exceptional that women make up 45 per cent of the management positions at NSW Ambulance, given that they make up over 50 per cent of the workforce.

"It means there's an opportunity for people to better their skills and have progression in the job," she said.

"It's great to see that NSW Ambulance is thriving, modern and working with the community and providing us with a service equal to no other."

Ms Clout joined Wagga Wagga Ambulance Station as a paramedic officer in May 1979, when she was 20 years old.

Born in Melbourne and raised in Tumut, Ms Clout initially pursued nursing in Wagga. However, after realising that it was not her calling, she applied for the position of paramedic officer.

When Ms Clout first started, she did many jobs as a lone officer.

"Paramedics today have much better knowledge and skills because of the training," she said. "It's amazing what some of the paramedics can do."

"The opportunity to arrive at a hospital is much better now than when I was a paramedic."

The former paramedic said her memorable moments and the best part were the strong bonds she formed with her colleagues.

"We didn't have things like counsellors to go and speak to, we helped each other out," Ms Clout said.

"We talked to each other and referred things to each other, and I think that camaraderie was something that was pretty special."

Ms Clout's words of wisdom for young people wanting to pursue a career as a paramedic is first to go and speak to one to



Lee Clout (centre) pictured when she was appointed as the first female paramedic in NSW. Source: Service Call.



Service Call article about Lee Clout's posting as the first female paramedic in NSW. Source: Service Call and Banksia Village.



gain insights on whether they want to remain in the field or explore a management position.

"Go and talk to people (paramedics). It's an excellent job. It has its good times and bad and you have your struggles," she said. "It's a job where you're caring and doing something for your community."

Ms Clout devoted 10 years of her time and skills to NSW Ambulance on two separate occasions.

The first time, she left NSW Ambulance because she could not do part-time work while she was a mother to a newborn baby. She said with her baby, she was unable to manage both her roles and give her 100 per cent.

She returned to NSW Ambulance after a decade and worked in the emergency centre for five years. After the centre closed, she joined the NSW Police Service and worked at their communication centre for 12 years.

Ms Clout currently lives on the South Coast, working as a complex case manager in aged care and preparing for retirement.

The grandmother hopes to travel and spend more time with her grandsons in retirement.

Shri Gayathirie Rajen
regionriverina.com.au

AMBULANCES FROM AOTEAROA JOIN SERVICE IN UKRAINE

The seven New Zealand ambulances gifted by Hato Hone St John and repurposed for the Ukraine are already in active service in the war torn country.

WELL-KNOWN BUSINESSMAN AND former New Zealand Army colonel Tenby Powell, who also served a tour of duty with UN peacekeeping forces in the Middle East, has spent several months in Ukraine and Poland. During this time he created the not-for-profit group Kiwi K.A.R.E (Kiwi Aid and Refugee Evacuation) while delivering supplies and evacuating vulnerable people out of danger. Kiwi K.A.R.E. has been operating in the Ukraine for 15 months.

"It's been two weeks since the New Zealand ambulances were handed over to frontline Ukrainian medical units and already they are being well used," Powell told the *New Zealand Herald*.

"As you can see in the video, six of the seven ambulances have been repainted in camouflage; the unpainted one will become the Kiwi K.A.R.E mobile health unit, managed initially by Canadian nurse Captain Ann Fournier.

"The mission is to provide general health care for those in newly liberated areas, who haven't seen a health professional, in some cases, for years. It's a daunting task and Ann and her team will be supported by Kiwi K.A.R.E.

"Each ambulance has a name in Te Reo, reflecting one of the seven key principles of Tanga, or Māori worldview: Rangatira (leadership); Manaaki (caring); Kotahi (unity); Whanau (relationships); Kaitiaki (guardianship); Wairua (spirit); and Tupuna (ancestry).

"We have named the Kiwi K.A.R.E mobile health unit Manaaki [caring seemed most appropriate in the circumstances for our vehicle]."

Powell also thanked Bay of Plenty iwi Ngāi Te Rangi for advice.

"I'm grateful to Paora Stanley, chief executive of Ngāi Te Rangi wi of Tauranga for their advice on the names and for their blessing, from afar, of the ambulances and all who will travel within them," Powell said.



NZ ambulances blessed and gifted to Ukraine. Source: Supplied.



One of the repurposed Kiwi ambulances helping the people of Ukraine. Source: Tenby Powell.



Kiwi K.A.R.E aid charity founder Tenby Powell in Ukraine. Source: Supplied.

"The names have resonated significantly with the Ukrainians. These warrior vehicles will operate proudly in the service of freedom for Ukraine.

"Most importantly, thank you to all those who have supported us in this mahi. Particularly, Hato Hone St John, Wallenius Wilhelmsen shipping, Volvo Car Poland, and our many New Zealand and International supporters.

"Please keep your support coming so we can keep the humanitarian and medical aid wheels rolling. If you feel you can, please donate by heading to this link: <https://givealittle.co.nz/cause/kiwi-kare-ukraine-kiwi-aid-and-refugee-evacuation>

Joseph Los'e
teaonews.co.nz

WORST-EVER DAY OF 'RAMPING' AT WAIKATO HOSPITAL WITH EMERGENCY DEPARTMENTS OVERLOADED

New Zealand has experienced one of its worst-ever days of 'ramping', where ambulances are forced to sit idle and treat patients on hospital ramps because emergency departments are overloaded.

WAIKATO HAD ITS WORST DAY EVER

on Monday with almost every ambulance in the region parked for up to four hours waiting to get into the ED. Five of those ambulances had seriously ill, status two patients on board.

"At its peak we had twelve ambulances at the emergency department. As a result of that my team declared a major incident," said Dan Ohs, Hato Hone St John's deputy chief executive of ambulance operations.

Ramping is not new but it's becoming frustratingly familiar. Anything over a 30-minute wait time to clear patients from an ambulance into the emergency department is declared as 'ramping'.

Hato Hone St John said ambulances around the country were parked up on Monday waiting to get into EDs for a total of 204 hours. On a normal winter's day they'd be 'ramped' for a total of 130 hours nationally.

"In Waikato it's probably the worst day we have ever seen. We spent 60 hours sitting at Waikato Hospital, 90 additional hours across all four Auckland EDs, so it was a particularly challenging time," said Ohs.

One senior ED doctor at Waikato Hospital told Newshub that Monday was "the most overwhelmed shift I have ever worked".

He said these shifts seem to be happening more regularly, each one worse than the previous one.

He blames "poor access to primary healthcare, lack of staff, lack of beds, and bad planning given it's a Monday and typically the busiest day of the week".

In a statement, Te Whatu Ora's national headquarters said: "ED presentations fluctuate day to day and hour to hour. While acknowledging that our hospitals are always very busy, we continue to work



Waikato Hospital seen across Hamilton Lake.

with Hato Hone St John to understand their demands and pressures."

Te Whatu Ora Waikato confirmed a higher number of patients arrived by ambulance on Monday, 85 in total.

Spokesperson Michelle Sutherland said it "moved additional staff to support ED and increased bed capacity in the wards to accommodate those being admitted".

Te Whatu Ora insists Waikato Hospital's ED is currently fully recruited for medical staff and health care assistants in ED and nearly fully recruited for nursing staff.

"Despite the best efforts of our hospital teams, we acknowledge that ambulance teams are sometimes waiting longer than we would like to hand patients over. While patients remain safe in the care of ambulance staff, the handover delay affects their ability to be back out responding to our communities, where we all want them to be," said Sutherland.

NZ Ambulance Association spokesperson and union delegate Mark Quin worries the longer people wait in the community, care is compromised.

"The trouble is if a patient is left waiting, that delay could be time critical in terms of immediate treatment paramedics can offer. It can have less than ideal health outcomes for the patients we are supposed to be there for," said Quin.

St John said while people in the community did have to wait longer than usual for an ambulance on Monday, he doesn't believe they suffered adverse clinical outcomes - but he does want answers.

"I've been having some direct conversations today with some very senior staff at Te Whatu Ora to make sure this does not happen again for our staff and people," Ohs told Newshub.

Karen Rutherford
newshub.co.nz



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CDU'S FIRST BACHELOR OF PARAMEDICINE STUDENTS TO JOIN ST JOHN NT

Charles Darwin University's first ever cohort of paramedic students is nearly ready to swap simulations for saving real lives. Here's why Territory-trained medics are crucial.

CHARLES DARWIN UNIVERSITY'S FIRST ever paramedics to learn lifesaving frontline skills are just about ready to join the workforce.

The first cohort of CDU paramedicine students is set to finish their studies at the end of this year, with 10 on track to officially graduate in May.

After launching in 2021, close to 80 students have joined the three-year course developed in partnership with St John Ambulance NT.

St John NT operations manager Andrew Thomas said it was crucial to give Territorians the chance to become a paramedic in their home jurisdiction.

"Previously, we've relied on those that have completed their degrees and moving from other states to come to the Territory and complete their internship," he said.

"We've had some really great people but there's always that draw to go back to their home, their family.

"Whereas with the people here that hopefully are learning local and doing their placements local with us, that they'll stay local."

All students are required to undertake three placements with St John Ambulance, totalling 600 hours, to become qualified.

The CDU training ground comes complete with a simulated ambulance and the guidance of practising paramedics, while an aeromedical retrieval unit – the first of its kind in Australia – is being developed for next year's students.

Student Tom Smith, who grew up in Darwin, said he planned to stay in the Territory after graduating the course and the following one-year St John internship.

"For placements we can go in Darwin, Katherine and Alice Springs ... it provides us a good opportunity to get on the road and find out what the job is really like," he said.

Mr Thomas said it was a rewarding career where no two days were the same.

"It's really a profession where you can have a major impact on people when



St John's NT Operations Manager Andrew Thomas. Picture: Adnan Reza



The first cohort of 10 students will soon complete their studies in Charles Darwin University's new Bachelor of Paramedicine program. Picture: Adnan Reza

they're having a really bad day, (on) how you can then support them," he said.

CDU Vice-Chancellor Scott Bowman said the course was one part of the university's plan to be able to provide all the healthcare career options for Northern Territory students.

Chief Minister Natasha Fyles said the course would help "fill a critical gap".

"The training these students are receiving are world-class, with access to simulation real life settings and time out on the field," she said.

Applications for CDU's Bachelor of Paramedicine are open for 2024.

Annabel Bowles

www.ntnews.com.au



22/9/2023: L-R Medical director Stephen Rashford, Senior Constable Russell McKelvey and Critical Care Paramedic Andrew Colen meet again for the first time, since Russell's near death in a car crash 18 months ago, as QAS High Acuity Response Unit, HARU, is celebrating 10 years in action. Source: Lyndon Mechielsen/Courier Mail.



Senior Constable Russell McKelvey and two of his colleagues miraculously survived a head-on collision at Caboolture in March of 2022. Source: Photo Supplied.



Senior Constable Russell McKelvey was lucky to survive.

'I REALISED I WAS GOING TO DIE': QLD COP REUNITED WITH PARAMEDICS WHO SAVED HIS LIFE

A Queensland police officer who was critically injured in a head-on collision says he believed he would die within minutes after looking down at how severely he was wounded.

A QUEENSLAND POLICE OFFICER

who was critically injured in a head-on collision says he believed he would die within minutes after looking down at how severely he was wounded.

Senior Constable Russell McKelvey almost died following the crash at Caboolture South last year after he and First Year Constable Callum McBride Whitehead and Police Recruit – now First Year Constable – Cassidy Cleary were called to a serious stabbing attack on March 12, 2022.

Just minutes later, their marked police van collided with a ute, being driven by the stabbing suspect.

Senior Constable McKelvey suffered multiple injuries including a snapped humerus, femur and tibia, radial nerve damage, a fractured vertebrae and perforated lung. A man is facing charges in relation to the incident.

On Friday afternoon, an emotional Senior Constable McKelvey reunited with Queensland Ambulance Service medical director Steve Rashford and Critical Care Paramedic Andrew Colen – the two men who saved his life as they celebrated

the High Acuity Response Unit's (HARU) 10 year anniversary.

Senior Constable McKelvey said metal from the van had pierced his right leg.

"Bones were sticking out ... I couldn't see out of one eye," he said.

"I realised that I was probably going to die in the next minute because of the injuries."

"I just turned my head to the side and tried to focus on getting my heart rate down."

Senior Constable McKelvey said a tradie "ripped the door open like a can opener".

"I woke up six days later in ICU with tubes down my throat ... I was 20 kilograms lighter," he said.

Mr Colen said it was a "highly emotive" scene with the three officers injured.

Dr Rashford said when he arrived on scene, he immediately noticed Senior Constable McKelvey was "deathly pale".

Senior Constable McKelvey believes he was trapped in the van for about 40 minutes.

"My leg was pinned against the seat," he said.

He said Senior Constable McKelvey had lost "a lot of blood" before he was put into an induced coma.

"Each of the bones in your thigh can lose up to two litres of blood ... Russell had probably lost close to two litres ... he had an unrecordable blood pressure," he said.

"It is really difficult – you are giving people drugs to put them to sleep but in the setting of massive blood loss there is a chance that we can actually kill you with those drugs.

"We have got to get the doses spot on."

Mr Colen said the firefighters on scene "just wanted to get him out, get him treated and get him to hospital".

In the last 18 months, Senior Constable McKelvey has undergone 11 surgeries, his recovery "hindered" by "pieces of missing bone".

"I can't really go back to what I was doing – first response – because of the injuries," he said.

"I have been working in the Criminal Investigation Branch (CIB)."

Dr Rashford the HARU units "work hand and glove with the hospital – we are an extension of the hospital", using techniques and therapies pioneered by battlefield medics.

RAMPING 'WORST ON RECORD' WITH AMBOS PARKED FOR 85,000 HOURS

Over 85,000 hours of paramedics' time was wasted outside hospitals in the first half of this year, including over 45,000 in the second quarter.

TWENTY-ONE AMBULANCES WERE ON average waiting outside Queensland's overloaded emergency departments at any given hour in the June quarter, new figures show.

The 45,220 hours of lost time spent by paramedics included a "historic worst" result in May.

And they resulted in the worst first-half result in recent history.

From January to June 85,456 hours were lost by paramedics – 472 hours per day – more than in the entire 2020 calendar year.

The state government, however, argued the figures did not provide a true indication of patient off-stretcher time, and said more recent data revealed lost time was improving.

Documents tabled in state parliament reveal 16,036 hours of lost time was recorded in May.

Metro South Hospital and Health Service – Queensland's second largest – was the worst performer over the June quarter with 15,279 hours lost.

Lost-time reports are completed by paramedics while they are caring for patients but are not an official government performance measure.

Opposition Leader David Crisafulli seized on the figures, claiming Premier Annastacia Palaszczuk's May Cabinet failed to deliver changes to the health system.

"Queensland Health is on life support and these catastrophic statistics prove the state government can't be trusted to heal the health crisis," he said.

"Paramedics didn't sign up to this vocation to spend an entire shift stuck on a ramp, while other calls go unanswered from Queenslanders in their hour of need."

Health Minister Shannon Fentiman, however, noted lost time was an "unofficial internal reporting metric" used by the Queensland Ambulance Service and should "not be used to determine a facility's patient off-stretcher time".

"The QAS is the busiest ambulance service in the country, responding to 1.2 million incidents a year and is the only mainland service that is free," she said.



Health Minister Shannon Fentiman says lost time is compiled by paramedics and not an accurate representation of patient off-stretcher time. Source: Nigel Hallett.

A spokesman for Ms Fentiman said the amount of time lost decreased by 16 per cent across Queensland between May and August this year.

"Lost-time data between late August and mid-September has also declined significantly compared to the same period last year, falling 18 per cent statewide," he said.

"In the last financial year, Queensland emergency departments experienced more presentations than at any other time in history."

Ms Fentiman said the government had employed more than 1100 extra paramedics since 2015, which ensured some 90 per cent of triple-0 calls were answered within 10 seconds, and 90 per cent of the most critical incidents were attended in about 17 minutes.

The lost-time data is the latest report to reveal ongoing challenges within Queensland Health.

The Sunday Mail reported 14 Queensland towns had no dedicated doctor in their local hospital, and the majority of bush facilities were operating with fewer doctors or nurses than 18 years ago.

Hospital performance data released last week reveals while elective surgery long-wait lists had dropped by almost 20 per cent compared to 2022, 80,131 Queenslanders had waited longer than clinically recommended.

Hayden Johnson
couriermail.com.au

STATE GOVERNMENT STATISTICS SHOW RAMPING CONTINUES TO RISE OUTSIDE EMERGENCY DEPARTMENTS

Ramping is on the rise again in South Australia, with more than 10,000 hours lost while ambulances waited outside the state's major hospitals during winter.

THE LATEST DATA FROM SA HEALTH

shows 3,721 hours were lost to ramping in August, compared to 3,354 in July.

Ramping times gradually increased during the colder months, reaching a total of 10,180 hours lost during winter.

But the state government has touted the statistics as "progress", highlighting that the total is 1,084 hours less on the ramp than last winter — a reduction of 9.6 per cent.

The data shows paramedics reached 67.3 per cent of priority one cases within the recommended eight minutes, compared to just 52.2 per cent last winter.

Health Minister Chris Picton said the "improved" response times come despite this winter being busier than last year.

"The improved ramping data and ambulance response times from this winter compared to last winter shows the massive investment we've made is making a difference," he said.

"However, we know there's still lots of work to be done and we're getting on with the job."

It comes as the state government opens 24 new beds at a residential care home at Elizabeth in Adelaide's northern suburbs, with the aim of transiting older patients out of the Lyell McEwin Hospital and Modbury Hospital to free up beds.

Some of the beds will be for older people who are medically fit to return home but their hospital discharge has been delayed because their house needs adaptations or their carer being temporarily unavailable.

Others will be used to provide short-term care for older people who are waiting for a permanent bed at a residential aged care facility.

The village-like setting has been setup at ACH Group's Healthia Residential Care Home.

"This is providing really high quality care in a fantastic environment so it's a great outcome for the patients themselves as they are rehabilitating but it's also a



Patients continue to be ramped outside Adelaide's metropolitan hospitals awaiting care. Source: ABC News: Che Chorley.



Ashton Hurn says the state government is not doing enough to reduce ramping. Source: ABC News: Che Chorley.



Chris Picton says additional beds are desperately needed across the whole health system. Source: ABC News: Che Chorley.

great outcome for the health system as a whole," Mr Picton said.

"Because we know that additional beds is really what we are desperately needing across the whole health system and we are working as fast as possible to build additional beds."

Opposition spokesperson Ashton Hurn welcomed the initiative but criticised a lack of progress with ramping.

"We should be seeing some green shoots when it comes to ramping but month after month after month we are seeing it at record levels," she said.

"What it means is South Australians are paying the price because patients and paramedics are spending longer than they ever have in the history of the state stuck

outside our emergency departments on the ramp waiting to be seen."

During the 2021 winter, under the former Liberal government, 7,680 hours were lost to ramping.

Ms Hurn said there should have been a greater improvement in ramping delays, describing the situation as "basically the same" compared to last winter.

"We are not seeing any movement when it comes to fixing ramping... at the election campaign the number one promise from Peter Malinauskas was all about fixing ramping and that continues to go back on his watch," she said.

ABC News
abc.net.au

LUCINDALE 'KID' RETURNS

Taylor Martin was born on the side of the road. It's now years later, and she has returned to lead the very ambulance volunteers that brought her into the world.

HER MOTHER, KERRY MARTIN, remembers the night her daughter was born like it was yesterday.

It was her due date, and Kerry had just finished her last appointment in Naracoorte with her specialist before heading back home to Kingston, in South Australia's south east.

Just before dinner on January 1992, though, her waters broke, and her husband rushed her to the local hospital, where she was told to head back to Naracoorte.

But her baby wasn't waiting, and in the small town of Lucindale they had to pull over.

"It had become obvious I was going to have this baby right there and then," Kerry says.

"I couldn't go on, so we stopped the car, and funnily enough, it was just opposite the Lucindale Hotel.

"And my husband got out of the car and yelled out to the patrons out the front, 'Can you help me? My wife is having a baby'.

"They thought he was joking."

Taylor was born on the front seat of the car shortly before ambulance officers from the town could arrive, with their promptness proving vital.

"Taylor had the [umbilical] cord wrapped around her neck, and I don't know what strife I would've been in if they hadn't been there," Kerry says.

"They cut the cord, unwrapped the cord from around her neck, got me in the ambulance, and sent me off to hospital with sirens blaring.

"I'll be forever grateful for their help."

Just to make conditions even more difficult, the internal light in the car wasn't working, meaning everyone was working in near-total darkness.

"I can remember saying to my husband, 'Is it a boy or a girl?' so he flicked his lighter, and he said, 'It's a girl'," Kerry says.

THE 'LUCINDALE KID'

Lucindale's population sat at about 300 people at the time, so a baby being born outside the local pub is always going to live long in the memory of the townsfolk.

Taylor quickly became known to locals as the "Lucindale kid".



Taylor worked around the state before settling back down in the South East. Source: Kerry Martin.

Now, she's giving back to the service that helped bring her into the world by working as a paramedic.

As a regional team leader, Taylor is now in charge of the Lucindale ambulance station, as well as others in the central Limestone Coast region.

"It's a bit strange because the Lucindale ambulance station is just a couple of doors down from where I was born," she says.

"I always have had a keen interest in medicine. I was accepted into a Bachelor of Paramedics, and then I've always had an interest in returning home too."

The stations Taylor looks after are staffed by volunteers, meaning there's a wide range of locals putting their hand up to help the community.

"I love that they come from different walks of life," she says.

"We have nurses, farmers, teachers, scientists, and a psychologist within my team.

"Some of the volunteers I work with even taught me at school."

VOLUNTEERS GIVE 'A VITAL SERVICE'

Kerry Martin says the volunteers who helped her give birth are forever etched in her mind.



Taylor Martin now leads the volunteer team that helped bring her into the world. Source: Kerry Martin.

Although one of them has since died, Kerry said she was trying to make contact with the others.

But it wasn't just the ambulance service that saved Taylor. Her hurried entry into the world also may have saved the ambulance station, whose fate hung in the balance.

"[The paramedics] came into the hospital to see me the next day, and they were saying that at the time, Lucindale was very close to losing their ambulance service," Kerry says.

"And because that had happened, the powers that be realised it was really needed and more was done to keep it."

Now in charge of volunteers, Taylor says the value to regional communities of volunteer ambulance officers is immeasurable.

"It is a vital service, and I don't think the community really realises that ambulances that are coming to you in these regional areas are volunteers," she says.

"They are normal people who are really dedicating their time to serving their community, and it's just amazing to be around these kinds of people."

Selina Green and Sam Bradbrook

ABC South East SA

TASMANIAN PARAMEDICS PREPARING TO LEAVE FOR UKRAINE MERCY MISSION

Two Tasmanian paramedics will spend a month in Ukraine volunteering with Frontline Medics, an organisation that works to provide supplies and care to Ukrainians who are living on the frontline of the war.

THEY ARE SELF-FUNDING THEIR TRIP

and hope their time working in a war zone will help Ukrainians on the ground, and that it will give them invaluable experience.

Working as a paramedic in the unforgiving Tasmanian wilderness, Dave Brown is used to working outside his comfort zone.

"The variability in that you have to turn what you know and have done before into a completely different situation every time, that's incredibly stimulating," Mr Brown said.

He also hopes it has equipped him for a new challenge — volunteering as a paramedic near the frontline of the war in Ukraine.

"I've never been up to a war zone at all before. I'm hoping that some of the skills I have, in trying to deal with things in quite a limited environment, may well be transferable," Mr Brown said.

"The main thing about the wilderness ... is that you're out of your comfort zone, so it's dark, it's wet, it's cold, the patient is cold and anxious, and it's right at the coalface." Mr Brown has been closely following developments in Ukraine since Russia invaded about 18 months ago.

After meeting the Ukrainian ambassador and hearing a colleague, Jack Dear, speak about his time volunteering in Ukraine with Frontline Medics, Mr Brown was inspired to do the same.

He is taking a month's leave from his work with Ambulance Tasmania and as a teacher at the University of Tasmania, to volunteer as a paramedic with Frontline Medics — an organisation that works to provide supplies and care to Ukrainians who are living on the frontline of the war.

Mr Brown and colleague Mattie Pickering are fundraising to finance their trips.

They both leave in August and will spend a month in Ukraine.



Paramedic Dave Brown and colleague Mattie Pickering are fundraising to finance their trips to Ukraine. (Supplied: Dave Brown)



Dave Brown, pictured in the Tasmanian wilderness, says he has been learning some basic Ukrainian ahead of his trip. (Supplied: Dave Brown)

ONE MONTH AGREEMENT WITH KIDS

Mr Pickering, an intensive care paramedic said he, like Mr Brown, had been wanting to do something to help the people of Ukraine for some time.

"As an intensive care paramedic you've got a broad range of skills that are really useful.

"I felt like I could probably make a decent impact for a few people, probably not tonnes of people, but if you can get one person home to their family who wouldn't have otherwise got home, that's a good thing," he said.

He said Frontline Medics was, as its name suggests, an organisation working closer to the frontline than many others.

"You never know what's going to happen.

"Obviously we don't see the major traumatic injuries in our work here in the ambulance service in Tasmania.

"We don't see the shrapnel injuries, we don't see a lot of bullet wounds and that kind of thing, so there's a huge wealth of experience out there to go and learn and bring back."

Mr Pickering said he made the decision to go to Ukraine with his children, by telling them why he wanted to go, what it meant to him.

He also told them if they did not want him to go, he would not.

"They decided four weeks was okay," Mr Pickering said.

'UNDERSTANDING SOMEONE ELSE'S STORY'

Mr Brown said a large part of a paramedic's work was talking to people.

"I'm so lucky that the people I've treated have trusted me. It's very much an honour to be a paramedic or a doctor or anyone who's got the responsibility for somebody's crisis," he said.

"I learn from my patients all the time and mostly I'm just trying to learn their stories ... part of the journey to Ukraine is probably to understand someone else's story."

While there will be a language barrier on the ground in Ukraine, Mr Brown is learning some basic Ukrainian greetings and phrases and will be working alongside a translator.

He said Ukraine might be a long way away, but he felt an affinity with the people there.

"We're all on this planet together," he said.

"One of the things that will be a detriment to the people of Ukraine is if we stop talking about this conflict."

Loretta Lohberger

abc.net.au

AMBULANCE TASMANIA: 1-IN-10 SHIFTS GO UNFILLED, NEW FIGURES SHOW

New figures show that about 10 per cent of paramedic shifts are going unfilled in Tasmania, while one-in-five paramedics are on fixed-term contracts. An 18-year veteran has pleaded for more support.

NEW FIGURES SHOW THAT ABOUT 10 per cent of paramedic shifts are going unfilled in Tasmania, while one-in-five paramedics are on fixed-term contracts, an "insecure working arrangement [that] makes it extremely difficult to recruit and retain workers".

Figures released by Health Minister Guy Barnett in response to a question on notice in the Legislative Council by Sarah Lovell MLC, showed that 2181 shifts out of a total 19,710 between November 1, 2022 and March 31 this year went unfilled.

The highest number of unfilled shifts were in Hobart (256), Latrobe (220), Bridgewater (171), Glenorchy (133), Launceston (129), Wattle Hill (125) and Mornington (123).

Labor health spokeswoman Anita Dow said the state's paramedic shortfall was made worse by hospital bed block, with only 50 per cent of emergency department presentations seen within four hours, according to the latest health system dashboard figures.

The issue is particularly acute at the Launceston General Hospital, where only 37 per cent are seen within four hours. At least four ambulance and critical care units were seen ramped outside the hospital on Friday at 1pm, with more hidden from view via a closed roller door.

The response to the question on notice also revealed that approximately one-in-five Ambulance Tasmania paramedics were employed on fixed-term contracts, rather than permanent employees.

According to the figures, 94 paramedics were employed on a fixed-term/casual basis compared to 366 permanent employees as at March 24 this year.

The figures do not include paramedics employed in supervisor, management, and educational positions.

Fourteen paramedics are currently on workers' compensation and are unable to work.

Ms Dow said the lack of job security was forcing paramedics interstate.

"The insecure working arrangements for our paramedics makes it extremely



Ramping at Launceston General Hospital at 3.06pm, January 21, 2023. Source: LGH Community Support.



Ambulance Tasmania paramedic Simone Haigh, Labor Bass MP Janie Finlay and Labor health spokeswoman Anita Dow outside Launceston General Hospital, September 22, 2023. Source: Alex Treacy.



Question time in the Tasmanian parliament, Guy Barnett MP. Source: Chris Kidd.

difficult to recruit and retain workers, who are enticed by better pay, conditions and permanent work in other parts of the country," she said.

North-West paramedic Simone Haigh, an 18-year veteran of Ambulance Tasmania, said workforce shortages combined with increased ramping was a lethal combination.

"When I first started we occasionally got ramped. Now it's every day and nearly every case that you take in is ramped," she said.

"In that time we have increased the number of paramedics, but our case load has exponentially increased and we're just not keeping up.

"We are here for patients and the community, not to stand in hospitals and be fake nurses and fake doctors and fake hospital staff."

A Department of Health spokesman said that when paramedic shifts were unable to be filled by casuals or overtime, "operational plans are enacted to ensure Tasmanians' needs are met".

He noted that recruitment efforts continued apace, including by an appearance at the recent London Jobs Fair.

Mr Barnett said that an additional 220 paramedics and dispatch officers had been employed in Tasmania since the Liberal government came to power in 2014.

"We are also permanently funding positions created on a temporary basis during Covid-19, including 36 permanent frontline paramedic positions created in the North-West, with recruitment continuing," he said.

Alex Treacy
themercury.com.au



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Harriet Shing MP

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AUTHORISED BY SENATOR ANDREW MCLACHLAN CSC, LIBERAL PARTY OF AUSTRALIA, KENT TOWN SA 5067

THANK YOU

"Thank you for all the tireless work you do to keep our communities safe, and connected. I will continue to support, and fight for our first responders."

Senator Anne Urquhart
Labor Senator for Tasmania
Chief Government Whip in the Senate

If I can assist with anything, please don't hesitate to get in touch.

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your dedication
to our
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For residents of towns along the Victoria-NSW border, the closest ambulance is not always dispatched to emergencies. Credit: Wayne Taylor

MISROUTED TRIPLE-ZERO CALLS ON VIC-NSW BORDER LEADING TO AMBULANCE DELAYS

A health watchdog is examining whether patients living near the Victorian-NSW border have been harmed, with leaked emails revealing the closest ambulance is not always being dispatched.

THE EMAILS FROM AMBULANCE

Victoria show that in 43 towns along the border, the closest ambulance is not always sent, due to triple-zero calls being directed to the wrong state.

"This is a huge risk to patient safety," an Ambulance Victoria duty manager wrote in an email last November.

Another email from an Ambulance Victoria patient review specialist said there had been 10 patient safety incidents over the past two years involving emergency calls from border towns being handled by both NSW and Victorian call centres.

But following questions from The Age, Ambulance Victoria and NSW Ambulance said it hoped to resolve the issue within days.

Victorian Ambulance Union secretary Danny Hill said four Victorian patients had died from cardiac arrests in the past year following delays in dispatching the closest ambulances. He said these delays were caused by the misrouting of triple-zero calls.

"We believe there's been delays to a large number of patients in border communities," he said.

Hill said union members had lobbied for the glitches to be resolved for more than a year.

"We try to route the cases to the nearest ambulance service because that gives the patient the best chances of survival," Hill said. "When those things are not happening it can increase the chances of a negative outcome."

Henrietta Cook and Benjamin Preiss

Sydney Morning Herald

ACOS CELEBRATE TWO DECADES HELPING BOORT RESIDENTS

A deep love of the community characterises two Boort Ambulance Community Officers (ACOs), who recently celebrated 20 years of service at Ambulance Victoria (AV).

VIKKI COUPER AND DEANNE SMITH

started their AV careers as inaugural members of the town's Community Emergency Response Team (CERT), which began in August 2003.

CERTs are made up of local volunteers who provide 24 hours, seven days a week emergency medical support in less populated areas of the state.

Ms Couper said she was inspired to join after a community meeting about the new team.

"The CERT offered an opportunity to give back to our small town by helping to provide emergency assistance," she said.

The pair later undertook additional training and hit the road as ACOs in 2016.

ACOs are also First Responders but are employed on a casual basis to work "on call" in rural and remote areas and can transport patients to hospital.

Ms Couper said her role keeps her fulfilled and is one she plans to continue long-term.

"People call Triple Zero (000) when they are in vulnerable or traumatic situations and being able to help patients and their families by providing reassurance, treatment and support is not only comforting but also rewarding," she said.

"It's always a highlight to see the relief on a patient's face when you arrive."

Ms Smith said a few reasons made her first sign up as a CERT member and these same reasons have kept her to stay for two decades.

"I became a CERT member because I wanted to challenge myself, gain new skills and become involved in the care and future of the local community," she said.

"I love working within Boort and seeing the positive outcomes we can have on individuals – both in their time of need and their future care."



Vikki Couper (left) and Deanne Smith (right) working together.



Deanne Smith (left) and Vikki Couper (right).



Vikki Couper (left) and Deanne Smith (right) at a celebration for their milestones.

**Article from
Ambulance Victoria**

ambulance.vic.gov.au

WA AMBO EXPOSES LOOPHOLE IN ST JOHN'S EBA TO GET EIGHT DAYS PARENTAL LEAVE

A West Australian St John Ambulance medic has won the right to eight days of paid parental leave from his employer after just seven months working there.

THE FAIR WORK COMMISSION THIS week ruled St John employee Ryan Kershaw was eligible for the leave, five months after the birth of his child.

His victory was the result of exposing a loophole in St John's enterprise bargaining agreement that meant that type of leave was not covered by national employment standards and the Fair Work Act. The Act states parental leave is only accessible after 12 months of continuous employment.

In March, Kershaw requested eight days of parental leave around the time of the birth of his child in June.

The request was refused because he had only started in November last year, meaning he had not worked for the organisation continuously for 12 months.

St John argued this was a standard period outlined under the national employment standards in the Fair Work Act for employees to be eligible for any parental leave, which was also referred to in parental leave clauses in its enterprise agreement.

Kershaw disagreed with St John's reading of the enterprise agreement and the dispute eventually found its way into the Fair Work Commission for arbitration.

Represented by the United Workers Union, Kershaw argued St John had incorrectly tried to rewrite the agreement.

He said St John was applying a clause in the EBA relating to primary carers that referenced the Fair Work Act 12-month rule to another clause that covered his right to eight days of paid leave for non-carers.

St John Ambulance argued that Kershaw and the union's interpretation of the agreement was not logical.



A St John Ambulance medic has recorded a win against his employer in the Fair Work Commission. Credit: St John

It said the clause that establishes the eight days leave could not be "read in a vacuum" and was subject to criteria contained in other clauses that use criteria and eligibility for parental leave as set out in the Fair Work Act.

Fair Work Commissioner Paul Schneider sided with Kershaw and said the type of leave he had applied for was different from those covered under the act and therefore the 12-month continuous employment rule did not apply.

"Rather, the leave on offer under [the clause] is a distinct type of paid leave that is provided to the non-primary caregiver," he said.

"The eight days of paid leave in question are an additional entitlement which does

not form part of any entitlement under the [national employment standards], rather this is an additional benefit provided to employees of the respondent."

United Workers Union national ambulance coordinator Fiona Scalton said she was disappointed the dispute made it to the Fair Work Commission for what amounted to eight days' pay.

"This could have, and should have, been easily resolved," she said.

A St John Ambulance spokeswoman said the organisation was reviewing the decision and considering next steps.

Hamish Hastie
WA Today

MEET THE PERTH PARAMEDIC WHO IS A SECRET STUNTWOMAN IN YOUR FAVOURITE HOLLYWOOD FILMS

Too cool for school? Alicia White might just be. This Perth mum of two is a stuntwoman who sets herself on fire and hurls herself down the stairs for movie stars.

THE FORMER PARAMEDIC HAS BEEN nominated for the AusMumpreneur Awards in the service business category after launching a first aid training school business.

White, 34, says being a paramedic is far more dangerous than the stunts she has had to pull on Hollywood blockbusters *Elvis* and *Thor*.

She fell into the movie business after she and her colleague joked about it during one of their night shifts before she Googled it — and the rest is history.

"The stunts all carry an element of risk. I have been set on fire several times, hit by cars, and fallen down the stairs. That type of thing," White says.

The two colleagues' fleeting idea became a reality after White felt "burnt out" from saving lives on the street.

"I came across a course at Stunt Academy in the Gold Coast. I fell in love with it and thought, 'Why don't I do this properly?' A few weeks later, I booked leave without pay and moved to Queensland to pursue it full-time!" she said.

Soon she was doing stunts on Baz Luhrmann's *Elvis*. "I was one of the stage jumpers. *Elvis* was doing a song and jumped into a crowd, and then we all stormed the stage and jumped off the back of the stage and chased him into the car," she said.

"So that is jumping and falling and getting pushed over. I was on *Thor*. I was an Asgardian guard. I slayed mythical creatures that weren't there, so it was like swatting flies, and then they just CGI them on later. That was fun."

White said the superstars were rarely around to thank their stunt doubles.

"We do all the rehearsals without the stars, and then they just drop them in, and it's their time to shine," she said.

"They have body doubles if they are being shot from behind. They stick them in when they are ready to roll so their time isn't wasted. We don't get to mingle with them, especially on a *Marvel* or a *Baz* set. They get pampered and very well looked after!"

The career is undoubtedly enough to impress her kids. "I have a four-year-old and



It's a better life than the dangerous nights she spent rushing to save people on the streets. Source: Supplied.



Too cool for school? Alicia White might just be. This Perth mum of two is a stuntwoman who sets herself on fire and hurls herself down the stairs for movie stars. Source: Supplied.

a nine-month-old," White said. "My four-year-old has just been watching all the *Marvel* movies. He said, 'Mum's in this one' when I showed him *Thor*. His dad is in the film too. He does sound and drone. Our son thinks we make everything on TV!"

These days White is rolling all her skills into one to keep people safe. Her business Action & Emergency has landed in the running for the prestigious award.

"It's a combination of film and paramedics and first aid training," she said. "I combine all of the things and do corporate first aid training that's all nationally accredited. I opened my doors to the public in April, operating out of the ECU health precinct."

It's a better life than the dangerous nights she spent rushing to save people on the streets.




Alicia White after some wire work. Source: Supplied.

"Being a paramedic is more dangerous than stunts!" White said.

"It's unpredictable being a paramedic, which can be quite dangerous. It's just you and your partner. You are not armed. You literally have a torch. As a stunt performer, everything is practised 100 times to nail it. It's done really safely. Even though we are being set on fire, we have all these gels, clothing, and teams ready to put you out. It is very controlled. Whereas paramedic land is anything but."

Winners of the awards were announced in August in Sydney.

Andrei Harmsworth
The West Australian

A woman with dark curly hair tied back, wearing a dark blue paramedic uniform. She has her arms crossed and is looking directly at the camera with a calm expression. The uniform features a 'PARAMEDIC' patch on the shoulder and a 'NEW SOUTH WALES ASSISTANCE' patch with a red cross. A badge is visible on her chest.

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