

Log of Claims 2016 Public Sector (General) EBA

A. Salaries, classifications and related matters

1. Salaries to be increased for registered nurses, registered midwives and enrolled nurses to reflect our interstate and/or territory counterparts, including addressing disparity for RN/RM Grades 5, 6 and 7.
2. The CPD allowance to be rolled into hourly rate for all purposes.
3. The agreed 'Rural and Isolated Practice Endorsed Registered Nurse' (RIPN or RIPERN) allowance to be inserted into the EBA reflecting the DHHS and ANMF agreement of 2010 (four per cent of base rate in addition to qualification allowance).
4. Insertion of already agreed research nurse structure.
5. Introduction of a statewide classification committee, with independent chair, to standardise grades applicable to comparable roles.
6. Common annualised salary loading of 32 per cent for all midwifery care models
7. Align EBA terms with National Employment Standards where NES more favourable – e.g. jury service.

B. Standardising of conditions

1. Introduction of standardised, comprehensive organisational change provisions incorporating redundancy, retraining, redeployment and salary maintenance, and OHS consultation obligations.
2. Merging of comparable conditions applying to general nurses and mental health nurses, including:
 - a. Portability of service to be standardised (allowable period of absence of 13 weeks) for long service and personal leave purposes, and as between mental health and general nursing agreements (payment by employer to new employer as in MH EBA).
 - b. Standardise night shift public holiday payments for both mental health nurses and general nurses and midwives (all of the shift vs part of the shift) (and 55.7 in MH) (e) not (f)(i).

- c. Standardise overtime entitlements for mental health nurses and general nurses and midwives, (MH EBA says work beyond end of rostered shift) and between payment for overtime and time off in lieu (N&M EBA says time in lieu after shift length but OT after 8/10 hours).
 - d. Common clause for late payment of wages (or part thereof) as per MH EBA.
3. Ensure consistent PIAWE calculation method is used for both access to workers compensation and accident pay calculation (i.e. inclusion of penalties and overtime in the calculation).
 4. Standard process for providing evidence of completion of education leading to a qualification allowance and when entitlement to qualification allowance applies.
 5. Standardised parental leave benefits regardless of gender, birth, adoption, placement.
 6. Standardise personal leave to remove unnecessary distinctions between sick leave and carer's leave e.g. reinstatement of annual leave if on carer's leave.
 7. Experience to be treated equally regardless of sector, state or country of experience.
 8. Align public holiday 'rostered off' benefits for full and part-time employees.

C. Interaction between Ratios Act and EBA

1. Standardise normal shift lengths in inpatient areas to eight hour day, eight hour afternoon and 10 hour night for both full and part-time employees unless agreed otherwise.
2. Standardise short shift use on inpatient wards.
3. Psychiatric consultation liaison nurse in every Level 1 and Level 2 hospital.
4. Restore workload management protocols as specified in the 2007-11 EBA.
5. Remove the 50 per cent rule.
6. Escalation plan setting out how health service manage in a safe manner during periods of higher than usual demand, higher than usual acuity, and circumstances necessitating nursing or midwifery care to be provided in an alternative environment.

7. Amend rosters clause to require a roster in each ward/unit that:
 - a. Is available in print for viewing by ANMF without notice.
 - b. Accurately reflect at least the legislated staffing & skill mix for the roster period.
 - c. Allocates a registered nurse/midwife to be in charge of each shift.
 - d. All efforts must be made to fill vacancies in the roster with a nurse/midwife working the same hours as the rostered shift vacancy. Such efforts to be immediate, formally recorded in writing and available to the ANMF.
8. Any deviation from the published roster (other than one initiated by the employee) will attract the 'change of roster' allowance for each such variation.
9. Overtime payable where an employee works:
 - a. An additional shift that commences on the same day as the previous shift worked (such as a night duty shift commencing on the same day as a morning shift previously worked by the employee), or;
 - b. Where an eight hour break has not been provided between successive shifts.
10. If an employee works a double shift (which should only occur in emergency circumstances) the following will be put in place to mitigate the risk of fatigue:
 - a. Allow two hourly breaks of at least 10 minutes duration.
 - b. Adequate transport provided free of cost to employee.
 - c. An employee must have 24 hours off duty between that work and the next successive shift without loss of pay.
11. Enhanced overtime rates commensurate with the length of overtime worked, e.g. triple time after 4 hours overtime.

D. Rosters, leave and related matters

1. The employer to notify employees within a reasonable timeframe if their annual leave is approved or refused and the reasons for any refusal.
 - a. Annual leave requests should be submitted at least 4 weeks in advance of roster publication, and;
 - b. The status of leave requests notified to employees in writing within 2 weeks of receipt of application.
 - c. Refusal only in extraordinary circumstances.
 - d. Once annual leave is formally approved it must not be unilaterally changed by the employer without discussion and unless there are extraordinary circumstances.
2. Where higher duties performed for an aggregate of three months or more in a 12 month period, the same annual leave benefit as a permanent or fixed term employee, pro rata to apply.
3. Protect total of paid EBA parental leave and government parental leave entitlements.
4. Agreed domestic violence leave and systems to be introduced.
5. An employee, by making a request in writing to the employer or as demonstrated by a regular pattern of work, will be considered to have his or her roster fixed by mutual agreement.
6. Employers to provide reasonable break time for an employee to express breast milk for her nursing child for one year after the child's birth each time such employee has need to express the milk.

Employers are also required to provide a place, other than a bathroom, that is shielded from view and free from intrusion from co-workers and the public, which may be used by an employee to express breast milk or breastfeed a child.

E. Professional development and related matters

1. Paid professional development leave to apply to attend conferences/seminars or other professional development activities that fall on a day that they are not rostered to work.
2. Confirm that a 'day' for the purposes of professional development leave is the employee's normal shift length.
3. Qualifications allowance to recognise double degree and Masters undertaken before entry to practice (after 12 months consolidation).
4. PhD and Doctorate qualification allowance to 10 per cent of base rate.
5. Salaries while undertaking postgraduate education standardised for nursing and midwifery (substantive salary).

6. Study leave for higher education studies to include:
 - a. Periods of leave also being granted to employees undertaking a postgraduate qualification by thesis, research, coursework, or a combination of these.
 - b. The amount of paid study leave being based on four hours per week for each academic semester of study per full-time year of study. Where an employee is undertaking the study on a part time basis the periods of leave is to be granted on a pro rata basis.
 - c. Taking of approved periods of study leave can be accessed and taken over the course of study in amounts mutually agreeable between the staff member and relevant manager rather than taken on a week-to-week basis.
7. Increase professional development leave for those nurses and midwives required to undertake more than 20 hours of CPD per annum.
8. Exam leave broadened to include major assessment tasks/other methods of assessment.
9. Professional development leave not be used for mandatory education.

F. Promoting permanent employment

1. Option for all casual nurses and midwives to become permanent after six months.
2. Reinforcement of agency directive.
3. First and final warning only to occur for serious and wilful misconduct, and remove reference from LSL provisions.

G. Occupational Health & Safety, Equal Opportunity and employee representation

1. Employees with disabilities (including temporary disability) to be reasonably accommodated at work.
2. A committee to be established to explore safe rostering practices across the industry, changes for existing employees only by mutual agreement.
3. Healthcare employers must establish and maintain an effective occupational violence and aggression prevention and management program which targets the multi-factorial nature of this hazard, and addresses potential contributing factors.
4. Every facility must implement and maintain an ANMF agreed policy on prevention of occupational violence and aggression. This should involve consultation with HSRs and staff members. (The ANMF policy to be included in the body of the agreement.)
5. Job Rep leave consistent with NSW Health "Leave Matters for the NSW Health Service" policy directive September 2014.

6. Employees to be provided reasonable access to electronic communication devices to facilitate communication between employees and the ANMF.
7. Employees to be given full access to ANMF staff, officials and Job Reps during working hours to discuss any employment matter or seek ANMF advice.
8. Compulsory WIC agenda item to give effect to the above, and current Clauses 31.1, 31.2 and 31.3 as replicated or amended in the new EBA.