

From: [Helen Gunter](#)
To: [Legal Affairs and Community Safety Committee](#)
Subject: Submission regarding: The Industrial Relations (Fair Work Act Harmonisation No. 2) and Other Legislation Amendment Bill 2013 a
Date: Sunday, 27 October 2013 11:58:22 AM

The Research Director
Legal Affairs and Community Safety Committee
Parliament House
George Street
BRISBANE QLD 4000

Dear Sir/Madam,

Thank-you for considering my submission

As a Registered Nurse who has worked within the Public and Private Health Sectors in a number of States and territories within Australia for for more than two decades, I would like to submit the following for consideration in the proposed Bill before the Committee

I appreciate that the committee has the difficult role of navigating between the newly appointed government's desire to implement the Bill, and it's own good conscience of the impact this bill will have on the landscape of health services provision for the next few years. The flow on effects of decisions such as these will affect not just health professional groups such as Nurses and the wider group of Public Health Service employees and Queensland Public Service Staff, but rather the population of Queensland which relies on the aforementioned elements to ensure that their health system operates at an equitable standard worthy of 'Access to Healthcare services for all Australians', regardless of their ability to pay.

Much of my submission revolves around the intent of the Bill to 'streamline' the awards which will, (reading between the lines), threaten allowances and conditions of health care workers, however I also express concern regarding other aspects of the bill.

From the Bill itself citing the Commission Of Audit: "that awards continue to provide the basis for public sector wages and conditions, however only matters not covered by legislation or Public Service directives should be included; and the number of awards that apply in the public sector should be significantly reduced;"

Please bear in mind that just as one should never assume that a Minister of Parliament (MP) is a secretary, despite being often involved in the same working environment, nor should all health care workers be 'lumped together'. Thus the removal of allowances, rights and conditions of MP's to match those of a secretary baseline or safety net would never be considered satisfactory.

With this in mind I would argue that a streamlined award for health staff should be firstly very well informed and thought out. There are many aspects to the various health worker roles that require vastly diverging responsibilities, education and safety issues in contrast to other health professional colleagues. Considerable variation exists in levels of responsibility regarding decision making and care of patients that can ensure or endanger the health of those within our care. Nurses, through their acts or omissions to act can endanger life. Critical thinking skills are required to ensure safe practice. Thus, our current awards and

conditions and certified agreement should remain in-situ.

Yes the agreement has grown complex over the years, just as the role it attempts to remunerate has grown complex. This is not an excuse to slash conditions to the certified agreement when the role itself has not reduced in its nature and complexity.

There are several inconsistencies in the argument put forward to make these changes:

1) - By aiming for the bottom of the scale of remuneration, the quality of health professionals who will be attracted to Queensland in the future will be threatened

Recent negotiations regarding Queensland political appointments has demonstrated the importance of parity with not only their interstate counterparts, but federal : The importance of interstate wage rates (and allowances) for important Government staff (MP's) has already been acknowledged by the current and previous Queensland State Governments in the moves tie Queensland MP's remuneration not directly to their individual productivity, but rather their Federal counterparts. Thus highlighting the full understanding and acknowledgment of the Government that to ensure we have MP's of high standard, we need to remunerate them to a level that is close to the Federal counterparts, and certainly not below their NSW, Victorian, W.A., S.A, N.T., ACT or Tasmanian equals.

The importance of this matter was again highlighted with the recent attempt to recover back-pay for those MP's who had fallen behind. (<http://www.premiers.qld.gov.au/right-to-info/disclosure-log/assets/disclosure-log-entry-0078.pdf>).

Fortunately for the MP's in Queensland, a recent independent pay tribunal came up with a 9% pay rise (<http://www.brisbanetimes.com.au/queensland/politicians-get-9-per-cent-pay-rise-20131015-2vjr.html>).

This tribunal used direct comparisons with other state and federal MPs to make its judgement thus demonstrating this criteria should be used for other professional streams. (Unless the Committee feels such comparisons should not have been used for MP's).

To quote the tribunal

"Our approach was to establish the role and responsibilities of an MP and assess the work value of the position," tribunal chair Tim Brailsford said.

"In doing so we found that Queensland MPs are amongst the hardest working MPs in the country, sitting longer hours than most.

"Queensland parliament does tend to sit fewer days, but these days are much longer than other state jurisdictions

"Associated with this, Queensland MPs are amongst the lowest paid in the country."

Professor Brailsford said the raise helped address this issue and made MPs salary more comparable to other states and the private sector"

I note that Mr Brailsford did not state that Queensland MPs are the lowest, or the 2nd lowest, just that they are amongst the lowest.

I also note that while Mr Brailsford deemed comparison to other states MPs, he also cited the private sector. Sadly, there are no private sector MPs that exist in Australia to check this comparison. In my opinion, It would be incorrect to compare an MP to a CEO or vice CEO. If that was the case then one would assume that all MP's would come from such position or visa versa, flow into them when they leave office. There is no direct correlation with such a claim and so it

may be a flawed comparison against which the benchmark should be made.

I am sure the Committee would agree that the employment standard applied regarding the need to employ MPs who are remunerated at a level commensurate with their interstate counterparts to ensure the appointment of individuals who are educated and skilled so as to be described as highly qualified Government MPs who will act wisely in the interests of the people of Queensland also applies to the recruitment of educated and skilled Health workers for the same reasons. Thus a reduction or removal of existing award entitlements from Queensland Health Professional (HP) streams undermines the very principal that MPs used to support their own remuneration... That is to say, the quality of services compared to interstate colleagues requires quality remuneration benchmarked against those same colleagues. This basic principal should not have to be argued on the behalf of the Nursing and HP stream as it has already been acknowledge to be valid for MPs in Queensland and by the independent pay tribunal.

I would draw the committee's attention to the comparison between interstate HP and Nursing staff prior to 2005 which demonstrated that nursing awards sat at the bottom of the remuneration scale. A number of inquiries undertaken and reported on at this time (namely the Bundaberg and the Foster Inquiries) identified the necessity of improving remuneration, education and workplace culture as important factors closely related to patient health and safety. Many of the workplace entitlements across all health streams in existence today are the result of these inquiries, and removal of them would seriously endanger the culture we have striven so hard to attain.

2) - **The suggested changes incorporate basic award with additional future productivity negotiations rather than accepting current allowances and entitlements that too have been formerly based on the achievement of previous productively goals.**

To cite the following statement : "that certified agreements only contain wages and conditions for specific groups of employees which are outside award conditions and that these are linked to improvements in productivity and performance."

The stated intention of the bill is in direct odds with the reality of how the current award conditions have developed over several decades of disparity: In other words: how we arrived at the point we are now. That is to say that the current remuneration of Nursing and HP stream has evolved over many years, and has already had many requirements to show productivity. They were not achieved by simply applying routine wage and allowance rises each EB round, but rather through long, drawn out and often difficult EB negotiations where the Qld Health counterpoint to many proposals to the HP bargaining team has often been the challenge of showing potential productivity gains in exchange for any allowance or entitlement increase, or to show more flexible working arrangements which give Queensland Health the ability to provide a modern, flexible workforce and thus improve it's productivity through efficient use of this resource.

One must ask, how is it appropriate to remove allowances for staff that currently exist in such a way as to impact their overall income while ignoring the productivity gains that have been achieved against those allowances and entitlements over the many years. The double standard of doing so is demonstrated when one investigates the MP situation yet again where, despite the tribunal's finding to alter/reduce some allowances, the final remuneration to the MP's was not impacted. If I am correct in understanding some of the proposed removal of allowances to the Nursing/HP stream from the Qld Health EB negotiating team, many Nursing/HP staff may see between 10 and 20% decrease in the remuneration. This appears to be the set of proposals that the Queensland Health EB negotiation team were bringing to the table.

3) - **The stated intention of streamlining awards is to make things**

easier, but in reality it makes them cheaper at the expense of Health care workers.

If the intention of this change is to simplify the agreements with no financial pain suffered by employees, a formula could be used to make the adjustment for each employee based on their current role in the organization and an adjustment made to counter the simplified award each pay. **The fact that no effort is being made to do this should tell the committee that the real purpose of this change is to cheapen the workforce not by simplification alone, but by reducing payments to the employees.**

4) - The proposed fixed term QIRC

Quote:

"The bill amends the IR Act to allow the Governor in Council to appoint a QIRC deputy president or commissioner on a fixed term appointment of not less than one year. Currently, all appointments to the QIRC can only be made on tenure to age 70. This amendment will provide greater flexibility for the government to address short- to medium-term workload pressures within the QIRC. Fixed term appointment arrangements were a feature of the QIRC prior to 1999 and are currently provided for in the New South Wales Industrial Relations Commission and the Fair Work Commission federally.

The independence of the QIRC is its major strength. It acts as the judge when two parties are unable to reach agreement. To give power to one of those parties over the QIRC is to undermine its stated purpose.

One should never, in a democracy, look to undermine the separation of powers, nor the perception of them.

If we are to accept that the QIRC has a role to act on judgements between Old Government as an employer and its employees, we should also look to ensure it can perform that role without fear or favour

<http://australianpolitics.com/democracy-and-politics/key-terms/separation-of-power>

Giving any government more control over the QIRC that it currently has threatens that separation. While last year's AWU challenge was unsuccessful, it was not a rubber stamp for any government to expand powers into the QIRC which has been historically considered an unbiased and impartial adjudicator

5) - Individual employment Contracts (Queensland Workchoices)

Quote "The fifth element of the IR framework is individual employment contracts for highly paid senior staff. The bill introduces a facility for an employer and an employee to enter into an individual employment contract. (<http://www.abc.net.au/news/2013-10-22/serious-concerns-raised-about-contracts-imposed-on-doctors/5038550>)

There is a very strong element of 'history repeating itself' in these decisions. It was apparent in the past that the Queensland Health Public System suffered from a 'mass movement' of highly qualified Australian trained medical personnel from the Public System into the private system. This diminished the number of dedicated, ethical, principled medical consultants within the Public Hospital Acute Care Sector -who, in addition to providing 'Health care for all regardless of ability to pay', were responsible for facilitating and enabling high quality training and research to support the University sector. This then resulted in a number of highly criticised medical appointments from overseas. Please see Bundaberg and Foster Inquiries (cited

above). While the current Queensland Government may claim to have a mandate to bring in some changes, there has never been a mandate in Australia for Workchoices in the Public Health Sector, nor is there every likely to be.

Yours Sincerely,
Helen Gunter

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