

From: [Izan Gill](#)
To: [Legal Affairs and Community Safety Committee](#)
Subject: A submission regarding the Industrial Relations (Fair Work Harmonisation No. 2) and Other Legislation Amendment Bill 2013
Date: Sunday, 27 October 2013 8:10:13 PM
Attachments: [Wage Comparison for MRPs - pre HP \(2006\)-1.doc](#)
[Southernex Health Professionals Enterprise Agreement 2013 PDF-1.pdf](#)
[calculate EBv4.xls](#)

Dear Sir/ Madam

Submission regarding the Industrial Relations (Fair Work Act Harmonisation No. 2) and Other Legislation Amendment Bill 2013.

I am writing both as a resident of Queensland and as worker within Qld. Health. I am a Diagnostic Radiographer (part of the Health Practitioner/ HP stream.) I have worked within Qld. Health for over 22 years, 20 of which have been in sole Rural Remote positions and I have grave concerns about the fairness of this bill, both to the health workers on the staff of Qld. Health and to the continuing health and safety outcomes of the people of Queensland who rely on us on a 24 hour basis across the state. I ask you to consider the following submission.

I certainly appreciate that the committee has an extremely difficult task in taking into account both the desires of a very strong government to implement this bill and the committee's own awareness of the impact that the bill would have not just on clinical staff across Health Practitioners, Medical Officers, Nurses and Midwives, Administrative and Operational staff, but also on the other Qld. Government staff and especially on the Qld. community which relies on all sectors of Qld. Health to keep their health system operating at the standard of quality and safety that they have the right to expect.

As a Health Practitioner (HP) much of my submission is concerned with the intent of the bill. It's intent is to "streamline" the HP award - and all others which follow on across the various Health disciplines - by removing HP allowances and many other clauses from the proposed 2013 agreement

(HPEB3). This makes me concerned as to how the bill will also affect other workers across all groups statewide. Health Practitioners are the first of the various Health disciplines to be involved as our 2010 agreement expired on 31/8/2013. Health Practitioners were actually in protracted negotiations with Qld. Health, which were suspended when the bill was put before parliament on 17/10/2013.

The bill itself cites the Commission of Audit (COA) "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". This takes on a "one size fits all" approach which given the diversity of the roles of the people involved really makes no sense. It seems to be trying to compare "apples with oranges, with pears and with tomatoes.

If the committee will permit me, can I ask them to look at not just HP issues but at the wider impact and the real direction that this bill seems to be taking Queensland, its government, its employees and the

Looking at the way in which the MP remuneration was handled, their staff, in spite of them being involved in the same working environment (and hours for many), would not have their conditions matched to those of the MPs themselves or vice versa, makes it plain that reducing the awards and the conditions covering these groups would not answer. It would not be considered appropriate, fair or satisfactory. In the same way, reducing the conditions and allowances (which were not reduced for MPs, I believe, under the commission findings), for Health Practitioners would result in the loss of many of both of these which were negotiated back in 2006 when the HP stream was set up under the

auspices of QHealth to address the poor recruitment and retention issues of the then Allied Health Professional Officers (PO) stream which was impacting on performance across these disciplines. From being at the bottom of the states rates of pay and conditions nationally and with poor position occupancy rates, Qld. HPs came up the rankings with new allowances to help attract new HP staff and to offer a career path specific to their stream. Suffice it to say that this made Qld. Health very much an "employer of choice" and has very significantly increased the throughput of patients, both inpatients and outpatients. This can be seen from the various statements by the Health Minister on the reductions in waiting times in the various departments, and these are very much a collaborative effort across the clinical streams, albeit one for which Radiography (for example) rarely rates a mention. QHealth Hs are very highly educated and skilled. They are much in demand both nationally and

internationally. If their conditions and award is wound back under this bill, Qld. will lose large numbers of HPs who are unlikely to return. This could have a significant impact on the care of patients and, ultimately, could lead to litigation down the track. The scale of where HPs a=sat in 2006 is attached at the foot of this submission.

The allowances and conditions of employment which were included in the previous 2 HP agreements have had a considerable impact in helping HPs to achieve these successes. Even before the staff cutbacks, there were very few vacancies and staff worked very hard to achieve the productivity levels that were asked for. This bill would remove them and would also remove several clauses in the previous agreements and in the award while limiting the capacity of employees

While the committee found that Queensland MPs should be remunerated

at a level commensurate with the Federal and interstate colleagues, to ensure that Queensland attracts high quality MPs, the same should be expected to apply to other public servants. Just as the people of Queensland are reliant upon the standards of MPs and can accept that they deserve suitable remuneration, so too should other public servants be able to expect fair and equitable remuneration and conditions in their awards rather than have these wound back and reduced in both size and scope.

I believe that this basic principle should not have to be re-argued on behalf of MPs or any other group as it has already been acknowledged via the independent pay tribunal that it is valid for Queensland MPs, a decision which the MPs affected accepted readily.

It seems quite strange that a new basic award that removes the current

allowances and entitlements for HPS (to flow on across to medical officers, nurses and midwives, administrative and operational officers) together with the wider government employees should not have very wide consultation when it is going to impact on so many workers. There are many workers, HPs among them, who will be very significantly worse off at one stroke - some up to 20% or more - while trying to cope with increased living costs (electricity for example went up 22% at the beginning of July this year after several other rises in earlier years) while at the same time being offered as little as 1.5% as a pay increase. This has come about with very little warning or consultation and leaves workers uncertain, afraid with very low morale and motivation - none of which augurs well for future harmony.

I notice that one phrase states:

"The Bill provides an industrial relations framework in Queensland

comprising of: streamlined arrangements for bargaining and taking protected industrial action. These arrangements include measures to reduce protracted disputation and disruption to service delivery; and the introduction of specified timeframes in which assisted conciliation and arbitration is to occur”

The premise is that specified timeframes will assist conciliation and arbitration to occur. I have to admit I don't know about arbitration under this new bill but I certainly don't see conciliation being easy to achieve. The hope that both sides can actually deal fairly and honestly with each other without any fear or favour during such sessions appears to recede rapidly under the wording and intent of the bill. After all the gains made over the years to work more collaboratively, this seems sad indeed.

I find the changes to the way in which QIRC fixed term appointments and the removal of tenure to appointments is a particularly worrying aspect of this bill. I 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 has always been at the heart of peoples'

trust in our system. To remove this independence and to allow a party which is involved in the passing of this bill and which will always be dealing with the various award negotiations with staff, totally undermines the stated purpose of the QIRC. This seeks to undermine the separation of powers. As the QIRC, acting independently, has as part of its role, to act on judgements between the Qld. Government as an employer on the one hand and the Government's employees on the other hand, the QIRC must be able to perform its role without any taint of interference for the government. This is at the very heart of our democratic process.

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

Giving any government more control over the QIRC that it currently has threatens that separation.

I come now to Individual Employment Contracts part of the bill which has the appearance of a Queensland "WorkChoices". It gives the government the power to add to this at any time once the bill passes. Taken with the rest of the bill this is also a disturbing matter.

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."

Can I direct you to <http://www.abc.net.au/news/2013-10-22/serious-concerns-raised-about-contracts-imposed-on-doctors/5038550> from the AMA, which makes it very plain where this could lead. In the proposed HPEB3

agreement from QHealth, HPs have already seen clauses removed from their agreement under various guises: "administrative matters" (to be dealt with by each individual Health and Hospital Service - HHSs/ Hospital Boards), which would mean the removal of uniformity, continuity and certainty of adherence to any agreed pay and conditions or allowances. Other conditions were to be placed under "policy" - HPs have already seen policies from their HP2 agreement changed to "Guidelines" which immediately opened them to "Interpretation" by individual HHSs.

The right for workers to have a unionised body to act as a negotiating instrument is, for many people, the only way that they can ever aspire to negotiate/bargain on some form of equal terms with the large, well staffed and very well resourced government body, set up and dedicated to to compete against those employees in very

intimidating surroundings. It is essential that all employees are able to continue to have this union access - whatever the union is called.

One of my colleagues has put this next paragraph very well indeed and I have that person's permission to use it. In the democratic country of Australia, I feel most people would not support forcing individuals whose primary training and focus is on the health of patients to pit themselves against a team of people whose primary focus is on negotiating against individuals in what is a combative for workplace agreements (another version of WorkChoices). This is clearly unfair "negotiation" and this mandate against such practices was clearly shown in previous elections.

While the current Qld. government may claim to have a mandate to implement some changes, there has never been a mandate in Australia for WorkChoices in

the Public Health Sector. I would hope that the committee would take into consideration just what mandate exists and how it really applies to the people of Queensland.

The bill seems to give the impression that health under a streamlined industrial award instrument will provide a cheaper health system to the people of Queensland. No consideration is given to the very real probability that patient care will suffer badly and that very costly litigation is likely to follow down the track, The system will grind to a lower and lower level of care which will become unacceptable and will cost massive amounts of money and time to entice back the staff which ran it so well previously - the various streams of Health professionals across all the disciplines and modalities.

I attach 3 documents - wages comparisons for HPs in 2006, a private agreement between the owners and

employees of a private Radiology company and the calculator for the losses to be made by Radiographers if the proposed legislation and the proposed HPEB3 go through. This would be coupled to a 1.5% pay increase.

Thank you for reading this.

Izan Gill

