From:	Barbara Coleman
To:	Legal Affairs and Community Safety Committee
Cc:	Thuringowa Electorate Office; Mundingburra Electorate Office; Stafford Electorate Office; Townsville Electorate Office; Mount Isa Electorate Office; Dalrymple Charters Electorate Office; Burdekin Electorate Office; Premier; Inala Electorate Office; Southern Downs Electorate Office; Minister for Health
Subject:	Submission regarding *Industrial Relations (Fair Work Act Harmonisation No. 2) and Other Legislation Amendment Bill 2013*
Date:	Monday, 28 October 2013 12:20:13 AM

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

Dear Sir/Madam,

Thank-you for considering my submission.

As a Health Practitioner (Radiation Therapist) who has worked for Queensland Health for 18 year as well as interstate & overseas Public and Private Hospitals, I would like to submit the following for consideration in the proposed Bill before the Committee.

I have been able to read through the proposed legislation briefly and much of what I read has alarmed me as being anti democratic and ideologically based. The stated aim of the bill is to streamline industrial awards but I believe that it will lead to unheard- of levels of injustice and to perverse outcomes. It was exactly this desire to "streamline" and "simplify" the Queensland Health payroll that lead to the debacle of that rollout, because it failed to take account of the complexities of the health industry and the wide variety of skills and responsibilities required. This legislation appears to cover education services, meat workers and a range of other public sector employees with a huge range of duties, skills, regulation and education levels, including all health employees.

By restricting what can and what cannot be agreed upon in Enterprise Bargaining, restricting industrial actions, meddling with the Queensland Industrial Relations Commission and doing away with many so-called "duplicated" allowances there can be no doubt that most, if not all, Health Practitioners will be significantly disadvantaged. It is clear that this legislation paves the way to privatise many currently public functions, which I believe to be detrimental to the interests of the the people of Queensland, particularly with respect to health services provision.

For many years Health Practitioners in Queensland were paid less and had worse conditions that virtually all other states. As a result, it was extremely difficult to recruit quality staff, particularly in challenging locations. Even now this can still be an issue - I note that the post of Radiographer in Weipa remains unfilled despite extensive advertising. It was not until the first Health Practitioners award in 2007 that many anomalies were discussed and began to be addressed. These included provision for fatigue & recall, consideration regarding the issues of sole practitioners in radiography, harmonisation with radiation licensing & registration, continuing professional development, research and mentorship of new graduates to name a few. Many of these items are now removed with one stroke! I expect a return to difficulties with recruitment, a return to excessive workloads resulting in unsafe practices and diminished productivity as the result of this legislation if it passes in this format.

I also object to the "High Income" definition as proposed. I believe the AMA & the ASMOFQ have made a very full submission dealing with this aspect of the proposed legislation. I would like to add that it will also affect some of the higher streams of Health Practitioners, particularly advanced clinicians, specialists and managers and that this will have the effect of splitting our skilled and experienced staff, virtually all of whom now have post graduate qualifications. This will effectively remove the incentive for younger staff to undertake advanced study and practice. It has also been argued in other forums (when tax levels were being debated prior to the last election) that \$130,000 is not a "high" salary. This is, of course, debateable, but by defining this amount in the legislation it will inevitably apply to more and more people as inflation inevitably diminishes the value of salaries. I think the amount in the legislation should remain undefined. Removing staff who are subject to this definition from the industrial agreements is a poor move particularly as they are likely to fall out of fatigue and health and safety provisions.

I would like the Parliament to take note of the fact that Queensland's current health workforce is overwhelmingly a "knowledge based" one where Practitioners study for many years and invest in ourselves throughout our working lives, often at great cost in time and money. We work in fields that are continuously changing, thanks to technological and health developments. For radiation therapists a career break as short as five years requires total re-qualification, because of the speed with which radiotherapy technology changes.

I make this submission from the point of view of a Medical Radiations Practitioner but I am acutely aware that every stream represented in the Health Practitioners Agreement has particular skills and requirements and is equally worthy of consideration. They also sometimes have quite different industrial requirements because of the nature of their work. The same applies to Nurses and Medical Practitioners. I am passionate about retaining good practices in the public health sector in this state, not because I believe that my private sector colleagues are not competent, but because I have come across many instances where the best outcome for our patients has been compromised by the competitive nature of private practice & a refusal to work in an evidence based & collegiate manner. The team based nature of modern medicine is very important and this applies, in my own experience, to long, complex & potentially lethal cancer treatments. The legislation as it stands devalues the contribution of all team members.

Submitted, with respect.

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