

Australia: The political issues facing Victorian paramedics

The Socialist Equality Party (Australia)
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The statement is available for download in PDF.

The Socialist Equality Party calls on paramedics to reject the regressive sell-out industrial agreement drafted by the state Labor government of Premier John Brumby and the Ambulance Employees Association. A “no” vote must be the first step towards a coordinated industrial and political campaign mounted in opposition to the grossly inadequate salaries and dangerous working conditions endured by ambulance workers, and in defence of the public health system as a whole.

The paramedics’ demands stand in direct conflict with the healthcare agenda being advanced by the federal Labor government of Prime Minister Kevin Rudd, along with its state counterparts, and the trade unions. On behalf of the Australian corporate elite, Labor has developed a long-term strategy to further promote the private health industry and drive down already inadequate levels of public health spending. The same processes are underway around the world; in the US, for example, President Obama has targeted Medicare and other public health programs for unprecedented cutbacks as a means of paying for the bad debts that have been transferred from the banks onto the state’s books.

Like the US Democrats, the Labor government is utilising the global economic crisis to orchestrate a sweeping “free market” economic restructuring, involving the destruction of existing social services and a permanent reduction in the living standards of ordinary people. While paramedics and other health workers are told that there is no more money available for the public system, Rudd has placed tens of billions of public funds at the disposal of the banks and the financial operators.

Moreover, there is no shortage of resources available for the private health industry. The Rudd government funnels \$3.7 billion every year to the health insurance corporations via the 30 percent private rebate—more than the Australian Medical Association’s estimate of the sum necessary to fund an additional 3,750 hospital beds and resolve chronic shortages.

The government’s conscious policy is to entrench a two-tier health system where those who can afford it can access high quality and promptly delivered care, while everyone else is condemned to an overstretched service on the brink of collapse. Paramedics are among the many front-line health workers who are

forced to deal with the consequent threats to public safety. About one-third of emergency patients now wait eight hours to be admitted to public hospital wards; paramedics have coined the phrase “ramping up” to describe the common problem of having their ambulances queued outside hospital entrances because patients cannot be transferred to a hospital bed or trolley.

Labor regards the paramedics’ 16-month industrial campaign as a threat to the entire framework of its plan for the health system—which is why the Brumby government has proved so intransigent. Rather than grant even limited concessions, the government has conspired with the Ambulance Employees Association (AEA) to devise a regressive three-year agreement.

Its central features include:

* The extension of between-shift breaks from 8 to 10 hours—falsely hailed by the AEA as a major victory. This will only be phased in over the next two years. In the meantime, the existing situation will remain—with paramedics unable to get sufficient sleep between shifts that can extend for 15 or 16 hours. They will continue to suffer fatigue and stress related health problems; well-documented safety issues will also continue, including ambulance vehicle accidents and misapplication of drugs and medicine. The proposed 10-hour rest break is itself grossly inadequate. And it remains unclear whether the “transition” described in the proposed agreement from 8 to 10 hours will ever be completed as there are no plans to train and recruit additional paramedics. This means that to the extent that 10-hour breaks are introduced in 2011, it is likely that the existing workforce will be forced to work longer hours.

* A salary component involving most paramedics receiving a 7.5 percent nominal pay rise in the first year and 2.5 percent for the following two years. Specialist MICA (Mobile Intensive Care Ambulance) paramedics will receive 10 percent in the first year and 2.5 percent for the following two years. In both cases salaries will, in real terms, remain stagnant, with the nominal wage rises about equivalent to the official cost of living index. While the union has hailed the first year salary offers as a significant boost, paramedics last received a wage rise in August 2007, meaning that the 7.5 and 10 percent increase actually covers two years. In any event, paramedics will remain grossly undercompensated for their skills and training. After the first year nominal wage rises, ALS

(Advanced Life Support) paramedics will receive a base weekly salary of just \$960 to \$1,025, depending on their seniority, while MICA paramedics will get between \$1,086 and \$1,160, meaning the vast majority will earn well under the average weekly wage.

* A change in the calculation of overtime payments, which will leave many paramedics substantially worse off. Overtime will be calculated as a percentage of their base hourly wage rather than, as presently formulated, as a percentage of their “rolled-in rate” of pay. This rolled-in rate is always higher than the base rate and is calculated by assigning a monetary value to all operational shift penalties on rosters across Ambulance Victoria. According to one calculation done by a paramedic (in an email that has been circulated among ambulance workers), in the first year of the proposed agreement, an ALS paramedic averaging 400 hours of overtime a year will be \$5,240 worse off as a result of the new calculation method. With many paramedics forced to work long overtime hours as a result of understaffing and the need to boost their base salaries, the new agreement effectively delivers a major wage cut.

A coordinated political and industrial campaign, involving paramedics turning out to other health workers facing similarly untenable conditions—as well as broader layers of the working class threatened with job losses, wage cuts, and deteriorating conditions—would immediately win widespread popular support.

In seeking to develop such a struggle, however, paramedics will find no more determined enemy than the AEA bureaucracy, who support the Rudd and Brumby governments’ agenda. Throughout their campaign, the AEA has attempted to isolate its members from other workers and prevent the development of any challenge to the Labor Party. When the Rudd government’s industrial tribunal, Fair Work Australia, twice intervened to outlaw paramedics’ industrial action—in July banning a proposed rolling strike and in September preventing MICA paramedics from resigning from their specialist duties—AEA state secretary Steve McGhie rushed to declare his acceptance of the deeply anti-democratic rulings.

The union is now attempting to intimidate paramedics into accepting the deal by arguing that the only alternative is forced arbitration before Fair Work Australia. In a YouTube presentation, McGhie declared that voting “no” to the agreement “just means all of your conditions could potentially be arbitrated” and downgraded. He also warned that rejection of the agreement would mean that the 7.5 and 10 percent nominal wage increases would be withdrawn. In a blatantly cynical attempt to pressure workers to vote “yes”, these increases have been paid to paramedics since the proposed deal was announced.

McGhie’s arguments—which underscore the union’s contempt for its membership—only demonstrate that fact that paramedics are locked in a political struggle.

The alternative to the proposed industrial agreement is not to

wait for a FWA-arbitrated ruling, but rather to fight the Rudd and Brumby governments. Anti-working class industrial laws have only ever been enforceable to the extent that the trade union bureaucracy has succeeded in smothering and sabotaging resistance to them. In May 1969, for example, the Arbitration Commission’s anti-strike penal powers were effectively rendered a dead letter by the eruption of a wild-cat three-day general strike after the imprisonment of Victorian tramways union official Clarrie O’Shea.

The prerequisite for any such fight today is for workers to make a political break from the trade unions and their pro-market agenda. Rank and file paramedics’ committees, independent of and in opposition to the AEA, should be formed at every hospital and depot. MICA paramedics took an important step when they convened meetings independently of the union to review progress on the agreement and discuss the way forward. In the end, however, rank and file representatives participated in last-minute negotiations between the AEA and Brumby government and were pressured to back the proposed industrial agreement.

This experience underscores the need for the paramedics’ struggle to be guided by a new and independent political perspective. Such a perspective must take as its starting point the incompatibility of the profit system with adequately funded and rationally operated healthcare. Paramedics commit to years of education and training in order to utilise the latest medical techniques and technology when responding to emergency situations. Yet at every step, their ability to save lives and ensure the best treatment for those in need is compromised by chronic understaffing, lack of resources, union-imposed “productivity” concessions, as well as the various logistical and other problems generated by Australia’s two-tier, semi-privatised health system.

Healthcare must be recognised as a fundamental right. The best available treatment must be provided to all who need it, free of charge, while all those working in the health system must be provided with the resources required to function at the highest possible level, and paid a decent living wage for themselves and their families. This is impossible within the current socio-economic order. That is why the working class needs to build a new mass revolutionary party, based on a socialist and internationalist program, to fight for the complete reorganisation of society in the interests of the vast majority, not the wealthy few. We encourage all paramedics and their supporters to contact the Socialist Equality Party to discuss these critical issues.



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