

Australian aged care workers confront worsening conditions

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Following a trade union sell-out of month-long industrial action in the state of Victoria late last year, residential aged care nurses and care workers across Australia are facing deteriorating and stressful working conditions.

Aged care is an increasingly important part of society, because people have been living longer due to advances in medical science. But the essential social right to decent care is being eroded, at the cost of both the elderly and the care workers.

Decades of government funding cuts, combined with the rise of corporate profit-making operators, have led to severe under-staffing, accompanied by the replacement of highly skilled nurses by lower-paid and less medically-qualified personal care assistants (PCAs).

One result has been a staggering rise in potentially preventable deaths among residents. A study published in the *Medical Journal of Australia* last year recorded 3,291 such deaths in aged-care nursing homes between 2000 and 2013. That number had increased more than four-fold over a decade.

This crisis is intensifying despite an official report last year admitting that in many residential aged care facilities, a single registered nurse (RN) can be responsible for the care of up to 150 residents each shift.

A workforce survey in 2016 provided an indication of the escalating exploitation of very poorly-paid and minimally-trained PCAs. Between 2003 and 2016, PCAs increased as a proportion of the residential aged care workforce from 58.5 to 70.3 percent, while the proportion of RNs dropped from 21.0 to 14.6.

None of this would be possible except for the role of the nurses' union, the Australian Nursing and Midwifery Federation (ANMF). It has facilitated the

employer's cost-cutting and profiteering by signing enterprise bargaining agreements (EBAs) and stifling the growing anger and resistance of aged care workers.

Last year's ANMF sellout of workers employed in Victoria by the international health corporation Bupa took this policing function to a new level. After a month of limited, but unprecedented, industrial action, the union struck a deal with Bupa that met none of the core demands of nurses and carers: comparable pay with nurses in the public sector, introduction of minimum nurse to patient ratios and increased numbers of RNs on each shift.

In September, 92 percent of Bupa nurses and carers in the state voted in a ballot for industrial action after 14 months of failed negotiations for a new EBA. On October 3, around 1,000 nurses and carers in Bupa's 26 Victorian facilities began a campaign that included wearing protest T-shirts, refusing overtime and banning non-clinical paperwork.

Although the campaign was kept under close union control, on October 23, 400 workers walked off the job and demonstrated outside Bupa's corporate office in Melbourne. The campaign extended to two-hour stopwork meetings and community rallies at various sites.

On November 1, rolling stopwork action commenced at 13 sites, with two or more nurses or carers walking off the job on both morning and afternoon shifts. Just a week later, the union pushed through a deal that provided for pay rises of only 11.25 percent over five years, not even enough to cover soaring living costs.

This outcome was not only far short of the workers' fight for parity with public sector nurses, and a rise of 14 percent. The ANMF completely shelved the demand for improved staffing and more RNs, offering an empty promise to lobby for these changes to be made by

federal legislation.

An ANMF “campaign update” announced the “settlement of the dispute,” saying “a national campaign is needed to harness the momentum of the extraordinary Bupa dispute to legislate ratios.”

Cynically, the union hailed the Bupa workers as “trailblazers.” But no mass meeting was conducted to allow nurses and carers to democratically debate the EBA deal. Instead, the union isolated members, with separate meetings at each of the 26 Bupa sites across the state.

Bupa is Australia’s biggest private aged care provider, with nearly 7,000 residents across 71 sites nationally. The Australian/New Zealand Bupa conglomerate reported a 9 percent increase in profits in 2016, making an estimated \$587 million in its aged care enterprises alone.

Such lucrative profits are derived from exploiting the labour power of the 155,000 direct care workers in residential aged care facilities nationally. This number has grown from 115,600 in 2003, but the ratio of workers to residents, which reached 197,046 in 2016, has not improved.

The ANMF is straitjacketing aged care workers in a lobbying campaign directed at sowing illusions that the Turnbull Liberal-National government or a Labor government would adopt recommendations made in last June’s Australian Law Reform Commission report, *Elder Abuse—A National Legal Response*.

That report expressed concern that 70 percent of the direct care workers were now PCAs, with minimal qualifications. It cited a number of coronial inquiries which had concluded that staffing numbers were not adequate in the circumstances of the deaths under inquiry.

Based on the report, the union is calling for a skills mix of 30 percent RNs, 20 percent enrolled nurses, and 50 percent PCAs. It also says residents should receive an average of 4 hours and 18 minutes of care per day, compared to the current 2.84 hours.

Even these inadequate proposals are incompatible with the profit-driven system that was further spurred by the previous Labor governments of Julia Gillard and Kevin Rudd. Labor’s “Living Longer, Living Better” aged-care policy, introduced in 2012, abolished any distinction between “high-care” and “low-care” beds in nursing homes, removing restrictions on charging some

prospective residents accommodation bonds.

In effect, these measures dismantled a safety net for elderly people requiring care, and boosted profit prospects. A survey of aged care homes by Bentleys Chartered Accountants, found that the average profit before interest and tax increased from \$4,497 per resident per annum in 2014 to \$6,278 in 2015.



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