Australian health workers protest assaults on staff

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17 August 2019

Health workers in Australia's most populous state, New South Wales (NSW), took industrial action this month over the rising number of assaults against staff in public hospitals. However, the Health Services Union (HSU) limited the action and channelled workers' anger into a demand for more security officers, not for increased funding and staffing to address the underlying problems.

Four-hour stoppages were staggered in selected hospitals. Nurses, doctors, midwives and most paramedics did not participate, nor were health workers in other states called on to join the walkouts. The "strike" was an attempt to placate anger among HSU members and cut off calls for a broader campaign.

According to the HSU, there are 40 assaults per month in NSW hospitals, but not all assaults are reported. While the problems are most severe in emergency departments, all wards are affected. In the most widely reported incidents nationally, a man brandishing two knives was shot by police at Nepean Hospital last October, a surgeon at Melbourne's Box Hill Hospital was killed in a one-punch attack, and a neurosurgeon was stabbed to death at Melbourne's Western Hospital.

A NSW Nurses and Midwives Association (NSWNMA) and University of Technology Sydney survey of 3,162 nurse and midwives workers, released in February, revealed 21 types of physical violence. Among them, 35 staff reported being sexually attacked and 388 nurses had blood, urine, faeces or semen thrown at them by patients. Sixty percent had been grabbed or hit, 53 percent were kicked, pushed or spat upon, 52 percent were punched and 30 percent were threatened by "non-traditional weapons e.g. sharps, IV poles, chair."

Nearly half the respondents, 1,454, had experienced a violent episode in the previous week and 2,460 (80 percent) had experienced violence in the previous six months. Violence was highest in the specialities of emergency, drug and alcohol and mental health. There was an overall injury rate of 28 percent as a result of a violent incident, with psychological injuries the most commonly reported.

Among the 22 types of non-physical violence, 84 percent reported swearing, 80 percent rudeness, 79 percent anger and 42 percent threatening comments.

The overriding feature of the industrial action was the lack of information provided to health workers by the unions. "Rolling strikes" were called at hospitals, including Royal Prince Alfred (RPA), Royal North Shore, Westmead Children's, Wollongong, Tamworth, Wagga and Dubbo.

No picket was organised at RPA—one of Sydney's biggest hospitals—and others visited by WSWS correspondents, with no visible sign of any action, nor any attempt to appeal to other health workers, patients and visitors.

The NSWNMA told its members it offered only "in-principle support." It asked nurses not on shift to join the action, preferably in their scrubs. Patient transport paramedics refused to take payments and some staff refused to do paper work.

Speaking to the WSWS, Matt, from John Hunter Hospital in Newcastle, pointed to one of the main reasons for the escalating violence—the stresses on both patients and staff produced by under-staffing and long waiting times.

Matt, who has worked in hospital maintenance for 11 years and was a wardsman for 12 years before that, said: "For a patient in the emergency department, many can't go straight in unless it's a trauma. The waiting time is anywhere between 4 to 16 hours. You come

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under pressure. All of the staff are expected to adapt to this increase without complaints… Nurses cop it the most. They are way overworked. People keep calling in sick because they can't cope. They need a break."

Matt commented: "You have these politicians and officials promise increases in funding for the hospitals, for example, [former Labor Party leader] Bill Shorten saying that we would get a $100 million or so increase in the last election. They can promise all they want, but no one actually sees it. I can get fired for telling you all of this. The hospital wants complete silence on these issues and people are coming under a lot of pressure not to talk about the real situation."

Rather than raising the lack of staff, creating delays for patients, and the broader social problems, such as mental illness, the HSU's only demands are for the employment of 250 extra security guards and for guards to be given "special constable" powers to detain violent people.

A health department interim report, published in February, admitted that the "challenges" facing hospitals included demand for mental health services; drugs (particularly ice) and/or alcohol affected people; escalating numbers of ageing patients; and increasing anger-related presentations and weapon-inflicted injuries. It noted that "delays in timely movement of patients through EDs [emergency departments] can increase pressure, which is a particular problem for patients with 'behavioural disturbances.'"

A 2018 report found that 10 NSW hospitals had unacceptably long waiting times and uncleanliness. At western Sydney's Blacktown and Westmead hospitals only 41 percent of patients with urgent life-threatening conditions—such as heart-related pain—received treatment within 15 minutes.

Nathan, another John Hunter Hospital worker, told the WSWS: "People are dying all the time here because the system is all run for money. We can't take proper care of patients. The media and management are covering it all up, not letting the broader community know. If people knew what was going on they would be really angry." He added: "The unions aren't what they used to be. They've worked arm-in-arm with management. We haven't had a proper pay increase in decades. They do nothing. When was the last time we had a proper mass strike?"

Colin, a John Hunter Hospital wardsman and union delegate, said: "The hospital and grounds are huge and there are only two security staff in a car and two inside. Sometimes, in forensics when relatives come into see family members who are deceased and are upset, [they] will get hostile to our staff down there, and security is ten minutes away."

At Westmead, Sydney's largest hospital, two workers, who did not want to be named, said they knew staff at nearby Blacktown hospital had been attacked by people on drugs, but they could not afford to strike. One said: "We earn the smallest earnings in the hospital and they expect us to go on strike. We need the money.

"We pay out union dues and they expect us to go to union meetings and not get paid for it. If a meeting is not in our break, they expect us to bundy [clock] off and so we are paying them and losing money and getting nowhere." The second worker added: "The unions are hopeless."

Sam, a former HSU member, now a trainee doctor at Westmead Hospital, commented: "The patchwork system of health care is not holistic. It is not preventative; it is reactive. To change that would require huge amounts of change in the way we look at things and a lot more money. But we are not in a political climate that is going to allow that."

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