

Ambulance services buckling as COVID-19 surges in Australia

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With the Omicron variant fuelling a rapidly rising COVID wave across Australia, healthcare services are already being overwhelmed. One of the most critical indications is extensive ambulance response delays and understaffing.

In Sydney, Australia's most populous city, the *Sydney Morning Herald* reported that the average response time on December 22 was one hour for life-threatening emergencies (called P1 emergencies). P1 emergencies include heart attacks and patients rendered unconscious, and most must be seen within 10 minutes.

A senior operational manager at New South Wales (NSW) Ambulance, who spoke on the condition of anonymity, said there were significant "wait times in offloading ambulances" at public hospital emergency departments, causing up to four-hour response delays to triple zero calls.

"Paramedics are also catching COVID-19 and needing to take extended periods of time off work," the manager said. Only 20 ambulances were available across the network, which is about 11 percent of total operational capacity.

The ambulance network reached "status 2" mode at least twice that week, meaning there was likely more emergency triple zero responses than there were available crews. As well as endangering the lives of patients, such crisis modes increase the stress and fatigue levels among the over-stretched paramedics.

Since then, daily new COVID cases have more than quadrupled and are soaring exponentially, now above 21,000 in NSW.

Even before the Omicron disaster, NSW Ambulance statistics showed that from July to September less than half of ambulance responses to P1 cases (42.5 percent), including unconscious patients, having an acute heart attack or choking, arrived within 15 minutes. Roughly

40 percent of responses to priority 1A jobs—the most life-threatening category—failed to arrive within the 10-minute target.

Similar failures are occurring in other states. In South Australia, ambulances in metropolitan Adelaide entered a critical "status white" for almost five hours overnight on December 22, with 100 percent of available crews in use, leading to a backlog of cases and lengthy delays.

The Australian Broadcasting Corporation reports that final-year paramedic students are now acting as ambulance drivers before qualification because of the acute shortages of staff. In recent days, police officers have even served as de facto paramedics, ferrying patients to hospital.

Compounding the crisis, the South Australia Ambulance Service (SAAS) was forced to dispatch paramedics to an Adelaide nursing home, the Bene Italian Village, on Christmas Eve and Christmas Day to assist with resident care due to a shortage of nurses. At least 20 residents at the aged care facility had tested positive to COVID-19.

In October, during the Delta wave, the state of Victoria requested military personnel to drive ambulances as average response times ballooned to 50 minutes, an increase of 20 minutes from 2019. So severe was the emergency that Victoria Ambulance director Mick Stephenson said ambulances would be reserved for only the direst circumstances. "Unless they're really sick, they won't get an ambulance," he declared.

On November 7 a Code Red was almost declared in Melbourne, indicating that ambulances are unable to respond to any new patients. Since then, Victoria's daily COVID infections have more than doubled, rising above 5,000.

All the state governments, both Liberal-National and

Labor, constantly insist that the public health system is well-prepared to deal with the flood of cases coming in the weeks ahead. These reports, however, indicate that the system, long starved of resources and staff, is already unable to cope.

Ambulances are vital to timely patient care. A breakdown in service ensures that patients will arrive to hospital sicker and possibly die en route. These dangers are worsened by shortages of available hospital beds. Even if patients get to a hospital on time, they are often left inside ambulances for hours waiting to be admitted for treatment—a practice known as “ambulance ramping.”

A financial audit of the Queensland Ambulance Service revealed that paramedics spent a cumulative 112,000 hours in ambulance ramping this year, even though the state did not have significant COVID outbreaks until the Labor Party government re-opened its borders in mid-December.

This book compiles the most critical programmatic statements, polemics, scientific analyses, interviews, and news articles published by the World Socialist Web Site on the COVID-19 pandemic. It is a social and political chronology of this world historic event based on a Marxist and Trotskyist perspective.

In response, Premier Anastacia Palaszczuk announced only a vague promise to hire 535 new paramedics “in the next few years.” This is in a state with a population of over 5 million, now confronting thousands of daily new COVID cases.

Governments have responded to the breakdown in healthcare services with a mixture of lies and callousness. A SAAS spokesperson downplayed the unprecedented use of student drivers, stating: “Certainly, our crews have had a busy few days as more South Australians move about the state and celebrate the festive season.”

That comment also reflects the fact that the governments have urged people to ignore the dangers of the Omicron variant and socialise widely, in an attempt to bolster the profits of the retail, airline and hospitality industries.

COVID has sharpened the healthcare crisis, but it did not create it. Worsening working conditions and overtime, and increasingly severe delays in ambulance services were the norm before the pandemic.

Ambulance workers have become increasingly burnt-

out and disillusioned. In 2017, Steve McDowell, a former paramedic and founder of the emergency services support group No More Neglect, told the WWS: “It is clear to on-road paramedics and control centre staff that they are a ‘bum on a seat.’” That is, their welfare and fatigue were secondary to meeting NSW Ambulance’s key performance indicators.

Primary responsibility for this situation lies with the health trade unions. For decades they have collaborated with governments in overseeing the erosion of services.

In 2017, Health Services Union (HSU) secretary Gerard Hayes told a parliamentary inquiry that NSW Ambulance was “at least a thousand people short.” Hayes and the HSU, along with the Australian Paramedics Association (APA) then accepted without opposition the state government’s meagre promises to hire 700 paramedics over four years.

Ambulance workers are on the frontlines of an unfolding catastrophe. Healthcare services have been starved of staff and funds, while hundreds of billions of dollars have been transferred to the coffers of corporations and the super-wealthy during the pandemic.



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