

Australian health workers warn of hospital system collapse

Martin Scott
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The current COVID-19 outbreak is vastly exceeding levels previously seen in Australia—more new infections have been reported since Christmas Day than in the preceding two years. As a result, health systems are already at breaking point, prompting urgent warnings from doctors and nurses that unless immediate action is taken, the hospitals will collapse as the testing regime already has.

Australia-wide, more than 30 percent of COVID-19 tests reported today were positive, resulting in almost 65,000 new cases. More than 35,000 of these were in NSW, 17,636 were in Victoria and 6,781 in Queensland.

Across the country, 19 COVID-19 deaths were reported today, the highest number since late October, 2,964 people are hospitalised, 195 are in intensive care units (ICUs), and 56 require ventilation.

Already, three major Melbourne hospitals warned Monday that people should not present at their emergency departments “unless absolutely necessary,” because the facilities were already overwhelmed. Medical experts, however, are warning that the current tsunami of infections will result in an even greater surge of hospitalisations over the coming month.

Senior emergency doctor Stephen Parnis told the *Age*: “I’ve got real trepidations about what next week will look like.”

Almost 1,500 people are currently hospitalised with COVID-19 in New South Wales (NSW), and more than 2,500 health workers are furloughed due to infection or isolation, as of December 30.

With the NSW hospital system crippled by staff shortages, COVID-positive health care workers are reportedly being called back to work, despite the massive risk of infection posed to patients and other workers.

The *Guardian* yesterday stated it had been contacted by “multiple nurses” from public hospitals across NSW who said management had informed them that health workers who had tested positive could return to work.

Some of these nurses were reportedly ordered to treat patients who did not have COVID-19, even though the workers were displaying “obvious symptoms, including coughing and sneezing.”

While this is not officially condoned by NSW Health, the groundwork was laid by the decision on December 31 to allow

asymptomatic health workers who were close contacts of COVID-19 cases to leave isolation and attend work without a PCR test.

The crisis has led countless health workers to voice their opposition, on social media and in the corporate press, to the reckless actions of Australian governments allowing the pandemic to rage.

Twitter user @carly_solstice, a registered nurse (RN) from Sydney, urged readers: “Please don’t believe the premier when he says hospitals are coping.”

She continued: “Nurses are being forced to take a dangerous amount of patients because there is no staff. My advice to the public? Don’t get sick right now.

“Nurses are not angels. We’re humans trying to do a difficult and sometimes wonderful job. But we can’t do the impossible. We can’t care for more patients than is physically possible. The NSW government must come up with a plan to fix the staffing crisis. THIS IS NOT SUSTAINABLE!”

The reality is that, far from developing a plan to address the catastrophic situation, the NSW government, like its state, territory and federal counterparts, Liberal-National and Labor alike, has proceeded with the criminal “let it rip” reopening drive while tearing down what remains of the testing and contact tracing infrastructure.

Also on Twitter, @ABertwhistle wrote: “I’m in a rehab ward and we are working short-handed, too. We’ve resorted to calling in staff who worked last night to 7am this morning to come to work from 3pm this afternoon.”

@Jodavis167 tweeted: “I am an after hours manager and every time I ask someone to work another overtime [shift], I break a little bit more. Then having to listen to the government say we are coping is crushing. I am beyond furious.”

Sydney critical care RN @HRMHowler wrote: “Horror night shift. 1:11 ratio. Three RNs down and replaced with one AIN [assistant in nursing]. One death. No breaks on a 12 hour shift. No time for a bathroom break. At 3am, one of the patients made all of us a cup of tea and brought it to us on her walker.”

One anonymous Sydney COVID nurse told the ABC: “The staff shortages are just proving to be crippling, there’s never a shift that I’m coming onto which isn’t short staff[ed].”

Another Twitter user, @rpcounat, an emergency room doctor,

wrote: “Words from an ED nurse. 6am. COVID cardiac arrest. I’m broken. I haven’t had a mouthful of water for 18 hours. I can’t do this anymore. Now there’s not enough staff for day shift. We can’t cover the department.”

The doctor continued: “I am beyond angry at what is happening to critical care nursing staff. Furious. Livid. That government policy settings are crushing them, leaving them in tears, making them leave.”

The physician countered the claims made by Prime Minister Scott Morrison, backed by the Victorian Labor government, the NSW administration and the Murdoch press, that most COVID patients were being hospitalised for an unrelated condition.

She wrote: “the vast majority of patients we admit with COVID are being admitted FOR COVID. This disingenuous change in definition doesn’t stop the burden on COVID wards, nor the number of beds needed, staff needed, processes, policies, PPE. It’s a political definition.”

A Sydney medical specialist told the *World Socialist Web Site* this morning that 21 patients are currently being treated for COVID-19 in his hospital’s ICU. Of these, six were intubated and two require extracorporeal membrane oxygenation, one of them a pregnant young woman.

The doctor said: “That’s just the ICU. The emergency department is turning away people with ‘mild’ symptoms. Bear in mind they’re sick enough to present to hospital in the first place.”

Ambulance Victoria issued a “code red” in the Melbourne metropolitan region shortly after midnight this morning due to “extreme demand.” Ambulance services in NSW are also under extreme pressure. Paramedics reported yesterday that all three ambulance crews from Lithgow had been sent to Sydney, 150 kilometres away, leaving the regional centre uncovered.

Ambulance dispatcher Pat Duggan wrote on Facebook: “The gaslighting about the state of the health system needs to stop... the ‘we’re busy but coping’ is nonsense.”

Clearly in response to mounting unrest among health workers, the unions have in recent days issued mealy-mouthed denunciations of the crisis. NSW Nurses and Midwives Association General Secretary Brett Holmes acknowledged in the *Sydney Morning Herald* yesterday that “the relaxing of health regulations in mid-December has made what would have been a difficult situation worse.”

Holmes did not call for a reversal of these measures or the implementation of a lockdown to stem rampant community transmission. Instead, the union has called for cash incentives to force exhausted nurses to cancel their leave and return to work.

Last week, Holmes tacitly endorsed nurses who were close contacts returning to work, saying: “In the best possible world this change should not have been needed but we have a situation where COVID-19 is compromising our health staff such that the system cannot continue to operate.”

Health Services Union Secretary Gerard Hayes told the ABC

on Monday that NSW was “paying the price” for “under-investment” in health.

The reality is, the health unions have enforced stagnant wages, with decades of sell-out enterprise and industrial agreements. Over the same period, they have collaborated hand-in-glove with governments slashing funding to public health, while doing everything they can to suppress any opposition from workers.

With infections continuing to increase rapidly, even as many Australians are unable to get tested, the already disastrous situation in the nation’s hospitals will only get worse in the coming weeks, leading to hundreds, if not thousands, of additional deaths.

This crisis is entirely the product of the criminal reopening policies of every Australian government, in line with the demands of big business that all public health measures must be abandoned and lockdowns avoided, whatever the cost to human health and lives.

The opposition of healthcare workers can only go forward through a rebellion against the unions, which have functioned as the enforcers and apologists of this profit before lives program. Rank-and-file committees, independent of these corrupt organisations, must be formed by nurses and doctors at every hospital to share information, defeat government and health department attacks and to reach out to other sections of the working class.

This struggle must be guided by the fight for the elimination of the virus, including through the closure of non-essential workplaces, with full compensation for workers and small businesspeople. A central component of this fight is the demand for a massive expansion of the public healthcare system. This is incompatible with the dictatorship of the financial elite, and raises the need for a socialist perspective, which places health and lives above profit.

To take forward the international fight for elimination, the WSWS has called a Global Workers’ Inquest into the COVID-19 pandemic. Australian health workers who are prepared to contribute to this critical inquiry should contact the SEP today.



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