

Ambulance services at breaking point across Australia

Clare Bruderlin
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The impact of the ongoing COVID-19 pandemic in Australia, coupled with influenza and widespread understaffing, threatens to catastrophically overwhelm a health system already in crisis. New reports emerge every week of overflowing emergency departments and record ambulance delays in every state and territory.

Hundreds of deaths from COVID-19 are being recorded each week and hospitalisations continue to grow. The official death-toll is now over 9,000. This is entirely the result of the “let it rip” policy, enforced by state and federal governments, Labor and Liberal-National, which have sacrificed lives for corporate profits.

The New South Wales (NSW) Bureau of Health Information’s “Healthcare Quarterly,” released on Wednesday, provided a glimpse of the deteriorating conditions.

In NSW, ambulance response times are at their worst recorded levels in the period from January to March this year. Ambulances did not arrive to 63.3 percent of emergency priority cases within 15 minutes. More than 20 percent of those in this category, requiring the most urgent care, waited for over 30 minutes.

A shortage of beds means that ambulances are frequently forced to “ramp” with patients outside of hospitals for hours on end. At times, the entire ambulance fleet at country centres such as Gosford and Wyong will be stuck outside the regional hospitals waiting for beds in emergency departments.

There are also occasions when there are no available ambulances whatsoever in the large regional centres of greater Newcastle and Illawarra.

Before the pandemic, NSW Ambulance, the employing authority, would attend about one million calls a year. However, in 2021 there were 1.43 million Triple-0 calls. Before the pandemic there were an average of 3,300 calls a day. In April this year there were 116,000 calls. This is an average of 3,860 a day, an increase of 500 every day.

With no boost to resources, paramedics are being asked to fill the shortfall. The *Sydney Morning Herald* reported that NSW Ambulance has asked crews to work overtime and start day shifts early to “assist with backlog.” One manager admitted to the paper that paramedics are being asked to work up to 16 hour shifts to “mop up all the calls ambulances haven’t been able to get to overnight.”

NSW Ambulance also moved at the behest of the state Liberal-National government to provide a short-term fix, which would see a sifting process to avoid an ambulance response for non-emergency calls to Triple-0. This would divert some callers to general practitioners or pharmacists or advise them to make their own way to hospital rather than relying on an ambulance.

Medical experts have warned that this could result in numerous tragedies, with ill patients effectively denied an ambulance and hospital admission.

Earlier this month, the NSW government announced a measly \$1.76 billion over four years for “frontline emergency care.” It claimed that this would include the hiring of some 1,850 additional paramedics over four years and the construction of 30 new ambulance stations.

The Health Services Union ambulance division (ADHSU) which, along with the Australian Paramedics Association (APA), has repeatedly rejected calls from paramedics for united action, immediately welcomed the announcement. This was despite national president Gerard Hayes stating last month that there would need to be “at least 2,000 extra paramedics to be able to cope with rising demand.”

Workers have rightly asked, where will these paramedics come from? But even if the number of paramedics is increased, it will not alleviate the crisis.

Productivity Commission figures show that there are 48.6 ambulance officers, including students and qualified paramedics, per 100,000 people in NSW. This is compared to a still inadequate ratio of 61.7 per 100,000 in

Victoria, 71.3 in Queensland and 61.1 in South Australia, where ambulance services are also buckling under the strain of rising COVID-19 and influenza cases, as well as staff illness.

In Victoria there have been two Code Reds called this year when there were no ambulances available at all to respond to emergency calls. A recent budget estimates hearing heard at least twenty-one Victorians have died waiting for an ambulance in the past six months.

In Queensland, in events that are becoming typical, 170 patients were left waiting for ambulances ramped elsewhere on May 16. Figures for the month of March showed that almost 50 percent of Queensland patients who had arrived at hospital by ambulance, waited more than 30 minutes to be admitted.

Hospital emergency departments are so overcrowded that patients are reportedly being treated in corridors as ambulances are routinely ramped for hours outside, waiting to offload patients.

Only Western Australia had a ratio worse than NSW, with 34 paramedics per 100,000 people. In June, St John Ambulance WA said roughly 22 percent of the Perth metropolitan fleet was ramped at any given time. Figures for May showed paramedics spent 5,252 hours ramped outside hospitals, the highest-ever total recorded for that month.

There is a growing gulf between the anger and frustration of paramedics and other healthcare workers, and the limited and isolated actions promoted by the unions. On the Facebook page of the Australian Paramedics Association, which recently ended workers' five-day work bans without their demands being met, comments indicate that paramedics are being driven to the end of their tether.

One, forced into resignation wrote: "Got pulled into the office for a 'chat' for taking 'too much sick leave' even though I hadn't actually used all my sick leave. Dangerously fatigued? No one cares. Haven't eaten for 8 or 10 hours? No one cares... Thank god I got out when I did. I would've had a nervous breakdown or be dead by now."

Another, pointed towards the heart of the problem, writing: "Sorry but I have to disagree with 'the power is within our hands.' If it WAS in Paramedics' hands it would not be happening year after year & getting worse. If it WAS in Paramedics' hands we would know that we were supported by upper management and both unions when we say we're exhausted and need a break, not just supported but met with action..."

"If it WAS in Paramedics' hands it would not have gotten to the point of collapse. These issues are not new, they have not magically materialise[d] due to CoVid. They are historically endemic within a broken system, a pandemic in its own right with a history of misuse, mismanagement by government, & yes complacency by those that are supposed to support & fight for us..."

The new federal Labor government, which has been welcomed by the health unions, has declared that "sacrifices" are needed in order to repair a "dire" budget situation. In its submission to the Fair Work Commission, the Labor government opposed any "across the board" pay rise for workers in line with inflation, regardless of the sky-rocketing cost of living.

Workers have demonstrated their willingness to fight these attacks. In recent months health workers have gone on strike, as well as teachers and other public sector workers, often in defiance of orders by the industrial courts.

These actions by workers in the face of prohibitions from the industrial relations regime have urgently alarmed health union bureaucrats who work constantly to subordinate their members to the orders of the industrial courts and prevent challenges to its legitimacy.

The unions act as a police force for governments and big business, and have presided over historic cuts to real wages and working conditions, attacks on jobs and the privatisation of healthcare, over decades.

Health workers everywhere are confronted with deep-seated systemic problems bound up with the prioritising of profits over lives, the decades of funding cuts and the privatisation of healthcare under Labor and Liberal-National governments alike.

To conduct a real fight, there is an urgent need for new organisations of struggle. Rank-and-file committees, controlled by workers themselves and independent of the unions, must be built to unify the struggles of health workers and other sections of workers, throughout Australia and internationally. A new, socialist perspective is required, which priorities health, lives and the needs of society, above the profit interests of big business and the austerity drive of the governments that represent it.



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