

Australia: Nurses' union promotes New South Wales Labor election campaign

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Amid the mounting anger and opposition of health workers over deteriorating pay, chronic understaffing and unrelenting workloads, the New South Wales Nurses and Midwives' Association (NSWNMA) has stepped up its collaboration with the state Labor opposition and is seeking to transform the nurses' dispute into an adjunct of Labor's election campaign.

NSWNMA general secretary Shaye Candish and assistant general secretary Michael Whaites appeared beside Opposition leader Chris Minns at a press conference on September 21, to promote Labor's platform of "public health reform" ahead of the March 2023 state election.

The announcement follows four 24-hour statewide strikes by public sector members of the NSWNMA since the beginning of 2022. Nurses have demanded minimum shift-by-shift nurse-to-patient ratios of 1:3 in emergency departments and 1:4 in the wards, as well as a 7 percent pay increase.

Their action has been deliberately isolated and limited by the union, which has rejected the demands of rank-and-file workers for unified action with other health workers and employees across the public sector, who face the same sub-inflationary pay cap and impossible working conditions.

The NSWNMA's endorsement of Labor and Minns, who proudly declared in August that he had "clashed with the nurses' association over nurse-to-patient ratios" and who insists that pay rises must be tied to "productivity" gains, underscores the union's role as an enforcer of the cost-cutting demands of government and business. It is a warning of the sell-out being prepared by the NSWNMA in the nurses dispute.

Labor's proposal would do nothing to alleviate the crisis in public healthcare, which has reached the proportions of a complete breakdown. It would see 1,200 nurses and midwives recruited into the system over four years, a financial commitment of just \$175 million, in addition to the Liberal-National state government's existing pledge to hire some 10,148 full time equivalent staff.

At the time of Premier Dominic Perrottet's announcement,

the union stated, "We still have no detail on how many new nurses and midwives are within this announcement, where they will be allocated or when they will be recruited. There's no guarantee all positions will actually be recruited because the government intends to allocate funds to Local Health Districts to use at their own discretion."

None of these concerns were addressed in Labor's announcement. There is no indication of where the additional staff will come from or how they will be deployed. Even if the number were met, it would do nothing to resolve the state's longstanding health crisis, which has been exacerbated by the ongoing COVID-19 pandemic.

Labor's platform does not include legislated nurse-to-patient ratios, a key demand of nurses. Labor promised in previous campaigns, including in 2019, to mandate ratios if elected, but has since abandoned the policy. In May this year, Labor rejected a recommendation from a parliamentary inquiry for mandated nurse-to-patient ratios, on the basis that there were no "up-to-date costings." The Parliamentary Budget Office has estimated that it would cost \$1.3 billion over seven years.

Instead, Labor has proposed "minimum and enforceable Safe Staffing Levels" in Emergency Departments, ICUs, maternity wards, and multi-purpose services, which provide integrated health and aged care in rural areas. This excludes other areas of health services, including pediatrics, mental healthcare unions and outpatient clinics.

While NSW Labor has not indicated what their "minimum safe staffing" actually equates to, the NSWNMA has asserted that it will mean 1:3 in emergency departments, 1:4 in medical and surgical wards and 1:3 in maternity and postnatal, which doesn't include the care required for babies.

In multi-purpose services, which the NSWNMA has said are typically staffed with just two nurses at night, the minimum requirement would be increased to three, and only in facilities with a 24/7 emergency department.

This would be implemented by converting the existing Nursing Hours Per Patient Day staffing requirement into

minimum staffing levels within the Nurses and Midwives' Award. Liberal-National and Labor governments, in collaboration with the NSWNMA, have used successive industrial awards to enforce decades of cuts to jobs, wages and conditions, deepening the hospital staffing crisis.

Labor's limited proposal also did not include any response to the nurses' pay claim. The Liberal-National government is currently offering a 3 percent wage "increase"—well below the official inflation rate, which stands at 6.1 percent—on top of years of stagnant or declining real wages.

Despite the meagre and token character of Labor policies, NSWNMA's Candish hailed "a fantastic announcement," which would allow nurses to "bring more pressure down on the current government now."

The union's support for Labor's pitiful offer and its efforts to channel workers' opposition back behind further, futile appeals to the Liberal-National government and the campaign to elect Labor next year is a dead-end road for workers.

In other states where Labor is in office, including Victoria, Queensland and the Australian Capital Territory, ratios are legislated, but are never adhered to, because they have been accompanied by funding cuts. The chronic understaffing of hospitals has been exacerbated by the COVID-19 pandemic, which is the direct result of the homicidal "let it rip" policies adopted by all Australian governments and only deepened since Labor took office.

The experiences of workers in other states must stand as a warning to nurses in NSW, that no faith can be placed in Labor, or the unions that promote the party, to enforce safe working conditions.

Prior to the May election, the federal Labor opposition backed the Liberal-National government's federal budget, which slashed health spending by more than 10 percent in real terms. Since being elected in May, the Albanese Labor government has also rejected calls from the states and the Australian Medical Association to increase federal funding for public hospitals.

Labor, the Liberal-National Coalition and the entire capitalist establishment have demonstrated during the pandemic their willingness to sacrifice the health and lives of working people in the interests of corporate profit. Last week, the federal Labor government, along with state Labor and Liberal administration, announced the ending of COVID isolation requirements and pandemic leave payments for COVID-positive workers, setting the stage for a new surge.

Throughout the pandemic, the unions, including the health unions, have collaborated with big business and government to "reopen the economy," remove public health measures to stop the spread of the virus and force workers into unsafe workplaces, despite the danger to their health and lives from

COVID-19.

Nurses and midwives have overwhelmingly expressed their opposition to the NSWNMA's promotion of Labor. Hundreds of comments on the NSWNMA Facebook page condemned the announcement and called for further strike action.

One nurse wrote "Give us the ratios we need, not what a bean counter thinks we should have." Another wrote: "I remember last time Labor promised a better deal for nurses before they got into power – nothing really changed once they got in. I don't trust that they will follow through on their promise."

This reflects the growing determination of workers to fight, however, this struggle cannot be taken forward within the straitjacket of Labor and the unions.

The recent experiences of nurses at Lifehouse, a private cancer treatment centre in Sydney, is instructive. Rank-and-file nurses developed an open letter to the NSWNMA condemning the union leadership's tacit endorsement of a sell-out enterprise agreement and calling for a "no" vote against it.

The open letter and the "vote no" campaign were important first steps, which resulted in the agreement being overwhelmingly rejected. It demonstrates that, in order to advance their struggles, health workers must break free from the shackles of the unions and take matters into their own hands.

What is required is a complete break with the union bureaucracy and a fight to establish rank-and-file committees in every hospital and workplace, which can discuss and develop demands based on the actual needs of workers and unite and coordinate their struggles across the country and internationally.

Above all, the fight for safe, high quality health care, available to all, requires a fight against the capitalist profit system and for socialism, to bring healthcare under the democratic control of the working class based on social need, not private profit.



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