Australia: Health Services Union imposes sellout of ambulance workers

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15 December 2023

The New South Wales (NSW) Labor government and the Health Services Union (HSU) jointly announced on Wednesday a deal that will award paramedics in the state nominal pay increases of between 11 and 29 percent over four years.

The deal will do nothing to address the underlying crisis in the ambulance service and the public health system more broadly, as a result of decades of bipartisan government funding cuts.

The announcement came after two days of behind-closed-doors negotiations with HSU officials, aimed at neutralising the threat of paramedics refusing to renew their registration before the end of the year. The mass deregistration action would have left most of the state without ambulance cover from January 1.

Underscoring the determination of the unions to ram the deal through and shut down any possibility of industrial action, HSU members were given only a couple of hours to vote on the offer, after an online meeting that was limited to 1,000 participants, a fraction of the workforce. Some workers have reported on social media that they did not receive information on the vote before it closed.

The Australian Paramedics Association (APA) which also covers paramedics under this award, similarly forced a snap ballot, with members given less than 24 hours to vote.

Health Minister Ryan Park described the pay offer as "a once-in-a-generation change," while HSU NSW Secretary Gerard Hayes declared it was "historic." In reality, with inflation currently at 5.4 percent, and higher for basic essentials, the offer will barely keep pace with the rising cost of living over the term of the deal, let alone make up for years of real wage cuts.

Under the punitive NSW public sector wage cap, originally introduced under Labor in 2008, but fully rolled out by the Liberal-Nationals in 2011, annual pay increases were limited to 2.5 percent.

In 2020, COVID-19 was used as a pretext to further slash wage increases, with paramedics and other public sector workers receiving nominal pay rises of just 0.3 percent. This was especially grating for paramedics and other health workers, who were simultaneously confronted with increased workloads and the daily risk of infection with a deadly virus, as they tried desperately to keep afloat a health system that was already in crisis before the arrival of the pandemic.

In July 2021, with inflation already at 3.8 percent, paramedics were awarded a meagre 2.04 percent "increase"—a substantial pay cut in real terms. A year later, when inflation was at 6.1 percent, on its way to a peak in December of 7.8 percent, paramedics received just a 2.5 percent nominal pay increase.

As a result, even those paramedics receiving the largest nominal pay rises under the new deal will only see marginal increases in real terms. For example, Year 1 Paramedic Specialists will earn less than $16 per week more in real terms from the start of next year than at the end of 2018, despite a 4 percent rise backdated to July, and a 6.13 percent increase from January 1.

Also notable is the fact that the pay increases differ according to job classification. While some workers will receive a 29 percent rise over four years, others will get far less. Trainees, the lowest paid, will see wages increase just 11.4 percent over four years, a real wage cut, while Year 2 Paramedic rates will increase just 16.1 percent. The cumulative impact of this will be to substantially lower in real terms the base pay of new hires, effectively creating a lower entry-level tier.

The HSU employed a similar technique of turning workers against one other in the July deal it rammed through for NSW hospital workers, in close collaboration with Labor. Workers were immensely hostile to the government's initial offer of a 4 percent pay "increase" across the board. This prompted the union leadership to cook up an arrangement that would not cost the state an extra cent, but would be narrowly accepted by workers, because it provided slightly larger pay increases to the most poorly paid sections.

Wages also do not tell the full story. A recent report showed that 1 in 12 NSW Ambulance employees has made a

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workers' compensation claim for a psychological injury in the past two years.

Workers say this is the result of "guilt [over] patients dying" due to "an overburdened health system." According to Bureau of Health information figures, only 69.4 percent of ambulances arrive within 10 minutes for the highest-priority cases in urban areas.

This union-government deal will do nothing to address these issues or the broader crisis in the public health system.

In announcing the deal, the NSW government revealed that the pay rise would be partially funded through "savings from the Health portfolio including through savings associated with recruitment challenges."

In other words, it is only because the dire wages and conditions throughout the health system have created the conditions in which chronic staffing shortages cannot be resolved that the Labor government is willing to offer some paramedics a pay rise above the 4 percent *de facto* wage cap now in place.

The government is also sending a clear message that spending increases in one section of health or anywhere in the public sector will necessarily be accompanied by cuts elsewhere in the department, or demands for "productivity" increases.

Health Minister Park explained on Wednesday that paramedics will now be expected to carry a greater share of the burden of the state's ailing public health system. Rather than merely "taking people to hospital," he said, "under these changes, we're going to see more and more paramedics preventing people [from] going to hospital, because they'll be able to do some of that life-saving treatment in the home, in residential aged care, at the side of the road and either prevent a person from going to hospital or reduce the length of stay that that person is in hospital."

A highly trained, skilled and well-compensated paramedic service is obviously a vital component of the state health system. But it is not, as Park is suggesting, a substitute for functional, well-resourced and adequately staffed hospitals. The decision to carry out more complex medical procedures in the field should be based on the immediate needs of the patient, not the lack of available hospital beds.

The approach of robbing Peter to pay Paul is not only the policy of Labor governments in NSW and around the country, but the doctrine of the HSU itself. Earlier this year, the union published a report that boldly declared, "Neither NSW or Australia needs to spend more on health care."

Instead, the HSU insisted, echoing the sentiments of the most right-wing sections of the ruling class, the problem was "where the health dollar is being spent, where it's being wasted and where it's being rorted."

This was a promise to Labor that the HSU would lend its full support to further cuts in public health spending, as long as the union bureaucracy was part of the negotiation of how funds would be shuffled around. The paramedics deal, along with the July sellout of hospital workers, is part of this operation.

Workers should reject the premise that any gains, even nominal ones, for one section of workers must be paid for through a deeper attack on another. The unions facilitate this, by ensuring workers at different locations, or in different roles, are kept isolated, and prevented from taking unified action to advance their common interests.

A unified struggle must be built by workers throughout health, including paramedics, nurses and midwives, as well as other hospital and allied health workers. But this will require a rebellion against the union bureaucracy and the establishment of new organisations of struggle, rank-and-file committees democratically controlled by workers themselves.

This will provide the means through which health workers can not only fight for their own wages and conditions, but for a top quality, well-resourced public health system to serve the needs of the entire working class.

The question is not lack of resources, but who controls them. At the same time as governments insist there is no money for hospitals, schools and other public necessities, billions of dollars are made available in an instant for military expenditure to further the interests of US and Australian imperialism, including preparations for a disastrous war against China.

What is posed therefore is the need for an alternative to the capitalist profit system. Under socialism, the vast resources currently devoted to war, and those controlled by the major banks and corporations, would instead be used to make the highest standard of health care, along with education and other vital public services, provided by well-paid workers, freely available to everyone.

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