

West Australian union sells out public sector nurses and midwives

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Public sector nurses and midwives in Western Australia (WA) will see a further cut to real wages under a sellout enterprise agreement between the Australian Nursing Federation (ANF) and the state Labor government.

Under the deal, health workers will receive a nominal annual pay increase of just 3 percent, far below the current inflation rate of 5.4 percent. When the previous agreement expired in October 2022, inflation was at 7.3 percent.

In addition, workers will receive a “professional development allowance” ranging from \$700 per annum for level one registered nurses (RNs) to \$1400 for senior nurses and midwives. In an effort to promote the agreement, the ANF circulated a table that included this allowance in “wage increase” figures.

Even with this deliberately misleading arithmetic, the document shows that every single public sector nurse and midwife in the state will take home less real pay in both years of the agreement. Of the 22 pay classifications covered, the total nominal increase is less than 5 percent in all but the lowest, RN Level 1.1.

This wage-slashing deal has been imposed by the ANF bureaucracy in an entirely anti-democratic fashion. While the union claimed that 65 percent of members voted for the deal, in fact just 2,066 nurses and midwives—around 10 percent of the workforce—participated in the phoney exercise.

Furthermore, the ballot did not contain a “no” option, merely offering workers the choice between two regressive government offers. As a result, some nurses and midwives called for a total boycott of the vote, including at a non-union-sanctioned rally outside Royal Perth Hospital last Thursday, attended by around 40 workers.

There is no way to ascertain how many of the 18,000 public sector nurses and midwives who abstained from the ballot did so in a conscious act of protest, further exposing the ANF leadership’s claim of majority support as a fraud.

A Change.org petition entitled “Nurses and Midwives of WA reject the ANF and Government offers” started on December 16 has received 2,748 signatures. While this is not limited to health workers and therefore not directly comparable, this number is more than double the number of votes for the government offer accepted by the union.

Attempting to rescue the union’s credibility amid substantial worker opposition to the agreement, ANF Secretary Janet Reah has lightly criticised the deal in public. At the same time, she promoted the legitimacy of the tiny vote, claiming it was the largest ever turnout for an ANF EBA ballot.

On 6PR radio, Reah said on Friday, “We’re not happy, we’ve had to sort of cut our losses I suppose. We needed to get this EBA negotiation brought to a conclusion so that we can concentrate on the future, which is implementing the ratios.”

Reah’s position is entirely in line with that of the Labor government: If nurses and midwives want minimum staffing ratios to improve patient outcomes and reduce staff workload, they will have to pay for it themselves.

In fact, neither Labor nor the ANF has a worked-out plan for the introduction of ratios, although government health officials have previously proposed that they would be rolled out across the state’s hospital system over two or three years.

Nurse-to-patient ratios alone will not resolve the staffing crisis. In Victoria, Queensland and the Australian Capital Territory, ratios are legislated, but nurses confront the same shortages and excessive workload as in WA.

The imposition of further cuts to real wages in this deal will only exacerbate the overall shortage of nurses and midwives, meaning ratios can only be met through constant overtime or reducing bed numbers.

Reah said this deal was a “stepping stone” to the 2024 EBA, due to come into effect in October. She is promoting illusions that Labor will be more willing to grant concessions in the lead-up to the March 2025 state election.

Nurses and midwives should reject this dangerous lie, and draw lessons from the experiences of health workers in WA and more broadly over recent months and years.

Although almost 16 months have elapsed since the previous agreement expired, the union-government negotiations could not accurately be described as a “dispute.”

In November 2022, the ANF bureaucracy went behind workers’ backs, calling off planned industrial action and announcing a deal with the Labor government for the original 3 percent wage offer.

Nurses and midwives, who had voted for industrial action on the basis of a 10 percent wage rise demand responded angrily,

including by booing ANF leaders in union meetings. This forced the ANF to back out of its agreement with Labor and make a show of fighting for workers' interests, calling a 24-hour statewide strike on November 25.

The state Industrial Relations Commission (IRC) immediately sought to ban the strike, even threatening action against bus companies transporting workers to the rally, but the overwhelming anger of nurses and midwives compelled the ANF to proceed with the action.

Labor and the IRC threatened to deregister the union over the "illegal" strike, an attack on workers' basic democratic rights that, if carried through, would have been the first such action in Australia in more than three decades.

While this was ultimately dropped, the IRC levied a \$350,000 fine against the ANF for the strike, the largest ever such penalty in WA by a factor of more than 35, and far higher than similar fines issued—under the notoriously anti-union Perrottet Coalition government—against nurse and teacher unions in New South Wales for larger strikes in 2022.

The ANF bureaucracy responded to these attacks by giving the Labor government everything it wanted. Reah immediately declared there would be no further industrial action and has used the threat of deregistration to ensure that this has been the case.

Nurses and midwives should be warned: Nothing has changed. Labor and the IRC, with the full cooperation of the ANF bureaucracy, will employ the same tactics to prevent industrial action over the 2024 EBA.

The ANF claim that Labor will be more generous ahead of an election is completely out of line with the party's record over previous years.

The 2020 Labor-ANF EBA, finalised just two months after the 2021 state election, contained a pitiful \$1,000 per annum flat-rate wage increase, amounting to between 0.6 percent and 1.5 percent depending on seniority. The \$1,000 cap had been introduced in the previous 2018 agreement, the first struck with Labor after nine years of Liberal leadership.

This is also the attitude of Labor governments throughout the country. In New South Wales (NSW), repeated statewide strikes by nurses and midwives throughout 2022 were dissolved by the Nurses and Midwives Association (NSWNMA) into a campaign to elect a Labor government in March 2023.

Workers were told that Labor would end the punitive public sector wage cap and introduce ratios. In fact, after the election the NSWNMA quickly pushed through a 4 percent deal, well below inflation, with only vague commitments on staffing levels.

This is part of a broader assault by Labor on every aspect of social conditions for the working class, as already inadequate funding for health, education, and other vital public services is redirected into preparations for US-led military conflict on a global scale.

These episodes make clear that there is no way forward for

nurses and midwives within the framework of the existing trade unions, which are closely tied to the pro-business Labor Party, and which support and enforce the draconian anti-strike laws administered by the industrial courts.

This means nurses and midwives need to build new organisations of struggle, rank-and-file committees, in every hospital and health facility. Under the democratic leadership of workers themselves, and politically independent of the existing unions and Labor, nurses and midwives can prepare a plan of action based on their needs and those of their patients.

Through such committees, health workers can break down the isolation imposed by the unions which divide workers according to their role and prevent a unified struggle involving not just RNs and midwives, but enrolled nurses, paramedics, doctors and all the many other health workers whose daily collaboration is vital to the functioning of the hospital system.

This is not just a fight for wages and conditions, but for the defence of the public health system itself. Vast government investment is required to reverse decades of privatisation and cuts, spearheaded by pro-business Labor governments with the full collaboration of the unions. In addition to large wage increases to make up for past losses, a mass training and recruitment program is required in order to resolve chronic understaffing throughout the health system.

Despite the silence of all of the health unions on the ongoing COVID pandemic—currently at the worst levels in 12 months in parts of Australia—the struggle for improved working conditions in hospitals is inseparable from the fight to eliminate the deadly virus on a global scale.

These demands are impossible without a fight to establish workers' governments to implement socialist policies. This includes placing hospitals and other critical public infrastructure, along with the major corporations and banks, under democratic workers' control and ownership, to allow the reorganisation of society's resources to provide free, high-quality health care for all, with decent wages and conditions for health workers.



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