

Australia: Paramedics threaten industrial action over Victorian Labor government wage cuts

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Paramedics in Victoria are currently voting on whether to take industrial action as part of an enterprise bargaining dispute with the state Labor government. The ballot comes after workers overwhelmingly rejected a nominal wage increase of 3 percent per annum, plus yearly lump sum payments of \$1,800.

As well as opposing what amounts to a massive wage cut in relation to the soaring cost of living, paramedics are seeking improvements to the dire conditions they confront as a result of the broader crisis across public health.

Workers want improved end-of-shift management to allow them to finish on time. Currently they are frequently forced to go into overtime at the end of a long shift in order to respond to an emergency call. Paramedics are also seeking increased staffing resources to allow workers to take meal breaks and improve crew welfare.

Ambulance Victoria has rejected these demands, and is trying to cut sick leave, overtime and travel allowance entitlements.

Paramedics are also raising concerns over severe short-staffing in rural areas, leaving sick people unattended for hours at a time. The government's new operating model for specialist mobile intensive care ambulance (MICA) paramedics could leave many regional areas without any MICA coverage at all.

Despite the bluster of "hard industrial action" from Victorian Ambulance Union (VAU) secretary Danny Hill, the actions proposed are minimal to say the least. The 26 ballot options consist largely of administrative bans, work-to-rule actions, and public relations exercises, with stoppages of ten minutes or one hour the most substantial possibilities.

These limited actions are designed to cause as little disruption as possible to Ambulance Victoria and the Labor government, while wearing workers down in preparation for a sell-out.

The ballot does not close until March 12, meaning the earliest workers could begin action is halfway through next

month, although their existing enterprise agreement expired in January.

The delay is particularly significant in light of ongoing industrial action by Victorian emergency services call centre workers. The VAU, which covers some of these workers, along with the Communication Workers Union, United Firefighters Union and United Workers Union, are trying to keep the struggles of different sections of emergency services workers isolated.

But all of these workers confront the same opponent—the Labor government and its punitive public sector wage policy. Under the cap, any pay "increase" over 3 percent per annum must be paid for through "productivity improvements," that is, cuts to working conditions or jobs. Labor governments throughout the country and at the federal level all have similar policies in place.

Last month, after paramedics rejected the government's offer, Victorian Treasurer and Industrial Relations Minister Tim Pallas reaffirmed Labor's commitment to the wage cap. He declared: "If I make a special exception for ambulance workers then we have to do exactly the same for everybody else, otherwise, quite frankly, it wouldn't be fair."

The union has called for a nominal pay increase of 6 percent per annum or the consumer price index (CPI). Even if granted, this would fall far short of what is needed to keep up with the real increase in the cost of living for working people, let alone make up for past losses.

But the more likely scenario is what has been carried out time and time again by the unions: An initial wage figure, based on the demands of workers, is quietly rebranded as an "ambit" claim and a far lower "compromise"—i.e., sellout—is promoted as a "victory" and forced through.

In "exchange" for its meagre demand, the VAU bureaucracy has proposed a set of "productivity and efficiency" measures to cut costs for management. These include reducing the length of night shifts, so that part-time workers can be rostered at that time, saving management the

cost of overtime. The union has also suggested that Ambulance Community Officers (ACO), who have far less training than paramedics, could be allowed to work full shifts in patient transport.

These compromise proposals and the pitiful wage claim underscore the fact that the VAU leadership is totally on board with Labor's austerity agenda. The union is committed to delivering what the government demands—further cuts to wages and social spending in order to impose the burden of its \$135.5 billion and growing debt on the shoulders of the working class.

The overtime and staffing crisis at Ambulance Victoria is a product of cuts imposed across the entire public health system over decades by successive state and federal governments and enforced by the unions.

According to a Productivity Commission report released on January 31, Victoria's annual expenditure on public hospital services—\$3,330 per person compared to the national average of \$3,484—has been the second lowest (ahead of South Australia) in the country since 2019–20.

With just 2.3 public hospital beds per 1,000 people, Victoria shares bottom place with Western Australia, behind the already grossly inadequate national average of 2.5. In 1992, Victoria had 3.5 hospital beds per 1,000 people. While it was the Liberal government of Jeff Kennett that initially slashed this to 2.5, the cuts have been continued and deepened under Labor, which has been in power for more than 20 of the past 25 years.

The result is that emergency departments are overflowing with patients who cannot be transferred to wards, forcing paramedics to spend hours caring for patients in hospital driveways and car parks rather than responding to emergency calls.

The Australian Medical Association's (AMA) 2023 Ambulance Ramping Report Card revealed increased delays in patient transfer from ambulances to emergency departments in every jurisdiction except Tasmania and the Australian Capital Territory. In Victoria, just 61.3 percent of patients were transferred within 40 minutes in 2021–22, 11.4 percentage points lower than the previous year and 20.5 points down on 2018–2019.

The rapidly worsening conditions for ambulance workers are causing high levels of stress and burnout. A 2022 Swinburne University survey found that 45 percent of Victorian paramedics often think about quitting (up from 29 percent in 2020) and 16 percent intended to leave the profession within a year (up from 9 percent in 2020).

While sharply expressed in Victoria, paramedics and other health workers across the country confront the same dire situation—a public hospital system in a constant state of crisis as a result of decades of government cuts.

This underscores the need for a unified struggle of health workers, across Victoria and throughout the country, directed against Labor's austerity agenda. This is impossible under the dominance of the VAU bureaucracy or that of the other unions, which are all complicit in the evisceration of public health, and which have the closest of ties with the Labor government.

To take forward their fight for real improvements to wages and conditions, paramedics will need new organisations of struggle, rank-and-file committees, independent of the union apparatus and democratically controlled by workers themselves. These committees will need to reach out to broader layers of workers, throughout health and emergency services in Victoria, across the country and around the world, who all confront similar attacks.

The crisis in public health has been, and continues to be, massively exacerbated by the COVID-19 pandemic and the pro-business abandonment by (primarily Labor) governments of almost all public health measures against the virus, including in hospitals. Again, this has been enforced at every stage by the unions, including in health, which are now silent on the ongoing pandemic, in line with the official government line that COVID is a thing of the past.

The entirely preventable social murder of at least 25,000 people from COVID in Australia alone is a stark illustration of the fact that capitalism is incapable of satisfying even the most basic needs of the working class.

Therefore, the fight for a high-quality public health system, with adequate resources and decent pay and conditions for workers, is inseparable from the struggle for socialism, and an end to the subordination of all human needs, including life itself, to the profit demands of the financial and corporate elite.



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