

Australia: Melbourne man dies, four hours after emergency call for ambulance

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A 69-year-old man from Surrey Hills in Melbourne's eastern suburbs died early last Sunday, four hours after his neighbour, having heard distressed appeals at 2 a.m., made a triple zero emergency call for an ambulance.

The neighbour, who was unable to gain access to the 69-year-old's locked home, was told an ambulance crew would be there within 40 to 60 minutes. The crew, however, did not arrive and get into the property until 6.30 a.m. where they found the man dead.

The tragedy, one of the growing number of entirely preventable deaths, is a direct result of decades of government underfunding of ambulance services, public hospitals and other essential health facilities.

Such was the catastrophic state of Victoria's ambulance services last weekend that only 90 crews were available, instead of the usual 120 in the metropolitan area, last Saturday night-Sunday morning.

Thirty crews could not be manned because large numbers of paramedics were on sick leave, a situation that would have been even worse if two dozen other crews had not agreed to work on their day off.

The "dropped" ambulance crews involved 26 metropolitan and 5 Mobile Intensive Care Ambulance (MICA) units as well as 20 regional crews, including one regional MICA.

At one stage last Saturday night, the closest available ambulance capable of responding to a triple zero call in Melbourne's busy central business district was in Cranbourne, about 50 kilometres away. Multiple calls by crews requesting intensive care back-up for critically unwell patients were told none were available.

The response of Ambulance Victoria (AV) to the latest death was an anodyne message expressing its "deepest sympathy" to the dead man's family along with a declaration that the case was "being reviewed to better understand the circumstances." The state Labor government's health minister made no official comment on the tragedy.

The circumstances that led to last Sunday's tragedy are patently clear. Under-funding of vital health services by state

and federal governments, Labor and Liberal-National alike, imposed by the health unions, is placing impossible pressure on the entire sector and all levels of its workforce. Paramedics and other health workers face exhaustion, burnout and illness as they desperately attempt to deal with the worsening problems in public health.

A key indicator of this crisis is "ramping," which involves paramedics staying with patients outside the hospital until emergency medics have the time and/or resources to assess and induct them. This can hold up paramedics for hours, causing critical delays in the availability of their services.

On August 28, paramedics ramped with a patient at Maroondah Hospital, in metropolitan Melbourne. The patient had heart arrhythmia but there were no available beds. The patient's condition deteriorated, forcing the paramedics to call in a MICA team to assist and stabilise the patient because medics were still unavailable at the hospital.

In the rural town of Sale, Bernard Goss, a paramedic with over 45 years' experience, recently told the media that it was not unusual for ambulances to be ramped for eight or more hours during a shift.

According to the Victorian Ambulance Union (VAU), paramedics in the state are collectively doing an average of 800 hours of forced incidental overtime every single day.

Commenting on Reddit about conditions, one worker said, "At this stage it is common for paramedics to do at least an hour of overtime every shift, often even more. I've had 14hr nightshifts turn into 18hr shifts due to forced OT [overtime]."

In late June, paramedic Jim Avard fell asleep at the wheel of his ambulance and rolled it into an embankment at the end of an 18.5-hour shift. VicRoads, the state's road transport authority, has stated that if a driver is awake for 17 hours or more it is the equivalent of being over the 0.5 blood-alcohol limit.

Ambulance Victoria (AV) initially responded by falsely claiming that the driver had not been rostered on to such a long shift. Angry ambulance union members responded with

an overwhelming endorsement of a no-confidence motion in AV chief executive Jane Miller, who then resigned, after just 18 months in the job.

Under-resourcing of ambulance services, ramping, and the overworking of paramedics are nationwide issues.

On July 5, in the northern state of Queensland, Ben Carse, a 43-year-old father, died of a cardiac arrest at Brisbane's Princess Alexandra Hospital, having waited almost four hours in an ambulance outside the emergency department the night before.

In South Australia, the state Labor government is imposing the same brutal conditions. On August 15, 56 ambulances were ramped outside five public hospitals on one day, leading to 23 emergency cases in the community not being followed up.

Ramping is a product of the broader rundown of health services. Factors include an insufficient number of staffed hospital beds in hospitals across the country, the increasingly complex health problems of an aging population and the consequences of the mass infection COVID policies pursued by every government.

In addition, access to general practitioners has been restricted, with cuts to federal Medicare copayments forcing many GPs to charge fees. Increasingly, if they need medical treatment, the poor are compelled to go to hospital emergency rooms, placing increased pressure on an already overwhelmed system.

Record numbers of critically ill and injured patients required ambulances in Sydney, Australia's most populous city, and across New South Wales (NSW) between April and July this year. According to the Bureau of Health Information, almost 18,461 immediately life-threatening medical emergencies were recorded in that three-month period, the highest since 2010, and 36 percent higher than the same quarter last year.

The Victorian Ambulance Union (VAU) is currently in negotiations with the state Labor government for a new enterprise agreement. The union leadership has called for three annual 6 percent pay rises for all classifications starting this year, improvements in overtime and other penalty rates and minimum staffing levels. The VAU's pay demand, even if granted, would not make up for cuts in real wages that paramedics have suffered in previous agreements.

The state Labor government, however, is refusing to budge from its "wages policy," which mandates that any pay increase over 3 percent per annum be paid for through "productivity improvements," that is, ever-greater attacks on jobs and working conditions.

The VAU has denounced the state Labor government over the worsening conditions confronting paramedics but, as in the past and like its counterpart in other health unions,

worked to prevent any independent action by paramedics. Above all it opposes unified action with other health workers to fight the ongoing state government assault on public health. The union's so-called campaign consists of asking paramedics to write slogans on the outside of their ambulances and impose limited bans, work-to-rule actions, and minimal and entirely ineffective stoppages of between ten minutes and an hour.

In order to win decent wages, establish safe manning levels and put an end to the brutal and dangerous working conditions, paramedics need to take their struggle out of the hands of the VAU bureaucracy and organise unified action with nurses and other health sectors workers.

The task facing paramedics is the establishment of rank-and-file committees to develop a genuine struggle, based on their needs, not what governments and union bureaucrats say is affordable or possible. Such committees are the only means of developing a democratic discussion among workers, and planning concrete industrial and political action. They are a vehicle for breaking the isolation enforced by the unions, and uniting with other health workers who face the same issues.

The crisis of the entire healthcare system is a sharp expression of the bankruptcy of capitalism, which subordinates everything to the profit dictates of the ultra-wealthy. The alternative is the struggle for socialism, which prioritises the health, lives and social needs of the population.

We urge paramedics looking for a way forward to contact the Health Workers Rank-and-File Committee which will offer every assistance to establish your committee and develop a discussion on these critical issues.

Email: sephw.aus@gmail.com

Twitter: [@HealthRandF_Aus](https://twitter.com/HealthRandF_Aus)

Facebook: facebook.com/groups/hwrfcaus



To contact the WSWS and the
Socialist Equality Party visit:

wsws.org/contact