

Australia: Striking nurses and midwives speak on dire wages and conditions in Ramsay hospitals

Our reporters
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World Socialist Web Site reporters spoke with striking Ramsay nurses and midwives at the Sydney rally on Tuesday about their wages, heavy workloads and worsening conditions. Read a full report of the strike here.

Stephanie has worked for 14 years in maternity at Ramsay Westmead. Reporters raised the Socialist Equality Party's call for the formation of health workers' rank-and-file committees, united across states and between private and public nurses. "That's a fantastic idea," she said. "We are in very close proximity to our public hospital, which is sort of a brother hospital, and a lot of staff do work between the two hospitals."

Referring to her increasingly difficult working conditions she said, "The hospital has just increased the numbers of patients to levels that are not workable. They are also recruiting more Visiting Medical Officers (VMOs), which bring with them their own workloads and patients, which we must care for, but we don't have capacity to do that.

"The enterprise bargaining agreement, the issue of a pay rise and safe working conditions has been going on for months and months. But Ramsay don't want to give us the pay rise. They are claiming they can't afford it, but they have made something like \$900 million in profit.

"A key issue is workload. We're just completely burnt out. I worked night shift and have not had a break. I just got on a bus and came here because I feel strongly about it."

Stephanie said it was "virtually impossible" to make ends meet on nurse's wages.

"We just all tend to rely on doing overtime on top of

our full-time rosters. Some of us do agency work at other hospitals as well, on our days off. It gives us very little rest. Girls are finding it hard to pay their mortgages. My kids are older, but I feel for those people that have got young families trying to sort of survive today."

Alex, who works in a surgical ward, said, "One thing that we face is poor nurse-to-patient ratios. We don't have explicit ratios in the private system in Ramsay Hospitals. Routinely it will be two nurses to twelve patients, that's quite a good day.

"Sometimes you'll have several post-op patients and new admissions, so you can have 15 to 18 patients with two nurses, churning through the day. On a night shift it is not unusual to have one nurse to nine patients. Some of those patients will be confused and require quite close supervision, such as hourly observations. It's very hard and you worry about your patients' safety.

"You miss opportunities to provide emotional support to patients. With the high workload, you triage what you're doing, give acute care first and emotional support is a low order priority. There is this idea of a moral injury. For a nurse, when something doesn't go right you think 'What did I miss? What could I have done differently?' There are mini traumas people suffer at work.

"Living in Sydney on a nurse's wage is extremely difficult, especially for young nurses, even to rent. How do they expect to attract and retain nurses with the wages that nurses are on? I think it's a chronically undervalued profession."

The deterioration of hospitals was a "war of attrition," Alex continued. "We all fronted up and put

ourselves at personal risk and our families through the pandemic and yet now we are worse off on a real daily basis. There have been both Coalition and Labor governments in that time.

“I think there are salient lessons from the US elections. Look what happened to the Democrats. A working-class base is no longer assured for them. The Labor Party here probably needs to think about that. It is a big problem for them.” she said.

Kristy, from North Shore hospital in Sydney, has worked as a nurse for over two decades, including ten years in Sydney. “It would be nice if we were all taking industrial action together instead of being separated,” she said.

“I can’t remember the last time we got a proper pay rise, but we are all in the same industry and facing the same difficulties. Our conditions are long hours, with no breaks, and low pay. It’s a long time since I’ve been in the public hospitals, but I’m assuming that they face these same conditions. It’s a general situation with staff ratios. They’re really bad everywhere.

“Staff numbers are horrible. How can you work with one registered nurse looking after nine patients in the emergency ward? We are not superhuman. With such low staffing numbers—and especially related to those who need major surgery—we are risking the lives of people.

“The problem we face in the private sector is that we don’t get enough time to train people. If there are two junior staff and something goes wrong with a case—if you hit a major blood vessel for example—they don’t have the expertise to deal with this. To train people takes time but in our industry, because it is run for profit, that costs money, which management doesn’t want to spend. Medicine should be organised in a way that’s fair for everybody.”



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