

Australia: Union cancels strike by pathology workers at Australian Clinical Labs

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A strike by more than 200 pathology workers at Australian Clinical Laboratories (ACL), planned for today, was abruptly called off by the Health Workers Union (HWU) late last week, less than 48 hours after it was called. Last month, workers voted near-unanimously in favour of industrial action including strikes, but the union bureaucracy has not allowed a single action to proceed in the three weeks following the ballot.

ACL workers in January decisively rejected a real-wage slashing proposed enterprise agreement from the company that would have seen many workers receive annual pay “increases” of just 0.24 percent.

The company’s miserly and insulting offer is far below the official inflation rate of 2.4 percent, itself a major understatement of the real rise in the cost of living. Moreover, it follows on from a three-year union-management deal struck in 2021, containing annual pay rises of just 2.24 percent, while inflation climbed to 7.8 percent.

Workers are deeply frustrated over ongoing staffing shortages, safety concerns and worsening working conditions, as well as the continued assault on their take-home pay. But their efforts to fight the company attacks are being thwarted by the HWU bureaucracy, which is keeping workers in the dark and on the sidelines, while continuing to negotiate behind closed doors with management.

The union leadership has not even told workers what demands for pay and conditions it is supposedly advancing in these backroom discussions!

A text message last Tuesday, advising of a “strike next Monday” and unspecified “actions continuing indefinitely,” was the first workers had heard from the union leadership since the vote. No further information, such as the time and duration of the strike, or what these indefinite actions would consist of, was provided, just that “A pack with more details is on its way.”

What was expressed in no uncertain terms, however, was the admonition, “Do not act until advised by the Union.”

The vacuum created by the HWU’s silence and obfuscation has allowed management to step up its threats and intimidation. After workers rejected ACL’s initial offer, CEO Darren McKee responded with a letter warning that an improved wage offer would be paid for by staff through job cuts, reduced working

hours and the closure of collection centres.

Tuesday’s strike notification was followed within 24 hours by another letter from McKee, which, in stark contrast with the union’s vague text message, was an unequivocal attempt to scare workers into abandoning the strike.

McKee’s March 12 letter twice reminded workers that only HWU members (205 of around 700 ACL staff) were allowed to take part in industrial action, threatening “an investigation and disciplinary process” and possible sacking for non-members who stopped work or imposed work bans. It also emphasised that striking workers would not be paid and that “no one should feel pressured to take industrial action.”

McKee also noted that “ACL reserves the right to ‘lock out’ any employees who partake in industrial action … without pay.” This was a direct threat to indefinitely suspend the employment of any worker taking part in stoppages or work bans, however limited.

The letter stated that ACL had “sought the intervention of the Fair Work Commission [FWC],” Australia’s pro-business industrial tribunal, to ban the strike, under the pretext of “patient safety.”

The following day, ACL workers were advised by management that the HWU had “formally withdrawn their notice to take Industrial Action, and it will no longer be proceeding as planned.” In other words, ahead of so much as a hearing, let alone a decision, by the FWC, the HWU bureaucracy immediately agreed to the company’s demand that the strike be shut down.

This was tacitly confirmed by the union leadership, in a text message stating that the “HWU are pursuing legal avenues,” and that an online meeting would be held on March 19. While not a single mass meeting has been called by the union to discuss workers’ demands or how to fight for them, a meeting has now been rapidly convened at which the bureaucracy will likely tell workers that an industrial struggle is impossible and that their fate will be determined by the courts.

The other motivating factor behind Wednesday’s meeting is indicated by the union’s repeated warnings to workers not to act without the bureaucracy’s explicit say-so—mirrored in McKee’s emphasis that industrial action by non-members is illegal. With workers increasingly frustrated by both the

company's animosity and the union's suppression, there is clearly concern, among management and the bureaucracy, that the HWU leadership will not be able to maintain control of the workforce.

ACL workers need to make this concern a reality and take matters into their own hands. The HWU's liquidation of today's strike, after weeks of silence, and following on from previous sell-out deals with management, confirms that there is no way forward for workers within the constraints of the union.

Rank-and-file committees, independent of the union bureaucracy, must be built in every ACL workplace. They must be open to all ACL workers, including pathology collectors, specimen reception workers, administrative staff, couriers, store persons, maintenance workers, cleaners and others.

Through these committees, workers can democratically discuss, prepare and put into action a struggle for demands based on their actual needs, not what management or the union says is affordable or possible. These must include, at a minimum, an immediate 30 percent pay rise to recoup past losses; safe conditions for workers and patients; and an end to job cuts and understaffing.

In the first instance, rank-and-file committees must insist that a serious campaign of strikes and industrial action, as voted for by workers, proceeds. This will not only bring workers into conflict with the company and the union, but the FWC and the draconian anti-strike legislation it enforces.

ACL's claim that industrial action by pathology workers poses a threat to "patient safety" is a hypocritical fraud. Amid the ongoing COVID-19 pandemic—from which the company, a major provider of PCR testing, has derived the majority of its \$238 million in profit over the past three years—ACL has lifted all safety precautions to mitigate the spread of the virus in its collection centres. Staff and patients are no longer required to wear masks and limits on the number of patients in waiting areas have been abandoned. Neither the company nor the union has ever published any numbers on the COVID-19 infection rate among staff, although numerous workers are known to have been infected, including some who contracted Long COVID.

Despite the high-risk nature of pathology collection centres, ACL has allocated just one hour of cleaning per week in most locations—a completely inadequate measure for maintaining a safe and sanitary environment. Given the volume of patients, many of whom are immunocompromised, undergoing cancer treatment, or seeking respiratory testing, including for COVID-19, proper and frequent cleaning is essential to prevent the spread of infections. Instead, workers are left to handle biohazardous materials in unsanitary conditions, further increasing their workload and exposure risks.

Chronic understaffing at ACL has placed enormous strain on workers, forcing them to handle unsustainable workloads with little support or relief. With too few staff to meet patient demand, workers are often expected to perform multiple roles

at once, leading to exhaustion, burnout, and an increased risk of errors. Far from addressing these concerns, the company is seeking to impose further cost-cutting measures.

The problems at ACL are not isolated—they reflect a broader crisis in the healthcare system. Understaffing, low wages and cost-cutting measures are affecting nurses, paramedics, aged care workers and other health professionals across the country. Following on from decades of government cuts, enforced by the health unions, the current state and federal governments, primarily Labor, are further slashing public health, including by handing off critical functions like pathology to ACL and other private corporations for profit.

The fight for improved wages and conditions at ACL and throughout the health system is inseparable from the struggle against the decimation and privatisation of healthcare, and for a high-quality public health system, accessible to all. This means ACL workers must appeal to broad layers of other health workers, who all confront similar attacks, to mount a unified struggle for decent wages, safe conditions, and proper funding for healthcare.

A future where healthcare serves the public, not corporate profits, requires a fight for a socialist perspective. Hospitals and other vital public infrastructure, along with the major corporations and banks, must be placed under democratic workers' control and ownership, so that society's resources can be used to meet the needs of the entire working class, not the financial and corporate elite.

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