

South Australian nurses to vote on sellout union-Labor government agreement

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Nurses and midwives across South Australia will vote next week on a proposed enterprise agreement from the state Labor government that would impose further real pay cuts and do nothing to address the dire conditions confronting public health staff.

Amid significant opposition from health workers, the Australian Nursing and Midwifery Federation (ANMF) has unequivocally endorsed the rotten proposed agreement and is heavily promoting a “yes” vote.

In a fear-mongering campaign that completely writes off the possibility of further industrial action, the union leadership is telling workers that a “no” vote will only lead to the dispute being decided through arbitration in the pro-business South Australian Employment Tribunal (SAET), threatening that this process could take years.

The latest offer came after separate 24-hour stoppages at Lyell McEwin Hospital and Flinders Medical Centre, which the ANMF bureaucracy was finally compelled to hold after months of cancelled strikes, industrial action pauses and backroom union-government negotiations.

The ANMF-backed proposed agreement announced on June 25 offers a 16 percent cumulative nominal pay rise, effectively over four years, as the previous agreement expired in July 2025: 3 percent from January 2027, another 3 percent from July 2027 and 4 percent from July 2028, on top of the already awarded 4 percent, backdated to January 2026, and 2 percent coming in October.

This would fall far short of keeping up with the soaring cost of living, let alone restoring losses imposed in previous union-government agreements. Since 2022, while nurses’ pay has increased by just 9.27 percent, average advertised house rents in Adelaide have risen by 88.5 percent and unit rents by 45.3 percent. It also falls far short of the demand advanced by the ANMF earlier in this dispute for a 23 percent pay rise over just three years.

In terms of conditions, the offering is even more meagre—higher on-call allowances, a new lead apron allowance and a regional service incentive for nurses who remain in rural and regional areas over specified

periods—and will do nothing to overturn decades of chronic underfunding and degradation of public health.

Far more significant is what has been dropped. The union’s central staffing demand—that all babies in postnatal wards be counted as patients for the purposes of nurse-to-patient ratios (“Count the Babies”)—has not been secured. Instead, the government has only committed to a further “review” of this issue. Broader safe staffing claims, reclassification demands, proposals for expanded leave entitlements and increased night-shift penalties have also been abandoned by the ANMF bureaucracy.

Rank-and-file nurses and their supporters have responded with anger on social media.

One nurse declared her intention to vote “NO.NO.NO” and stated she had “NO CONFIDENCE in the ANMFSA.” Others have condemned the offer as “insulting,” pointing to higher wages in other states and the abandonment of the “Count the Babies” demand.

Nurses have also criticised the gap between the comfortable pay and conditions of the union leadership and the real wage cuts being imposed on rank-and-file members.

One nurse’s husband noted that his wife had been assured that if a “fair deal” were not reached the union would escalate industrial action, only for the ANMF to now promote a substandard agreement.

The reality is that the ANMF bureaucracy has been working to undermine and sell out the struggle by nurses and midwives from the outset.

In February 2026, the union first postponed and then called off a planned 24-hour strike at Lyell McEwin Hospital, after the government offered what was described as an “interim” 6 percent administrative rise, which the ANMF accepted without consultation with workers. This handed the state Labor government a guarantee of industrial peace ahead of the March 21 election.

The ANMF shut down all industrial action until May 18, when limited work bans were reinstated, followed by just two 24-hour stoppages, isolated to individual hospitals, at

Lyell McEwin Hospital on June 4 and Flinders Medical Centre on June 18.

Now, the ANMF leadership is spruiking a sellout agreement on behalf of a state Labor government that is not only attacking nurses and midwives, but the entire working class. With the aid of the unions, Premier Peter Malinauskas and his administration have in the past year imposed sub-inflationary pay “rises” on tens of thousands of workers throughout the public sector, including in health. The government announced last month that 1,000 public sector jobs would be slashed in the next year, as part of its austerity budget.

This is completely in line with the actions of the federal Labor government, which is spearheading the national attack on jobs, wages and conditions, and slashing social spending, most notably with its \$38 billion cut to the National Disability Insurance Scheme (NDIS), which will deny essential care to hundreds of thousands of people with disabilities.

Since Malinauskas first took office in 2022—after campaigning on a union-backed pledge to “fix ramping”—ambulance ramping has only worsened, while emergency department congestion and the widespread practice of “internal ramping”—with patients treated in corridors and improvised spaces due to chronic bed shortages—remain entrenched features of the system.

Lessons must be drawn from the ANMF’s promotion of a deal that would not only not resolve the crisis in public hospitals, but exacerbate it. The union bureaucracy is not acting in the interests of nurses and midwives, but those of a Labor government that is hostile to the working class.

Nurses and midwives should reject this rotten proposed agreement. But a “no” vote is only the first step. Defeating this deal requires building independent rank-and-file committees in every hospital, democratically controlled by nurses and midwives themselves, to take control of the struggle out of the hands of the ANMF apparatus.

Through these committees, nurses and midwives can develop demands based on their actual needs, not what the government or union says is affordable or “realistic,” and a plan—including statewide strikes and other industrial action—through which to fight for them.

South Australian nurses and midwives are far from the only section of workers who find themselves up against a dual union-Labor offensive.

Victorian teachers last month voted down a sellout Australian Education Union (AEU)-Labor agreement, for the first time in four decades. This is a significant development, reflecting the determination of educators to fight, but it is only the beginning. While the AEU leadership has been compelled to call a second statewide 24-hour strike next

Thursday, it is working frantically behind closed doors to stitch up a deal and shut down the dispute.

The Victorian experience provides both encouragement and a critical warning to South Australian nurses. The union bureaucracies will use every means at their disposal—delay, misinformation, threats of arbitration and appeals to “realism”—to enforce the demands of the governments they serve. The central question facing nurses and other workers is how to break out of this framework and develop their own independent organisations and political perspective.

It is only through the fight for independent rank-and-file committees that the necessary unified counteroffensive can be built, bringing together nurses with doctors, paramedics and other health workers, as well as the rest of the public sector and broader sections of the working class, in a common struggle against attacks on their wages and conditions.

The struggle for decent wages and safe staffing for health workers is inseparable from the fight for a fully funded public health system of the highest quality, freely accessible to all. This is incompatible with the capitalist system itself, under which all human needs are subordinated to the profit demands of the financial and corporate elite. The alternative is the fight for socialism.

The Health Workers Rank-and-File Committee urge nurses, midwives and all other healthcare professionals to contact us today to discuss how to establish a rank-and-file committee at your workplace.

Contact the Health Workers’ Rank-and-File Committee (HWRFC):

Email: sephw.aus@gmail.com

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

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