

ANMF NEWSFLASH

Child Health and Parenting Service Statewide

The Australian Nursing and Midwifery Federation Tasmanian Branch (ANMF) met with Child Health and Parenting Service (CHaPS) management for a third Step 2 Specialist Panel on Tuesday 1 November 2022. At this meeting the ANMF was just in receipt of the Tasmanian Health Service (THS) response to the ANMF letter of concerns

Original letter:

<https://anmftas.org.au/pdf/20221031ANMFLetterCHaPSStatewideStepTwoWorkloadGrievance.pdf>

THS response: <https://anmftas.org.au/pdf/CHaPSResponsetoANMFCorrespondence.pdf>

The ANMF stepped through the response at the meeting and can provide members the following assessment:

1. It focuses on the workload of the CHaPS executive in responding to the concerns raised rather than focusing on the workloads of CHaPS nurses, which has given rise to the grievance in the first instance.
2. The concerns from the CHaPS executive around the short time frame put by the ANMF are a product of their own design. Given the multitude of issues, and subsequent solutions, have been known for **four months** and solutions have not been forthcoming.
3. The ANMF has deliberately placed tight timelines and dates for actions to ensure this matter is dealt with in a timely manner and further given the concerns raised are long standing and entrenched.
4. Just responding to the concerns raised by the ANMF without doing something to fix them is not an adequate response by the THS. As disappointed as the CHaPS executive might be, they have the

authority to fix the concerns raised by members, the ANMF has the responsibility to raise these concerns on behalf of members.

5. The ANMF advocated, at the Step 2 Panel, that Points 1, 2, 5, 7, 10, 18, 27, 28, 31, in the THS response can be directed to the Working Group (WG) for establishing a nursing model, noting the first WG is to occur on **Wednesday 23 November 2022**.
6. It is confirmed that 10 post graduate students will be supported in 2023 by bridging the funding gap in cost between a Commonwealth supported place and the student contribution amount. Despite the ANMF submissions, Clinical Nurse Educator (CNE) support for these roles will be based in the South only. Further the ANMF is concerned that the area of highest need (North West and North) will not receive the highest number of placements.
7. The previous Step 2 meeting did not provide clarity on the framework for employing casual staff. This clarity has now been provided as detailed in the attached letter.
8. For the working group to be collaborative, as it is industrially required to be, THS need to share the COVID-19 modelling and how this is understood so the appropriate development of a CHaPS nursing model can occur. The ANMF will pursue this further at the WG.
9. The ANMF believes rolling recruitment is possible and this does occur in other areas. A theme of under resourcing within the service is emerging at every level. Other areas can resource rolling recruitment processes, it is not understood why this cannot occur in CHaPS. This matter remains unresolved.
10. As per the above point, simple processes, such as establishing a staff 'exit survey' should not negatively impact existing resourcing if resourcing of the service is sufficient in the first instance. This appears to collaborate the workload concerns raised by members.
11. The matter of Transition to Practice (TtP) nurses getting an opportunity to rotate through CHaPS to increase exposure to these new professionals, and assist with recruitment, was raised at point 8 of the original ANMF step 2 letter dated 22 August 2022. This is not a new matter as submitted by THS in their response. This matter remains unresolved.

12. Cost centres and Nurse Unit Manger (NUM) discretionary spending remains outstanding. It was advised to the ANMF this work would occur as a part of the WG process. The ANMF believes that allowing for discretionary budgetary spending, up to \$5000, is a matter that sits outside any terms of reference for a WG. This matter remains unresolved.
13. Regarding outdated policy and procedure development the THS have advised that “all staff within CHaPS whether they are directly providing client care or working to progress strategic planning, policy, education, quality, safety, administration provision is working incredibly hard within a resource stretched environment.” CHaPS executive here have acknowledged that CHaPS is a resource stretched environment, yet they are not listening to solutions put by members to address this resourcing. Grade 4 portfolio allocations remain unresolved.
14. Despite initially committing to looking at a 2023 budget arrangement for a recruitment and retention officer/project and or similar position, the THS are now saying they are unable to commit to a budget allocation for this, and instead will review other similar positions within the THS to understand role and function of these positions. The ANMF is concerned that this commitment is another distraction from addressing the issue directly.
15. The proposed post graduate student gap funding program, detailed in point 6 above, is not a new program or new funding arrangements. But rather the implementation of an existing program that was 2 years pending a business case approval. The ANMF considers that more needs to be done now to address the current roster gaps which have been accentuated by this delay.
16. The THS submit that only periods of NUM leave, 4 weeks or more will be backed filled. The ANMF considers that all leave periods should be backfilled, and nursing models should accommodate this leave replacement requirement.
17. Confirmation has been provided that the North West CNE position is out to recruitment, but no progress update has been provided.
18. Confirmed that the North West administration position had been filled.

19. Confirmation provided that the safe staffing plan is to reduce the service, this has been done arbitrarily without consultation with the ANMF through the grievance process and the requirement to come to agreed recommendations. No advice has been given to the ANMF on how key checks will be caught up due to this decreasing of service.
20. The THS will not reinstate waitlists to avoid inefficiencies where the nurse can contact a client at short notice in the event of a late cancellation, or to ensure accurate data is collated on service demand and the services ability to meet this demand.
21. The THS have advised that there is a 'recovery approach' planned for resumption of full service and catch up. No details of this plan have been provided to the ANMF for an assessment, relating to the Nursing Model WG, or to provide members a level of reassurance that their workload grievance is being addressed.
22. The THS have planned for face-to-face meetings to resume, noting that this is contingent on staffing and availability of suitable venues.
23. At the outset of this dispute the THS requested a singular meeting to be convened to deal with multiple issues from each of the jurisdictions across the state. The THS response at point 22 outlines the confusion that has entailed, whereby a matter relating to the North has been responded to and or highlighted, but the North West and South issue/s on this matter has been avoided and or left unacknowledged. To be clear the ANMF has requested consideration of direct appointment to Grade 4. This will assist with recruitment and retention in a very competitive market for registered nurses. Further, the ANMF has requested that professional development programs are established as a minimum in line with the Nurses and Midwives Award requirements at Part II 4.
24. Regarding base place of employment, the ANMF is advised by members that casuals will not travel from a base place of employment, say in Devonport to the West Coast, at their own cost. This needs to be considered for the service to attract casual and agency nurses.
25. The THS have indicated, despite members concerns, that telehealth appointments from the South to the North West are manageable regarding workloads, the southern service is not negatively impacted, further referral pathways have been clarified.



As detailed above, the ANMF has now correlated items that will be discussed at the WG. The balance of the matters, that are outstanding, are being assessed into an application for the Tasmanian Industrial Commission. From this, any matters that fall outside the WG and Tasmanian Industrial Commission application will be taken back to each jurisdiction for resolution at the local level. In relation to these local matters the ANMF will continue to utilise media exposure to highlight member concerns, as well as developing further strategies, in consultation with members, that might include the commencement of industrial action.

The ANMF Tasmanian Branch is 8000 plus members strong! Supporting nurses, midwives, and care workers as the only union in Tasmania employing nurses and care workers to represent members. This is why our Organisers and Member Support Team are uniquely positioned to understand your experiences, represent you in your workplace, and offer industrial advice that's relevant to you.

If you have any queries, please do not hesitate to contact our Member Support Team via email on membersupport@anmftas.org.au. Email is the preferred and fastest way of contacting the team. Alternatively, you can phone (03) 6223 6777 or 1800 001 241 if outside Hobart.

Authorised by Emily Shepherd, ANMF Tasmanian Branch Secretary
22 November 2022