

ANMF NEWSFLASH

Attention ANMF Launceston General Hospital- Emergency Department Members

The Australian Nursing and Midwifery Federation Tasmanian Branch (ANMF) has formally written to the Executive Director of Nursing and Midwifery Services (EDONM)- Hospitals North, Launceston General Hospital (LGH) regarding the critical issue of sustained workloads in the Emergency Department (ED). The ongoing failure of the Tasmanian Health Service (THS) North to adhere to the staffing arrangements agreed upon in the 2021 Tasmanian Industrial Commission (TIC) Record of Outcome is a major concern along with the added impact of Transfer of Care (ToC).

Key Issues Highlighted:

- 1. Understaffing:** The proposed 2024 ED benchmark staffing levels are inadequate and do not meet the requirements set in the 2021 TIC Record of Outcome. The 2021 agreement required an additional 21.3 Full Time Equivalent (FTE) staff, a necessity that has only grown more urgent as per the latest Australian Institute of Health and Welfare (AIHW) data.
- 2. Deteriorating Metrics:** Critical metrics have worsened significantly:
 - Only 14% of patients depart the ED within four hours, a 64% decline from 2020-2021.
 - Time until 90% of "all patients" depart the ED has increased by 20%, now at 21.1 hours.
 - Time until 90% of "subsequently admitted" patients depart the ED has increased by 15%, now at 32.9 hours.
 - Median time for "all patients" to depart the ED has increased by 14%, now at 4.3 hours.
 - Median time for "subsequently admitted" patients to depart the ED has increased by 22%, now at 9.5 hours.

- Inadequate Staffing Proposal:** The proposed 2024 benchmarking suggests a total of 123.15 FTE, including an additional 2.62 FTE. This is significantly lower than the previous total of 131.5 FTE, which included the 21.3 FTE from the 2021 TIC agreement. The worsening metrics necessitate maintaining the additional 21.3 FTE in addition to the proposed FTE.

Member Concerns:

- No additional staff added during the phased introduction of the ToC procedure.
- Overcapacity and significant workload stress.
- **Clinical Nurse Consultant (CNC) position:** the CNC position, created from the agreed TIC outcome in 2021, was removed without consultation.
- **Clinical Coach (CC) staffing:** the CC role is not being backfilled and is often used for direct patient care rather than supervisory functions.
- **Shift staffing:** preference is given to working shifts short-staffed rather than approving Short Notice Change of Shifts (SNCOS), increasing workload pressures.
- **Late night double shifts:** nurses are instructed to start late shifts at 1600 hours instead of 1430 hours, leading to understaffing and suspicions of avoiding overtime payments.
- **Sick leave policy:** nurses calling in sick are prohibited from picking up additional shifts within the same fortnight, leading to chronic understaffing and burnout.
- **Support officer staffing:** The department is short-staffed on support officers, causing nurses to fill these roles.
- **CNC duties:** CNCs spend excessive time arranging staffing instead of providing clinical support, worsened when CC are not rostered.
- **MCH bypass:** the MCH often goes on bypass to LGH, but the LGH ED is not staffed to handle the additional patient load.
- **Nurse-to-patient ratios:** nurses in the waiting room and ambulance triage are working with unsustainable ratios up to 1:30.
- **Unadvertised positions:** significant gaps in the baseline roster exist, with up to 10 FTE positions unadvertised.

- **Ignored FTE requirements:** the additional 21.3 FTE required by the 2021 TIC record of outcome is not being honoured.
- **Overcrowding and delays:** on Wednesday 7 June 2024, there were 14 patients in the ED corridor, with a full waiting room and department, leading to prolonged patient retention.
- **Roster management:** rosters issued by administration without NUM review result in improper skill mix and inadequate shift coverage.
- **Extended wait times:** on Wednesday 12 June 2024, the AM shift began with 36 patients, including three admitted patients, with one waiting 49 hours for a bed.
- **Emergency codes:** there is no capacity to declare code yellow or code brown, essential for managing departmental overcrowding.
- **Survey results:** members have not received the results of the Insync surveys from the past five years.

Immediate Actions Requested:

1. Staff to a baseline roster of 123.15 FTE, plus the additional 21.3 FTE.
2. Allocate zones at a 1:3 ratio and resus at 1:1.
3. Roster and quarantine a clinical coach for each shift.
4. Reinstate additional FTE for a nurse navigator or CNC as agreed in 2021.
5. Provide additional nurses for the waiting room, ambulance triage, transfers to wards, and radiology.
6. Fill vacant shifts and allow all staff to pick up extra shifts when fit and willing.
7. Adjust the code yellow/brown policy to allow for the calling of these codes once the department has reached an agreed critical mass.
8. Share the Insync survey results from the last 5 years with staff.
9. Release the 2023 report on NUM workloads to the ANMF.

Next Steps:

If the above actions are not agreed upon by **close of business Wednesday 24 July 2024**, the ANMF will look to refer the matter to the TIC as an urgent application. A member meeting to consider industrial action will be held on Thursday 18 July 2024. Potential actions may include:



- Refusing to offload patients when the department is full
- Working to rule
- Speaking to the media
- Stop work meetings
- Half and full-day stop work meetings
- Calling an ANMF Code Yellow to alert the public via the media.

We urge immediate attention to these critical issues to ensure the safety and well-being of both staff and patients at the LGH.

The ANMF Tasmanian Branch is 8000 plus members strong! Supporting nurses, midwives, and care workers as the only union in Tasmania employing nurses, midwives 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.

Further updates to follow. In the interim if you have any queries, please do not hesitate to contact our Member Support Team via email on membersupport@anmftas.org.au. Alternatively, you can phone 1800 001 241.

Authorised by Emily Shepherd, ANMF Tasmanian Branch Secretary
15 July 2024