



ANMF NEWSFLASH

Launceston General Hospital

Intensive Care Unit

The Australian Nursing and Midwifery Federation Tasmanian Branch (ANMF) met with members in the Intensive Care Unit (ICU) at the Launceston General Hospital (LGH).

Members have advised they will continue their **Industrial Action (IA)** to **refuse redeployment**, citing the following ongoing and unresolved concerns:

1. Unapproved Benchmarking - 2.29 FTE Still Outstanding

The ANMF was advised at the Safe Staffing Committee (SSC) meeting in May 2025, that the 2.29 additional FTE identified through the benchmarking process in May 2024 is *still pending approval*. This FTE was planned for the employment of **clinical coaches**; a resource members believe is essential due to the increasing number of junior staff in the **ICU**. Many of these junior nurses were being regularly redeployed prior to the **IA**. Members have raised concerns that despite repeated engagement on this matter, no progress has been made.

A delay of over 12 months following benchmarking is unacceptable and is placing additional pressure on **ICU** staff. **The ANMF** considers this delay a significant breach of the *NHpPD Safe Staffing Standards* and *Nurses and Midwives (Tasmanian State Service) Interim Agreement 2013.*

2. Unmanageable Overtime and Double Shifts

Data obtained by the **ANMF** via the ongoing *Safe Hospital Save Lives* dispute in the **Tasmanian Industrial Commission (TIC)** shows that during a four-week period (5 Jan – 1 Feb 2025), **ICU** required:

- 36 double shifts
- 29 Short Notice Changes of Shift (SNCOS)







• 6.71 FTE agency staff.

This level of overtime represents a significant **Work Health and Safety (WHS)** risk and further supports members' position that redeployment of **ICU** nurses is unsafe and unsustainable.

3. Redeployment Risks

ICU members continue to raise serious concerns about redeployment practices, including:

- Inability to return to ICU during the same shift, delaying critical patient care including for intubated patients in ED.
- Uncompensated overtime, missed breaks, and unsafe workloads, when redeployed.
- Lack of orientation when sent to unfamiliar wards—posing direct clinical risks, particularly for nurses without experience outside of ICU.
- Missed opportunities to support and develop junior ICU staff, increasing reliance on senior staff and creating skill gaps.
- Inappropriate use of agency staff, with ICU-assigned agency nurses employed to bolster skill mix being redeployed to other wards.

The ANMF has reiterated to management that the solution to hospital-wide staffing issues is recruitment to vacancies, not redeployment from critical areas like **ICU**.

4. Removal of ICU Pharmacy Technician

Members report the pharmacy technician role in **ICU** has been removed without consultation. This has increased nursing workloads and raised concerns about access to essential medications. In some cases, critical drugs have had to be couriered from Hobart, causing delays and adding risk to patient care.

Step 2 Grievance Lodged

Given the above, the **ANMF** has formally lodged a **Step 2 Grievance** in line with *Nurses and Midwives* (*Tasmanian State Service*) *Interim Agreement 2013*. This grievance seeks specifically to address the non-







implementation of the 2.29 FTE uplift as benchmarked for **ICU**. The **ANMF** has requested a specialist panel be convened within two weeks to resolve this matter. The **ANMF** will provide updates as they are available.

Together, we are stronger.

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.

Authorised by Phoebe Mansell, ANMF Tasmanian Acting Branch Secretary 11 June 2025