



FAQ:

Nurses & Midwives Agreement 2016 Award Variation

How can we trust the implementation of all conditions?

A steering committee has been established to proactively work together to ensure the Agreement is implemented and projects completed by the agreed time specified in the Agreement. Five sub-committees have been agreed; Ratios/NHPPD, Classification and Career Structure, On-Call Rostering, Associate NUMs, Midwifery Group Practice. ANMF is represented on all groups.

When will we receive wage increases?

The Agreement was registered with the TIC on February 23 2017. TIC. Increase to be added to hourly rate pay after registration which should be 15 March with back payment in the following fortnight.

What is happening with Ratios?

A hybrid model needs to be developed by the parties recognising that the ratio is a simple daily staffing tool. However there is also a benefit in retaining some positive components of the NHPPD. The working party will commence within one month of the Agreement registration and finalise the review by 30 October 2017. ANMF note this is a significant part of our claim and settlement.

What is the Associate NUM and how will the role be implemented?

The offer consists of an ANUM rostered on every shift in every ward/unit across the state.

This position will replace the current myriad of in charge roles on shifts, who currently receive the 'in-charge' allowance. This allowance will not be paid to ANUMs as coordinating and being 'in-charge' of shifts is part of their role.

Other aspects of this role include working with NUM as delegated and being a formal part of the

ward/unit management team. It is anticipated that the role may include; co-ordinating patient flow and clinical oversight of patient care, coordination of complex discharge planning, staffing and resource planning, mentoring and support of other nurses and may assist the NUM in Grade 4 application assessment, PDAs, interviews and staff selection. However the Classification Descriptor and SoD are yet to be finalised. Meetings are scheduled to obtain feedback from members, in particular the NUMs, in relation to how they see this role should work.

Small numbers of Clinical Coordinators are currently working on wards as mostly day workers however the ANUM will cover all shifts. It is anticipated that some Clinical Coordinators will translate to the ANUM roles at their current level. Negotiation will occur and if there is mutual agreement, these positions may convert from day to shift worker but this cannot be forced.

Where current 'in-charge' positions have a patient load, that will continue but the majority of wards have 'in-charge' positions with no patient load which are included in direct hours.

Once the Classification Descriptor and new Statement of Duties are drafted and agreed, advertisement will begin to recruit to these senior Grade 5 clinical positions using a merit based process.

In-charge allowance

Will only be payable to Grade 3's and 4's if they cover the ANUM for short term cover on a shift. Longer term planned cover will attract a Higher Duty Allowance and enable other nurses to gain experience as acting ANUMs.

The in-charge allowance has increased to \$ 23.20 for Grade 3 and Grade 4s when sole Grade 4 rostered and \$15.47 for Grade 4s when other Grade 4s rostered.



What is in it for enrolled nurses?

An enrolled nurse who has upgraded to a RN role (and is appointed to such) will directly enter as a Grade 3 Year 3.

How has non-certified personal leave improved?

The provision and intent is for nurses to have five shifts, regardless of length, available for uncertified leave. The award clause reads:

A medical certificate is required for each personal leave absence for personal illness or injury after the employee has taken five (5) full rostered days regardless of shift length (e.g. 8, 10 or 12 hours) and/or an aggregate of no less than 38 hours without a medical certificate in any personal leave year.

I am RN, Year Four and how can I now access a Grade 4 role?

Agreement enables nurses and midwives at Year 4 and beyond to apply rather than at Year 6 as in previous Agreement. The Formal Capability Assessment criteria remain but the guidelines will need to be reviewed and updated. Applications will be accepted from the date of registration of the Agreement.

What are the improvements for nurses working in the community and uniforms?

In addition to normal uniform entitlements, agreement to provide a warm, breathable, windproof jacket and protective clothing to each nurse and midwife working in community settings, including outreach roles.

What about night duty?

A new clause has been entered into the Award which means that nurses are now to be rostered to a total of two days off in a row after a night shift. The morning the night shift finishes is *not* included in those two days. If not rostered to the 'sleep day' and two days off a penalty payment may follow.

This penalty will not apply if the employee 'agrees' or 'requests' a different shift pattern.

As it is understood rosters are already published and/or in production this Award provision does not take effect until April 27 2017. However it is expected that rosters will become compliant with this provision ASAP.

How have the on-call entitlements improved?

Nurses and midwives rostered on-call will have improved entitlements. Nurses who are rostered on-call and working beyond the completion of their rostered shift and in excess of one hour, will be paid the first hour at overtime rates and after that hour will be paid a call back payment of four hours, regardless of how much longer they work (and without them needing to leave the ward area). This issue has been occurring predominantly in theatre suites as lists extend.

A working party will be established to increase the pool of on-call nurses and midwives in specialty areas and report of good rostering practices and the use of on-call.

Additionally, it is recognised that some nurses work excessive on-call which is impacting on their work life balance, and discussion continues as to whether, additional benefits will be paid to this small group of nurses and midwives.

When does the extra two weeks of maternity leave and one week of paternity leave apply?

The Award has now been amended. Nurses, on *paid* maternity leave at the time of the award variation will have their period of paid leave extended by two weeks. It is understood that the pay office will contact employees who are currently on paid maternity leave.

Nurses who have already entered into the unpaid period of maternity leave will not be entitled to any further paid leave.

What about the Maternity Group Practice (MGP) Agreement?

The MGP Agreement is a separate agreement covering a small group of midwives. Negotiation for this new agreement continues.

However midwives under the MGP will still receive the pay rises as outlined above.