Australian Nursing & Midwifery Federation Tasmania

Media Release

Friday 9 February 2024

ANMF

Media Doorstop When: TODAY, Friday 9 February 1:00pm Where: ANMF Office, 182 Macquarie Street, Hobart Who: ANMF Branch Secretary and ANMF Members

ANMF MEMBERS LABEL MINISTER'S OFFLOAD PROPOSAL AS RECKLESS

The Australian Nursing and Midwifery Federation, Tasmanian Branch (ANMF) have labelled the announcement by the Minister for Health, Guy Barnett, to offload ambulance patients within 60 minutes in March this year, as reckless.

The ANMF were initially requested to join the Transfer of Care Working Group in 2023, at the request of Ambulance Tasmania, following the Health and Community Services Union (HACSU) seeking the inclusion of a 60 minute offload policy implementation, within 12 months of their industrial agreement being struck for Paramedics. This was agreed to by the State Service Management Office and the Government with no consultation with other unions or other health care workers who would be impacted by the protocol. The ANMF have repeatedly stated on behalf of members that this protocol could not be supported in isolation without strategies put in place to support improved access and flow in Emergency Departments (EDs). Given the consultation period for the protocol has not yet even closed, the Minister's announcements are astounding to the ANMF and ANMF members.

'The ANMF absolutely support the principle of Paramedics being available to respond to triple zero calls and providing emergency care in the community, rather than caring for patients in EDs on the ramp. However, implementation of this policy will not solve anything and in fact is likely to just transfer the risk from Paramedics and those awaiting an ambulance in the community to nurses and their health care colleagues in EDs and to the patient, who if offloaded into an overcapacity ED that is short staffed, will likely experience unsafe care', said ANMF Tasmanian Branch Secretary, Emily Shepherd.

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The ANMF have in good faith contributed to the Major Hospital ED Review and the Parliamentary Inquiry into Ambulance Ramping with the intention to see improvements to access and flow across all hospitals prior to the offload protocol being implemented. The ANMF have also sought a commitment from the Minister to align the timeframes of the access and flow improvements and the offload protocol. However, no commitment has been received.

Disappointingly, the Minister has not listened to ED staff across the State or the ANMF about the dire safety consequences this protocol will have for ED staff and patients, and ironically, has stated that Ambulance Tasmania notes the position of the Australasian College of Emergency Medicine (ACEM) that rapid offload is prohibited due to being unsafe. The developed protocol will not recommend unsafe practice, with transfer of care to occur into a clinically appropriate space with a safe and adequate handover. 'Clearly, offloading ramped patients into an overcapacity ED, will mean there is not adequate space, likely insufficient staff and is nowhere near safe'.

The ANMF have worked hard to contribute to the Major Hospital ED Review and the Parliamentary Inquiry into access block in a collaborative way and wish to do so ongoing by aligning the timeframes of the strategies to improve access and flow with the offload protocol. However, if the Minister continues to refuse to agree to this, ANMF members will take industrial action and the ANMF will lodge a case for arbitration in the Tasmanian Industrial Commission (TIC) if a phased approach is not agreed to.

'The ANMF only take industrial action as an option of last resort, but the reality is that the Minister has had no regard for Nurses, Midwives and Assistants in Nursing, their safety and that of the patients in EDs across this State by choosing to announce a protocol to address Ambulance Ramping whilst consultation is still occurring, the same week that he is providing evidence to the Parliamentary Inquiry into Ambulance Ramping. Implementation of the protocol before access and flow initiatives have taken affect is at best short sighted, and at worst, reckless and poses a serious safety risk to staff and patients.'



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