Notices of Motion
Part C, D, E & General Business
Table of Contents

Part C: Organising and Campaigning ........................................................................................................... 5
Part D: Industrial and Bargaining ..................................................................................................................... 9
Part E: Professional, Educational and General ............................................................................................... 13
General Business ........................................................................................................................................... 17
Part C: Organising and Campaigning

C.1 MANLY DISTRICT HOSPITAL BRANCH

This Annual Conference calls on the NSWNMA to use whatever resources it deems fit to fight the creeping privatisation of public health services in NSW.

C.2 WESTERN SYDNEY COMMUNITY BRANCH

This Annual Conference resolves that the NSWNMA will continue to campaign and actively lobby the NSW government and ensure that services such as palliative care, wound care and other services provided by community health care nurses across NSW remain within the public health system and not be sold off and privatised.

Currently, there are ‘Confidential in Cabinet’ discussions being held with this government to privatise palliative care in Western Sydney Local Health District and handing this vital service to the Silver Chain Group. We fear other services could also be sliced off and sold to private providers leaving our staff without a job and the community with a less than adequate service.

C.3 MANLY DISTRICT HOSPITAL BRANCH

This Annual Conference calls on the NSWNMA to seek urgent answers to the questions presented at the Combined Union Meeting in March 2017, regarding the transfer of acute Public Services from Manly and Mona Vale Hospitals to the new Healthscope Private Hospital at Frenchs Forest. The Healthscope facility opens in 15 months and the following questions were put into a petition and have received no reply.

a How are current Award conditions to be protected and made enforceable for transferring employees?

b How are additional commitments to be made to staff, e.g. job guarantees enforceable?

c Ensure employees are not obliged to transfer, if the Regulation barring redundancies is applied.

d Job matching results to be released immediately, so that employees have enough time to make knowledgeable decisions.
C.4 WOLLONGONG PRIVATE HOSPITAL BRANCH

This Annual Conference calls on all our colleagues to join Ramsay Health nurses and midwives to fight for mandated safe staffing levels in our Enterprise Agreement campaign.

We need mandated ratios to ensure safe patient care is not compromised by the constant pressure to cut nursing hours forcing us to do more with less.

It’s time for Ramsay Health Care to stop:

- Expecting us to work short staffed;
- Overriding our entitlements in MyTime;
- Expecting us to work unpaid overtime;
- Pressuring us to reduce hours and take leave at late notice;
- Expecting e-learning to be completed outside rostered hours;
- Expecting us to miss tea and meal breaks.

C.5 ROYAL PRINCE ALFRED HOSPITAL BRANCH

That this Annual Conference of the NSWNMA endorses the Public Health System Log of Claims Committee to investigate and pursue a cost of living allowance for nurses and midwives living in areas of NSW deemed unaffordable as per the housing affordability index.

C.6 ROYAL PRINCE ALFRED HOSPITAL BRANCH

This Annual Conference acknowledges the work done by the NSWNMA on housing affordability. It requests that the NSWNMA also lobbies for improvement to renters’ rights with the aim of improving rental security and affordability.

C.7 BODINGTON AGED CARE SERVICE BRANCH

That this Annual Conference requests that the NSW Nurses and Midwives’ Association continue to support members working in aged care facilities in their ongoing campaign for the continued employment of registered nurses in aged care facilities in NSW.

Further, this Annual Conference supports the findings of the Australian Nursing and Midwifery Federation Report into the National Aged Care Staffing Skills Mix Project and requests that the findings be forwarded to all appropriate government bodies and political parties with the view of seeking support for the adoption into State and Federal legislation of a patient care staffing methodology for all aged care facilities as outlined in the report.
C.8 LONG JETTY CONTINUING CARE BRANCH

This Annual Conference requests that the NSWNMA continue to lobby the NSW Government and the Ministry of Health for RNs to be maintained 24/7 in all Residential Aged Care Facilities in order to lessen the burden on the acute care system. Furthermore, we also request that the NSWNMA expand and broaden efforts to encapsulate the national campaign for skill mix and staffing in order to engage a future Federal Government to ensure improvements in overall staffing and funding for aged care.

We request the NSWNMA engage all branches to campaign in conjunction with the efforts of the ANMF for ratios in aged care.

C.9 GOSFORD PRIVATE HOSPITAL BRANCH

This Annual Conference seeks that the NSWNMA continues to participate in the NSW Aged Care Roundtable and promote the “10 Questions to Ask” leaflet through a state-wide rollout.

Furthermore, we ask that the promotion of the leaflets is pursued nationally through the ANMF.

C.10 LIVERPOOL HOSPITAL BRANCH

This Annual Conference of the NSWNMA calls on the Association to oppose the Medicare Levy increase, as our wages have been capped and essential service costs are rising. The gap between wages and inflation is growing wider and will cause hardship to many essential service staff.

C.11 ESTIA HEALTH AT FIGTREE BRANCH

This Annual Conference resolves that the NSWNMA continues the Save Our Weekend penalty rates campaign in order to fight back against the cuts to weekend rates for retail and hospitality workers. As seen by the recent actions of some healthcare and aged care providers, this could extend to all sectors of nursing.
Part D: Industrial and Bargaining

D.1 JOHN HUNTER HOSPITAL BRANCH

This Annual Conference requests the Public Health System Log of Claims Committee consider that the Public Health System Award, Clause 53 – Staffing Arrangements, sub clause (iv) Staffing and Specialities, Section IV: Perioperative Services be amended to require that “The most recent ACORN standards be implemented in Perioperative Departments”.

D.2 JOHN HUNTER HOSPITAL BRANCH

This Annual Conference requests that Birthrate Plus be overhauled to adequately reflect the workload of staff in the maternity and gynaecology divisions of tertiary centres. In hospitals, such as John Hunter, where many births are complicated by maternal comorbidities, pre-term delivery or perinatal complications. The existing categories do not adequately reflect the patients who have dependency scores >25, which is many of John Hunter’s clients.

There also needs to be additional scoring to get a better “snap-shot” of the work involved in caring for the low birthweight/late-term babies that are now nursed on the ward with their mothers, e.g.: BGLs/ complex feeding regimens.

D.3 LISMORE BASE HOSPITAL BRANCH

This Annual Conference of the NSWNMA requests the Ministry of Health, when constructing new hospitals or units, provides the NSWNMA and the local branch with a risk assessment based on the proposed staffing numbers for these areas. All too often new hospitals and departments are now being built under the guise of future proofing the hospital but staffed with current staffing quotas, which result in small numbers of staff working in large footprints where the physical distance can present an unacceptable risk.

D.4 PORT MACQUARIE BASE HOSPITAL BRANCH

This Annual Conference of the NSWNMA requests the Public Health System Log of Claims Committee consider including in Clause 13 – Continuing Education Allowance, Clinical Nurse Consultants for entitlement to this allowance.
D.5 PORT MACQUARIE BASE HOSPITAL BRANCH

This Annual Conference of the NSWNMA requests the Public Health System Log of Claims Committee consider in Clause 25 – Overtime, an additional sub-clause that defines the food that is to be provided. Currently, Clause 38 – Accommodation and Board, is used for clarification of the meal requirements. However that is not currently referenced in Clause 25 and also does not provide sufficient detail.

That the proposed new sub-clause or amended sub-clauses allow for employees to request payment of the meal allowance when the meal available on-site does not meet the award definition or where this does not provide for individual special dietary requirements. If at any health care facility no on-site meal service is available to provide meals at any day/hour to meet the Award definition, then the meal allowance must be paid.

D.6 COFFS HARBOUR HOSPITAL BRANCH

The Public Health System Log of Claims Committee will consider pursuing an extension of paid parental leave for new parents (Clause 34, Part C – Parental Leave) whose baby has been delivered by Caesarean section from 5 days to 30 days on full pay to allow for the needed support of the spouse.

D.7 JOHN HUNTER HOSPITAL BRANCH

This Annual Conference asks that the NSWNMA works with the NSW Ministry of Health to ensure that all hospital managers formulate a system which adequately facilitates staff to complete all elements of their mandatory education in work time. This includes online and face-to-face components. Possible solutions could include, but are not limited to, quarantined time within shifts, with adequate relief provided, for staff to leave the floor to attend to this; “blitz days” when a full 8-hour day is rostered and a timetabled programme is organised; face-to-face components are scheduled “after hours” for the staff who work nights and weekend shifts. Staff should not be pressured by managers/educators to attend to this in their own time.

D.8 COFFS HARBOUR HOSPITAL BRANCH

Amended by the branch

That the Public Health System Log of Claims Committee will consider pursuing a change in the wording of Clause 4 (xvi)(a) of the Public Health System Nurses’ and Midwives’ (State) Award – Hours of Work relating to days off for full time employees. Sub-clause (xvi) states “… be amended to delete the words “Where practicable”, days off shall be consecutive …..” To be changed to reflect that, so that the sentence of this subclause will commence with “…. Unless agreed by both nurse and management, days off must be consecutive, …..”

Published version

That the Public Health System Log of Claims Committee consider resolution that Clause 4 (xvi)(a) of the Public Health System Nurses’ and Midwives’ (State) be amended to delete the words “Where practicable” so that the sentence of this subclause will commence with “…. Unless agreed by both nurse and management, days off must be consecutive, …..”
D.9 COFFS HARBOUR HOSPITAL BRANCH

This Annual Conference of the NSWNMA resolves to continue to actively pursue shorts becoming part of the uniform provisions for nurses and midwives not “at the discretion” of the LHD. This action will bring nurses and midwives in line with all other hospital employees.

D.10 COFFS HARBOUR HOSPITAL BRANCH

This Annual Conference resolves the NSWNMA will write to each LHD to request shorts be added to the uniform choices for nurses and midwives. Also that each Organiser who attends LHD JCCs will list the approval of shorts for nurses and midwives on the agenda for the earliest JCC in 2017 and make a request for approval at that meeting.
Part D: Industrial and Bargaining
Part E: Professional, Educational and General

E.1 HUNTER DRUG & ALCOHOL NURSES BRANCH
This Annual Conference requests the General Secretary of the NSWNMA to include the payment of working with children checks in any issues list provided to political parties leading up to the 2019 state election to establish their position/view, which will then be promoted to members in The Lamp and through the NSWNMA’s various social media portals.

E.2 LISMORE BASE HOSPITAL BRANCH
This Annual Conference of the NSWNMA requests the Ministry of Health provide a clear and simple way of reporting aggression/violence in the workplace for healthcare workers. The IIMS system has multiple ways of reporting acts of aggression and violence in its system which result in no clear understanding of the prevalence of violence, and if we are indeed honouring the zero tolerance mantra the Ministry claims we must start by knowing how bad the problem is.

E.3 LISMORE BASE HOSPITAL BRANCH
This Annual Conference of the NSWNMA requests the Ministry of Health support nurses and health care professionals when they request patients be charged by the police when they are the victims of violence while caring for those patients. Management should support their workforce in the zero tolerance against violence campaign and not discourage the victims of violence from seeking justice for acts against them.

E.4 LIVERPOOL HOSPITAL BRANCH
This Annual Conference of the NSWNMA calls on the Association to discuss with the Ministry of Health the practice of Local Health Districts delaying recruitment to vacancies. All vacancies need to be recruited to as soon as possible and skill profiles not undermined by the use of junior or untrained staff working short shifts.
E.5 ROYAL PRINCE ALFRED HOSPITAL BRANCH

This Annual Conference calls upon the NSWNMA to demand that the Ministry of Health provides annual data on the hospital beds in NSW, including the number per capita.

E.6 LISMORE BASE HOSPITAL BRANCH

Preamble

Climate change has been acknowledged as the biggest global health threat of the 21st century and former Australian of the Year, Fiona Stanley has categorically stated “that human health and financing fossil fuels are fundamentally incompatible”.

Extreme weather events are becoming more frequent with climate change and are demanding and costly to health services and communities.

As nurses and midwives we have a responsibility under our Code of Ethics to value an ecologically sustainable environment that promotes health and wellbeing and as such must make a stand against the fossil fuel industry and the corporations that fund it.

A current example is Adani’s massive Carmichael coalmine in the Galilee Basin, which if it were to go ahead would pose serious environmental and health risks and is inconsistent with the Paris two degree target which Australia signed up to.

We have a responsibility as trusted leaders in our communities to not only protest publicly, which we do so exceptionally well, but also to call on all corporations with which we have financial interests to cease their funding of the fossil fuel industry. Should they choose not to, we must divest, as the core business model of the fossil fuel industry threatens all of us.

For too long the fossil fuel industry has corrupted our government and treated our planet with contempt. As nurses and midwives we should not be involved in funding any industry that impacts so negatively on our planet and all who inhabit her.

We have a duty of care.

Resolution

This Annual Conference calls on the NSWNMA to divest from any corporation with which we have financial interests should they not undertake to cease their funding of the fossil fuel industry.

That the NSWNMA invest in clean, renewable energy.

E.7 LANGTON CENTRE BRANCH

Preamble

It is well known that a blanket ban on drugs does not work. This vastly increases their risk of overdose or adverse events, which then increases the workload and risk of aggression towards emergency services and volunteer health workers. Pill testing has been shown to reduce the harm and increase safety of people who choose to use these substances. It is not legalising but ensuring the safe use and minimising the risk of overdoses and deaths. This is similar in approach to the very successful Medically Supervised Safe Injecting Rooms.
Pill testing allows for education and engagement of the community. It does not advocate drug use. Pill testing is about allowing people to make informed decisions with information that they otherwise would not be able to access. It also allows for volunteers and workers to be available for people to speak to and be referred to other services if need be - a conversation that does not currently occur because of the taboo nature of certain drugs and recreational drug use. Legality does not equate safety. On the scale of harm to self vs harm to others, alcohol and tobacco are more harmful than ecstasy, LSD and cannabis. Pill testing statistics would contribute to research, policy making, policing, emergency healthcare and the health and safety of our community.

Resolution

This Annual Conference requests that the NSWNMA develop a position statement that takes a stand which advocates for pill testing and other interventions that promotes harm minimisation and also commences political lobbying. We need to take a stand, as we have done many times before, on what is right for the health and safety of nurses midwives and the community whom we have a moral responsibility to care for.

E.8 JOHN HUNTER HOSPITAL BRANCH

This Annual Conference of the NSWNMA asks that AHPRA is approached to review the Continuing Professional Development (CPD) requirement for nurses and midwives and allow averaging of CPD hours over 3 years. This would allow professionals who are taking a long period of leave, such as maternity leave, long service leave, to spread their CPD across 3 years rather than having to fulfil this commitment while on leave from work. This arrangement would be similar to the recency of practice requirement which can be averaged over 5 years.

E.9 HUNTER DRUG & ALCOHOL NURSES BRANCH

This Annual Conference requests that the NSWNMA conduct a feasibility study into a nursing and midwifery international exchange program where there is a direct swap of nursing or midwifery positions and accommodation. A report back to be made to a subsequent CoD.

E.10 SYDNEY CHILDREN’S HOSPITAL BRANCH

Preamble

The Mission Statement of NSW Police Legacy:

Police Legacy is the NSW Police Force Charity. Our commitment is to build on the care and support of over 20,000 serving and retired police officers and their families during times of tragedy and need. Initially founded to support bereaved families following the loss of their loved one, our support now extends to include police officers and their families experiencing challenging times in their lives.

Resolution

This Annual Conference calls upon the NSWNMA to investigate the feasibility of establishing a NSW Nurse and Midwife Legacy Fund similar to the NSW Police Legacy fund. The fund would assist nurses, midwives and their families suffering from loss and grief as well as those experiencing misfortune that require extra support.
E.11 COFFS HARBOUR HOSPITAL BRANCH

The NSWNMA will seriously investigate and consider a fee reduction (half the fees) for AiNs / AiMs working casually or part time who are studying the Bachelor of Nursing or Bachelor of Midwifery full time. The term of this reduction to be capped at 3 years while the AiN / AiMs are actively studying.

E.12 COFFS HARBOUR HOSPITAL BRANCH

This Annual Conference of the NSWNMA resolves that the Association will provide a progress report of annual conference resolutions to the Committee of Delegates 6 months’ post holding of the NSWNMA annual conference to ensure delegates can update their branches on progress of successful resolutions.

E.13 ESTIA HEALTH AT FIGTREE BRANCH

This Annual Conference of NSWNMA calls on the Association to engage in serious discussions with the current Minister for Mental Health and Minister for Ageing before the end of 2017 with the issues of the increased number of residents with mental health issues now entering Aged Care facilities.

These issues to include as a matter of priority but not excluding other issues:

1. Staff working in Aged Care are not trained to care for residents with the mental health conditions they are being asked to care for;
2. In Mental Health services, there are different staffing levels and resources compared to Aged Care;
3. Safety and security of other residents and staff.
This Annual Conference of the NSWNMA calls on the federal government to affirm unequivocally, a commitment to international humanitarian laws, and to uphold the emergency United Nations Security Council’s resolution 2286 condemning attacks on medical personnel in conflict situations;

We also call on the NSWNMA to:

1. Continue to support Medecins Sans Frontieres (MSF) and other health humanitarian organisations’ urgent calls to action #NotATarget, to protect health care workers who assist in conflict zones;

2. Join the Safeguarding Health in Conflict Coalition; and

3. Write to the Minister for Foreign Affairs concerning the moratorium or suspension of the United Nations “listing” of persistent perpetrators of grave violations of human rights against civilians in conflict.