Notices of Motion
Post Annual Conference
as at 22 July 2019
PART C: Organising, Campaigning and Industrial

AC39/2019 C.1 GUNNEDAH DISTRICT HOSPITAL BRANCH
Moved H Franke Seconded J Crough

This Annual Conference seeks that the NSWNMA continues with campaigning for Ratios in all NSW Public Hospitals.

We believe that regardless of which political party is governing NSW, we as a union need to continue campaigning to allow us as nurses and midwives to practice safe patient care, without fear of losing our registrations, due to the inadequate staffing and budget constraints within our Local Health Districts.

CARRIED UNANIMOUSLY

AC40/2019 C.2 ROYAL PRINCE ALFRED HOSPITAL BRANCH
Moved E Romney Seconded S Sharp

This Annual Conference requests that the NSWNMA launch a campaign targeting the practice of ‘specialling within numbers’. This staffing arrangement increases nursing workload, negatively impacts on patient care and erodes nurse to patient ratios. The campaign should raise public awareness of this practice and include activities that pressure the Ministry of Health to create policy.

CARRIED

AC41/2019 C.3 CONCORD REPATRIATION GENERAL HOSPITAL BRANCH

Preamble

The use of “In Patient Specials” (IPS) on a nursing/midwifery ward or unit often creates a negative impact on workloads for nurses and midwives.

The common causes are:

- When IPS are taken from existing staff numbers, the workloads shift to the other staff and “nursing hours” are diluted. It is routine policy in NSW to take the “first IPS from the numbers”, this contravenes the intention of the Public Health System Nurses’ and Midwives’ (State) Award 2018 (the Award) and
clinical needs of the patient are overridden by a direction in policy that can only be driven by budgets.

- The use of the Assistant in Nursing (AiN) classification as a special requires direct and indirect supervision and guidance from the registered nurse (RN), and therefore creates an additional RN workload to care for the patient requiring IPS.

- The use of unregulated nursing staff for patients requiring intense 1:1 and 24-hour around the clock nursing care is a contradiction, because the most challenging and acutely unwell patient is being cared for by the least qualified.

- The NSW Health service implementation “Assistants in nursing working in the acute care environment” states that the utilisation of an AiN can only be when there are predictable patient outcomes, most IPS patients do not fit this.

Moved S Mansfield Seconded N Ellis

This Annual Conference seeks that the NSWNMA makes representation to NSW Health regarding the need for a consistent state-wide policy on the use of patient specials to ensure the clinical needs of patients are being considered before budgetary outcomes when allocating an Inpatient Patient Special (IPS).

We call on NSW Health to ensure the IPS is never within the existing minimal staffing hours/ratios of the ward or unit and the NHPPD reports must reflect this, i.e. the IPS hours are not making up the minimal NHPPD hours and that reports and spot checks clearly show IPS hours separately.

The skills mix of the IPS must not be decided by budget, policy or convenience but by the clinical and medical needs of a person. Where AiN usage is applicable there should be robust documentation including compliance with the AiNs working in the acute care environment implementation package, including a documented shift by shift review process.

CARRIED

AC42/2019 ROYAL PRINCE ALFRED HOSPITAL BRANCH

Background

Often the staff member selected to special a patient is the cheapest labour available rather than the staff with the appropriate training in mental health or de-escalation. We refer to the stabbing of three staff at RPAH in May 2019, where a casual staff member was tasked with specialling a patient who had three Code Blacks in one shift.

Moved L Murphy Seconded E Romney

This Annual Conference calls on the NSWNMA to discuss with the Ministry of Health and the Minister for Health the importance of staff selection and training when selecting staff for specialling.

CARRIED
AC43/2019  
C.5 ROYAL PRINCE ALFRED HOSPITAL BRANCH  
Moved E Romney  
Seconded J Myers  

This Annual Conference calls for health care funding that matches activity levels, with infrastructure and staffing levels to meet the existing and future needs of the state of NSW. We request that the NSWNMA campaign to highlight the current mismatch between need and capacity, and the toll that this is taking on nurses and midwives.  

CARRIED

AC44/2019  
C.6 SOUTH EAST REGIONAL HOSPITAL – BEGA VALLEY BRANCH  
Moved D Lang  
Seconded A Gillies  

This Annual Conference requests the NSWNMA lobby the Ministry of Health to stand by the Liberal government’s election promise of 5,000 more nurses and the introduction of 6 NHPPD across B and C hospitals. On 17 February 2019 the Liberal government promised 6,000 new nurses. We request the government confirm these are full time registered nurse/midwife +/-/enrolled nurse positions and apply to direct clinical care. We request the NSWNMA approach the Ministry of Health and request an implementation schedule for the 5,000 new nurses with full details and within a defined timeframe of 6 months.  

When the Liberal government promised 5,000 new nurses, did they mean 5,000 FTE? 5,000 @ 0.1 FTE, is only 500 full time positions and we need clarification that they are new positions and clinical direct patient care. We request the Association approach the Ministry of Health and request an implementation schedule with full details and within a defined timeframe of 6 months. We see this request as building trust that has been lost over the last few years. Nurses want to have confidence in the NSW Government, and we hope they will no longer ignore the link between nurse staffing levels and improved patient outcomes.  

CARRIED

AC45/2019  
C.7 SOUTH EAST REGIONAL HOSPITAL – BEGA VALLEY BRANCH  
Moved D Lang  
Seconded A Gillies  

This Annual Conference requests the NSWNMA to continue to use the momentum we created during the state election to campaign for ratios. If the current government does not honour their promises and continues to ignore our requests, then as a union we need to push the parameters. We need to go back to the grass roots of our campaign, and stop being so political and become more vocal and active, e.g. combined rallies across all of NSW, bed closures, following the NSW Premier with ratios placards as the California Nurses Association did to achieve ratios. This Annual Conference believes it is time to stop being polite and become a noisy squeaky wheel that needs to be noticed and rectified. We request that the NSWNMA consider industrial action if this lack of engagement continues.  

CARRIED
This Annual Conference calls on the NSWNMA to demand midwives are not replaced by RNs or ENs in our postnatal or antenatal wards. This is happening in many instances in maternity units, when a shift is rostered short of midwives or due to sick leave. Midwifery work should be conducted solely by midwives. It puts pressure on the midwives working the shift to spread themselves even more thinly across the women they care for and partitions a woman’s care between several practitioners which can cause unsafe work practices. Respect for the unique nature of the knowledge and training of a midwife is fundamental to the delivery of safe, high quality care for all women and their babies in all areas of maternity, with the exception of NICU.

CARRIED

**AC47/2019 C.9 JOHN HUNTER AND JOHN HUNTER CHILDREN’S HOSPITAL BRANCH**

*Background*

In spite of recent building work to increase the number of spaces, staff often cannot find a space to park even though they pay direct through payroll. Many staff no longer pay for on-site parking and now park in the surrounding residential streets which creates congestion for local residents and put staff at risk returning to their vehicle after dark. Staff representatives have requested that solutions such as an off-site “park and ride” be re-established, but these have been rejected by HNE management. A plan to remedy this is required by the end of 2019.

Moved C Bolton  
Seconded J Patterson

This Annual Conference of the NSWNMA seeks that the Minister for Health undertakes an urgent review of the availability of car parking for staff at John Hunter Hospital campus.

CARRIED

**AC48/2019 C.10 JOHN HUNTER AND JOHN HUNTER CHILDREN’S HOSPITAL BRANCH**

*Background*

From 07:00 to 09:00 hours on weekdays there are long queues along Lookout Road and Croudace Road in both directions as traffic tries to enter the campus via this one set of traffic lights. From 15:00 to 17:00 hours on weekdays it can take 90 minutes to get from a parking space to the traffic lights to leave the campus. Since the original hospital was built, with the promise of a second access road at the western end of the campus which is yet to be built, the number of facilities located on this site has multiplied, with the addition of the Royal Newcastle Centre, HMRI, Newcastle Private Hospital and associated consulting rooms. This has brought a huge increase in the number of staff, patients and visitors who need to access – and therefore exit – the campus every day. The hold ups caused by the morning and evening bottle neck adds 1-3 hours to the working day, adding to fatigue and eroding the work life balance. In addition emergency ambulances and public buses often get caught in this traffic jam.
Moved D Pfanner Seconded M Hatch

This Annual Conference of the NSWNMA seeks that the NSW Minister for Health and the Minister for Roads and Transport work together to urgently provide a solution to the major hold ups caused by the single entry and exit point for the John Hunter Hospital campus.

CARRIED

AC49/2019  C.11 COFFS HARBOUR HOSPITAL BRANCH

Moved S White Seconded P Brookes

This Annual Conference of the NSWNMA resolves that the Public Health System Log of Claims Committee will consider an amendment to the award prohibiting nurses doing night duty on the night immediately preceding to annual leave unless agreed to by the employee (e.g. Sunday night duty before commencing annual leave on the Monday).

CARRIED

AC50/2019  C.12 COFFS HARBOUR HOSPITAL BRANCH

Moved P Brookes Seconded S White

This Annual Conference of the NSWNMA resolves to pursue a resolution to ensure that compulsory superannuation contributions are paid monthly into an employee's superannuation fund as opposed to the current arrangement where contributions can be held back up to 3 months by an employer. The current arrangement is detrimental to the employee because it does not maximise the amount of superannuation earnings that can be achieved over an employee's working life, resulting in considerable loss of superannuation funds at retirement for the choice of working casually.

CARRIED

AC51/2019  C.13 COFFS HARBOUR HOSPITAL BRANCH

Moved P Clerkin Seconded S White

That the Public Health System Log of Claims Committee will consider a change to the Public Health System Nurses’ and Midwives’ (State) Award 2018 to clause 4 (xvi) (a) to delete the words “where practicable” at the beginning of the 2nd sentence and replace with “unless agreed upon”. This would ensure full time nurses and midwives would have two consecutive days off unless they agree to split days off.

CARRIED

AC52/2019  C.14 TWEED HEADS COMMUNITY NURSES BRANCH

Moved R Scott Seconded R Sack

That this Annual Conference requests that the NSWNMA approach the Northern NSW Local Health District and NSW Ministry of Health to seek the appointment of a qualified project officer to consult with staff and apply NSW Health Policy and Australasian Health Facility Guidelines for the fair, equitable, and suitable allocation of office work space and clinical areas for use by nurses working in Tweed Heads
Community Health and all other similar Community Health projects under the control of NSW Health.

With reference to Tweed Heads, particular consideration is requested to provide simultaneous review of the use of existing clinical and office spaces of Community Health buildings to support nurses that provide complex clinical care, confidential and sensitive information exchange, as well as preparation of higher level reports and documents.

CARRIED

AC53/2019 C.15 TWEED HEADS COMMUNITY NURSES BRANCH
Moved  R Scott           Seconded  R Sack

That this Annual Conference requests that the NSWNMA approach the Ministry of Health to seek a commitment to rectifying the lack of succession planning and backfill for specialist and general community health nursing positions.

CARRIED

AC54/2019 C.16 TWEED HEADS COMMUNITY NURSES BRANCH
Moved  R Scott           Seconded  R Sack

That this Annual Conference requests that the NSWNMA approach the NSW Ministry of Health to seek a commitment to the continuation of Audiometry services provided by specialist Audiometry Nurses in NSW by creating opportunities for succession planning through funded training programs.

CARRIED

AC55/2019 C.17 ROYAL PRINCE ALFRED HOSPITAL BRANCH
Moved  E Romney           Seconded  L Murphy

This Annual Conference supports the NSWNMA advocating for an overall wage increase for female dominated industries and jobs. This is one way to address the gender wage gap that continues to exist in Australia and is particularly noticeable in healthcare and social assistance industries.

CARRIED

AC56/2019 C.18 COFFS HARBOUR HOSPITAL BRANCH
Moved  P Brookes           Seconded  S White

This Annual Conference resolves to pursue the Ministry of Health to have a uniform that included shorts regardless of area. Nurses and midwives who work in inpatient areas should not be discriminated against by not allowing them to wear shorts.

CARRIED

AC57/2019 C.19 LONG JETTY CONTINUING CARE BRANCH

Preamble
Recently the six NSWNMA branches of the Central Coast Local Health District joined together in the successful retention of senior nursing positions from being graded as Health Service Managers.

It is a credit to the staunch Central Coast membership and solidarity of the NSWNMA teams that this was achieved.

Unfortunately this trend is occurring across the state and with four more years of a conservative government this strategy of diluting nursing positions and power will most likely continue, if not escalate.

This devaluing and eroding of nurses in pivotal positions will negatively impact our profession; not only is expertise lost, but nurses face limited career paths and risk their registration.

**Moved M Cashman Seconded M Pendrick**

That the 74th Conference of the NSWNMA continues to act on behalf of the members and wholly reject and defend any attempt of downgrading or removing nursing and midwifery positions in NSW, including senior nursing or midwifery positions.

Any attempts to downgrade or remove nursing and midwifery positions will not be accepted.

Our Public Health System relies on a robust nursing structure and it must have an appropriately proportioned hierarchy that reflects this; so any attempts to regrade nursing and midwifery positions will not be tolerated by the NSWNMA.

**CARRIED**

**AC58/2019 C.20 MAITLAND HOSPITAL BRANCH**

**Moved J Burton Seconded S Lawler**

This Annual Conference of the NSWNMA resolves that the Public Health Log of Claims Committee consider and pursue amendments to the Public Health System Nurses’ and Midwives’ (State) Award to remove the current inequality whereby full time seven day workers receive six weeks annual leave, whilst permanent part time seven day workers receive only four weeks annual leave and public holiday entitlements easily circumvented by their public health employers. The Award should provide equivalent annual leave and public holiday entitlements to all seven day workers, including permanent part time employees, similar to the approach adopted for all other Award entitlements.

**CARRIED**
D.1 NSWNMA COUNCIL
 Moved J Kiejda  Seconded E Francis

That the NSWNMA will campaign with other public sector unions in Australia to lobby the federal Government to ratify Convention 151. We do this to ensure that public sector workers’ trade union rights to form unions, to organise, and to collectively bargain in Australia are acknowledged at the international level, and enforced at the national, state and local level.

CARRIED

D.2 TWEED HEADS COMMUNITY NURSES BRANCH
 Moved R Scott  Seconded R Sack

That this Annual Conference of the NSWNMA seeks clarification from the Federal Minister for Health and the NSW Ministry of Health for the planned end date of Commonwealth HACC/CHSP funded community nursing positions and make known the future plan for funding these positions and provision of community nursing services.

CARRIED

D.3 ESTIA HEALTH AT FIGTREE BRANCH

Background
Aged Care nurses are increasingly faced with violence and aggression from residents in residential aged care, and there has also been an increase in resident to resident violence, yet occupational violence risk management in the sector is very poor.

Moved L Hardman  Seconded J Hofman

This Annual Conference seeks that the NSWNMA discuss with Aged Care providers the possibility of police checks being conducted on residents, development of systems to identify and manage the risk of occupational violence and aggression in aged care, including:

- Violence risk assessments (including the possibility of police checks being conducted on residents);
- Work, health and safety violence risk management plans (including adequate staff arrangements); and,
- Effective duress arrangements.

There has been an increase in resident to resident violence, also an increase in violence towards staff.

This information would allow for appropriate controls to be put in place to minimise the risks associated with violence such as staffing levels to be changed if necessary to attend to that resident, ensuring in order to ensure a safer environment for all.

CARRIED

**AC62/2019 D.4 ROYAL PRINCE ALFRED HOSPITAL BRANCH**

Moved E Romney Seconded S Sharp

This Annual Conference calls on the NSWNMA to develop a position statement on sexual harassment of nurses and midwives by patients and visitors. It is time for our profession to clearly articulate that illness is never an excuse for behaviour that makes nurses and midwives feel threatened and vulnerable in the workplace.

CARRIED

**AC63/2019 D.5 LONG JETTY CONTINUING CARE BRANCH**

_Preamble_

Broadly speaking, medicinal cannabis is cannabis prescribed to relieve the symptoms of a medical condition, such as epilepsy or chronic pain. It is important to make the distinction between medicinal cannabis and recreational cannabis.

Recreational cannabis is the form of cannabis that people use to get “high”.

For some people suffering from a chronic or terminal illness, conventional medicines do not work or do not work as effectively as medicinal cannabis. Also, for some patients conventional medicines may work but cause debilitating side effects that cannabis can help relieve.

The NSWNMA has a position statement in support of medicinal cannabis, but we feel that more could be done to ensure that medicinal cannabis can reach its full potential. This is a highly politicised and emotive health policy area. Advocates and objectors are often polarised. Partly this may be attributed to a lack of education and understanding of the endocannabinoid system, and the therapeutic effects of medicinal cannabis - as opposed to the very high tetrahydrocannabinol (THC), or recreational cannabis.

Evidence based advice is not readily available, and there are a number of political and bureaucratic pitfalls preventing the timely and affordable access for patients and cares.
Moved M Cashman  Seconded M Pendrick

The 74th Conference of the NSWNMA acknowledges the ground-breaking and profound implications for the therapeutic uses of medicinal cannabis.

We believe that in the next 12 months the Association should commit to the following actions:

- **Lead a national ANMF nursing conference on medicinal cannabis** Discuss with other ANMF Branches the possibility of convening a national nursing conference with local and international experts. Being able to hear from experts in this field, both nursing and others, would show leadership and accelerate the slow progress currently being made in Australia.

- **Form an alliance interest group network** of nurses, community groups, caregivers and patient advocacy groups to promote, advocate and lobby for safe affordable and timely treatment with medicinal cannabis for those seeking relief.

- **Develop a guideline on the role of nurses and medicinal cannabis covering aspects such as clinical applications, legal awareness and scope of practice issues.**

- **Survey NSWNMA members to assist in the development of a national discussion paper on the role of nurses and medicinal cannabis.** This survey should explore the need for education, clinical applications, legal awareness and scope of practice issues.

- The current medicinal cannabis administrative scheme is not fit purpose and does not meet the needs of patients. That the NSWNMA work with patient advocacy groups for a better system.

- That medicinal cannabis be considered as a topic at the Professional Day 2020 be Medicinal Cannabis.

*CARRIED*
Preamble
It was obvious to those members who volunteered and took part in campaigning activities in the recent State election that nurses are highly respected but that the electorate was less receptive of the party we asked them to support. It was also apparent that many NSWNMA members chose to support the party of their choice despite our urges. By standing alone for the Legislative Council, our members could support the candidate of their choice and still support the NSWNMA at the election. Additionally they could preference the party of their choice as number 2 on the ballot paper, which presented a major issue for some members during the recent election.

Moved G Wilson   Seconded C Murphy

This Annual Conference

1. Requests the NSWNMA continue to investigate the feasibility of creating a NSW Nurses and Midwives’ Association political party to campaign for the NSW Legislative Council in the 2023 NSW State election and a report back be given to delegates at the 2020 NSWNMA Annual Conference.

2. Endorses a ballot of all members to be conducted using Rule 45 asking the following questions:
   a. Do you support the NSWNMA creating a new political party and becoming affiliated with that party?
   b. Would you join the new political party and pay the membership fee?

3. The following criteria will be used to determine a successful ballot:
   a. Minimum 10,000 members vote and
   b. 70% of those who vote support the creation of a new political party and
   c. Minimum 1000 members agree to join the new political party.

4. In the event of a successful ballot, calls on the NSWNMA at the 2020 Annual Conference to:
   a. Propose Rule changes with respect to becoming party political and to permit political affiliation.
   b. Provide a comprehensive report back to delegates on political party formation and associated implications.

CARRIED
This Annual Conference of the NSWNMA requests the Minister for Health and the Ministry returns the delegated authority to the After Hours Nurse Managers, who at some facilities are required to seek the approval of the off site on-call executive for such things as approval of overtime and the employment of individual patient specials. This process is time consuming and overcomplicates the after hours’ management role for the facility, and the individual who has been nominated as the Executive On-Call may not possess the clinical knowledge to assess the situation particularly when they are not even on site.

CARRIED

Nurses and midwives are experiencing increased exposure to violence and aggression at work, causing untold physical, psychological and economic harm. Action is urgently required to develop an effective integrated approach to the prevention and elimination of violence towards nurses and midwives. This must include:

- Appropriate staffing and skills mix to enable safe care for patients and safety of staff and to ensure that no nurse or midwife works in isolation;
- Improved reporting systems and transparent reporting of violence;
- Proper implementation of policies designed to provide protection from violence;
- Funding pool for anti-violence measures.

This Annual Conference requests the NSWNMA immediately begin discussions with the State Liberal government about these matters.

CARRIED

That this Annual Conference requests the NSWNMA develop an Association policy and work with NSW Health to develop and implement a state-wide policy that allows for nurses over the age of 55 years to opt in to work night shifts. This Annual Conference believes that nurses over 55 years of age are not to be rostered on night duty unless the employee so requests and local management agrees. The ultimate intention of this bilaterally agreed policy is to eventually be inserted into a future Public Health System Nurses’ and Midwives’ (State) Award after agreement is achieved.

LOST