



Stat Report 2017/04

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Being a Professional

There's a popular myth that being a professional in health means accepting high workloads, mounting personal pressure and performing whatever amount of unpaid work it takes to get our work done.

Being a medical scientist, a psychologist or a pharmacist, by the very nature of the professions and the work, means being a professional. Too often when discussing workplace issues like increasing workloads and insufficient staff available to cover workloads the notion of accepting this as part of a professional role is raised.

Unfortunately when the work keeps piling up without the staff needed, it will create significant pressure. Situations where people get over-worked and neglect their own health because they have to plough through the work are apparent in every workplace. Invariably whenever these sorts of issues are raised, someone is likely to insist people should be 'professionals'; and that excessive workloads go with being a 'professional'.

It's not clear to us as to why raising issues about workloads is not being 'professional'. Or how excessive workloads are a hallmark of being a 'professional'.

What we can say about being 'professional' is that there is nothing professional in allowing your health to deteriorate because executive managements are seemingly incapable of managing workloads appropriately. There is nothing 'professional' about having excessive workloads because managements refuse to employ sufficient staff to do the work. And there is nothing 'professional' about working through meal breaks and performing unpaid work in order to get more work done.

Excessive workloads in many respects rob you of your ability to be professional.

When you are stressed and overworked errors can occur and mistakes can be amplified. Stress and being overworked can lead to serious health problems leading to increased time away from work. As you will know, errors and mistakes can make a major difference in a diagnosis or treatment; or critically delay a diagnosis for urgent treatments to be established.

We know from experience in representing members in disciplinary processes resulting from an error being made that there is not a single employer that accepts a defence of stress and anxiety from my high workload and pressure to get the job done.

It's when you're stressed and overworked that you're most at risk of making an error.

Excessive workloads are not about you and your level of professionalism; it's increasingly clear excessive workloads are about management refusing to properly manage workloads by ensuring the availability of sufficient staff. It's about management lacking the professionalism they demand of you.

These are among some of the big issues we have to take up and we're hopeful that some of these matters can be better tackled through our new public sector agreement. But at its core these issues speak to the growing concern that many vital services are reliant on you doing unpaid work; and an unspoken workplace culture of doing unpaid work.

It is up to us fight back. It is up to us to protect our professions, wages and hard won conditions and rights at work. And the best way to fight back is to strengthen our collective voice and our bargaining strength by increasing our membership – please encourage your colleagues to join the Union.

-- Paul Elliott

Update on Public Sector bargaining

Following up from our Job Reps meeting, which supported the package and agreed in principle to accepting and presenting it to members for consideration, we've now started organising rounds of members' meetings.

Over the coming fortnight we're holding members' meetings at a number of public health services to discuss the offer made on our claims.

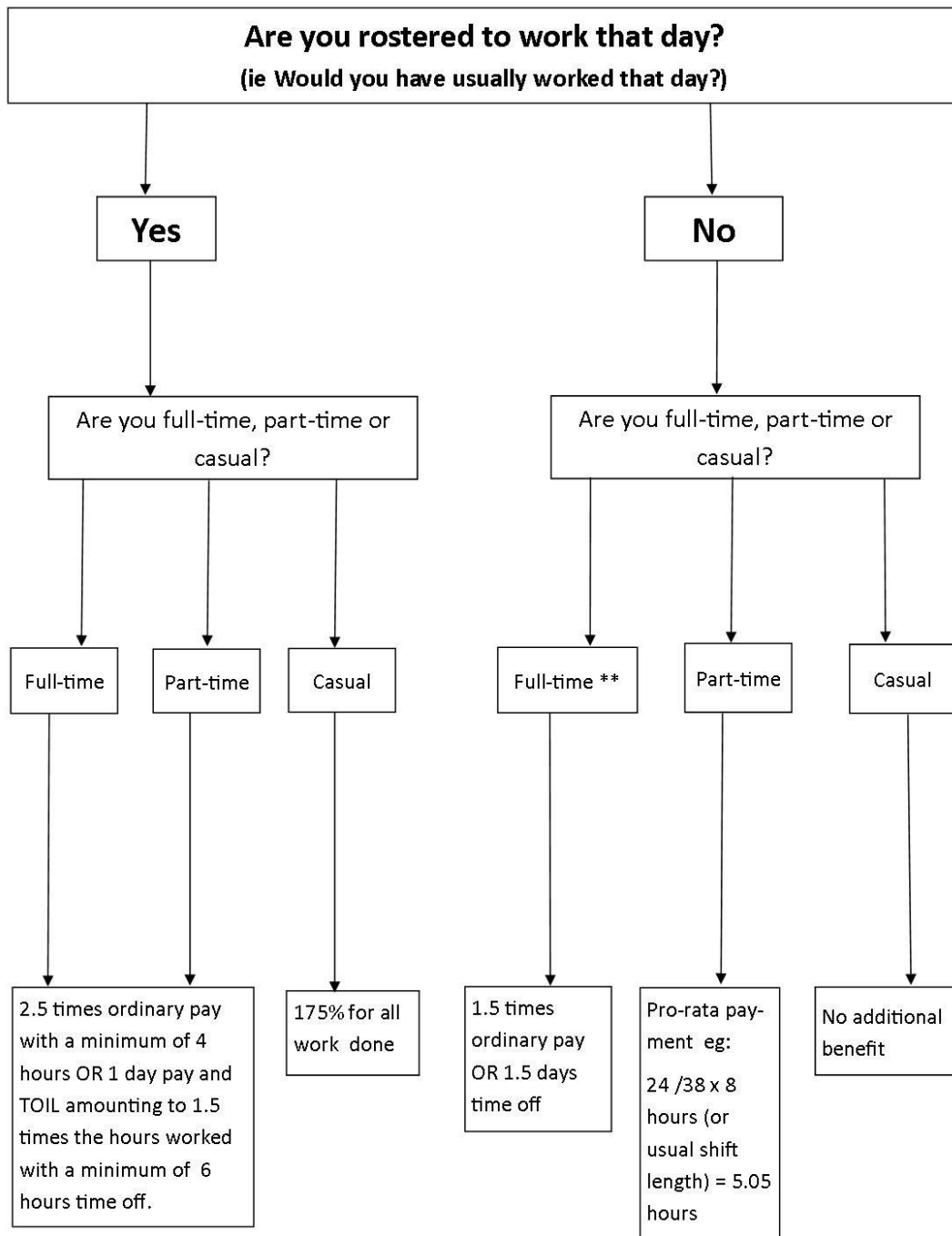
Keep your eyes peeled for notices and more details about member meetings in your workplace. Make sure you come along to hear a report on this 4 year deal and discuss your feelings about all of the possible improvements and changes.

Public Holiday Entitlements

We can't believe it but here we are in February chasing a large number of health services for failing to pay people properly over the Christmas/New Year period. It is incredibly frustrating for us and we know it's incredibly frustrating for you too.

But to make sure we are able to get your public holiday entitlements paid to you we will need your assistance. If you believe you haven't been paid correctly please send us your pay slip and roster covering the Christmas/New Year period. We also ask for your patience as we work to recover your entitlements.

PUBLIC HOLIDAY PAYMENTS



** For Easter Saturday: 1 days ordinary pay or where mutual consent, within 4 weeks following the date on which the Public Holiday occurred the employee may take a day in lieu or 1 day added to their annual leave.

If you still have queries about your entitlement or you believe you haven't been paid your public holiday entitlement please contact the Union on 9623 9623 or via email at enquiry@msav.org.au

Recent publications from NPAAC

The National Pathology Accreditation Advisory Council (NPAAC) has released three new publications including:

- Requirements for Transfusion Laboratory Practice
- Requirements for Human Genome Testing Utilising Massively Parallel Sequencing Technology
- Requirements for Semen Analysis

Members can download a copy of each of these publications directly from the NPAAC website at: <http://www.health.gov.au/npaac>

Allied Health Workforce Questionnaire

The Department of Health and Human Services is undertaking a research program into the allied health workforce. The Allied Health Workforce Research Program is specifically targeting psychologists, occupational therapists and social workers and is examining the workforce development issues that prevent allied health professions from meeting service demand.

Southern Cross University has been engaged by the Department of Health and Human Services to undertake the Victorian Allied Health Workforce Research Program. This three-year research program will generate qualitative and quantitative information to inform future policy directions and allied health workforce strategies. This will involve gathering in-depth data, from allied health employers, and individual allied health practitioners.

This survey is specifically designed for psychologists, occupational therapists and social workers who have ever worked in Victoria. More information and a link to the questionnaire can be found at: <https://www2.health.vic.gov.au/health-workforce/allied-health-workforce/allied-health-research>

Psychologists: If you need help at work you need the VPA Inc.

If you are a psychologist and not in the VPA, you are taking unnecessary risks with your reputation and career. Download an application form and join today.

Here's a 'real-life' case where the VPA has acted on behalf of VPA members.

When a patient of a major public health service committed an act of serious self-harm, Psychologist 'D', who had seen the patient many months previously, was subjected to disciplinary proceedings concerning her clinical notes. After enduring unfounded allegations by the employer, the psychologist decided to resign. VPA was able to negotiate on her behalf to obtain an attractive severance package in recognition of the injustice to which she had been subjected.

Common beaches of employment entitlements and negotiation of enterprise agreements
In addition to the above, VPA routinely assists members over issues such as harassment and bullying, under classification, organisational re-structuring, incorrect calculation of leave entitlements and health and safety. In addition, the VPA negotiates enterprise agreements for psychologists in the public and private sectors to ensure that rates of pay and conditions remain up to date.

Support Family Violence Leave for all workers

Survivors have suffered for too long behind closed doors. We all have a part to play in ending violence: it's time that employers played theirs. Tell employers that everyone has the right to paid days away from work if they are subjected to family violence.

Make your voice heard: <http://bit.ly/FDVLeave>

Stopping Gendered Violence at Work

Far too often women are attacked, harassed and threatened in their workplaces. And it needs to stop. That's why the Union is fighting back against gendered violence in the workplace – it's a very serious occupational health and safety issue.

Gendered violence is like a disease in our workplaces. Working women's experience of violence at work indicates that the problem of gendered violence is endemic in our workplaces.

Sign up to support the campaign at: <http://www.unionwomen.org.au/stopgv>

Support the Healthy Futures campaign



The Union strongly believes that climate change is union business. We know that climate change threatens our health by increasing the risks of heatwaves, bushfires, droughts and storms, displacing people and straining our health systems.

And right now HESTA and First State Super (FSS), Australia's biggest health industry super funds, are investing our money in fossil fuels - coal, oil and gas.

Join us in asking HESTA and FSS to divest from fossil fuels at www.healthyfutures.net.au/divest.

Do you need access to Domestic Violence services?

If you're experiencing domestic violence and need help, here is a list of Victorian services which may be able to assist you.

[Safe Steps \(formerly Women's Domestic Violence Crisis Service of Victoria\)](#)

[Aboriginal Family Violence Prevention and Legal Service Victoria \(FVPLS\)](#)

[Centre Against Sexual Assault \(CASA\) Forum](#)

[Community Legal Centres](#)

[Court Network](#)

[Domestic Violence Victoria](#)

[Elder Rights Advocacy \(ERA\)](#)

[Elizabeth Morgan House Aboriginal Women's Service](#)

[inTouch Multicultural Centre Against Family Violence](#)

[Men's Referral Service](#)

[No To Violence](#)

[QLife Australia](#)

[Seniors Rights Victoria \(SRV\)](#)

[The Jewish Taskforce Against Family Violence](#)

[Victoria Legal Aid \(VLA\)](#)

[Victorian Aboriginal Child Care Agency](#)

[Women with Disabilities Victoria \(WDV\)](#)

[Women's Housing Ltd](#)

[Women's Information Referral Exchange \(WIRE\)](#)

[Women's Legal Service](#)

[Women's refuges](#)

Worth Reading: Domestic violence leave a small cost to employers but priceless to victims

"When Simon Earle decided to make five days' domestic violence leave available to his 30 employees, he wasn't concerned about the extra cost to his payroll."

As it turns out, he had good reason. In more than three years, only one person has used it – for one day – even though it is open to victims and perpetrators.

Earle heads up METL ([Maritime Employees Training Ltd](#)), a non-profit joint venture between maritime employers and the Maritime Union of Australia to train seafarers. “It is letting everybody know – women in particular – that this is our stand,” he says.

“We want to stop this issue and it is part of our strategy to get more women into the workplace ... which is going to change some of the archaic attitudes that might exist in certain workplaces,” he says.

The cost of paid domestic violence leave is important because it is one of the key arguments against its proposed inclusion by the Fair Work Commission into awards that would affect 1.5 million workers.”

Read the entire article by Fiona Smith in The Guardian at:

https://www.theguardian.com/sustainable-business/2017/feb/09/domestic-violence-leave-a-small-cost-to-employers-but-priceless-to-victims?CMP=soc_568

Worth Reading: Death by racism: bigotry in the health system is harming Indigenous patients

“Death by racism should be a category on death certificates, because the racism in hospitals is hindering the recovery of many Aboriginal and Torres Strait Islander people. Spend some time as a patient in a hospital and you soon find out that the medical profession is full of bigots and people who might not consider themselves racist, but have preconceived ideas on race and hold outdated beliefs in racial stereotypes.

I have been in and out of hospital for years with a brain tumour and have experienced the bigotry within the system first hand. I have also collected stories from Indigenous people around the country and a common thread is either: “Is it me or do they treat all of us like this?” or “Am I being overly sensitive?”

Indigenous cancer patients have even had pain relief denied to them. This might happen for a couple of reasons. First, because apparently some people think we Indigenous people can cope with more pain than our European counterparts. Let me state now that that ethnocentric view is not true. Another common view is that we are “faking it” to get drugs. Now, I don’t know about you, but if someone has cancer and is crying in pain, it’s pretty obvious they are not trying to get some cheap thrills.”

Read the entire article by Colleen Lavelle for IndigenousX in The Guardian at:

<https://www.theguardian.com/commentisfree/2017/feb/06/death-by-racism-bigotry-in-the-health-system-is-harming-indigenous-patients>

Worth Reading: Sobering health stats in latest Productivity Commission report

"New health minister [Greg Hunt](#) probably choked over his breakfast cereal this morning as he read the blandly titled [Report on Government Services 2017](#), released by the [Productivity Commission](#) today.

As if he did not have enough on his plate pondering the [Medicare rebate freeze](#), which hits the [poor and sickest the most](#), the future of [private health insurance](#) and the long-term fate of [public hospital funding](#), the report puts another difficult set of issues onto his desk.

Australia [performs relatively](#) well in health when compared to other countries. But those data are about averages and broad measures.

When you dig down into the data, the report reveals serious problems, notably in the areas of

out-of-pocket health expenses, potentially avoidable early deaths, Indigenous health and state-by-state differences in health outcomes."

Read the entire article by Stephen Duckett in The Conversation at:

<https://theconversation.com/sobering-health-stats-in-latest-productivity-commission-report-72259>

Worth Reading: Busting Black Myths: The Truth About Our First Peoples

"It's one of the greatest myths about Aboriginal people: that before European invasion, Aboriginal people were simply living off the land, with no civilization and a culture that didn't make it out of the 'stone age' despite tens of thousands of years of human habitation.

If you believe this trope, you would be one of those arguing that the invasion and the massacres and small pox and stolen children that came along with it, was all for the 'greater good'.

You would be one of those on Twitter recently messaging me rubbish like "What have the Aboriginals invented? A throwing stick?" Or "Civilisation would have never progressed in this country".

You would be one of those people who believes that Aboriginal people should be thankful and rather than whinge about 'Australia Day', instead start assimilating into society, and maybe bring along with you a side of lamb chops to throw on the barbie, mate."

Read the entire article by Amy McQuire in the New Matilda at:

<https://newmatilda.com/2017/01/22/busting-black-myths-the-truth-about-our-first-peoples/>

Worth Reading: Three killer facts about corporate tax cuts you won't hear from Scott Morrison

"In this brave new world of "["alternative facts"](#)", reasoned argument just doesn't cut it anymore. While the phrase originates with the Trump administration, the tactic has been gaining traction in Australia too.

[Burqas make us less safe](#), [negative gearing has no effect on housing affordability](#), [citizens expect politicians to use public funds to attend sporting events](#). No evidence needed – assert it and hey presto, it's true.

But the return last week of a perennial political assertion offers a reminder of the value unpacking these claims and examining their moving parts."

Read the entire article by David Hetherington in The Guardian at:

<https://www.theguardian.com/commentisfree/2017/feb/06/three-killer-facts-about-corporate-tax-cuts-you-wont-hear-from-scott-morrison>

Join the Union

Are your workloads increasing? Are your stress levels increasing? Are you doing longer hours at work? Join the Union for work pain relief!

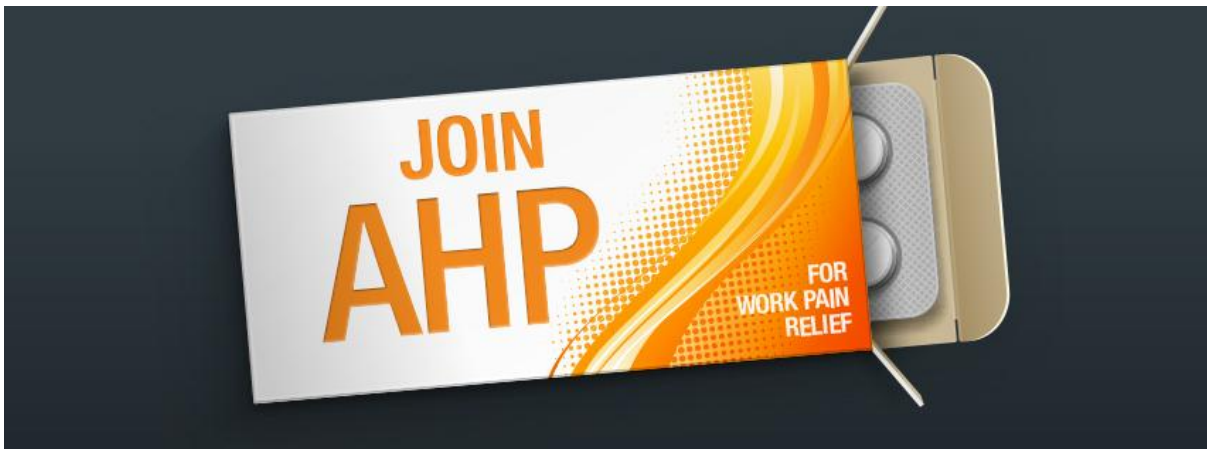
To protect our professions and stand up for our rights at work we must strengthen our collective voice and strengthen our bargaining position by increasing our membership. And you can help right now by sharing one of the images below through Facebook.



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Your Union is on Facebook

Keep up to date with what's happening by liking us on Facebook

[Medical Scientists Association of Victoria](#) | [Victorian Psychologists Association Inc](#) | [Association of Hospital Pharmacists](#)

Get the most out of the Union's website

The Union's website has a number of special features for members. These features, like the Members section and the Forums, require you to have a log-in and password.

But to ensure that your privacy is protected we have created the website in such a way that you will need a separate log-in and password for the Members section and the Forums section. It might seem to be inconvenient but it does better protect you and your private information. It also means that we can be more certain about the source of a hack if such an event is ever to arise.

Australian Unions Member Benefits app

Over the last month Australian Unions launched some new and exclusive Member Benefits - did you see our recent email telling you about this? If not, check your inbox! Search for "Lifestyle Rewards" for your login code.

Our program has expanded to include:

- Discounted movie tickets for Village, Hoyts, Palace and Event cinemas.
- Discounted electronic gift cards including major theme parks, zoos and aquariums.
- A discounted accommodation booking site.
- A new secure member only website and smart phone app.

All this is free to all members of affiliated unions. If you have not got a login and would like join in [register for Member Benefits now.](#)



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