SUMMARY OF KEY CHANGES
NURSES AND MIDWIVES (VICTORIAN PUBLIC SECTOR)(SINGLE INTERST EMPLOYERS)
ENTERPRISE AGREEMENT 2012 - 2016

The Single Interest Employers Agreement provides terms and conditions of employment for all former respondents to the previous agreement and as such includes public health services, stand-alone Community Health Centres, Early Parenting Centres and a number of Aged Care providers.

BASE RATE INCREASES AND CONTINUING PROFESSIONAL DEVELOPMENT ALLOWANCE

In addition to four annual wage increases of 2.5%, there is now provision for a Continuing Professional Development Allowance (CPD) for full time staff of $1000 in the first year, and $900 in each subsequent year (split into $450 per 6 months – payable 31 March and 30 September each year) throughout the life of the agreement. Pro-rata for part time employees.

NURSE PATIENT RATIOS

The ratios contained within the previous agreement have been retained and are found in Schedule C of the Agreement. However, there are new provisions (which have been agreed with the ANF) as to how these ratios are to be applied.

PROFESSIONAL DEVELOPMENT, EXAM AND STUDY LEAVE

Professional Development Leave and Conference Seminar leave have been merged, and Professional Development Leave extended to part-time employees. This means full-time employees will receive 5 days per annum, and part time employees will receive the pro-rata equivalent. All Professional Development Leave is to be backfilled in clinical areas. Exam Leave and Study Leave are in addition to these entitlements.

The definition of Continuing Professional Development has also been amended to reflect the NMBA Standard.

ENROLLED NURSE CAREER STRUCTURE

A new three (3) level professional career structure has been developed for Enrolled Nurses that recognises appropriate professional career progression and absorbs the current medication and senior allowances into the new base rate of pay.
REGISTERED NURSE / ENROLLED NURSE/MOTHERCRAFT NURSE HARMONISATION OF ENTITLEMENTS.

Enrolled Nurses are now covered by common conditions with Registered Nurses and Midwives. The following is a précis of those changed conditions.

Mothercraft Nurses (however titled) are considered Enrolled Nurses for the purposes of the Agreement.

ANNUAL LEAVE

Every full and part-time Enrolled Nurse is now entitled to a minimum of 5 weeks annual leave per year which will accrue at the same rate as Registered Nurses.

Full-time Employees, who work normal hours on weekends, are entitled to an additional sixth week of annual leave.

EXAM LEAVE

Enrolled Nurses are now entitled to up to 5 days paid Examination Leave per annum.

HIGHER DUTIES

Enrolled Nurses will now receive higher duties after two hours engaged in duties carrying a higher rate than their substantive classification.

ROSTERS

The old agreement required employers to post a 14 day roster, 14 days in advance. The new requirement, commensurate with the entitlement to Registered Nurses and Midwives, now requires the employer to post a 28 day roster 14 days in advance.

The previous restriction whereby an Enrolled Nurse could not work more than 6 days without 24 hours off duty has been removed.

LONG SERVICE LEAVE

An Enrolled Nurse may now have an unpaid absence up to 24 months for the sole purpose of undertaking a course of study related to nursing with the approval of the employer, without breaking continuity of employment for Long Service Leave purposes.

PERSONAL LEAVE ACCRUAL

Enrolled Nurses will now accrue personal leave similarly to that accrued by Registered Nurses and Midwives. This variation rectifies an historic anomaly in regard to the 38 Hour Week agreement in that a day is specified as 7 hours 36 minutes and not 8 hours.
QUALIFICATION ALLOWANCE

The new career structure pay rates for Enrolled Nurses incorporate and absorb both the medication allowances and the Senior Allowance (now abolished) and as such a higher qualification payment is no longer applicable for medication endorsement. However if the Enrolled Nurse is in receipt of a further post Registration qualification then a Higher Qualification payment may be applicable for this secondary qualification.

SHIFT PENALTIES

Enrolled Nurses and Registered Nurses and Midwives will now receive the same shift penalties.

INTERPRETERS ALLOWANCE, INFECTIOUS ALLOWANCE, WASH UP TIME AND HEAT ALLOWANCE.

The above have now been abolished.

CHANGE OF SHIFT

Those Enrolled Nurses working in an environment where a cap of 2 changes of shift allowances (or more) is observed retain that entitlement. Enrolled Nurses working where no cap exists presently will be individually reviewed (over the last twelve month period) and their individual average (changes of shift per fortnight) enforced as a cap and ongoing entitlement whilst they remain with that Employer. In the event they change Employers they will be paid the change of shift cap applicable to the new Employer.

The Change of Shift allowance for Enrolled Nurses will be abolished for new entrants to the workforce within the Public Health Sector on and from the date on which the Agreement comes into operation.

SKILL MIX

The skill mix in Medical/Surgical Wards has been renegotiated and employers will now have the ability to increase enrolled nurse participation with a new skill mix of up to 20% Enrolled Nurses, up from 15% in the previous agreement.

CASHING OUT OF ANNUAL LEAVE

All Employees now also have an option to “cash-out” up to 2 weeks annual leave a year, subject to strict conditions and only on the request of the employee. An Employee must maintain a balance of 6 weeks annual leave after any “cashing out”. Part-time Employees who reduce hours may elect to be paid out excess leave entitlements at the previous higher EFT rate.

SINGLE NIGHT SHIFT ALLOWANCE

The previous night shift allowance and permanent night shift allowance have been abolished and all Employees will receive the previous higher permanent night duty penalty of $64.40 per shift (to be adjusted with the percentage wage increases).
ON-CALL ALLOWANCE.

The on-call rate for Employees has been increased to $51.70 per 12 hours (to be adjusted with the percentage wage increases).

MEAL ALLOWANCES

The requirements for Meal Allowances have been reviewed and now sets out clearly the entitlements for Employees working beyond the rostered shift length, and when recalled on days off.

OVERTIME ON PUBLIC HOLIDAYS

Overtime on public holidays will now attract a minimum of the public holiday penalty, where previously only the lesser overtime rate applied. In addition, the rostered off public holiday benefits will not be affected by recall to duty.

LAUNDRY ALLOWANCE

All employees, except those whose work clothing is laundered by their employer, will receive a Laundry Allowance of $100.00 per annum, paid fortnightly and then adjusted annually by 2.5%.

RESEARCH NURSES AND COMMUNITY HEALTH CENTRE NURSING CAREER STRUCTURE

Within 6 months a new career structure will be developed for Research Nurses and an expanded career structure will be developed for Community Health Nurses.

DISCIPLINARY PROCESS

A new disciplinary process has been agreed that sets out the process requirements and expectations in regard to representation, notification and evidence. The disciplinary procedure also enables employers to issue a first and final warning for serious misconduct in circumstances where the Employee may otherwise be dismissed. The periods of reoffending leading to further warnings have been extended from 12 months to 18 months.

CLAUSE 42 – WORKLOAD MANAGEMENT / RATIOS and ROSTERS.

The new Clause 42 provides for Existing Ratios as per the 2007 – 2011 Agreement. It also allows for the redistribution of nursing hours and below ratio distribution in certain circumstances. Alternate staffing models being an established Nursing Hours Per Patient Day model like those in operation in other States within Australia may also be utilised in particular circumstances.
PUBLIC HOLIDAYS

There is a new Public Holidays clause that ensures that Employees will only receive either the actual day or the substitute or additional day, depending on which day they are rostered to work, but not both.

Example: A nurse will be entitled to one public holiday for Christmas Day. If they work the actual day - that is the public holiday for which they receive penalty payments. If the Nurse only works Monday to Friday, they would only be entitled to the additional or substitute day. The same applies to Boxing Day, New Year’s Day and Australia Day.

Public Holiday benefits do not apply to Monday to Friday workers where the holiday falls on a weekend,

Penalty Rates for public holidays are 200%, and on weekends all nurses will receive both the public holiday penalty and the weekend penalty, meaning on weekend public holidays the penalty is Double Time and a Half (250%). For casuals the penalty rates are 250% and 312.5% respectively.

MATERNITY LEAVE

A new provision has been negotiated that recognises an employee who gives birth to a Stillborn Child at or after 20 weeks gestation or who gives birth to a live baby that subsequently dies during or before the period of intended leave is entitled to the full amount of paid parental leave.

Employees seeking to reduce their period of maternity leave now will be required to give 6 weeks’ notice rather than 4 weeks. The extended timeframe will allow a more efficient use of staff resources in regard to future rostering and return to work arrangements.

CLINICAL NURSE SPECIALIST

Registered Nurses and Midwives will need to satisfy amended criteria to meet the professional development requirement. Such as providing additional information (for example attendance at professional development or membership of a special interest group) when seeking to rely upon membership of a professional body, such as the ANF, for professional development purposes.
AGREED SERVICE IMPROVEMENT

The ANF has agreed to cooperate with employers in individual workplaces to achieve sector wide improvements in the following areas:

Assist hospitals in increasing use of Enrolled Nurses to 20% up from 15% in the acute setting.

Improving patient quality and safety through nursing sensitive indicators such as:

- Reducing falls resulting in patient harm
- Reducing hospital acquired infections including further improvement in hand hygiene
- Increasing influenza vaccination uptake both to avoid transmission to patients and reduce nursing days absent
- Reducing acquired pressure injuries
- Positively contributing to work focusing on reduced patient readmission rates
- Securing a national nurse health program
- Improving patient experience of their hospital stay as measured by Patient Satisfaction Survey

OTHER ISSUES

The Agreement contains a number of new definitions to update terminology and to align it with the National Employment Standards.