

Australia: Paramedics must reject Victorian Labor government-union cost-cutting agreement

Margaret Rees
2 December 2024

Victorian paramedics are voting this week on a sell-out enterprise agreement drawn up by the state Labor government in collaboration with the Victorian Ambulance Union (VAU) and Ambulance Employees Australia Victoria (AEAV), a division of the United Workers Union.

Paramedics must vote “No” and reject their unions’ support for this cost-cutting deal.

The agreement, brokered in months of negotiations with Ambulance Victoria, will see paramedics worse off in real terms than they were in 2019. It will not increase the number of frontline paramedics or end the onerous and unsafe working conditions they confront daily.

For 90 percent of the more than 4,800 on-road clinical employees, the “offer” delivers a total base pay increase of just 4 percent annually over the life of the four-year agreement. About 500 Mobile Intensive Care Ambulance (MICA) paramedics will receive an increase in their base rates of \$12,500, phased in during the agreement.

The VAU originally called for an across-the-board pay increase of 6 percent but quietly dropped this during negotiations. It now claims that a 4 percent increase is a victory.

Glowing descriptions of the deal by the leadership of the ambulance unions are false. The 4 percent increase, in line with the state Labor government’s public-sector wage cap policy, is made up of a 3 percent rise in base rates, combined with a “Pillar 1” allowance of 0.5 percent and a 0.5 percent Productivity and Retention Allowance for each year of the deal.

The 4 percent falls far short of making up for the sub-inflationary wage “rises” of 2 percent per annum in the previous 2020 Enterprise Agreement imposed by the unions. While this agreement was in effect, the official annual inflation rate peaked at 7.8 percent nationally.

As every worker can testify, real increases in the cost of living are far more than the 2.8 percent officially claimed by Australian authorities. Consumer price index (CPI) figures

for September show that rents this year rose 6.7 percent, health costs were up by 4.8 percent, education expenses by 6.4 percent and insurance premiums by 14 percent. Mortgage costs, which are not counted in the CPI, have risen 155 percent since May 2022.

In March this year, Victorian paramedics voted down Labor’s pay cap policies and imposed various work-to-rule measures and other forms of protest, including activating ambulance vehicle lights when ramped for 40 minutes outside hospital emergency departments.

While union members demonstrated their willingness to fight over the subsequent months, the ambulance union leaderships deepened their collaboration with the Labor government. Their negotiations resulted in the latest “offer” and a joint statement in September by Ambulance Victoria management, VAU secretary Danny Hill and AEAU secretary Fiona Scanlon.

The statement claimed that the new deal would create “a new and stronger foundation for collaboration, building of trust and cementing our position as a world-leading ambulance service.” It was yet another confirmation that the unions are a crucial prop of the Labor government and its regressive social agenda. “Cementing our position as a world-leading ambulance service,” simply means imposing Labor’s demands for increased “productivity,” that is, further cuts to working conditions.

A long-standing issue for paramedics is the harsh work regime. It has been calculated that Victorian paramedics are collectively doing an average of 800 hours of forced incidental overtime every day. Overtime and extended shifts, as long as 14 hours, are routine. Last June, a Victorian regional paramedic fell asleep while driving his ambulance at the end of an 18.5-hour shift.

The proposed agreement includes the phasing in of some end-of-shift adjustments, starting in November 2025, an extra 84 full-time equivalent communications staff, and Advanced Life Support Clinicians to assist with case review

for end of shift management.

The “unsociable shift incentive” payment will increase from \$162 to \$185 per shift, and the “unsociable shift roster” will be paid at \$13.45 per hour, up from \$11.21. Individual paramedics will be taken out of service after 14 hours and have the right to refuse “unreasonable” overtime.

These measures, an Ambulance Victoria spokesperson told the media, would ensure “paramedics finish on time—getting them home to their loved ones sooner and safer.” This is nothing more than blather, intended to cover up the fact that the proposed agreement does not include any increase to frontline worker numbers.

How will the onerous, unsafe, physically and psychologically destructive work regime change without the hiring of hundreds of new paramedics? Those forced to do more overtime and work extended shifts might be paid a little extra money, but this will not resolve the dire conditions paramedics face as a result of decades of government cuts to the whole public health system, imposed with the full support of the unions.

The proposed agreement maintains a deathly silence about ramping—ambulances parked outside hospitals for extended periods because patients cannot be admitted to understaffed emergency departments. Extended ramping times, which are now commonplace, tie up ambulances and paramedics, meaning they cannot respond in a timely manner to other critical emergencies.

Hill, trying to cover up the extent of the ramping crisis with a vacuous promise of future negotiations, told the *Melbourne Age*, “There is a lot more work to do including on ramping, response times, workload and morale. This outcome will allow us to focus our full attention on working through these matters with Ambulance Victoria and government.”

In fact, September quarter response-time figures show that only 65.4 percent of urgent patients were reached by within 15 minutes, far short of Ambulance Victoria’s “benchmark” of 85 percent. Recent media reports also reveal that one-third of ambulance patients were ramped outside crowded emergency departments for more than 40 minutes.

The failure to reach response-time targets adds to the psychological stress on paramedics who are alarmed by hearing urgent calls on the radio that they cannot attend because they are waiting for a hospital bed to become free.

The ongoing ramping issue underscores that the conditions confronting paramedics are inseparable from the catastrophic state of public hospitals and the health sector more broadly. With hospitals already chronically underfunded and understaffed before the arrival of COVID-19, the ongoing pandemic, fuelled by Labor’s “let-it-rip” mass infection policies, has exacerbated the crisis.

Recent reports indicate that Victoria’s public health system is teetering on the brink of collapse, with some hospitals barely having enough funds for daily operations, much less the means to alleviate overwhelmed emergency departments.

Victorian paramedics must decisively reject the proposed agreement. This should be seen as a first step towards taking their struggle out of the hands of the union bureaucracy, through the establishment of their own independent rank-and-file committees. Their fight needs to be linked with other health workers who all confront all the same issues.

Earlier this year, the Australian Nursing and Midwifery Federation (ANMF) in Victoria imposed an enterprise agreement negotiated with the Labor government. Hailed by the union and the media, the deal will in fact leave most nurses and midwives worse off in real terms until at least November 2027, and do nothing to recoup the thousands of dollars lost through previous sell-out union agreements.

Like their ANMF counterparts, the ambulance unions oppose any unification of paramedics with Victorian nurses in statewide industrial action against Labor’s assault on public health.

The fight for decent wages, proper manning levels and all the necessary resources for a decent public health system requires a unified struggle by all health workers based on a socialist program. This involves placing health before profits and directing the billions of dollars spent on the military and war into the public health system and other vital social services.

Such a struggle cannot be taken forward under the leadership of the unions, which work hand-in-hand with the government.

Nor can it be limited to one state. This fight must involve paramedics and other health workers nationally. This includes reaching out to nurses and midwives in New South Wales, who are fighting the state Labor government and its regressive wage-cutting policies.

We urge Victoria paramedics to discuss this article with your fellow workers and contact us today to discuss how to develop a rank-and-file committee at your depot.



To contact the WSWs and the Socialist Equality Party visit:

[wsws.org/contact](https://www.wsws.org/contact)