



australian nursing federation

3 June 2009

Committee Secretary
Senate Standing Committee on Community Affairs
PO Box 6100
Parliament House
CANBERRA ACT 2600

By email: community.affairs.sen@aph.gov.au

Re: Health Workforce Australia Bill 2009

The Australian Nursing Federation (ANF) was established in 1924. The ANF is the national union for nurses and midwives, with Branches in each State and Territory of Australia. The ANF is also the largest professional and industrial organisation in Australia, with a membership of over 170,000 nurses and midwives, employed in a wide range of enterprises in urban, rural and remote locations in both the public and private sectors. The ANF's core business is the industrial and professional representation of our members and of the industry of nursing and midwifery.

The ANF participates in the development of policy in nursing, nursing regulation, health, community services, veteran's affairs, education, training, occupational health and safety, industrial relations, immigration, foreign affairs and law reform.

The ANF is delighted to have the opportunity to contribute to the Health Workforce Australia Bill (HWA). As previously stated the ANF is positive and supportive of the proposed National Registration and Accreditation scheme for health professionals due for implementation on July 1 2010. However, we remain concerned regarding some of the aspects of HWA and the proposed Bill.

Australian Health Workforce planning has been left to languish for years, with little or no co-ordination or leadership resulting in a massive and growing shortage of appropriately skilled and qualified health practitioners.

While we welcome a coordinated approach to this issue the ANF has concerns regarding a number of issues relating to HWA as outlined in the Bill. These issues include:

The Bill, in defining functions of the agency, deals with matters very broadly, it permits additional functions to be conferred by regulation or by determination of the Ministerial Council. This indefinite range of functions creates potential for role overlap, conflict and lack of clarity with other organisations already in existence. This lack of clarity also extends to the lack of definition of the health sector or health workforce which may be seen to extend to a number of areas of the community services sector. We are of the understanding that the agency will, in the first instance, be focussed on the 'professional' higher education workforce, particularly in relation to clinical education placements, but that, over time it will extend its activities to VET sector

workers. This will potentially lead to an overlap with the Industry Skills Council (ISC) role in relation to health workforce or even the displacement of the ISC from the health sector. Given the important role of the ISCs and the amount of industry knowledge incorporated into the ISC process the ANF would argue strongly against its demise or marginalisation.

We note that within the ISC framework there is a constitutional role for unions and industry representatives at all levels of the process including positions on the board. The new agency however, has no stated external stakeholder requirement at board or other levels. Indeed there is a prescription for exclusion of 'interest groups' from the original interim group, which assumes the States and Territories are not interested parties in relation to the matters which are at odds with the fact that they are the principal employers in the field.

In addition we remain concerned regarding clause 5(2) where it would appear that powers will be conferred upon HWA to do all things necessary to perform its functions. The ANF believes that one of the most important and non negotiable features of a nationalised registration and accreditation system is that the professions must have the final say on issues that are related to the professions. Consistent with the position taken by the ANF and other nursing and midwifery organisations in relation to that debate we oppose the HWA having unfettered powers over workforce planning, education and training related to our professions and we will not tolerate what we believe is a complete absence of consultation and involvement that is suggested by this clause.

The ANF recognises the need to modernise the health workforce and work practices in the industry. This will require negotiation of changes to professional roles and boundaries and this necessitates the active involvement of both employers and employee organisations in these processes. Clearly, the ANF has campaigned actively against restrictions such as limits to the PBS and MBS which has served to limit choice to consumers and advantage particular professional groups.

The ANF does not support the imposition of artificial barriers to entry into a profession that create shortages that have the effect of significantly boosting earning capacity, especially for those practitioners engaged on fee for service arrangements. The opposition of nursing and midwifery organisations to this clause is not related to seeking to replicate these arrangements that exist elsewhere. Indeed rather than seeking to restrict numbers we seek to greatly increase the numbers of appropriately educated and skilled nurses and midwives in order to address the significant workforce shortages that currently exist.

It is also noted the primary function of HWA relates to funding for entry level clinical training and supervision. We note the reference in clause 5 of the explanatory memorandum that the Ministerial Council may confer additional functions on HWA. Clause 7 says that major new functions for HWA would require amendments to the HWA Act rather than through Health Ministers direction yet this is not reflected in clauses 5 or 7 of the Bill. The ANF therefore believes the Bill should be amended to reflect commitments given in the explanatory memorandum.

Finally, it is assumed this body will develop and evaluate workforce strategies. Again the ANF insists upon there being a requirement for effective consultation and negotiation through stakeholders such as unions and other professional groups when developing

and evaluating workforce strategies. Cutting out those who both professionally and industrially have the best interests of their professions and their consumers at the forefront of our minds is completely unthinkable and again we will object publically and campaign against these provisions if they are pursued in the current form.

The ANF believes that the Bill requires significant amendment to deal with these issues and would welcome the opportunity to meet with you to explore proper resolution of them.

Yours sincerely



Gerardine (Ged) Kearney
Federal Secretary

The industrial and professional organisation for nurses and midwives in Australia

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