

Forensicare EBA Offer

After an incredibly long campaign, the Government has made an offer of settlement for the Forensicare EBA. Attached is an overview of the offer, which we have broken down into applicable classifications.

Most of the big items in this offer are those relating to common clauses meaning ALL staff working under the EBA will receive them (e.g. parental leave and superannuation improvements).

We haven't included some small drafting/wording changes in this document; however, if you would like a complete copy outlining all the format/wording changes, get in touch with your area organiser or HACSU on 1300 651 931.

As always, it is entirely up to members whether an offer is rejected or accepted. There are pros and cons to each path forward — to assist members in making an informed decision, we have outlined the options and a view of the pros and cons of each.

Please note this SMS vote is to get an indication of where Forensicare members want to go from here. The EBA will still need to be completely drafted and a formal endorsement vote held.

Option 1: Accept the offer

If members vote to accept this offer, we would then move into the final drafting stages (fixing any agreed wording errors, etc.). The proposed agreement would then be presented to HACSU members to vote and endorse the Agreement. Then, the EBA would be submitted to the Fair Work Commission to begin the process of certification. This process can take a couple of months. The new pay/conditions would apply from the date that the EBA is certified.

Pros: Members to receive backpay (to July 2021) and other new conditions once EBA is certified.

Cons: Non-agreed items are off the table until the next bargaining round in 4 years.

Option 2: Reject the offer and maintain bans as currently implemented

If members reject this offer, we continue to bargain. With bans maintained at their current level, it will be difficult to push the government to put more on the table.

Pros: The possibility of improving outcomes, no additional bans which would cause loss of pay for members, less likely to have industrial action terminated in the FWC (compared to escalating action)

Cons: The Government is likely to reduce their pay offer over the coming months based on current economic realities rather than increase it. All currently offered items would again be up in the air — having previously offered an item doesn't mean the employers have to continue offering that item.

Option 3: Reject the offer and step up bans

If members reject this offer, and want to escalate the campaign then bans and industrial action could be stepped up in a few different ways — this would require all members to stick to all current bans.

Pros: The possibility of improving outcomes, the possibility of increased media coverage which may help pressure the government — if all HACSU members commit to action.

Cons: We can never guarantee any improved offer; depending on how much the bans were stepped up (much longer stop works, or stop works across multiple sites simultaneously, for example), there is a real possibility of our bans being terminated. If this happens, we lose our pressure point.

An SMS vote will be sent Wednesday 19 January to HACSU Members.

To have your response counted, you must reply YES or NO by 5PM on Monday 24 January.

CONTENTS

Page 1: Forensicare-specific claims
Page 2: Common claims (impact all staff)
Page 5: Admin/Allied Services claims
Page 6: Lived Experience Workforce claims
Page 7: Health Professional Claims
Page 8: Nursing & PSO Claims

FORENSICARE-SPECIFIC CLAIMS

Within the first 6 months of lodgement of the Agreement with the Fair Work Commission:

- Forensicare to undertake a review of the Clinical Administration Team's workload
- Additional 2 FTE to be allocated to the Clinical Administration Team (7 days a week, am and pm.), with additional resourcing to be considered as part of the review.
- A review of all ward clerks' workloads
- On call roster to be created for ward clerks so that they can be available to work on weekends and public holidays to enable admissions and discharges to occur on these days. This work can be undertaken remotely.

Additional staffing overnight to ensure that a minimum of 3 nursing staff are roster per night (with the exclusion of Jardine Unit).

Forensicare to be included as part of consultation and engagement for the delivery of additional 800FTE agreed to in the Mental Health Enterprise Agreement Memorandum of Understanding.

FSRDP to be paid on parental leave for all employees.

COMMON CLAIMS - ALL STAFF

Introduce new Workload Management System (CTWMS) model for Acute Community Teams (CAT/ECATT etc.)

Introduction of protected non-clinical time for workers in acute community teams:

- 1 January 2022 - 0.9 to 1 FTE: 2 days per month
- 1 January 2023 - 0.4 to 0.8 FTE: 1 day per month

Introduce an Alternative Dispute Resolution Panel to address disputes relating to classifications, and by mutual agreement disputes regarding underpayment of wages

Loss of pregnancy under 20 weeks gestation will become a 'permissible' matter to access compassionate leave for the primary and non-primary carer.

Establishment of a Royal Commission Working Group (RCWG) to identify recommendations of the RC which have implications for the operation of the enterprise agreement.

800 FTE to be implemented in the delivery of mental health services over the life of the enterprise agreement – unions will be consulted on where these positions go.

Parental Leave:

Primary Carer Paid Parental leave to increase by 4 weeks – from 10 weeks to 14 weeks.

Non-primary Carer Paid Parental leave to increase by 1 week – from 1 week to 2 weeks.

Employer Superannuation Guarantee contributions to be paid through all paid and non paid parental leave.

Paid leave entitlement is determined at the time of birth to ensure the right to paid leave occurs contemporaneously with the birth of the child.

Leave:

Up to 2 weeks paid leave to engage in voluntary emergency management activities (e.g. CFA, SES)

Introduction of Special Paid Disaster Leave

Three paid days per calendar year, non-cumulative, where the employee is unable to attend work in limited circumstances:

- due to a disaster resulting in their residence being damaged/under imminent threat of major damage,
- the lives/safety of their immediate family or household members are threatened, or formal closure.

Introduction of Paid Defence Leave – permanent staff, reimbursed by Employer of the difference between their expected earnings and the amount paid by the Australian Defence Force

Amended wording increases employer discretion to provide compassionate leave for relatives not currently covered by the existing immediate family definition.

Long Service Leave:

Long Service Leave to be accessed pro-rata at 7 years with a staged introduction being:

- 1 July 2021 – 9 years
- 1 July 2022 – 8 years
- 1 July 2023 – 7 years.

Prospective resolution of pre-modern Award LSL entitlements which will improve casual RPN, PEN and PSO entitlement (as per VHIA clause) – casuals to receive the full entitlement under the enterprise agreement (6 months after 15 years)

Clarification of portability of service entitlements (personal leave) for Employees seeking to transfer service to another Employer.

Superannuation:

Superannuation to continue to be paid through absences on parental leave – not only the paid component.

Employer superannuation to be calculated and paid fortnightly where existing systems have the capacity. Future implementation of new systems to incorporate this requirement.

Staffing:

Improved backfill arrangements for all leave absences.

Introduction of a supplementary roster system.

Additional HDU staffing to ensure staffing meets the HDU minimum numbers of nursing without detriment to the remainder of the unit, in accordance with the numbers agreed with the unions in bargaining.

Gender and Diversity:

Amendment of Ceremonial Leave provision to enable attendance at a day during NAIDOC week

Gender Transition Leave – Up to 20 days paid leave for essential and necessary gender affirmation procedures (see clause 58 of the Victorian Public Service Enterprise Agreement 2020). Up to 48 weeks unpaid leave.

Classification Descriptors:

- Inclusion of Aboriginal Traineeship arrangements.
- Inclusion of Nursing Indigenous Health Cadetship arrangements.
- Inclusion of Mental Health Engagement Worker arrangement provision

Occupational Health & Safety:

Insertion of a process for Unions to obtain a copy of DWG list; names of HSRs; and election and HSR training dates.

Inclusion of standing OVA agenda item at WIC.

Performance Management & Union Facilitation:

Insert requirement to establish local MHWIC and reschedule cancelled meetings.

Reworded/clarified clauses re: consultation, performance management, employee travel and redundancy.

Miscellaneous:

Provision that provides Graduate Nurses/employees undertaking Post Graduate studies with ongoing employment where suitable vacancies exist.

Insert provision regarding private car use by employees – employees can only be directed to use their private car for work purposes where it forms part of contract of employment or agreed in writing.

Best Practice Employment Commitment:

To hold discussions over the life of the Agreement regarding the following no-cost items:

- Consistency of documentation
- Applicability of NUM descriptors/Advanced Practice Framework to Mental Health environment
- Community teams skill mix
- Staffing profiles to support potential legislative developments
- Management and administrative classification structure.

ADMIN/ALLIED SERVICES CLAIMS

In addition to all common claims, pages 1-3:

WAGES

Annual wage increase of 2 per cent per annum over four years

- 1 July 2021 – 2%
- 1 July 2022 – 2%
- 1 July 2023 - 2%
- 1 July 2024 - 2%

An annual retention payment to be made at the same time as annual wage increases as follows:

1 July 2021	1 July 2022	1 July 2023	1 July 2024
\$1500	\$1800	\$2000	\$2000

Occupational Health & Safety:

Requirement to ensure frontline administrative employees are adequately trained in responding to incidents of Occupational Violence and Aggression (OVA).

Requirement to provide PSAs within Acute Inpatient Units a functional duress alarm.

Insertion of a requirement to ensure support employees are informed of any heightened OVA risk within the Unit and any additional precautions necessary to reduce risk (which may include a Nurse being present when a meal is being served).

LIVED EXPERIENCE WORKFORCE CLAIMS

In addition to all common claims, pages 1-3:

WAGES

Annual wage increase of 2 per cent per annum over four years

- 1 July 2021 – 2%
- 1 July 2022 – 2%
- 1 July 2023 - 2%
- 1 July 2024 - 2%

An annual retention payment to be made at the same time as annual wage increases as follows:

1 July 2021	1 July 2022	1 July 2023	1 July 2024
\$1500	\$1800	\$2000	\$2000

Allowances:

Qualification Allowance (however titled) for Lived Experience Workers – 4% for a Graduate Certificate; 6.5% for a Post Grad Diploma, degree, or double degree; 7.5% for a Masters degree and 10% for a Doctorate.

Staffing:

Introduction of a new multi-level classification and salary structure for the Lived Experience workforce – utilising the salary structure proposed by HACSU and with agreed transition arrangements.

Miscellaneous:

Introduction of supervision arrangements for Lived Experience Workers.

HEALTH PROFESSIONAL CLAIMS

In addition to all common claims, pages 1-3:

WAGES

Annual wage increase of 2 per cent per annum over four years

- 1 July 2021 – 2%
- 1 July 2022 – 2%
- 1 July 2023 - 2%
- 1 July 2024 - 2%

An annual retention payment to be made at the same time as annual wage increases as follows:

1 July 2021	1 July 2022	1 July 2023	1 July 2024
\$1500	\$1800	\$2000	\$2000

Annual Leave:

Health Professionals to receive an additional 2.5 days annual leave – will create alignment with nurses' quantum.

Payment of qualifications' allowance on all forms of paid leave for Health Professionals, PENs and PSOs (however named).

Clarification of the circumstances in which health professionals are entitled to a higher duties allowance with the higher duties arrangement to be recorded in writing.

Classification Descriptors:

Inclusion of explicit speech pathology and art therapy classifications.

Miscellaneous:

Establishment of a process to enable workers in community and acute inpatient units to elect to work in an alternative setting to assist with retention of mental health staff.

NURSING & PSO CLAIMS

In addition to all common claims, pages 1-4:

WAGES - Nurses

Annual wage increase as follows:

- 1 July 2021 – 3%
- 1 July 2022 – 3%
- 1 July 2023 – 3%
- 1 July 2024 – 1.5%

A one-off payment to be made at the commencement of the new Agreement equivalent to 3% dated back to 1 December 2020.

10-day transition program for up to 550 Enrolled Nurses commencing in Mental Health allocated across the mental health services.

Existing nursing positions in community teams will be replaced by nurses when they become vacant. This may be amended through the change consultation process in the enterprise agreement if it will have detrimental impact on vacancy filling.

Six Graduate Support Nurses to be introduced as a trial to assess the benefit to the workforce.

Professional Development Leave:

Increase nurses eligible to access study leave entitlement from 440 FTE to 1000 FTE

Strengthening of provision to ensure mandatory training does not reduce an Employees professional development leave entitlement.

Annual Leave:

Part-time nurses to receive pro-rata leave for working 10 weekends or more

Long Service Leave:

Insertion of ability to transfer personal leave where RPN, PEN, PSO remains on the casual nurse bank – a statement of service to be made available.

Grade 4 Year 1 to receive uplift of \$50 to the amount of \$1950.00 to address the current anomaly between Grade 3 Year 5 and Grade 4 Year 1

Meal Breaks:

Amended clause 84 to provide that an Employee unable to take their meal break on an ad hoc basis will be paid for the meal break as time worked at their ordinary rate plus 50%.

Where Employees are regularly unable to take their meal breaks, a 'crib time' arrangement will operate. The crib time arrangement entitles an Employee to a paid meal interval of not less than twenty minutes to commence between three hours and five hours of duty at a rate equivalent to ordinary hours.

Allowances:

- Qualification Allowance - 3.5% of the base rate for Registered Psychiatric Nurses with a Certificate IV in Training and Assessment where the employer requires that qualification (applicable if no other qualification allowance applies).
- Change of Roster Allowance – roster change allowance of 2.5% for changes notified between 8 and 14 days and 5% for changes notified 7 days or less.
- Recall paid at the equivalent overtime rate.
- Damaged Clothing Allowance for Nurses – to align with Health Professionals provision, which is at clause 107 of the existing Agreement.
- RPN5 Access to 'Saturday and Sunday Work', 'Higher Duties Allowance', 'Shift Allowances', and 'Overtime' when undertaking direct care clinical work.
- Payment of qualifications' allowance on all forms of paid leave for Health Professionals, PENs and PSOs (however named).
- Six-month trial of greater Sunday night shift penalty for permanent RPNs, PENs and PSOs to be undertaken in the last six months of the new enterprise agreement.

Staffing:

Clinical Educators for Parent and Infant Units (0.5 FTE at six units)

Classification Descriptors:

Insertion of a framework to introduce a Registered Undergraduate Student of Nursing (RUSON) and Enrolled Nurse pre-qualification employment model.

Inclusion of Mental Health Inpatient Clinical Nurse Consultant classification descriptor.

Inclusion of Graduate Support Nurse classification descriptor.

Rename PSOs to 'Mental Health Assistants'.

Miscellaneous:

Establishment of a process to enable workers in community and acute inpatient units to elect to work in an alternative setting to assist with retention of mental health staff.

Insertion of a process to have PCNS/RPN2 status recognised from the commencement of employment with a new employer.

Insertion of a process to determine whether overseas nursing experience (prior to registration within Australia) is comparable and therefore contributes to years of experience.