

Bargaining News

We have had a busy month initiating bargaining for many of our newest members, as well as finishing a number of collective agreements. In the last two weeks, bargaining has been initiated for:

- Pharmacists and Pharmacy Techs in Nelson Marlborough and Hawkes Bay
- Anaesthetic Techs in Southern, Nelson-Marl, MidCentral, Lakes and Northland
- Taranaki Dietitians
- Waikato Biomedical Engineers
- Mental Health Managers in Nelson Marlborough
- CSSD members in Hawkes Bay
- Southern Psychologists

Meanwhile, bargaining continues for Northland Physios, Bay of Plenty and Canterbury Anaesthetic Technicians, Laboratory Workers in Gisbourne, and Waikato Perfusionists. We will shortly begin bargaining for our Waitemata Dental Therapists. Meanwhile, bargaining for Northland Social Workers is set to initiate in November, so we recently met with members to discuss potential claims and plans. Northland DHB Occupational Therapists will also begin bargaining shortly.

Nationwide Workforce Issues

The following workforce events are coming in the next month:

- Allied Scientific and Technical Governance meeting at Health Workforce NZ
- Laboratory Roundtable Meeting
- Meeting to discuss National Screening Unit activities and implications for the AST workforce (note changes for cytologists with the cervical screening programme)
- Meeting of the Radiology Workforce Group
- Intersectional (Health, Justice, Oranga Tamariki, Education) Psychologists Workforce meeting.

As we have recently had a number of new members join APEX: a timely reminder. Your work email is the property of your employer and as such can be, and often is, viewed by your employer.

When communicating with APEX please use your own private email address as some information is confidential (especially claims for bargaining) and not for your employer's viewing.



Election Policy Update

Here we have an APEX update of the health-related election policies just in time for the election. The *New Zealand Herald* has summarised all election policies for all major parties; to access the interactive guide, click on the Live Election button.



National



The National Party continues to campaign on its "Delivering better results for NZers." Since our last issue of *To the Point*, Health Minister Jonathan Coleman announced

that Canterbury will receive a \$57-million specialist mental health facility, pushing the total spend on the region's hospital rebuild to over \$1 billion. Around the same time, they also announced increasing the total number of elective surgeries each year to 200,000, and that they would establish a new School of Rural Medicine. National also plans to extend \$18 GP visits to an additional 600,000 lower-income people. Perhaps the biggest announcement, however, was the promise to a new \$1-billion hospital in Dunedin, to be built via public-private partnership.

Labour

Labour's key campaign policies remain focused on investing \$8 billion more into Health. However, the campaign was shaken by a leadership change, and Jacinda Adern relaunched the election campaign on August 20. She



has announced that finding solutions to the mental health crisis will be among Labour's top priorities in the first 100 days, if elected.

On August 26, Labour announced that they will cut GP fees by \$10, making GP visits either free or less than \$8 for half of all patients. As with National, Labour has committed to a new Dunedin Hospital, although theirs would proceed without a public-private partnership.



Greens

The Green continue to push



preventative medicine as the cornerstone of their healthcare ethos. The most recent direct announcement from the Greens came on September 11, when they announced policy to fund free mental-health counselling services for all people aged under 25 years. They continue to emphasise the connection between housing conditions and health outcomes, especially for children.



NZ First

New Zealand First describes health as a critical investment for New Zealand. Their most specific proposed changes are directed



towards children and the elderly, with policies

for extending free doctor visits to all school-aged children and funding 3 free GP visits for SuperGold card holders. However, New Zealand First has not made any new health policy announcements in the last month.

NPL Agreement Ratified

The new collective agreement for Northland Pathology Ltd (NPL) has been ratified and will run through until 31 August 2019.

Broad gains

Whilst our NPL members are pleased to have made gains on pay, annual leave and redundancy compensation, we now need to campaign to get experienced members recognised on the merit scale in the Agreement. For years the NPL management have used the supposed 'lifestyle choice' that is living and working in Whangarei to get away with pay rates below those paid to similarly qualified members in other areas. This year's settlement represents a small dent to that approach by the company, but we are determined to continue to make more gains before the next negotiations.

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Taranaki Medlab Contracting

For almost a year now, APEX has been exerting pressure on Taranaki DHB to pursue an open and transparent tendering process for their proposed Laboratory restructure. Finally, last week the DHB announced that they will abandon their flawed process and go to open tender in October. Let's recap the events that led up to this.

How it all started

Back in Aug/Sep 2016, the Taranaki DHB decided to 'explore the provision of Laboratory Services in Taranaki by one provider.' They announced that 'the DHB was at the early stages of discussion with a preferred provider'. It was no secret that the preferred provider was Taranaki MedLab – the current provider of the community service. Equally clear was that there was already considerable investment in an outcome that would see the DHB build a new combined laboratory with public money and then hand it over to MedLab Taranaki to run.

Enter APEX – still NZMLWU at that time – with some obvious concerns. Enquiries quickly revealed that the DHB had no appetite to open up the process. There would be no competitive tendering to ensure the best possible price and services. Aside from the risks to the public purse, the long-term security of union members was of particular concern. We went public the following week:

"In our experience, to name a preferred provider so early in the process and without at the very least seeking any expressions of interest (EOI) is unprecedented in NZ when the outsourcing is a new venture. We want to ensure whatever arrangement is decided is robust and sustainable, and doesn't risk losing our highly skilled medical laboratory scientists and technicians to the detriment of the health sector and patients. . . . To put this essential component of healthcare at risk is foolhardy."

Lack of DHB co-operation

We sought from the DHB all the information that had led to their decision. The DHB chose to be completely unco-operative, which forced us to seek the information via the Official Information Act. In response to the OIA request, the DHB sent through documents with 90% of the relevant information redacted.

Union Response

APEX complained to the Ombudsmen about this and will pursue the complaint until we get a determination. On top of all this the National Secretary wrote to Chai Chuah, the Director General of the Ministry of Health, expressing considerable concern about the Taranaki situation.

Current status

Fast forward to September 2017 and we see that, combined with some pressure from other interested parties, our actions have forced the DHB to relent and abandon its previous approach. The process to award the contract to MedLab Taranaki has been discontinued, and the DHB will go to open tender in October. This is a great example of how persistence and sticking together delivers the goods – even if sometimes it takes quite a bit of time!

Pharmacy Meeting

Pharmacy delegates met in their first division meeting on the 11th of September. The division has grown by 20% since 1 January 2017, and APEX membership continues to increase across the DHBs we currently represent.



The aim of the meeting was to discuss issues that pertain to Pharmacy. These include increasing scopes of practice and additional qualifications, workload and staffing, Ministry of Health directives and the level of uptake by the various employers, and continuing professional development and access to training. This was a great opportunity to network, share common issues and solutions, and generate robust discussion.

Meet Your Delegates

Hawkes Bay Pharmacy Reps

Rosie Church: I'm a senior technician at Hawkes Bay Hospital. I started in Napier Hospital before it amalgamated – that was prior to 1998, put it that way! I'm also a qualified PAC technician, having gone through with the initial cohort. I also relieve in the chemotherapy department.



Sue Watson: I started in hospital pharmacy for 2-3 years before travelling and managing community pharmacies. I came back to NZ and worked in community and hospice pharmacies. I've been in a hospital pharmacy for 10 years now, specialising in mental health. I also work as a backup for our cytotoxic specialty.



Louise Burnside: I've been a pharmacist for many, many years! I qualified in NZ and went to Australia, then the UK, working in Scotland, Manchester and Guernsey. I lived in London for 6 years in various specialties, including mental health, elderly care and neurology. I worked for Guys and St Thomas' for about 7 years, then came back to NZ. I've been with Hawkes Bay for 5 years now.



What brought you to APEX?

Rosie: The support, the background support, and being part of a medical specialist union. APEX understands what we need and what we're talking about.

Sue: The fact that other pharmacy groups were with APEX was also a driving force.

"APEX can understand what we need to do for our professional integrity, as opposed to being just a good worker."

And the APEX advocates are great, too: I feel their energy and commitment – it's not just a job to them, it's something they're passionate about.

Louise: Yes, the advocates seem to know a lot about pharmacy, and what direction we're heading in.

Challenges for the future?

Rosie: Salary negotiations and wage rounds are always a challenge!

Sue: Yes, to make our pay rates fair and comparable across workplaces.

Louise: Looking at a consistent agreement for pharmacists within hospitals. When I returned from the UK, I was surprised that each DHB was so different. I was also surprised at how poorly pharmacy in NZ is remunerated and recognised. I think we're getting left behind compared with our overseas colleagues.

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