



& Pharmacists PHARMACY TECHS

May 2018

COLLECTIVE BARGAINING

A lot has happened since our last newsletter!

As you may or may not be aware, the NZNO has received an offer for their members covered by the Nurses DHB MECA. The offer includes: 1) a term of 33 months with 2+2+2% increases in salary over the term; 2) recognition of advanced practice for senior roles and midwives; 3) increases in on call rates from \$4.04 and \$6.06 moving to \$8 and \$10; 4) recognition of phone call consultations as work; and 5) increases for training funds. We expect similar increases to provisions to be available to our members in ongoing and upcoming bargaining. We will discuss these with members as we prepare for each set of bargaining.

NELSON MARLBOROUGH

Nelson Marlborough Pharmacy has had their first 2 days of bargaining. Agreement so far has been reached on moving salaries similar to those of other APEX pharmacy groups, increasing on call rates, recognising extension of scopes and improvements to merit progression. Their issues raised in

DIVISIONAL STATUS

The Pharmacy Division continues to grow. The Clinical Pharmacist Facilitators at Hawkes Bay DHB have recently joined, and interest continues to be shown by pharmacy staff from other DHBs. The growth can be attributed directly to word of mouth from members, as well as APEX delegates from other professions talking with their pharmacy colleagues.

bargaining were similar to most other pharmacy groups:

- Protection of current terms and conditions.
- Salary that recognises base qualification and job size/complexity.
- A salary increase relative to that currently being offered to other professions across the health sector.
- Merit progression that sets a career path and adds value, and is relevant to pharmacy
- Future-proofing with recognition of extension of scopes i.e. PACT and prescribing pharmacists.
- Adequate staffing to get through the work and backfill for training and leave.
- Safer rostering out of hours with adequate breaks between duties.
- Facilities and accommodation.

HAWKE'S BAY

Hawke's Bay has met for two sessions of bargaining. All claims were presented to the employer, who will now cost options

and prepare an offer.

NORTHLAND

The recent review of Pharmacy services revealed an unmet need for both Pharmacist and Pharmacy Technician resource on weekends. There is also an impending change in service requirement, which may require extending hours of work for this group, and the need to implement new roles. These issues, along with members' claims, were discussed at our first bargaining session on May 2.

FACILITATORS

Clinical Pharmacist Facilitators have now joined APEX. These members are currently employed by HBDHB on IEAs with varying terms and conditions. We will be working together to look at comparative salaries and bench marking of roles and terms and conditions, with a view to negotiating a collective agreement for this group in late 2018.

ITEMS STILL ON OUR RADAR

1. **THE FUTURE:** Headway is being made with employers to recognise the current extension of scopes as staff become qualified or are appointed to roles. We will watch this closely and raise these at upcoming bargaining rounds.
2. **DELEGATES:** To ensure the sharing of information between APEX and members, we need adequate representation in the workplace. If you don't currently have a delegate and are interesting in becoming one, please talk to your colleagues and let us know. We have vacancies for a technician delegate at Waikato, and a Pharmacist and Technician delegate at Southern DHB (Dunedin).
3. **WORKLOAD:** Workload continues to be reported as an issue by all our delegates across all pharmacies. APEX strongly advises you to take care of yourself: take your breaks, and start and leave on time or else claim overtime. If you do not do this, the employer will continue to pile work on you because you are masking the inadequate staffing. Also speak up on days when you are extra short and if you don't get a satisfactory response, such as reduction in services, let your delegate or APEX know so we can get involved.
4. **FATIGUE:** Raise concerns immediately with management. If you need assistance, contact your APEX delegate or representative. Safe rostering practices will be a feature of collective bargaining.
5. **PAY EQUITY:** A watching brief on processes that are already underway.

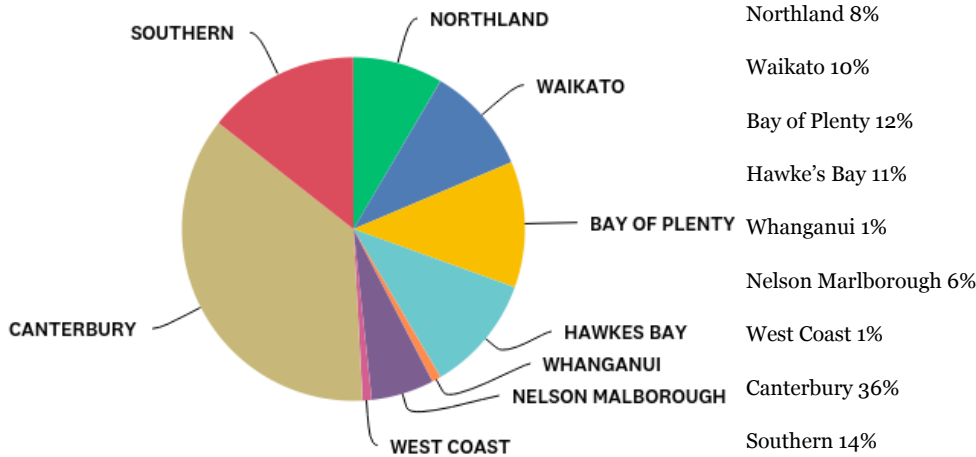
FATIGUE SURVEY RESULTS

In March this year we surveyed our Pharmacist and Pharmacy Technicians members to ask them about their thoughts on fatigue in their workplaces.

RESPONSE RATE

The survey was completed by 53% of our members. The breakdown of responses by DHB is given below.

WHICH DHB DO YOU WORK FOR?



EXTRA HOURS

34% of respondents work extra hours more than once per week. 17% of respondents work extra hours once per week. Some members commented:

“Extra hours sometimes takes the form of missed breaks.”

“Regularly doing at least an extra 5 hours per week unclaimed and unpaid and unappreciated.”

“Late prescriptions after 4.30 and we don't get paid past this time.”

WEEKEND OPENING HOURS

Members reported that the majority (90%) of pharmacies were either staffed for a half day on Saturdays or that the on-call pharmacist attended at least 3 hours on a Saturday morning.

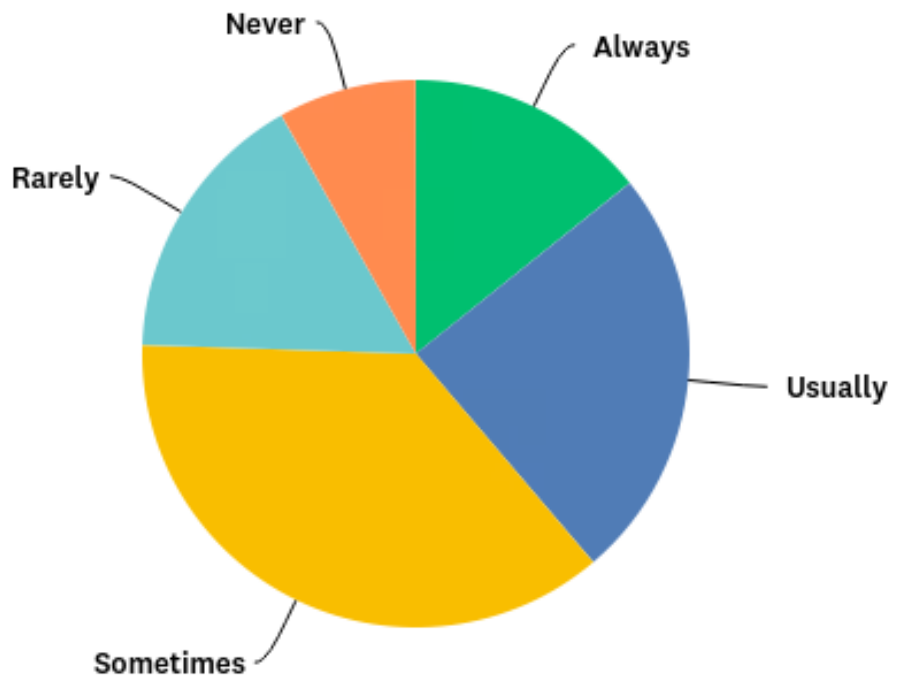
Of these only half also provided a morning service on a Sunday.

HOW CAN ROSTERS BE IMPROVED?

There were 4 main themes in the responses:

- The present on call week (Monday to Monday) should change to a Thursday to Thursday week. Also, that following a weekend on-call duty there should be two consecutive days off. Two consecutive days off after rostered on call weekend would ease fatigue.
- A technician should also be rostered on to work with a pharmacist on weekends. This would allow the pharmacists to concentrate on pharmacist duties, and the technician would be able to provide support for dispensing, compounding and distribution tasks.
- The on call service should be used only for urgent supply or clinical queries. The dispensary service

DO YOU FEEL TOO TIRED TO WORK THE DAY AFTER A PERIOD OF ON CALL?



should be kept separate from the on call service. In consideration of this, it is recommended that a dispensary shift be developed, along with the on call roster.

- Phone calls in the night are very disruptive to sleep, and the phone call is not necessarily paid.

These issues will form the basis of claims in collective bargaining.