



Under the Microscope

May 2019

IMPORTANT YEAR AHEAD FOR MEDLABS

We are now well into what promises to be a very important year for medical laboratory workers. The DHB's MECA expires on 6th September 2019 and we will need to be prepared for a very firm campaign in pursuit of significant improvements to laboratory workers in New Zealand. By September it will have been quite a length of time 'between drinks'. Since the last agreement was settled in 2016, there have been significant changes in the Health Sector and employment environments generally.

When we settled previously, Jonathan Coleman was still the Minister of Health, the NZNO DHBs MECA had not even begun its renewal process, and there was still no pay settlement arising from the TerraNova pay equity case in the Aged Care Sector. Since then, a Labour Government has been elected with a new Minister of Health David Clark (more on the new Minister later), pay equity settlements have been made in the Aged Care sector which are flowing to other care workers, NZNO settled their DHBs MECA with a range of 3% per annum pay increases, the minimum wage has moved to \$17.70/hr and

the 'Living Wage' has been increased to \$21.15. These developments expose severe under-payment and under-recognition of employees in the medical laboratory sector that must be addressed.

In this newsletter, you'll see that we continue to make good progress in private sector medical laboratory bargaining, that we are well down the road in preparation of a pay equity claim for laboratory technicians and that planning is in hand for the DHBs MECA renewal. What we do here in the office is all very well, but we are going to need you, our members, to be very active this year in the various campaigns.

So, back to the Minister of Health. It is fair to say that insofar as the needs of our APEX members are concerned, he has been a disappointment. David Clark appears undisturbed as he presides over a sector that has seen every DHB slip into deficit on his watch. We also know that aside from not reversing the years of under-funding during the time of the National Government, that he and his Ministry are so far unprepared to release additional funding to

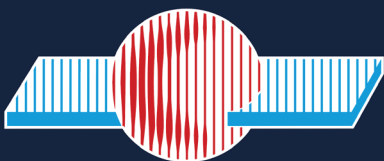


settle Allied, Scientific and Technical collective agreements. This must, and will, change. The DHBs laboratory MECA will feature in that as are other APEX MECAs.

Please feel free to contact us here in the office with your thoughts and issues as we continue the campaign. Your Senior Advocates for Labs are Denise Tairua and David Munro, assisted by Associate Advocates Tamara McConnell and Deepana Ponnampalam. Omar Hamed, Senior Advocate, is also in the mix as our new members in Taranaki and Mid-Central are aware.

Kia Kaha

MEDICAL LABORATORY WORKERS



DIVISION OF  APEX

NEGOTIATIONS IN PROGRESS

Taranaki Medlabs

After two days of bargaining, Taranaki Medlab negotiations are almost concluded for their first-ever collective agreement, with the employer and union still to finalise how workers will transition onto the union negotiated salary scales. Taranaki Medlab workers provide medical laboratory services to Taranaki community health providers.

Already agreed benefits of the new

collective agreement, which will have a term to 31 January 2020 include five weeks' annual leave for employees with seven or more year's service, merit progression, professional development, redundancy protection and requirements to agree changes to hours of work. The collective agreement will help provide a good structure for working conditions at the lab, where workers pay and conditions had been left behind without a union contract.

PAY EQUITY AND TERRANOVA CASE

A pay equity claim is centred on challenging wider societal assumptions and norms. These assumptions and norms have, over time, become engrained into the laboratory workplace.

Equal Pay Amendment Bill

The new Labour Equal Pay Amendment Bill was introduced on Women's Suffrage Day. Eugenie Sage, the Acting Minister for Women, said that "this bill is one piece of the puzzle" to continue to close the gender pay gap.

Raising a successful claim means to prove that the work is predominately performed by women, that the work is currently or historically undervalued and that this claim is arguable. This "arguable" threshold has been changed from the previous "of merit" threshold that was in the National Employment (Pay Equity and Equal Pay) Bill.

Historical examples of the underevaluation of women's work

The marriage bar – the practice of restricting married women from employment. Therefore, when a woman gets married her employment is terminated.

Temporary placeholders – during both World Wars women entered the workforce as 'temporary placeholders'. When men returned from war they would take back their old jobs from the women placeholders.

Fixed minimum wages – the Minimum Wage Act 1945 had fixed minimum wages for females at 60% of the male rate during this time.

Private versus professional sphere – women exist in the private sphere whereas men exist in the professional sphere. Any income earned by women was supplementary and to be spent on non-essential items.

Horizontal segregation – this is the fact that men and women generally work in different occupations. This type of occupational segregation can be solved by pay equity.

All of these practices and attitudes still remain in societal norms in one way or another.

The TerraNova case in brief...

Why did Kristine Bartlett bring the case?

Caregiving for the aged dominated by female workers and therefore workers were paid less due to the industry being substantially dominated by females. Considering that the majority of workers are female they are therefore paid less than if the industry wasn't substantially dominated by females.

What did the Court say?

The Court of Appeal found that the Equal Pay Act required equal pay for men and women doing different work that is of the same value, ie pay equity.

What was the settlement?

The \$2 billion settlement covered 55,000 workers and the new wage



structure has been in effect since 1 July 2017.

Why is it so important?

It is the first example in New Zealand that acknowledges that in some female dominated industries, wages are lower because the work is done by women. The Government made it clear that the settlement was not to act as a precedent however there have been several successful settlements post TerraNova.

What does this mean for Labs?

Patient specimen collection services, technical processes and ethical considerations are all a part of the phlebotomist's toolkit. Phlebotomists are responsible for direct patient care which often requires a high level of customer service, empathy and patience. These innate skills have long been viewed as simply "part of the job". Traditional job evaluation schemes have continued to discount these skills and the residue of this practice still affects the modern perception of the phlebotomist.

A MESSAGE FROM BRYAN RAILL, PRESIDENT OF MEDICAL LABORATORY WORKERS DIVISION



With new groups having recently joined APEX I will introduce myself, my name is Bryan Raill, I work in the Biochemistry department at Counties Manukau Health Laboratories

(Middlemore Hospital).

Firstly, a warm welcome to Taranaki Medlab members who have joined APEX and for whom we are bargaining their new APEX collective agreement.

Easter is over and we head into the start of winter, where the colder wetter months invariably put pressure on the labs. I have just had my tenth annual flu vaccination which is a combination of several things; my age almost (!), respect for and protecting myself, my colleagues and our patients – as influenza is a significant public health issue in New Zealand. Healthcare workers are twice as likely to acquire influenza than non-healthcare workers, and healthcare workers can transmit influenza without knowing they are infected. I

encourage you all to make a habit of it also.

The current Health Minister has said no to contracting out of Taranaki (what lab?), which comes after APEX prevented the plan to simply hand off the Taranaki DHB service to a private provider. We also understand that the Minister has also said no in Hawkes Bay DHB. It is interesting that the round of lab privatisation, which began in 2005, has come to a halt and it is hard to tell whether this is representative of what is to come. While your employer may depend on the winds of political ideas in fashion we advance and protect the interests of our members, whether working in the public or private sphere.