



Ambulance Employees Association of Western Australia

December 2nd, 2020 – AEAWA SOC JCC Minutes

Meeting officially opened by the President and Executive Committee

The SOC JCC meeting was opened by Julian Smith; present included members of the Executive and SOC Committee Delegates.

Committee Attendees

John Thomas, Lee Waller, Troy Bates, Justin Brennan and Kam Phagura.

Committee Apologies

Jon Flockton, Gary Davies, Earl Stamp, Lee Mack, Tim Dunlop, Conrad Fairhead and Dave Bryant.

SJA Attendees

Julian Smith (JS), Will White (WW), Hayden McGregor (HM) and Kathryn Smith (KS).

Item 1.0 Standing Items

Items discussed were from an SJA point, what they wanted to discuss in the JCC meeting.

Item 1.1 State Operations Centre – General Updates

Members have stated for quite a while that the SOC chairs have past their use by dates. They have not been replaced for a long time and are used 24/7 and have exceeded their lifespan.

SJA discussed the roll out of new chairs for SOC staff at a significant costing (\$70,000) to replace the old chairs in the room. Rollout of these new chairs should occur shortly, with a hope from SJA management that the chairs should arrive within the next few weeks.

Item 1.2 Headset/Equipment - Updates

Members wanted to know when the new headsets are arriving and have requested better equipment be utilised by the organisation so they can perform their roles to the best of their ability.

Item 1.3 Technology/Systems/CAD Updates

Items discussed here have been placed into the below items.

Item 2.0 New matters

Items discussed were from an AEAWA point, what the SOC members have requested from their delegates to be raised at the JCC..

Item 2.1 Audit Feedback Process

There was lots of discussion about the SJA auditing process. The main issues raised were.

1. The auditing process is different per officer, there are too many inconsistencies.

St John will review this process to make it fairer for officers.

2. The auditing process is not by peers, SOC officers are audited by office staff who are trained to audit calls, however, they have not performed the roles they are auditing.

JS to review this and ascertain if the old model of peer auditing can be reinstated.

3. Process is not supportive or used for education, it is a punitive tool used by management.

JS and WW both agreed it is a supportive role and that it is used to educate staff in the room. The AEAWA disagreed with this, however both JS and WW did ask for the AEAWA to discuss these grievances further; so if an issue does exist collaboration occur to rectify staff concerns.

4. Some staff are getting lots of feedback whilst others are getting minimum guidance and support.

Both JS and WW will review this.

5. JT suggested that the audit process could be included in the role of the Training officer position
Negotiated on each shift.
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Item 2.2 Roster Change Requests

Leave exchanges have been denied, whilst others have been approved, the policy appears to be applied differently across the board.

JS stated the leave policy has been followed, with the minimum of 6 weeks' notice needs to be given To change leave blocks. WW did however state that if an officer needs to change leave as a matter of Priority then he should be emailed to assist this change to occur were reasonable.

Item 2.3 Low Staff Numbers

Members are concerned of the lack of staffing levels in SOC, this is leading to poor morale and employee burnout. There are multiple vacancies not being filled, and there are a number of missed triple zero calls.

JS stated there is a current business case at Director level for sign off for 20 new officers. However, JS is mindful of staff being subjected to 'mentor fatigue'; meaning at such busy times and new staff already being mentored he is mindful that staff have been extremely busy and a new run of mentoring will soon occur.

Item 2.4 Low Morale in the Room

Members believe that high call volumes, low staffing levels and a lack of support are the cause of low morale in the room. Members state the workforce is at breaking point and the new round of audits are pushing staff to high stress levels.

Both JS and WW believe some of the previous mentioned outcomes to issues raised in this meeting will certainly help to reduce employee concerns.

Item 3.0 Enterprise Agreement Items

These items were discussed as items during the recent EBA negotiations and were moved to the JCC.

Item 3.1 Dispatch Hours

The allocation of dispatch hours was raised again to state the allocation is not equitable and that officers on less than full time hours were receiving more radio hours than others especially on shift crossovers as the DM's were shift specific with rostering hours.

JT advised that this was an issue as some officers are being disadvantaged and asked why a non-manager e.g. Country Support could not do the allocations which makes it easier for officers to approach and discuss as a peer decision. Some shift/officers are happy but others are not. WW stated he would look at the situation as he was unaware there was an issue.

Item 3.2 Secondments

There was clarification sought in relation to the new training positions agreed in the recent Certified Agreement.

The Agreement states that officers engaged for the period of the secondment .i.e.> than 3 months would receive the full secondment amount and those engaged of < 3 months would be paid an allowance as outlined in the agreement.

Item 3.3 New Locations

Members were asking about the creation of permanent positions at Wangara as well as Belmont.

JS responded that the Organisation was looking at increasing clinical presence and that open discussion in regard to location was holding back a decision to make permanent positions for SOC members. At this stage the current arrangement will remain until outcomes on staffing and other attributes were finalised.

General Discussion

JT raised the issue with HLM's liaising with the ANC when a 1 for 1 swap/transfer was called in by the particular hospital SOC radio operators are constantly under pressure to clear P1 & P2 calls in the community and without consultation the crew who is ramped suddenly appears on a transfer to another Hospital which has been arranged through the HLM and the ANC leaving community calls of P1 & P2 still waiting. This should not be occurring as it DOES NOT free a crew from the ramp but simply incurs a further ramping situation elsewhere and increases waiting times in the community.

JS replied that the HLM are to communicate through the RTM or DM as they are managers and not ANC's. The preference is to attend to community calls before IHT's unless the transfer is urgent and is going to a definitive location i.e. not through the ED department where it is likely to have a ramping effect on the crew.

JT asked JS to circulate this instruction to Metro to pass to the HLM's and Communications Centre staff to ensure everyone is on the same page.

Next SOC JCC Meeting

TBA

Meeting officially closed



Contact Us

Email: info@aeawa.com.au

Ambulance Employees Association of Western Australia
PO Box 1007,
Joondalup 6919

ABN: 66 550 017 640