



NSW NURSES AND MIDWIVES' ASSOCIATION **MEDIA RELEASE**

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17 October, 2017

John Hunter Hospital nurses and midwives put patient safety first

In an effort to highlight ongoing concerns for patient safety at Newcastle's John Hunter Hospital, over 250 nurses and midwives have voted in favour of introducing industrial bans across the facility.

Members of the NSW Nurses and Midwives' Association (NSWNMA) John Hunter Hospital Branch met yesterday and held a secret ballot, after discussing the amount of time they are required to spend away from patients on their ward or unit, to complete follow-up discharge phone calls.

General Secretary of the NSWNMA, Brett Holmes, said the Branch voted to implement a ban on the follow-up discharge phone calls from Thursday morning, unless Hunter New England Local Health District immediately introduced measures to address safe nursing staff numbers.

"The Hunter community is well aware that patient safety is paramount for our nurses and midwives – they want to provide the best possible care to everyone who comes into their ward or unit for treatment," Mr Holmes said.

"Hunter New England LHD's policy for nurses and midwives to conduct all follow-up phone calls for discharged patients while they're trying to look after current hospitalised patients has become an issue.

"We've already uncovered thousands of hours of nursing care missing at John Hunter as a result of Hunter New England LHD deliberately breaching the *Public Health System Nurses and Midwives (state) Award* by not rostering and recruiting the necessary staff."

Mr Holmes said while Hunter New England LHD had proposed several longer term recruitment solutions to address the understaffing issues at the major tertiary referral hospital, no immediate improvements were evident for nursing staff on the floor.

"We are talking to Hunter New England LHD, but our members are disappointed the measures they've proposed all have a long-term focus. There have been no immediate changes implemented, so nurses and midwives across a number of wards and units are still working short-staffed or required to work overtime.

"Our members are not suggesting that follow-up phone calls for discharged patients are not important in the Hunter. They are simply asking hospital management to allocate the calls to other clinicians and allied health staff, given the current understaffing of nurses and midwives," Mr Holmes said.

"Nurses and midwives should not be directed to complete follow-up discharge phone calls within the nursing hours that are required per patient per day under the state Award."

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