

Summary of References to consistency in health sector settlements: 11 April – 7 May 2008 in Press releases and reports

Timaru Herald 11 April – Page 2

Spokesperson for the DHBs, David Meates, said the deal the RDA was seeking was unachievable.

"This union only has one way of negotiating -- holding a loaded gun to the heads of patients. This strike will force hospitals to cut back services to make sure they can provide urgent and emergency cover.

Mr Meates says the next round of talks has been scheduled for April 22

"The demands are significantly beyond other health sector settlements which have been around 4 per cent. There is no way hospitals can afford this kind of increase and unless the union is prepared to be more realistic a strike is inevitable."

Marlborough Express 11 April – Page 3

The DHBNZ, the agency negotiating on behalf of the 21 DHBs, has offered the junior hospital doctors an average 4.17 percent per annum across three years. The DHBNZ said the junior doctors wanted an average 13.3 percent pay rise per annum over three years.

This offer is similar to the ones recently accepted by nurses and senior doctors.

NZ Govt Media statement 16 April 5:26pm – Page 4

"I am advised that RDA claims are still well out of line with other settlements in the health sector"

"I call on both sides to reconsider their positions and to recommence discussions in advance of the planned strike" said Mr Cunliffe

DHB Press Release 17 April "Patients and Public Deserve Better" – Page 5

"Junior doctors don't work in isolation – they're part of a team and we can't resolve their issues without considering the impact on the senior doctors who teach and mentor them, and the health professionals they work with.

"Any pay settlement must be consistent with the many other unions with which we've already agreed wage and salary deals. What signal would it send the other 57,000 DHB employees if we settled at a higher level with a group that won't work cooperatively with us?" – David Meates.

TV3 17 April "Minister Reject's junior doctors' 'unrealistic' demands" – Page 6

"They want more than any other health sector group. They have been offered, I have been advised, a similar increase to their fully qualified senior colleagues, yet they have rejected it.

"57,000 other employees in the health sector have ratified agreements in line with what has been offered to junior doctors.

"In short it is hard to see what planet this group is on." – David Cunliffe, Minister of Health

TVNZ 17 April 2008 "Junior docs to strike" – Page 8

DHB spokesman David Meates says the junior doctors are seeking a 10% pay rise per year for the next three years - the same pay rise as the original claim nine months ago.

He says the cost of that type of settlement is totally unaffordable to the DHBs and is significantly greater than any other settlement within the sector.

TV3 17 April 2008 "Junior Doctors Prepare to strike for 2 days" – Page 8

The Health Minister David Cunliffe has urged the two sides to get back to negotiations, but says the junior doctors' claims are out of line with other settlements in the health sector.

NZ Herald 18 April 2008 "Unrealistic' Pay rises demands by doctors" – Page 9

"There are many, many successes in the health sector, and one of them is the Government not folding to give Deborah Powell's union double what any other union in the health sector has got. It doesn't matter whether this strike lasts two days or two months; this Government is not going to fold in the face of such unrealistic demands." – David Cunliffe

Otago Daily Times 18 April "Cunliffe attacks doctor's union boss" – Page 10

Mr Cunliffe said this was due to the unrealistic bargaining position of the RDA, which had only modified its claim for a 20% pay rise over two years to one of 30% over three years.

"They want more than any other health sector group. They have been offered, I have been advised, a similar increase to their fully qualified senior colleagues, yet they have rejected it," Mr Cunliffe said.

TVNZ 20 April 4:23pm “Emotions running high in pay dispute” – Page 12

DHB Spokesman David Meates says they are unhappy that a gun has been held to their head for what the DHB sees as an unrealistic pay rise.

"That would see - if we were to agree with it - percentage increase greater than what we are paying to senior doctors and more than two times what we've been able to get with any other settlement in the health sector."

NZ Herald 21 April “Junior Doctors’ Strike to Cripple Hospitals” – Page 14

David Meates, spokesman for health boards chief executives, said the DHBs had offered to meet the junior doctors' union again, but the union had refused to meet unless the DHBs increased their offer.

The boards would not do this because it would lift the pay increase to junior doctors out of line with settlements with other health workers.

The Times Online 21 April – Page 15

"There's a horrible sense of déjà vu when negotiating with this group – an unrealistic and unaffordable claim backed up with the ultimatum of a strike," says Mr Meates. "It's hard to see where the compromise is in a wage demand that's more than double other health settlements."

The Daily Post 21 April “Local docs say they are NZ’s worst paid” – Page 16

David Meates, spokesman for health board's chief executives, said the DHBs had offered to meet the junior doctors' union again.

However, the union had refused to meet unless the DHBs increased their offer.

The boards would not do this because it would lift the pay increase to junior doctors out of line with settlements with other health workers.

Radio NZ 22 April “Junior Doctors Strike Again” – Page 18

Mr Meates says the boards have offered junior doctors a settlement in line with those given to other health professionals. They have invited the doctors to say which patient services could be cut, or which other pay settlements reduced, to meet their claim.

The Press 22 April “Doctors promise further Strikes” – Page 21

Yesterday Mr Cunliffe criticised the union, saying more than 8000 people would be affected, and the doctors' claims for a 30 per cent pay increase over the next three years were out of line.

Australian Associated Press 22 April “ Striking Doctors want Aussie wages” – Page 22

David Meates from the DHB said junior doctors had been offered a deal in keeping with other health professionals.

It would be an insult to all the unions and health staff that have engaged collaboratively with us if we were to buckle to industrial pressure and give this group more," he said in a statement.

TVNZ 23 April “ Junior Doctors Strike affects all” – Page 24

"This union should be more concerned about finding a way to solve the dispute rather than trying to prolong it," says DHB spokesman David Meates. "Perhaps the junior doctors and their union could suggest which patient services we could cut, or what other pay settlements we could reduce to meet their claim?"

Meates says DHBs have offered junior doctors settlements that are in keeping with other health professionals.

The Press 23 April “Junior Doctors to Walk out Again” – Page 25

Junior doctors want a 30 per cent pay rise spread over three years. The health boards have offered two rises of 4% over two years, which Meates said was in keeping with increases for other health professionals.

"It would be an insult to all the unions and health staff that have engaged collaboratively with us if we were to buckle to industrial pressure and give this group more," he said.

Radio NZ 23 April “Timing of Second Strike criticised by Senior Doctors” - Page 27

Mr Meates says the boards have offered junior doctors a settlement in line with those given to other health professionals. They have invited the doctors to say which patient services could be cut, or which other pay settlements reduced, to meet their claim.

NZ Government press release 23 April: “ Minister Pleased with DHB Staff’s Response” – Page 28

"Mr Meates has been in the health sector for 15 years and is the chair of the National DHB CEOs' Group. He was brought in to finalise the pay talks with Senior Doctors when they became stalled .He is highly professional and I have been comfortable with his approach to the negotiations" said Mr Cunliffe.

"I am calling on both sides to take a long term constructive approach that addresses the needed workforce reforms in a way that is sustainable, which does not impact on patients and other staff and is in line with other recent settlements in the public health care profession." – David Cunliffe.

Waikato Times 23 April "Fewer Doctors Strike than Anticipated" – Page 29

Lead negotiator for the DHBs, David Meates, said the threat of more industrial action defied belief. Rather, the union should be seeking resolution of the nearly year-long pay dispute. Junior doctors want a 30 per cent pay rise spread over three years. The DHBs have offered two rises of four per cent over two years which, Mr Meates said, was in keeping with increases for other health professionals.

Dominion Post 24 April "DHBs' Hardball Line Unhelpful" – Page 30

Mr Meates said it made no sense for boards to break ranks, but they had to find "collaborative ways of working together to solve the many challenges facing the sector".

While boards had to work within the available funding, the current argument was about relativity.

"The resident doctors' claim, which equates to a 40 per cent pay increase, is a slap in the face to the 57,000 other health board employees who have worked constructively with us to devise fair settlements."

Dominion Post Editorial 28 April – Page 31

Boards say they cannot afford what the young doctors are seeking and that it would be unfair to give them a higher percentage pay rise than that given to nurses and senior doctors. The Government - bar denouncing Dr Powell - is saying little, though intervened to help settle the senior doctors' and nurses' pay talks.

DHB Press Release 4 May 2008 – Page 32

Other workgroups and unions work collaboratively with DHBs - why can't the RDA.
"On Friday, DHBs reached another settlement with another large group of employees - PSA Nurses.

The PSA will soon take the offer to its members for discussion and ratification, and Mr Meates says details will show another progressive forward looking settlement with a union that engages in a collaborative and co-operative manner.

"The settlement with the PSA is within the financial parameters currently offered to junior doctors. Perhaps the RDA needs to look at itself for the reasons behind this dispute."

Dominion Post 7 May "Boards Count Costs as Second Junior Doctor Strike Begins" – Page 34

The current offer of 4.25 per cent, which was rejected by the union, "was as much - if not more - than the board could afford".

Caving in to the junior doctors' demands could upset relativity with other health workers, he said. "If we agree to an increase two times that offered to senior doctors, that could put that agreement in jeopardy." – Peter Glensor, Chair Hutt Valley DHB

NZRDA Membership

From: NZRDA Membership [membership@nzrda.org.nz]
Sent: Tuesday, 1 July 2008 10:40 a.m.
To: 'lmmnz@yahoo.com'
Subject: RE: contacting Medlab South re:

Hi Lynn

Did you ring or email her? Have you asked her what sort of timeframe they are anticipating working to to pay your settlement? See what she says when you ask her, then report back to us if you think she cant be pinned down.

I will also check with Anna on this

kind regards
Pip Reisch
NZRDA Membership Officer
Ph: 09 623 3993
Fax: 09 623 3996
www.nzrda.org.nz

From: lyn moore [mailto:lmmnz@yahoo.com]
Sent: Tuesday, 1 July 2008 10:21 a.m.
To: NZRDA Membership
Subject: Re: contacting Medlab South re:

Hi Pip

I contacted Rachel Harris re instructions for payment 11 days ago. No payment as yet . What is the timeframe we can expect to wait b4 this is paid? Should I hurry them up?

Waiting "expectantly"!

Cheers

LYN

<div>LYN</div>

--- On Mon, 6/16/08, NZRDA Membership <membership@nzrda.org.nz> wrote:

From: NZRDA Membership <membership@nzrda.org.nz>
Subject: contacting Medlab South re:
To: d.s.brooks@xtra.co.nz, lmmnz@yahoo.com, j.manderson@xlear.net.nz,
lsmackay@ts.co.nz, kjdrysdale@paradise.net.nz
Date: Monday, June 16, 2008, 10:21 AM

Dear All,

Rachel Harris at Medlab South needs to be advised how to pay you the money in the settlement. She will also need information for IRD. Coan you please contact her directly with that info on Ph: 03 363 0819 or rachel_harris@medlabsouth.co.nz

Please attend to this at your earliest convenience.

1/07/2008

For Anna Paton

kind regards

Pip Reisch

NZRDA Membership Officer

Ph: 09 623 3993

Fax: 09 623 3996

www.nzrda.org.nz

Press releases and commentary

11 April 2008

Junior doctors to strike

A bid for better pay will see half of Timaru Hospital's junior doctors go on strike later this month. Emma Bailey reports.

Half of Timaru Hospital's junior doctors will go on strike for two days from Tuesday April 22, following failed contract negotiations, it was announced yesterday.

Up to eight junior doctors are likely to strike, which will see some elective surgery and outpatient clinics postponed.

The New Zealand Resident Doctors Association (RDA) issued the strike notice after unsuccessful negotiations for a 10 per cent pay rise annually for the next three years, while the District Health Boards have offered 4 per cent annually over the next two years.

South Canterbury District Health Board confirmed yesterday it had received notice for the strike from Tuesday, April 22, 7am to 7am Thursday, April 24 .

Timaru Hospital RDA delegate and junior doctor Scott Newburn said the strike was an attempt to redress the imbalance between what junior doctors were paid, compared to locums, and to make becoming part of the permanent workforce a more attractive option.

" A locum doctor employed to do the same as a permanent staff junior doctor earns a minimum of \$75 per hour.

"We currently receive a starting salary of \$70,000 with bonuses and work on average 60 hours per week and in some week 70 hours with no day off in 12 days. In hourly rate terms this equates to just \$23 per hour.

"Understandably there has been a shift from regular employment to locum employment in New Zealand junior doctors because you end up with double the income."

Graduating doctors left university with a student loan of up to \$100,000, he said. Becoming a locum or going overseas to much more lucrative pay packets were better options to pay off debt.

"Another advantage of being a locum is choosing when you work and in particular having no obligation to do undesirable shifts like nights, weekends and evening shifts."

New Zealand spent around \$100 million a year on junior doctors, he said.

Timaru Hospital has 16 junior doctor positions, with 12 to 13 permanent employees and the balance made up by locums.

Hospital communications advisor Arlene Goss said yesterday contingency planning was under way for the strike.

"If this strike goes ahead, it will affect the level of services offered at Timaru Hospital.

"Some elective surgery and outpatient clinics will be postponed, as required, during the strike period.

"This will ensure that the hospital is able to respond to emergencies and offer life-preserving services. Affected patients will also be contacted by the hospital.

"Our number one concern in preparing for this strike is patient care and safety. This includes maintaining urgent and acute care, and minimising risks to patients."

Emergency services will be provided throughout the strike period.

Spokesperson for the DHBs, David Meates, said the deal the RDA was seeking was unachievable.

"This union only has one way of negotiating -- holding a loaded gun to the heads of patients. This strike will force hospitals to cut back services to make sure they can provide urgent and emergency cover.

Mr Meates says the next round of talks had been scheduled for April 22.

"The demands are significantly beyond other health sector settlements which have been around 4 per cent. There is no way hospitals can afford this kind of increase and unless the union is prepared to be more realistic a strike is inevitable."

Mr Meates says DHBs have some genuine workforce issues to resolve including growing shortages of junior doctors, but they won't be solved in pay talks.

<http://www.stuff.co.nz/timaruherald/4474078a6010.html>

11 April 2008

Surgery delayed if junior doctors strike

An estimated 40 patients in Nelson/Marlborough due to have elective surgery later this month will get a letter next week telling them their surgery may be rescheduled due to the pending junior doctors' strike.

The effects of the proposed industrial action are also being felt by the junior doctors themselves, who have voted to take a stand on their stalled pay dispute. Seven of Wairau Hospital's nine junior doctors will walk off the job. The other two junior doctors are privately paid locums.

Nelson junior doctors' representative James Moore said he and his colleagues had mixed feelings about going on strike.

"I've been feeling awful about it for days. This is quite a major action for us but we feel it's necessary overall to protect the public health system. We're on the ground seeing the shortages arising. We do want to reassure the public that patient safety is maintained... that won't be undermined," Dr Moore said.

Negotiations are continuing to provide life preserving cover over that period, said Nelson Marlborough DHB's chief operating officer Keith Rusholme.

The DHBNZ, the agency negotiating on behalf of the 21 DHBs, has offered the junior hospital doctors an average 4.17 percent per annum across three years. The DHBNZ said the junior doctors wanted an average 13.3 percent payrise per annum over three years.

This offer is similar to the ones recently accepted by nurses and senior doctors.

Dr Moore queried whether the money DHBs spent on locums, estimated by the union at \$100 million with hourly rates between \$75 and \$150 per hour, would be better spent on permanent staff and would also be cheaper in the long run.

"The locum industry has taken off. Student doctors have come through with huge student loans. Take the repayments and tax off and that leaves about \$12 an hour (from \$23 per hour)."

Communications co-ordinator for DHBNZ, Spiro Anastasiou, said the union was being selective with its figures. He said the cost of hiring locums actually totalled \$25 million out of a total cost of \$310 million spent on all junior doctors.

Dr Moore said junior doctors had seen the situation worsen, especially over the last three years.

He said at the end of February there were 240 vacant positions for house doctors around the country, a sign of the medical exodus that saw New Zealand doctors heading overseas for better pay and conditions.

Asked if he was likely to join the diaspora, Dr Moore said that thought had occurred. "I have to say it's very tempting.

"I can see why, out of my classmates, over 50 percent have left DHB employment to become locums this year. The benefits (of a bigger payrise) are not only for us but for hospitals as well.

"It's the DHBs' inability to acknowledge there's a problem. The guy on the street can see there is a problem but the DHBs seem blissfully unaware."

NMDHB received notice of a two day strike from the junior doctors' union on April 7. The strike takes effect from 7am on April 22 to 7am on April 24.

Junior doctors are also referred to as resident medical officers, resident doctors, house surgeons, house doctors and house officers.

<http://www.stuff.co.nz/marlboroughexpress/4475564a6563.html>

Statement concerning junior doctors strike

Wednesday, 16 April 2008, 5:26 pm

Press Release: New Zealand Government

Hon David Cunliffe
Minister of Health

16 April 2008 Media Statement
Statement concerning junior doctors strike

Minister of Health, Mr David Cunliffe said he was disappointed at the lack of progress in today's talks on the Junior Doctor's pay claims.

"I support the view that a broad based approach is needed to find a sustainable clear long-term pathway for improving conditions for junior doctors".

"I am advised that RDA claims are still well out of line with other settlements in the health sector".

"I call on both sides to reconsider their positions and to recommence discussions in advance of the planned strike" said Mr Cunliffe

ENDS

Patients and public deserve better

Thursday, 17 April 2008, 10:09 am
Press Release: District Health Boards

Media Statement – Wednesday, 16 April 2008
Patients and public deserve better

Mediation has failed to avert the threatened 48-hour strike by junior doctors scheduled for next Tuesday and Wednesday and DHBs are now focusing on finalising contingency plans for the strike.

“DHBs have already begun deferring non-urgent and elective treatments as they begin scaling down services for the strike,” says DHB spokesperson David Meates.

“Our number one priority is patient safety and we will be concentrating all efforts on maintaining acute and emergency services for anyone who needs urgent medical attention, care or treatment.”

District Health Boards had hoped junior doctors would have brought some realism to the talks with the mediator. The RDA yesterday put to DHBs a revised claim that equates to a pay increase of 30% over three years.

“It’s hard to see where the compromise is in a wage demand that is more than double other health settlements,” says David Meates. “What’s most telling is how junior doctors’ pay claims haven’t really changed during negotiations.”

Mr Meates says their first claim was 20% for 2 years, it then increased to 40% for 3 years – now it’s 30% for 3 years. “The only thing you can say about their latest claim is that it’s less than 40%, but it’s still totally unrealistic.”

“There’s a horrible sense of déjà vu when negotiating with this group – an unrealistic and unaffordable claim backed up with the ultimatum of a strike. We offer a constructive solution, they demand more money and offer no answers to the underlying issues that create pressure on DHBs and staff.”

Mr Meates says DHBs today offered lump sum payments of \$3-4,000 up front plus another \$1,000 retention payment with an agreement to continue negotiating. “The aim is to avert the strike so we can work on fixing the underlying problems that affect RMOs.”

An alternative option of putting 4.25% into base salaries for a short-term settlement was also provided via the mediator. Neither option was acceptable to the union.

“Junior doctors don’t work in isolation – they’re part of a team and we can’t resolve their issues without considering the impact on the senior doctors who teach and mentor them, and the health professionals they work with.

“Any pay settlement must be consistent with the many other unions with which we’ve already agreed wage and salary deals. What signal would it send the other 57,000 DHB employees if we settled at a higher level with a group that won’t work cooperatively with us?”

Mr Meates says DHBS recognise the need for good training and competitive salary packages. “We also need to address the frustrations expressed by many health professionals and managers about the way the current MECA forces us to organise our health services.”

“We’ve signalled that we’re prepared to look at ways to identify and amend operational processes so we can offer improved terms and conditions to our RMOs. This would include examining the locum spend across the country. What we can’t do is perpetuate the same old same old – it just doesn’t work!”

Over the past 5 years DHBs have increased the number of RMOs by 300 and significantly increased their remuneration – in 2007 the average 1st year house surgeon was paid \$88,000 and average hours worked have also improved. “Today we still have the same problem facing us!”

“Patients and the public deserve better than the strikes and disruption every time we come to pay talks with this group and this union.

“The nurses’ settlement is an example of what can be achieved by working collaboratively instead of confrontationally. Senior doctors are looking at a progressive settlement based on partnership and quality. Why can’t we do it with this group and this union?”

“The RDA needs the vision and the courage to work with us so that we can better meet the aspirations of junior doctors and the needs of the health sector. This is not about penny pinching, it is about a different type of engagement – we cannot afford to be back here in two years time having the same discussions.”

<http://www.scoop.co.nz/stories/print.html?path=GE0804/S00103.htm>

17 April 2008

Minister rejects junior doctors' 'unrealistic' demands

Health Minister David Cunliffe has lashed out at the leader of the junior doctors' union, saying he will never cave in to their "unrealistic" demands.

Mr Cunliffe said thousands of people would suffer from delayed surgery and medical appointments due to the two-day strike next week.

He laid blame for this suffering at the feet of Resident Doctors Association (RDA) general secretary Deborah Powell and questioned whether junior doctors were on the same planet as everyone else.

Junior doctors have resumed plans for strike action after negotiations with district health boards broke down yesterday.

Mr Cunliffe said this was due to the unrealistic bargaining position of the RDA which had only modified its claim for a 20 percent pay rise over two years to one of 30 percent over three years.

"They want more than any other health sector group. They have been offered, I have been advised, a similar increase to their fully qualified senior colleagues, yet they have rejected it.

"57,000 other employees in the health sector have ratified agreements in line with what has been offered to junior doctors.

"In short it is hard to see what planet this group is on."

The number of people who would have appointments disrupted was not clear.

Yesterday he said more than 6000 would be affected directly and this would have flow on effects. Today Mr Cunliffe said 8000 people would be affected.

Asked who would take responsibility for those who suffered due to delayed medical treatment, Mr Cunliffe replied "In two words, Deborah Powell."

Mr Cunliffe said he would not fold to "Deborah Powell's union" for demands in excess of others in the health sector.

"It doesn't matter whether this strike lasts two days or two months – this Government is not going to fold in the face of such unrealistic demands."

Mr Cunliffe said Dr Powell was responsible for much trouble in the health sector.

"I am advised that over 80 to 90 percent of strike action in the health sector between August 2005 and February 2007 has been related to the negotiations run by Contract Negotiation Service, a company run by Deborah Powell. They represent 7 percent of health sector employees."

Mr Cunliffe said the average first year house surgeon earned \$88,000 in their first year, plus 6 percent superannuation, with six weeks holiday, plus two weeks study leave and free meals.

"Many workers would consider that a reasonable package for a first year graduate."

Dr Powell said she was disappointed by the district health boards rejecting her latest offer.

"This was a compromise on behalf of junior doctors and we felt we had come up with a new strategy that would benefit both parties."

The proposal would have assisted with the retention and recruitment crisis, she said.

"We thought this offer would be a valuable step forward in recruiting and retaining our resident doctors although we also had to acknowledge that it was a compromise and would not solve the problem."

<http://www.tv3.co.nz/News/Ministerrejectsjuniordoctorsunrealisticdemands/tabid/209/articleID/52860/cat/41/Default>

17 April 2008

Junior doctors to strike

Junior doctors are to stage a 48 hour strike next Tuesday following the rejection by district health boards of the latest proposal put forward by the Resident Doctors Association.

DHB spokesman David Meates says the junior doctors are seeking a 10% pay rise per year for the next three years - the same pay rise as the original claim nine months ago.

He says the cost of that type of settlement is totally unaffordable to the DHBs and is significantly greater than any other settlement within the sector.

Meates says the two parties are a long way apart.

The doctors association has described the board's counter proposal to avert the strike as a joke.

Union spokeswoman Lisa Edwards says they can't understand why it was rejected because it is very similar in structure to the deal the DHBs agreed to with senior doctors.

She says the DHBs' counter offer is no pay rise and all previously agreed offers being taken off the table, in return for a one-off payment which she says works out to a couple of hours of locum work a week.

Dr Edwards says the DHB's non offer is forcing them to take strike action.

The district health boards are preparing contingency plans for the 48 hour strike. Meates says they are planning to ensure all hospitals in the country can safely provide urgent and acute services.

Meates says negotiations are continuing with senior doctors to cover the strike period.

<http://tvnz.co.nz/view/page/413551/1719008>

17 April 2008

Junior doctors prepare to strike for two days

The Health Minister is urging Junior Doctors and the Health Boards not to give up talking to each other, as a two day strike goes back on the agenda.

After renewed hopes of a deal yesterday - the talks broke down again and junior doctors are set to walk off the job for 48 hours on Tuesday.

The doctors want an increase of 40 percent over the next three years, to keep up with international markets and locum rates.

Spokesman Curtis Walker says the doctors brought their demands down to a 30 percent pay increase over three years - but the Health Boards hadn't moved at all.

The Health Minister David Cunliffe has urged the two sides to get back to negotiations, but says the junior doctors' claims are out of line with other settlements in the health sector.

<http://www.tv3.co.nz/News/PoliticsNews/Juniordoctorspreparetostrikefortwodays/tabid/419/articleID/52757/cat/67/Default.aspx>

18 April 2008

'Unrealistic' pay rises demanded by doctors

Health Minister David Cunliffe has accused the junior doctors' union, whose strike next week will delay treatment for thousands, of making "unrealistic" pay demands.

He told Parliament yesterday the Government would not agree to them, even if it was a two-month strike. He blamed the union and its general secretary, Deborah Powell, for health boards having to postpone an estimated 8000 elective surgeries and outpatient appointments.

Dr Powell said it was unfortunate that a "minister under pressure" had opted to attack her and the union, rather than addressing the key issue in the dispute: New Zealand's medical workforce crisis, marked by many junior doctors going into locum work or to Australia.

Mr Cunliffe said the union's pay dispute with health boards had not been settled this week "because of the unrealistic bargaining position of the Resident Doctors' Association".

The union had "not moderated its original claim of 20 per cent [pay rise] in two years. Now it is 30 per cent in three years".

"The people who will suffer from this strike are the patients and public of New Zealand ... the reason for this suffering is the bargaining tactics of the ... association."

He said most health sector strikes from August 2005 to February 2007 were related to negotiations run by Dr Powell's company, Contract Negotiation Services, which represented only 7 per cent of the health workforce.

The average first-year house surgeon earned \$88,000, plus 6 per cent for superannuation, six weeks' holiday, two weeks' study leave and free meals, the minister said. "Many workers would consider that a reasonable package for a first-year graduate.

"There are many, many successes in the health sector, and one of them is the Government not folding to give Deborah Powell's union double what any other union in the health sector has got. It doesn't matter whether this strike lasts two days or two months, this Government is not going to fold in the face of such unrealistic demands."

Dr Powell said Mr Cunliffe's pay figures were misleading because they included costs like ACC levies and mileage. A new graduate's annual base salary was around \$71,600 for a 60-hour week, which was the average.

And the union had moderated its pay claim in talks - which failed - this week to an amount less than the boards had offered to senior doctors.

National's health spokesman Tony Ryall said Mr Cunliffe's estimate of the number of patients affected was too low and he said it would reach 10,000.

STRIKE ACTION

- * Junior doctors intend to strike from next Tuesday morning for 48 hours.
- * An estimated 8000 patients nationally booked for elective surgery or an outpatient visit are having their appointments postponed.
- * Auckland District Health Board is postponing 275 elective surgeries and 1248 outpatient appointments.
- * Waikato Health Board is postponing about 420 outpatient appointments, 60 elective surgeries and 70 day-case procedures. It estimates costs and lost revenue from the strike will reach \$2.5 million.
- * Northland Health Board has postponed around 75 elective surgeries at Whangarei and Kaitaia hospitals, and most outpatient clinics have been cancelled for the strike period.

http://www.nzherald.co.nz/section/story.cfm?c_id=280&objectid=10504783

18 April 2008

Cunliffe attacks doctors' union boss

WELLINGTON: Health Minister David Cunliffe has lashed out at the leader of the junior doctors' union saying he will never cave in to their "unrealistic" demands.

Mr Cunliffe said thousands of people would suffer from delayed surgery and medical appointments because of the two-day strike next week.

He laid blame for this at the feet of Resident Doctors Association (RDA) general secretary Deborah Powell.

Junior doctors have resumed plans for strike action after negotiations with district health boards broke down on Wednesday.

Mr Cunliffe said this was due to the unrealistic bargaining position of the RDA, which had only modified its claim for a 20% pay rise over two years to one of 30% over three years.

"They want more than any other health sector group. They have been offered, I have been advised, a similar increase to their fully qualified senior colleagues, yet they have rejected it," Mr Cunliffe said.

"Fifty-seven thousand other employees in the health sector have ratified agreements in line with what has been offered to junior doctors. In short, it is hard to see what planet this group is on."

The number of people who would have appointments disrupted was not clear.

On Wednesday, he said more than 6000 would be affected directly and this would have flow-on effects.

Yesterday, Mr Cunliffe said 8000 people would be affected.

Asked who would take responsibility for those who suffered due to delayed medical treatment, Mr Cunliffe replied: "In two words, Deborah Powell."

Mr Cunliffe said he would not fold to "Deborah Powell's union".

"It doesn't matter whether this strike lasts two days or two months, this Government is not going to fold in the face of such unrealistic demands."

Mr Cunliffe said Dr Powell was responsible for much trouble in the health sector.

"I am advised that over 80% to 90% of strike action in the health sector between August 2005 and February 2007 has been related to the negotiations run by Contract Negotiation Service, a company run by Deborah Powell. They represent 7% of health sector employees."

Mr Cunliffe said the average first-year house surgeon earned \$88,000 in their first year, plus 6% superannuation, with six weeks holiday, plus two weeks study leave and free meals.

"Many workers would consider that a reasonable package for a first-year graduate."

Dr Powell said she was disappointed by the district health boards rejecting her latest offer.

"This was a compromise on behalf of junior doctors and we felt we had come up with a new strategy that would benefit both parties," Dr Powell said.

The proposal would have assisted with the retention and recruitment crisis, she said.

"We thought this offer would be a valuable step forward in recruiting and retaining our resident doctors, although we also had to acknowledge that it was a compromise and would not solve the problem."

National health spokesman Tony Ryall said the number of patients likely to be affected by the strike would be more than the 8000 Mr Cunliffe had estimated.

He had a memo that showed that at Auckland DHB alone "more than 1500 specialist appointments and surgeries are being postponed".

"On that basis, the total number of patients likely to be affected nationally would be around 10,000," Mr Ryall said.