

Victorian Public Health Crisis – VAHPA Public Statement 7 May 2021

Record pressure on Ambulance services has highlighted the unprecedented workloads facing Emergency Departments. Emergency Departments are seeing record presentations and the hospitals are already full causing a back-up situation or bed-block, where Emergency Departments can't clear space for incoming ambulance patients. The over-burdened, under-resourced public health system is in crisis mode. This causes the ambulances to queue up, commonly known as ramping. Patients are even being seen by emergency department staff in the ambulance waiting bay, due to lack of space.

The state government is acutely aware of the current crisis in public health. The pandemic exposed a system that had been run too lean for too long. While the Department of Health is holding crisis meetings, VAHPA is calling for urgent action. Simply adding resources to the Ambulance services and Emergency Departments will not unblock the hospital beds or relieve the bed-block pressures. The whole hospital system needs to be overhauled to ensure quality care is achieved while facilitating more patient capacity.

VAHPA welcomes the announcement by the State Government of increased funding, but it must include allied health. Allied health professionals are under increasing workload pressures and desperately need relief.

“We not only need urgent relief, we need a long term change in the approach to resourcing the health workforce,” said Andrew Hewat, Assistant Secretary of the Victorian Allied Health Professionals Association. “Victorian hospitals are run like a business, each with their own CEO, board and budget. They operate in a competitive environment and the focus has shifted to saving money, rather than on quality health care. Quality care can only be achieved by looking after the healthcare workers who deliver that care, and currently that is not happening.”

One senior allied health professional said: “It feels like we've reached a tipping point. People are either leaving or thinking about how they can manage that. Morale is the lowest I have ever seen it. The feeling is that they want to take a break but they just can't.”

This tipping point of this public health crisis is the result of the intersection of many factors:

- The COVID-19 pandemic severely stressed the health system and healthcare workers



- During the pandemic, many people avoided medical care and now they are seeking medical attention, often with a higher acuity problem because of the delays
- Elective surgery was paused or delayed several times during lock-down periods. There is considerable pressure to catch up.
- Covid fatigue-healthcare workers are worn out after such a stressful year that saw over 4,000 of them infected with COVID-19
- Long-covid, with so many healthcare workers infected, there is a significant number still suffering ongoing illness from their infection
- Leave-healthcare workers could not go on leave through 2020 and are now trying to finally take a break
- Sickness-with a return to semi-normal life, common respiratory illnesses and gastro are resurging leading to staff sickness
- Vaccination-many staff experience some kind of minor reaction to their Covid vaccination and need to take time off work
- Students-many students experienced delays in their practical training due to hospital restrictions, delaying graduation, meaning fewer new graduates entering the workforce
- Resignations-record healthcare worker resignations occurred due to the pandemic and many have not come back
- Backfill-employers deliberately and systematically delay or ignore backfilling vacant positions as a means to save labour costs (called 'vacancy targets')
- Workplace change-health services are pushing organisational change at great rates adding serious workplace pressure and major disruption (e.g. Better at Home sector-wide organisational change, Covid redeployments, etc)
- GPs sending patients with respiratory symptoms directly to ED adding to hospital presentations

The state government has pledged \$759 million trying to ameliorate the current workload crisis in the emergency departments of public hospitals. Allied health professionals need to see this translate to more staff, added resources and genuine support structures. Most allied health professionals take a minimum of four years to qualify and gaining experience and expertise is an ongoing process. They cannot be produced overnight. VAHPA wants to see a cultural shift in the recognition of the important role that allied health plays in health care. We need to see allied health professionals acknowledged, respected and valued for their important contribution to health care. Healthcare workers and their unions need to be engaged and consulted in the challenge to find solutions to this escalating workload crisis.

Quotes attributable to VAHPA Assistant Secretary Andrew Hewat:

“We welcome this commitment by the state government but we must see it translate to real practical solutions on the ground that include allied health professionals.”





“We cannot continue simply with business as usual. The current funding model is not working and allied health professionals are at breaking point. We welcome this injection of funds but we must see employers value their workforce and stop looking for opportunities to further squeeze them.”

“Our health workforce has endured the worst health crisis in 100 years and they are now at breaking point. Record workload pressures are threatening to break an already stressed health system. Allied health professionals are often overlooked but they are a critical link in the healthcare chain. We need to see urgent support for our allied health workforce.”

