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3<sup>rd</sup> January 2002

The General Manager,  
Adjudication Branch  
Australian Competition and Consumer Commission  
PO Box 1199  
DICKSON act 2602

ABN 45 877 249 165

Dear Sir,

**Re: Application for Authorisation Nos A90811 & A90812 lodged by Health Purchasing Victoria**

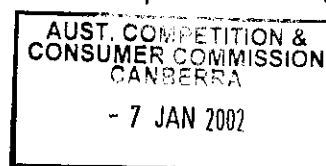
I wish to register our concerns regarding the current situation in Victoria relating to the increasing costs for Health Services in the utilisation of agency nurses and the negative impact this is having on the delivery of patient care and to the nursing profession. I support the comments made in the submission by Health Purchasing Victoria and Phillips Fox Attachment B of your letter.

Barwon Health is the largest regional health service in Victoria. With 400 acute beds at the Geelong Hospital, a teaching and tertiary referral hospital; and 492 beds at Grace McKellar Centre, for rehabilitation and residential care; as well as psychiatric and multiple community based services, Barwon Health provides care to a population of up to 450,000 in the south western part of Victoria.

Our Nursing Services are provided mainly by fulltime and part time permanent employed registered nurses. We have a Nurse Bank of casual nurses who work as and when required in various specialities or general patient care areas across the organisation. They are mainly used to replace sick leave, vacant shifts and for increased patient acuity and workload.

However we do need to resort to the use of agency nurses mainly for back up in the specialised areas of intensive care, cardiac/coronary care, emergency department, midwifery and psychiatry. The majority of these nurses are supplied from agencies based in Melbourne.

Since there has been a gradual increase in the payments to agency nurses over the past 12- 24 months over and above the normal casual loading, it is obvious that this has had a detrimental effect on the permanent employed nursing workforce professionally and on patient care.



As the payment for agency nurses has increased to the point where they could be paid at a grade 3 , 4 or grade 5 rate of pay for a grade 2 position, permanently employed nurses are choosing to reduce their permanent shifts and pick up agency shifts at a much higher rate of pay. This cycle continues with the nurse gradually doing all agency shifts but less total hours because of the higher remuneration. So we have a trend towards an increasing number of part time nurses and a decreasing number of shifts being worked.

When agency nurses are working side by side with our own employed nurses, there is a feeling of resentment that they are being paid at a much higher rate for the same skill level and experience and yet still require support and direction as they are unfamiliar with the unit and the patient care requirements. There is an added burden of care and responsibility by the organisation's own nurses in this regard.

I believe in the interests of the public in general, our community in particular, the quality of patient care and the nursing profession as a whole it is imperative that the current situation be addressed urgently.

Yours sincerely,



**Jill Davis Linklater**  
**Chief Nursing Officer**