Tasmanian Industrial Commission

Industrial Relations Act 1984
Section 55

CASELOAD MIDWIFERY INDUSTRIAL AGREEMENT
2012

Between
Minister administering the State Service Act 2000
And
Australian Nursing Federation (Tasmanian Branch)
And
Health Services Union Tasmania No.1 Branch
1. **TITLE**

This agreement shall be referred to as the Caseload Midwifery Industrial Agreement 2012.

2. **ARRANGEMENT**

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3. APPLICATION OF AGREEMENT

This Agreement shall apply in respect of the employees engaged as Caseload Midwives by the Department of Health and Human Services.

4. PARTIES TO THE AGREEMENT

This Agreement shall be binding upon:

i. The Minister administering the State Service Act 2000, hereinafter called “the employer”;

ii. Australian Nursing Federation (Tasmanian Branch); and

iii. Health Services Union, Tasmania No. 1 Branch

5. PERIOD OF OPERATION

This agreement shall take effect from the beginning of the first full pay period on or after the date of registration and will remain in force for a period of 3 years.

6. RELATIONSHIP TO RELEVANT AWARD/AGREEMENT

Employees covered by this Agreement are, except for this Agreement, subject to the Nurses (Tasmanian Public Sector) Award, the Nurses (Tasmanian Public Sector) Enterprise Agreement 2007 and Nurses and Midwives Heads of Agreement 2010. Where any inconsistency occurs between this Agreement and the Award this Agreement shall prevail to the extent of the inconsistency.

7. CONSISTENCY OF APPLICATION

The parties agree that the conditions and employee entitlements within this agreement will be consistently applied across the state, whilst still accommodating flexible Models of Care encompassing local needs and resources.
8. THE MODEL OF CARE

This agreement does not prescribe any specific Model of Care to be utilised, so long as the following broad principles of the agreement are met:

(i) Caseload Midwifery as a contemporary model of care is based on continuity of carer where an assigned Midwife is responsible for the primary care of the woman’s pregnancy, birth and postnatal recovery;

(ii) The conditions herein provide sufficient flexibility for caseload midwives to utilise discretion within group practices, using agreed protocols and clinical guidelines in order to best meet the needs of each woman;

(iii) Any participation in the model is voluntary for midwives and pregnant women; and

(iv) The model arrangements must include appropriate backup and support by other midwives at all times, including the ability to hand over to other suitably qualified and skilled midwives, including midwives who do not work in the model.

9. CASELOAD

(a) Full Time Midwife

A full-time caseload midwife is allocated the full care of a caseload of 35-45 booked women during the course of any full calendar year. This caseload will equate to a midwife working a 38 hour week, i.e. a full-time midwife under the Nurses (Tasmanian Public Sector) Award.

The allocation of women to a midwife’s caseload will take into account the existing caseload, the skill level of the midwife, and the complexity of care that is required by the woman.

The caseload of each midwife will be reviewed at least every 3 months having regard for the complexity of care required for the women assigned to the midwife and the recorded debit or credit of hours worked.

During absences of other caseload midwives’ planned or unplanned leave of 1 week or less, an employee’s caseload may fluctuate.

(b) Part Time Midwife

Part time midwives will receive salary and conditions, as well as allocation of caseload on a pro rata basis.
(c) Team Leaders or Equivalent

A caseload midwifery model may include a midwife in a position with responsibility for leading the team (however titled or classified) who may take a proportion of a full time equivalent caseload. This caseload will be determined according to the specific context of the Team Leader at the local level.

10. SALARY

(a) Midwives

Midwives (other than a team leader however named or classified) working in the caseload model will be paid an annualised salary in recognition of the flexible patterns of work to provide continuity of care. The annualised salary will be calculated on the midwife’s base salary with an additional all purpose loading of 30 percent which is in recognition of full compensation for ordinary hours worked and the following:

I. Shift Penalties (including: afternoon, night, Saturday, Sunday and public holiday shifts)
II. On call arrangements (close call, on call, & recall)
III. Overtime (except as provided for in clause 15 - Excess hours)
IV. Annual leave loading on five weeks annual leave up to the maximum amount prescribed within the Award.

(b) Team Leaders

Team Leaders (or similarly titled roles) who assume responsibility for a number of women will receive a 17.5 percent loading in lieu of shift penalties, on-call, recall payments leave loading and overtime. The number of women will be determined by the characteristics pertaining to the localised model.

Team Leaders who are day workers do not accrue the additional Annual leave as outlined in Clause 11 Annual leave and Clause 12 Additional Leave

11 ANNUAL LEAVE

Midwives working in the caseload model accrue an additional five (5) days annual leave provided to shift workers within the Nurses (Tasmanian Public Sector) Award 2005.
12. ADDITIONAL LEAVE

Midwives working in the caseload model will be credited with an additional 5 days leave in recognition of patterns of work. This leave does not attract leave loading but the all purpose loading will be paid for any period of this leave taken.

13 HOURS OF WORK

The ordinary hours of work for a Full Time Caseload Midwife are to average 152 in a four week period, within the agreed range of hours between a minimum of 142 hours and a maximum of 162 hours per four week period.

The hours of work will be averaged over a twelve week cycle with the aim to work a total of 456 hours over the period (or pro rata for part time employees).

Payment will be made fortnightly as a 76 hour averaged salary (pro-rata for part time caseload midwives).

14 PATTERNS OF WORK

(a) Midwives are to work with sufficient flexibility to meet the assessed needs of women in accordance with the Agreement.

(b) A midwife will not be required to work for a period longer than 8 hours and can choose to hand over care of the woman at that time. However midwives have the discretion to work up to, but no longer than 12 hours to meet the presenting needs of the woman.

(c) The duration of the work period will include all scheduled and unscheduled activities within the span making up the 8 hour work period. Provided that, where there is a break between episodes of work of one hour or less, the duration of that break will be treated as a continuation of time worked.

(d) A period of at least 8 continuous hours within a 24 hour period will be free of duty except in exceptional circumstances where the midwife is required to return to work to care for a birthing woman.

(e) The midwife will not be permitted to work for more than 8 days consecutively.
(f) Each midwife will have an average of four days off duty per fortnight which are free of planned work and on call commitments. At least two of these days shall be in succession.

(g) A midwife is to maintain an accurate and timely record of hours worked. Work activities will include but are not limited to:

- Face to face consultation;
- Phone calls;
- Accompanying women to consultations with other health professionals; and
- Activities related to the model of care/caseload practice.

15 EXCESS HOURS

(a) The hours of work will be averaged over a twelve week cycle. The first 30 hours worked in excess of 456 hours in the twelve week cycle will be taken as time off in lieu (TOIL). Such TOIL is to accrue time for time.

(b) The Team Leader and caseload midwife shall agree on the means to utilise any accrued TOIL within the twelve week cycle following, or within the cycle from which it was accrued.

(c) Any TOIL which is not used within the 12 week cycle subsequent to the period from when it was accrued will be paid at an overtime rate of double time.

(d) Scheduling of TOIL is through mutual agreement, and is to be recorded, taking into account:

- Any existing scheduled absence of leave by other members of the team;
- Allocation of leave dates of TOIL is based on a fair and reasonable distribution between eligible employees; and
- The scheduling of TOIL will take into account any special needs of the women.

(e) Hours worked in excess of 486 hours will automatically be paid at appropriate overtime rates.

(f) Where a caseload midwife works in excess of 486 hours within a 12 week period, the Team Leader shall review the midwife's hours of work and caseload to ensure their future hours of work falls within the maximum or minimum hours.
Application to participate in the model is voluntary and subject to a merit based selection process. Subject to operational requirements, midwives shall be able to revert to normal shiftwork and cease participating in the model provided a minimum of 4 weeks' notice is given, or 2 weeks in the case of resignation from the DHHS. In exceptional circumstances the employer may waive the giving of four weeks notice.

17 REVIEW AND RE-NEGOTIATION OF AGREEMENT

It is agreed that the parties meet no later than one month prior to the expiration of the Agreement to conduct a review of the impact of these provisions on both employees and clients/patients to caseload midwifery models.

18 NO EXTRA CLAIMS

The parties to this Agreement undertake that, for the life of this Agreement, they will not make any additional claims relating to any matters included in this Agreement.
19. SIGNATORIES

This Agreement is made in Hobart on this 12th day of June 2012

SIGNED FOR AND ON BEHALF OF

Minister administering the State Service Act 2000

[Signature]

SIGNED FOR AND ON BEHALF OF

Australian Nursing Federation (Tasmanian Branch)

[Signature]

SIGNED FOR AND ON BEHALF OF

Health Services Union, Tasmania No.1 Branch

[Signature]

This Agreement is registered pursuant to Section 56(1) of the Industrial Relations Act 1984