

# WA Health Offer

## Wage Offer

**1.5% from 1 July 2016 and 1.5% from 1 July 2017. A two year Agreement that expires on 30 June 2018.** The dates are guaranteed subject to members acceptance of the offer. If the offer is rejected the effective date of 1st July 2016 for the first pay increase will be lost. A draft Salary Schedule is available at [hsuwa.com.au](http://hsuwa.com.au)

## Secure employment

The proposed Agreement better defines the obligation of the employer in regard to providing permanent employment as the primary mode of employment. The proposed Agreement is amended to:

- Emphasize that employment is to be on a permanent basis as the first and preferred option whenever possible.
- Employment on fixed term contracts limited to specified circumstances only (all else must be filled permanently):
  - (a) to cover one-off periods of relief;
  - (b) to facilitate modified return to work arrangements and secondments;
  - (c) to cover projects with a finite life;
  - (d) to fill positions which are subject to external funding;
  - (e) for work that is seasonal in nature;
  - (f) to temporarily fill a vacancy during a recruitment process;
  - (g) to facilitate change;
  - (h) where an employee is on a visa with a fixed duration;
  - (i) for periods of traineeships and cadetships; and
  - (j) any other situations as agreed in writing between the parties.
- Union has a right to a list of positions filled on a fixed term contract basis.
- Union can have all fixed term contracts reviewed, and the employer has to provide reasons why a position is filled on a fixed term contract basis.
- Any positions that do not meet the specified circumstances for fixed term employment are to be filled on a permanent basis.
- Employees employed on a fixed term contract who believe they have a reasonable expectation of ongoing employment may make a claim for their employment to be deemed permanent
- A new criteria and process for assessing employees reasonable expectations of ongoing employment is to be agreed between the parties within 6 months of Registration of the Agreement (i.e., by approximately February / March 2017)

## Workload Management

A new Workload Management clause is to be included in the proposed Agreement as follows:

- 1 The employer is committed to addressing workload management issues and taking reasonable steps to ensure that employees are allocated sustainable workloads and are not required to work excessive or unreasonable hours.
- 2 Where an employee believes they have an excessive or unreasonable workload, this should be raised with their immediate supervisor in the first instance. If the workload issue is not resolved within a reasonable period of time, the matter should be escalated in accordance with Clause 56 – Dispute Settlement Procedure.

## Authorised Mental Health Practitioners

Qualified employees who are required to exercise the duties of an Authorised Mental Health Practitioner will be paid the Authorised Mental Health Practitioner's allowance.

On and from 1 July 2016     **\$2,981**

On and from 1 July 2017     **\$3,026**

## Domestic Violence Leave

A new Domestic Violence Leave Clause has been offered:

- Recognises the need for employees facing family and domestic violence leave.
- Facilitates access to existing leave entitlements for this purpose.
- Provides employees facing family and domestic violence with the right to security in the workplace and modified working arrangements to support them in dealing with such situations.
- Additional leave was refused by the Government on the grounds that it involves additional costs.

## Professional Development

The offer is for a new provision in clause 48. Skills Acquisition, Training and Employee Development

The provision:

- Facilitates employees who maintain a professional registration which is relevant but not mandatory (lawyers, accountants and the like) to be granted paid or unpaid leave to attend formal professional development training.
- Granting of the leave is at the discretion of the employer.

## Laundry Allowance

Allowance agreed in full and indexed by wage increases.

On and from 1 July 2016     **\$2.81 per week**

On and from 1 July 2017     **\$2.85 per week**

## Transfer and Portability of Entitlements

With the agreement of the employer, the time between completing employment with one Government Employer and commencing with an employer covered by the Agreement may be longer than **one week**, provided that the period in excess of one week does not exceed the total of accrued and pro rata annual leave paid out at the date the employee ceased with the previous government employer.

## Technical Changes

A range of technical changes such as clarifying provisions, and reorganising clauses to make them easier to read have been agreed.





### APPLICATION FOR MEMBERSHIP

of the HSUWA and HSU WA Branch  
8 Coolgardie Terrace, PERTH WA 6000  
t: (08) 9328 5155 • f: (08) 9328 9107 • union@hsuwa.com.au • hsuwa.com.au  
Secretary : Dan Hill

I, the undersigned, hereby apply to become a member of the above named Unions.

#### ABOUT YOU

Title:  Dr  Mr  Ms  Mrs  Miss Gender:   
(please tick) (please choose: M or F)

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_  
(Given name)  
\_\_\_\_\_  
(Surname)

#### CONTACTING YOU

Postal address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Please include as many as possible of the following:

Work Phone: \_\_\_\_\_

Work Email: \_\_\_\_\_

Home phone: \_\_\_\_\_

Home email: \_\_\_\_\_

Mobile phone: \_\_\_\_\_

#### YOUR EMPLOYER AND YOUR JOB

Name of Employer: \_\_\_\_\_

Workplace/Dept: \_\_\_\_\_

Job title: \_\_\_\_\_

Are you:  Full time  Temporary  Part time  Sessional  Casual  
(please tick)

Hours per fortnight: \_\_\_\_\_ Classification (eg. Level 2.4) \_\_\_\_\_

Present annual salary: \$ \_\_\_\_\_ (Please note that subs are calculated on the basis of ordinary salary without penalty rates or allowances).



Signed: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

FEES - Please note all union subscription fees are tax deductible.

HSUWA Subscription Rates (as from 1st January 2016, GST Inclusive)			
Ordinary Ann Salary	Fortnightly Subs	Ordinary Ann Salary	Fortnightly Subs
Under \$45,000	\$13.70	\$61,001 to \$97,000	\$25.35
\$45,001 to \$61,000	\$20.10	\$97,001 and above	\$32.55

#### NON-MEMBERS SERVICE POLICY

In accordance with the Union's objectives

- Except to the extent necessary for the Union to conduct its business, persons who are not members of the HSUWA will receive no advice or service. Such advice or service will be reserved for members only.
- Persons who join the HSUWA with a pre-existing workplace issue will not receive assistance in relation to that issue/problem, unless determined otherwise by the Secretary and/or the Committee of Management.

#### SUBSCRIPTION OPTIONS

Please choose one option and complete that section

*In authorising one of the subscription options the HSUWA is only authorised to debit the amount of subscriptions set from time to time by a general meeting of the Union, and notified to you in advance.*

#### OPTION 1. DIRECT DEBIT REQUEST

Member's Authority

I/We \_\_\_\_\_

Authorise the HSUWA (User ID 063 168) to arrange for funds to be debited from my/our account at the financial institution identified below and as prescribed below through the Bulk Electronic Clearing System (BECS).

This authorisation is to remain in force in accordance with the terms described in the HSUWA Direct Debit Customer Service Agreement which is available on request from the HSUWA Office.

Details of the Account to be Debited

Name of Financial Institution \_\_\_\_\_

Branch Address \_\_\_\_\_

(Account Name – that is, the name of the person(s) who hold the account

BSB Number: \_\_\_\_ / \_\_\_\_

Account Number: \_\_\_\_\_

I/We authorise the following:

- The HSUWA to verify the details of the abovenamed account with my/our financial institution.
- The Financial Institution to release information allowing the HSUWA to verify the abovenamed account details.

Signed

Date

Signed

Date

#### OPTION 2. PERIODIC CREDIT CARD PAYMENT

This option authorises an automatic, regular payment from your credit card.

*I wish to pay by regular credit card payment*

Monthly  Quarterly  6 Monthly  Annually

BankCard  Visa  Mastercard

Card holder name: \_\_\_\_\_

Card No: \_\_\_\_\_ Expires: \_\_\_\_ / \_\_\_\_

Signature: \_\_\_\_\_

#### OPTION 3. OTHER PAYMENT METHOD

Please contact the HSUWA Office for other payment options



Send your completed form via email to union@hsuwa.com.au, or fax to 9328 9107, or seal in an envelope and post to: Health Services Union, Reply Paid 8204, PERTH BC WA 6849 (no stamp required)

#### HSUWA REP/MEMBER USE ONLY - FOR ENTRY IN THE PRIZE DRAW

SALARIES

Name: \_\_\_\_\_

HSUWA Membership number or Workplace \_\_\_\_\_

Telephone \_\_\_\_\_