

# MEDICAL IMAGING AND RADIATION AWARD

## LOG OF CLAIMS

### CONDITIONS

#### Implementation of the HSU Core Conditions Log of Claims.

1. As listed here: <https://www.hsu.asn.au/stay-informed/secretary/vote-on-your-core-conditions-log-of-claims>

#### Payment for the cost and time of mandatory Continuing Professional Development (CPD) (Clause 5 and 11):

2. Employees receive an allowance of \$100 per hour of CPD required to maintain registration / accreditation (Clause 5).
3. 7 days Additional leave for Employees which can be used solely to meet their registration and / or accreditation with AHPRA and / or ASAR and / or ACPSEM (clause 11).

#### Introducing a Higher Qualifications Allowance to recognise the time, cost, and effort to obtain higher qualifications, and the significant benefit of higher skills and knowledge to the health system (Clause 6):

4. Allowance to be paid to Employees who hold a post-graduate certificate of direct relevance to their professional practice, in addition to qualifications relied upon for accreditation and / or registration. This allowance will not be payable to Radiographers and Sonographers for the higher qualification which results in progression to level 3, Grade 3 and / or Level 4 grade 1. Paid at the following rates of the employee's base rate:
  - (a) (AQF8) Post-Graduate Certificate: 3.5%
  - (b) (AQF8) Post-Graduate Diploma: 5%
  - (c) (AQF9) Masters: 7.5%
  - (d) (AQF10) PhD or Post-Doctoral: 10%

#### The mandatory costs for professionals should be covered by the Employer (Clause 7):

5. Reimbursement for all costs incurred and required for the performance of duties, e.g., Radiation License, working with children check, registration and / or accreditation costs applied by AHPRA and / or ASAR and / or ACPSEM.

#### HSU members must have improved outcomes and not be worse off during change processes (Clause 8):

6. No Employees will suffer a reduction in their substantive level, grade, or salary because of the implementation of change, including a new facility, department or LHD structure.

#### Equity of hours of work under the MIR Award (Clause 9):

7. 35-hour work week extended to all Sonographers and Nuclear Medicine Technology members.

#### Fair remuneration for shift work which takes a huge toll on workers' health and family life (Clause 10):

8. HSU members must be consulted prior to the introduction of shift work or alteration of shift work arrangements.
9. Shift workers to receive 50% night shift penalty for each hour worked between 9pm – 6am (MRS) or 9pm – 8:30am (Medical Physics and RPS).
10. Medical Physics and Radiopharmaceutical members who already receive consultation and higher penalty rates must have these retained.

#### All work beyond contract hours paid as overtime (Clause 12):

11. Overtime payments must be made for all work required beyond contracted hours to meet clinical, equipment, or regulatory needs regardless of whether express pre-approval was provided or not.

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### **Improved on-call rates and conditions for MIR staff because they are some of the lowest in NSW Health (Clause 13 and 14):**

12. On-call rates to be paid as an hourly rate with a minimum payment no matter the length of time.
  - (a) Hourly rate: \$4.20.
  - (b) Minimum payment: \$33.60.
  - (c) Hourly rate on RDO: \$8.40.
  - (d) Minimum payment on RDO: \$67.04.
13. Employees who are contacted out of hours to provide support, or guidance to remote clinical services without returning to site will be paid a minimum payment of one hour of overtime.
14. If a recall roster instituted, participating employees will receive the on-call allowance. Participation on such a roster will however be voluntary.

### **Fair and Reasonable Staffing and Workloads are a non-negotiable for staff and patient safety (clause 15, 16 and 17):**

15. Implementation in full of the Core Conditions Safe Staffing Principles.
16. When determining the safe staffing and workload levels, the Employer must consider:
  - (a) Clinical duties; and
  - (b) Regulatory requirements; and
  - (c) Administrative duties; and
  - (d) Managerial and operational supervisory responsibilities; and
  - (e) Professional supervision responsibilities; and
  - (f) Meeting and committee attendance; and
  - (g) Professional Development; and
  - (h) Duties related to training, education of other clinicians, staff, interns, or students; and
  - (i) Quality and research activities; and
  - (j) Award Grading Committee involvement; and
  - (k) Work, health and safety considerations; and
  - (l) Any other relevant factors in the employee position and role, either individually or collectively within the workplace / service.

### **Career progression and grading of positions must be consistent, expedient, and based on Award criteria, not funding (Clause 18):**

17. Progression within levels through year increments will occur on the anniversary of employment, not based on FTE equivalence.

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18. New Grading Committee structure which consists of equal part Employer and HSU member representatives with the power to determine:
  - (a) Any proposed new or any proposed alteration of an existing positions grading; or
  - (b) Personal regrades for any level under the Award for which personal progression is available; or
  - (c) Whether a position misclassified and any requirement backpay arising from the misclassification; or
  - (d) The assessment of any Award criteria such as speciality area, qualification, credentialing for the purpose of determining the appropriate classification of an employee or class of employees; or
  - (e) Disputes arising as to the payment of the higher qualification allowance to an employee.
19. Recommendations from the Grading Committee must be actioned by Local Health Districts according to strict time limits and cannot be rejected based on funding.
20. Medical Physics and Radiopharmaceutical Science specific personal regrade and credentialing committee which will be responsible for personal regrades and credentialing external candidates prior to employment.

### **Increased recognition for staff because scope of practice is constantly evolving which improves patient care and worker productivity (Clause 21):**

21. The HSU and Ministry must convene twice a year to review and discuss changes to the professions' scope of practice and workforce planning.
22. If changes to scope of practice are identified or explored then appropriate consultation, planning and monitoring of pilots must occur to determine efficacy including impacts on remuneration and classification structures.
23. The Employer will not implement any trial / pilot of new or advanced practice until such process is followed.

### **Allied Health Educator Task Force (Clause 22):**

24. HSU and Ministry of Health to establish taskforce with mandate to implement the findings of the Allied Health Workforce Educator Report. Specifically to achieve Allied Health Educator roles as constituting 2% of the total Allied Health workforce.

### **No worker to go backwards:**

25. Where a condition contained in the Hospital Scientists (State) Award applies to any staff member including Medical Physics and / or Radiopharmaceuticals and is more beneficial, that condition is retained in this Award or the Core Conditions Award.

### **CLASSIFICATION CHANGES:**

26. The complete details of proposed classification changes are contained in the document titled **Medical Imaging and Radiation Proposed Award:**
  - a. Classification schedules – Part H, Classification structures:
    - i. Schedule 1 – Nuclear Medicine.
    - ii. Schedule 2 – Radiation Therapy.
    - iii. Schedule 3 – Radiography.
    - iv. Schedule 4 – Sonography.
    - v. Schedule 5 – Medical Physics (not finalised).

vi. Schedule 6 – Radiopharmaceutical Scientists (not finalised).

b. Translation tables – Section C:

i. Table 1 – Nuclear Medicine.

ii. Table 2 – Radiation Therapy.

iii. Table 3 – Diagnostic Radiography.

iv. Table 4 – Sonography.

v. Table 5 – Medical Physics (not finalised).

vi. Table 6 – Radiopharmaceutical Scientists (not finalised).

### **Transitional Arrangements (Section C of the Award)**

27. In most instances classifications that have been superseded / replaced will have a readily comparable classification (Level and Grade) in the new Award, with the Award containing Transitional Tables for each classification structure to assist with the translation of current employees to the appropriate Level and Grade under the new Award.
28. However, a framework of principles has also been established to ensure fair and reasonable outcomes are achieved; that no one is worse off; and that disputes about outcomes can be addressed and resolved quickly within provided timeframes.