



**NZNO Comment on:
"SSC Pandemic Planning Guidelines Document for the State Services"
April 2006**

NZNO represents more than 20,000 employees working in the "wider state sector". We are concerned that our comments were not sought as part of the original consultation group on these guidelines.

It is pleasing to see that the SSC Pandemic Planning Guideline Document for the State Services provides simple information about areas of interest for all staff including:

- Remaining focussed on providing services to the public as required by legislation and public expectations
- The maintenance of public services, albeit the definition of 'essential services' needs to be more specific
- Expectations of staff to continue to perform their duties and obligations
- Employer expectations regarding the provision of safe work practices and workplaces, including whether the environment in which staff may work from home would constitute a safe workplace
- Ethical dilemmas for staff to continue to perform their duties and obligations and what constitutes 'reasonable' grounds for refusing to continue to work.

We would like to see the guidelines extended to include particular issues for the "health sector", but acknowledge that these issues do overlap to other parts of the state sector to some degree as well.

NZNO recommends that the guidelines include reference to or consideration of the following:

- That health and safety representatives are appointed and have sufficient training to fulfil their roles in the business continuity plans – e.g. the pandemic planning template (in code yellow) suggests that "Staff can refuse to come into the workplace if they and / or the workplace H & S rep believe that the workplace is unsafe; but in both cases the belief must be a reasonable one". So the H&S reps will need to be trained to be able to make this type of assessment and provide guidance to staff
- That business continuity succession planning be included – staff will need to know who they go to if their manager falls ill, or is not in the workplace. To maintain services, all staff should be told who management will delegate to, should something happen to those managers. In normal business continuity

planning, this would include delegating responsibilities (including financial) from the Chief Executive across and down the organisation.

- Given the nursing / midwifery workforce is mainly comprised of women workers thought should be given to the impact of lack of adequate leave on these employees who have other responsibilities i.e. caring for children and other dependents such as elderly relatives.
- Proposed MOH and DHB plans rely heavily upon nursing to be the major workforce to respond to a possible pandemic, there is a need to ensure that the SSC plan does not limit the potential contribution of our members nor put them at risk.
- More guidance is required on ethical matters to staff, through collective bargaining and through referring staff to their union and / or professional bodies for advice and guidance. While guidance is provided on whether staff ought to remain absent from their workplace because they are fearful of becoming sick, however what guidance is available if a staff members have family members, or are part of a small community affected by the illness, and the staff member (particularly a health professional) would like to under take caring duties at home or in their local, iwi community?
- The New Zealand Nurses Organisation is informing government and its members on a range of issues, ethical, professional and employment related.
- Collective Bargaining – the contrary position should also be recognised in terms of collective bargaining that pandemic issues should not be used to circumvent or decline genuine leave claims from unions predating this process.
- Employees working in the health sector will be at a higher risk of infection rate due to the proximity of the nursing / midwifery staff to the public and their families with potential illness. They will need extra allocation of sick leave provisions and their employers (DHB's) should be required to take a human approach.
- Hospitals and other proposed health facilities are places where the spread of infection is likely. DHB employers need to be sensible in their approach and help their employees remain healthy, e.g. options for shorter shifts to reduce fatigue, appropriate protection and surveillance of employees and free health care. If the employees are sick they should be clear that pressure to come to work could result in those people infecting others.

Although it is linked to the employers obligations to provide a safe work environment, a further aspect as yet not directly included in the guidelines is the issue of the potential risk of violence towards frontline staff and concerns about security being another reason why people will not wish to be at work..

NZNO comments collated by:

Glenda Alexander – NZNO Industrial Advisor (Public Sector)