

**From:** Stephen Bull <Stephen.Bull@unitedvoice.org.au>

**Sent:** Wednesday, 10 July 2019 5:38 PM

**To:** Chambers - Gostencnik DP <Chambers.Gostencnik.DP@fwc.gov.au>

**Cc:** AMOD <AMOD@fwc.gov.au>; Leigh Svendsen <leighs@hsu.net.au>; rachell@hsu.net.au; Justin Le Blond <Justin.LeBlond@kennedyslaw.com>; Naomi Cooper <Naomi.Cooper@kennedyslaw.com>; Persephone Forster <Persephone.Forster@kennedyslaw.com>; Mathew Dean <Mathew.Dean@kennedyslaw.com>; Erina Early <Erina.Early@unitedvoice.org.au>

**Subject:** MA2017/250 review of Aboriginal Community Controlled Health Services 2010

The Associate  
DP Gostencnik

Dear Associate

Please find attached a submission for the review of the above modern award. We are unlikely to appear at the hearing of this matter principally due to resource constraints. There appear to be able participants who can assist the Commission. We trust this submission assists.

Stephen Bull

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## IN THE FAIR WORK COMMISSION

Matter No: AM2017/250

### Section 156 - Four Yearly Review of Modern Awards – *Aboriginal Community Controlled Health Services Award 2010*

#### SUBMISSION OF UNITED VOICE

1. This submission is made pursuant to the 5 April 2019 direction of Deputy President Gostencnik as amended and is principally in support of the claims made by the National Aboriginal and Torres Strait Islander Health Worker Association ('NATSIHWA') and the Health Services Union ('HSU') to vary the *Aboriginal Community Controlled Health Services Award 2010* ('the Award') in this review.
2. United Voice generally supports the claims of the NATSIHWA and the HSU. The claims of both these participants are necessary and will ensure that the Award provides a fair and relevant safety-net of terms and conditions.
3. United Voice has significant coverage of employees to which the Award applies in the Northern Territory, Western Australia and South Australia.<sup>1</sup> Our coverage tends to align with health professionals that are the subject of the NATSIHWA's classification claim.
4. In the Northern Territory, which is our branch with the most significant membership in the sector covered by the Award, we have over 200 members who are registered Aboriginal health practitioners employed with non-government organisations and government. In the NGO sector in the Northern Territory, we also cover administrative staff, medical practitioner, councillors, social workers and mental health professionals. We do not have coverage of the nursing staff in the Northern Territory.
5. We are well known and respected throughout the Northern Territory as the Aboriginal and Torres Strait Islander health practitioner union as well as the union for all Aboriginal community controlled services.
6. Our members in the Northern Territory are generally covered by enterprise agreements.<sup>2</sup> This is the principal reason we have not assisted the NATSIHWA and the HSU with statement evidence.

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<sup>1</sup> The Rule of United Voice, Rule 3, Part 1.

<sup>2</sup> Some examples of bargained outcomes are: *Danila Dilba Health Service Enterprise Agreement 2018-2022*, the *Miwatj Health Aboriginal Corporation Enterprise Agreement 2018 – 2021*, the *Central Australian Aboriginal Congress Enterprise Agreement 2017 – 2021*; and the *Jirntangku Miyrta Enterprise Agreement 2018 – 2021*.

7. We are currently involved in bargaining with the Northern Territory Government for the first Aboriginal health practitioner enterprise agreement with a career pathway determined by our Aboriginal membership.
8. We have undertaken consultation with our members who are Aboriginal health practitioners and members employed in Aboriginal Community Controlled Organisations in the Northern Territory concerning the claims of the NATSIHWA and the HSU. All claims are supported. The classification claim of the NATSIHWA received broad support as it recognises the unique, useful, professional and high quality nature of the work performed by our members. Aboriginal controlled health services provide an adapted and effective service to their communities. Appropriate recognition of the skilled and critical work performed by these services is necessary. From our experience in engaging with our members in the Northern Territory, professional career pathways are very important. Our members want careers in health in their communities and it is important for the modern award to maximise opportunities and training. The best way to delivery these outcomes is by strengthening the terms and conditions of the sector and provide skills and career pathways.
9. It is important to bear in mind that much of the work performed under the Award is unique and we trust that the Commission will be mindful of this when determining the terms and conditions of a fair and relevant safety net. '*Relevance*' has particular resonance in setting the terms and conditions of the Award as these services are adapted to the communities they serve and critical to assisting indigenous Australia's eliminate the discriminatory health outcomes that persist. We urge the Commission to take into account the particular context of this Award in its application of the modern awards objective to the setting of its terms and conditions.

**10 July 2019**

**United Voice**

