

New EBA Outcomes at a Glance

Night shift Allowance

This allowance is **paid per shift** and recognises the real **fatigue, health, and wellbeing impacts** of sustained overnight work.

It is calculated at **5 % of the base hourly rate for Level 2 Band 2 Increment 5 (ACP)** for each **ordinary hour of a night shift worked**.

If you work a night shift, you now receive an extra 5 % per hour on top of your existing 15 % night loading.

1st yr - \$28.68 per shift, 2nd yr - \$29.40 per shift, 3rd yr - \$30.12

Double time OT

The old “rostered shift worker” restriction is gone.

All shift workers — including PTOs, paramedics, comms and part-time staff — get double time for shift extensions. Shift work and Shift worker as per EB Definition page 4 of new agreement.

Applies from the first minute past finish time.

If you work day, afternoon or night shifts and stay back — you get double time

Single officer rural and remote

The Union’s original claim sought for **all single-officer roles** — across **all categories and classifications** — to receive this allowance.

Despite strong evidence on risk, fatigue and cognitive load, QAS **refused to extend** coverage beyond Category 2 and 3 stations.

After lobbying by the Union and direct engagement with the **Minister for Health and Ambulance Services**, the final agreement now ensures recognition for those working at **Category 2 and 3 rural and remote stations**

5% of the ordinary base fortnightly rate of ACP Level 2 Band 2 Increment 5 – approx. \$220 per fortnight

Broken Fatigue on Sunday

It ensures that where an employee remains engaged during a fatigue break period on a **Sunday**, they are compensated at **50% again of the base rate** — the same structure used for broken fatigue payments on Saturday.

Meritorious Sick leave

Under **Directive 09/24 – Sick Leave**, employees with **26 years of meritorious service** across the Queensland Ambulance Employees are eligible for a one-off entitlement of **13 weeks (65 working days) paid Meritorious Sick Leave**.

This directive applies to all agencies covered by the *Industrial Relations Act 2016 (Qld)*, including QAS, Queensland Health, and QPS.

“Meritorious” means service that has been **consistently satisfactory, ethical, and aligned with public sector values**.

War Service leave

Under **Directive 09/24 – Sick Leave**, employees who are **Australian Defence Force veterans** may be granted **War Service Sick Leave** where an illness or disability has been **accepted as war-caused** by the Department of Veterans' Affairs (DVA).

This entitlement applies in addition to standard sick leave.

It recognises the unique circumstances of returned service members and ensures that illnesses connected to active duty are treated fairly within Queensland public sector employment.

Mechanisms to support end of shift off load

Commissioner and Minister have referred to supporting a tool such as a Health Service Directive that applies similar off load process when QAS staff are ramped at the end of their shift, as what currently exists in **Protocol for timely transfer of care in emergency departments**.

Escalation process within QAS when end of shift ramping is occurring also called out in Agreement.**Critical Console Handover – EMD and OCS**

15 mins pay at L1,8 regardless of personal increment for those required to attend pre shift for hand over where rostered shifts do not provide an overlap or opportunity to undertake handovers in paid time. in coverage.

Flexibility Allowance Officers' access to OT

Clarified with words in EBA – Access to such overtime will not be unreasonably withheld, taking into account the normal practices for providing overtime to employees.

CCP Access to Professional development time

The HOA commits QAS to providing opportunities for CCP's to undertake peer mentoring, clinical supervision and service improvement activities in paid time.

Flight or HARU in relief pool access to increment progression

employees who have met the mandatory requirements, will have that time worked in an identified Flight or HARU relief pool recognised for the purposes of increments at the extended role L3, B3.

Level 6 access to operational overtime shifts

Level 6 employees may undertake overtime in operational duties. OT will be paid at the top increment of the pay level and rate applicable to the operational duties being undertaken or clinical level at which the employee is credentialed to work if that is higher.

Inclusion of welfare statement

For the first time Welfare is called out in the EBA. Is a sign post for all supervisors and managers to ensure their decision making model includes staff welfare as part of their decision making model. This is unique to the QAS EBA.

Development of best practice rostering principles

Formal commitment to discuss improvements to rostering parameters, processes and procedures.

Development of reconciliation of hours procedure

An agreed procedure for staff to have their hours reconciled if they believe they have worked more ordinary duty and penalty hours than the Agg rate compensates them for.

Reference to complaints management obligations as per the Public Sector Act

Pathway for earlier intervention into complaint management processes.

End of shift measures**Mechanisms to support end of shift off load**

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Protocol for timely transfer of care in emergency departments.**Escalation process within QAS when end of shift ramping is occurring also called out in Agreement.**

Where a shift extension occurs due to access block, the QAS agrees that the matter should be escalated through appropriate pathways. In the first instance the escalation should occur at the local level. In instances where the access block remains unresolved, the matter may be escalated to a more senior level within QAS as appropriate.

Vehicle Readiness restocking stations at hospital so that this can happen while ramped and not back at stations past end of shift.

End of shift Crew utilisation / return to community status

Regions will be responsible for the implementation and management of any agreed state-wide strategies and other locally identified strategies. RCCs will identify and focus on stations/locations with regular high levels of end of shift overtime for discussion on improvement strategies. This may include current strategies such as end of shift crews and/or exploration of new strategies such as return to community status, or other locally relevant strategies agreed at the RCC.

Priority pairing of single officers

If you are normally rostered in a **two-officer crew**, QAS should not direct you to work single officer without:

- Appropriate support,
- A partner being provided, or
- Adjustments made to your duties.

If you are not confident or feel unsafe working alone, this is a **psychosocial hazard** that QAS must manage

Training related to **fatigue management** and reporting systems – for Supervisors and staff both onroad and in Op Cens.

These fact sheets are provided to assist UWU members in understanding their new and existing rights and entitlements.

For any further questions or clarification, please contact a UWU Official at qldambulance@unitedworkers.org.au or speak with your local UWU State Council Delegate.