

Proposed new Nursing / Midwifery (South Australian Public Sector) Enterprise Agreement 2022

Issued: 4 November 2022

The Australian Nursing and Midwifery Federation (SA Branch) Executive, Council, Staff and Worksite Representatives have worked tirelessly to be able to secure a new Agreement which

protects and extends your wages and conditions over the coming years.

Our key goals, endorsed by members at the outset of this round of bargaining, were:

Ratios: To transition our existing staffing provisions in preparation for the ratios legislation to be enacted in the first term of the new state Government; **Rewards:** To provide for increased remuneration and improved conditions of employment in a period of growing inflation; and

Recognition: To provide a starting point to address key WHS issues – violence and fatigue, and to deal with workforce development at a time of shortages locally and around the world.

I am pleased and proud to report that your active support for the ANMF (SA Branch) position has resulted in the proposed new Agreement delivering on our goals. The wage increases of 3% are supplemented by 2 additional payments of \$1500 in the first 2 years of the agreement. The CPD allowance more than doubles with \$400 p.a. increases as well as agreement to index it by salary increase now and in the future.

This will see total remuneration increases of 13-14% for most members in the 2 years and 9month life of the agreement. Much of those increases are to be received in the first 2 years when inflation is expected to be at the highest levels.

Staffing systems will be strengthened and be less open to distortion as we move to weekly compliance measures ahead of ratios coming into force.

Country hospitals will see the same rules apply to averaging hours across the week as city sites for the first time.

Our 10-point plan to address workplace violence will be implemented in all sites, as will measures to assist with fatigue, such as improvements to on-call arrangements, including a right to disconnect.

Our claims for improved breaks after overtime were not agreed. However, we have indicated that we will seek to prosecute health sites where they fail to give adequate time for recovery after overtime is worked.

We have secured an agreement to provide additional recruitment and retention incentives for rural and remote sites. These measures are to be finalised by mid-February 2023 and implemented by June 2023. An additional 16 FTE Educators are to be recruited to support the nursing and midwifery workforce in country sites.

Workforce renewal and capability development plans are to be reviewed and implemented by mid-2023 – measures critical in supporting a more inexperienced workforce in the coming years.

For those employees who have a permit for on-site/designated hospital car parking we have secured a cap of \$2.50 per day. However, we know that not all members have access to a car park so we are thrilled to have secured free public transport upon presentation of your valid hospital identification.

These are just some of the gains and improvements achieved as a result of all of your hard work. This agreement positions nursing and midwifery well at a time when we need to attract and retain as many people within the professions as possible.

For more information, please refer to our:

- Enterprise Agreement Summary and FAQs
- Wage Table

The ANMF (SA Branch) Council recommends your approval of this new Agreement and I urge you to vote 'YES' in this ballot by the closing date of **12pm on Friday 18 November 2022.**

Yours sincerely

Adj Assoc Professor Elizabeth Dabars AM CEO/Secretary





Enterprise Agreement Summary

Over the past 6 months, the ANMF public sector bargaining team has been working hard to negotiate for a new Enterprise Agreement (EA) that recognises the important work of nurses and midwives and the unique challenges they have faced over the course of the pandemic.

Drafting has now been finalised and the proposed EA encapsulates measures to deal with the significant staffing, workload and safety concerns raised by members.

We believe the proposed 2022 Enterprise Agreement addresses your log of claims, which was based around 3 broad concepts: Ratios, Reward and Recognition.

Below is a summary of the outcomes achieved in the new EA.

Ratios

- Weekly balancing of N/MHPPD for all metropolitan and regional sites by November 2023. This provides for a safe transition towards legislated ratios which will be enacted in the first term of the new state Government.
- Compliance strengthened to reduce distortion and improve staffing ahead of ratios coming into force.
- A joint research project to be conducted during the life of the agreement to inform the correct skill mix (of RN, RM, EN and AIN's) for optimal patient outcomes and staff experience; the first review of its kind since the 1990s.
- SALHN community mental health caseload model to be applied in CALHN and NALHN to ensure staffing is linked to consumer care needs.
- Emergency Department resuscitation team staffing will be reviewed within 6 months of the operation of the new agreement. Staffing outcomes will be implemented and updated in Appendix 1 by mid-2023.
- Like-for-like shift replacement (i.e., where an absent worker is rostered for an 8-hour shift, they should be replaced for the whole 8 hours, not for 6 hours).

Rewards

- Three annual salary increases of 3% per annum, operative on and from first full pay period first full pay period (ffpp) commencing on or after 1 January 2023.
- Two one-off payments of \$1,500, payable on 1 October 2022 and 1 October 2023, including pro rata for part-time workers and long-term casuals.
- Professional Development allowance will be increased from the current \$1,200 p.a. by \$400 p.a. to be paid effective ffpp 1 July in each of 2023, 2024 and 2025.





- Removal of the requirement for an employee to be engaged for a minimum of 16 hours a fortnight to receive the professional development allowance.
- Evidence will remain that the nurse/midwife had completed the 20 hours (or more) CPD required for registration renewal – your practising certificate is renewed and presented to the employer. (NB CPD on line is available free to members via the website.)
- All allowances, including the professional development allowance, will increase by the same percentage and same operative dates as the 3% wage/salary increases.
- A joint review of rural and remote incentives between ANMF and the Department will be completed by mid-February 2023. Outcomes of the review will be implemented by no later than mid-2023 and incorporated into the Agreement.

Recognition

- Casuals will be paid a minimum period of engagement (3 hours) where a shift for which they were rostered is cancelled within 12 hours of the rostered commencement.
- Time away from work without disturbance minimum 2 days per roster period where worker cannot be contacted without express permission or where required by law.
- Prohibiting the use of on call and overtime to cover regular service provision and ongoing demand for staff.
- ANMFSA 10 Point Action Plan to End Violence and Aggression in the workplace will be annexed to the new agreement.
- Better protection for those injured at work as the result of violent behaviour (Appendix 9).
- Review of workforce renewal obligations with the objective of developing an agreed strategy to address current and future nursing and midwifery workforce requirements.
- Maternity/adoption leave provisions have been amended to incorporate gender neutral language.
- Hyperbaric chamber allowance will be paid per occasion rather than per week.
- Public Holiday rates will be paid on the day itself and the date which is a declared public holiday when Christmas Day or New Year's Day falls on a Saturday or a Sunday.
- Requirement that health services ensure nurses and midwives are enabled to practice to their full scope.
- More secure employment, with permanent employment arrangements to be preferred to temporary/fixed term arrangements increasing permanent staffing to cover known levels of absence.
- Capability Development Framework will be reviewed and implemented.
- Recruitment to commence for additional FTE Rural Nurse Educators (up to 16 FTE) in regional Local Health Networks.





- Public sector experience across all LHNs will be recognised for the purpose of incremental advancement.
- Private sector experience and whether it should be included in increment progression will be reviewed within the first 6 months of the operation of the Agreement.
- For those employees who have a SA Health/LHN issued permit for onsite/designated hospital car parking, a maximum fortnightly charge equivalent to \$2.50 per day will apply; for those employees who cannot access on-site/designated hospital car parking, access to free public transport upon presentation of valid hospital identification will apply.





FAQs

What is the period of the Agreement?

The new NMEA 2022 will come into effect from 1 October 2022 and will nominally expire on 31 July 2025. Negotiations for a new agreement may not commence earlier than 2 April 2025.

When will my salary be adjusted?

Three annual salary increases comprised of 3.0% per annum (p.a.) will be operative on and from the first full pay period (ffpp) commencing on or after 1 January in each of 2023, 2024 and 2025.

Will the 3% increase be back paid?

Backpay only applies where the operational date of an increase pre-dates the actual payment of the increase. The first wage increase is to take effect on and from the first full pay period commencing on or after 1 January 2023.

The last pay increase was 1 January 2022, so the next increase is in line with previous salary increases.

The 3% doesn't match CPI/other professions' pay rises/nurses' pay rises in other states?

- We are confident that the complete package contained in the new EA will assist members with the increased cost of living pressures, through a combination of increases in wages and allowances, one-off payments, and significant savings on transport costs. Importantly the two one-off payments occur in the next 12 months when cost of living pressures are expected to peak.
- Care needs to be taken when comparing the new EA to other jurisdictions; in a state where the % increase is higher, they may be starting from a lower salary to begin with, and/or they may not have the same staffing and other measures that form part of this offer. Cost of living is also not comparable between states.
- Remuneration growth should remain relatively on par with inflation through the life of the EA. These figures only relate to increases in wages and does not include the other benefits secured through the EA negotiations.





I am no longer employed in the public sector; do I get any of the increases or entitlements? If I leave the public sector before a one-off payment or increased PD allowance is payable, will I still receive it?

- An Enterprise Agreement only applies to employees at the time that they are employed, i.e., the new Enterprise Agreement will not apply to people who have left the public sector before the date of operation.
- Payments or increases that take effect on specific dates will apply to employees covered by the EA at that particular time. If you are no longer employed at the relevant time, they will not apply to you.
- For more details surrounding eligibility for the two one-off \$1,500 payments please refer to the Government '*Fact Sheet: One Off Payment*'.

Will everyone have access to carparking subsidies?

The carparking subsidy applies to those who have an SA Health/LHN issued permit for onsite/designated hospital car parking and received subsidies during the pandemic.

The Emergency Declaration was lifted in July 2022 and the Government announced that those holding an eligible permit would no longer receive a subsidy. As a result, we have negotiated to cap the permit fee at \$2.50 per day. The newly capped fee will also apply to members who obtain a permit after that time.

These carparking subsidies do not apply to any carparking agreements that sit outside of the SA Health/LHN issued permit for on-site/designated hospital car parking, i.e., council carparking or private carparking spaces.

For those employees who cannot access on-site/designated car parking, we have negotiated free public transport for all public sector nurses and midwives who can produce a valid hospital identification.

But there are not enough carparking spaces available on my site

We acknowledge that not all members have access to a SA Health/LHN issued permit for on-site/designated hospital car parking. This is why we have negotiated provisions for free public transport upon presentation of valid hospital identification.

In addition, ANMF (SA Branch) continues to advocate for expansion of car parking facilities wherever possible.





Do part-time/casual workers receive the \$1,500 or the PD allowance?

- Part-time workers will receive the one-off payments on a pro rata basis.
- For more details surrounding eligibility for the two one-off \$1,500 payments please refer to the Government '*Fact Sheet: One Off Payment*'.
- Part-time workers will receive the Professional Development allowance on a pro rata basis. There is no longer a requirement for an employee to be engaged for more than 16 hours a fortnight to receive the professional development allowance.

Will the \$1,500 or PD allowance be taxed?

All payments made to you by your employer under the EA will form part of your taxable income for tax purposes.

Why do people of a lower classification than me receive the one-off payments and PD allowance at the same rate as me?

At a time when people are experiencing the same costs in a range of their day to day living expenses, e.g., fuel costs, gas and electricity and mortgage/rental costs, it makes sense for some of the flat dollar amount payments to be made equally across classifications. Those on the lowest incomes necessarily spend the highest proportion of that income on essentials like accommodation and fuel – where costs have hit all of us.

Why are there different percentage remuneration increases for different classifications?

The 3% per annum wage increase applies across all classifications, but the allowances and one-off payments are paid on a flat dollar rate. Those flat dollar rate payments equate to a different percentage of the underlying wage.

When will the legislated ratios come into effect?

The Government has committed to the implementation of legislated ratios based on the Victorian model by the end of their first term.

Once legislated, ratios will work in live time and give members a transparent, shift by shift nursing and midwifery staffing system, with appropriate skill mix and staff levels based on the number of patients in each ward or unit.

The EA provides a pathway for the safe transition to legislated ratios by improving current staffing systems to ensure they are transparent and less open to distortion.





How will staffing systems be improved in the lead up to ratios coming into force?

Currently, metropolitan health sites and Mt Gambier, Pt Augusta, Pt Pirie and Whyalla hospitals balance their N/MHPPD over 14 days. All other regional sites balance their hours over 28 days.

From November 2023, all metropolitan and regional health unit sites will be required to balance their N/MHPPD over 7 days.

We know from members that the averaging of hours using the existing reporting requirements does not always translate to safe staffing on a shift-by-shift basis. Moving to a 7 day averaging period will significantly improve staffing systems and act as a transition to real-time acquittal when legislated ratios come into effect.

Will members be involved in the transition to ratios?

The state Government has made a commitment to legislate ratios based on the current Victorian model for ratios. An agreement has been reached to establish a Ratios Working Party which includes ANMF representation. The purpose of the working party will be to review the Victorian model and adapt them as appropriate to the South Australian context.

ANMF will continue to update members throughout the review period and in the lead up to ratios being enshrined in law.

Will there still be Business Rules reviews under the new EA?

Business Rules reviews after the commencement of this agreement will only be conducted if parties can establish a prima facie case for material change. Material change means that staffing levels and/or mix are no longer safe nor appropriate for the type of patient care area to the extent that significant adjustment, by the addition or removal of at least one whole shift, is necessary.

A mere change in function or location alone will not of itself necessitate a review. A change must require adjustment to staffing levels and/or mix to ensure that they are both safe and appropriate to the new purpose.

When will the rural and remote incentives be implemented and what will they include?

A review of rural and remote incentives and finalisation of these will be undertaken by ANMF and the Department and completed by no later than mid-February 2023, with agreed measures to then be implemented by no later than mid-2023. The review will take account of work already conducted by DHW, LHNs and claims raised by the ANMF during bargaining.





Measures raised by ANMF during bargaining included:

- Improved allowances
- Increased housing availability and subsidised rent
- Subsidies for education repayments
- Subsidies for relocation expenses
- Incentive bonuses
- Right of return to a metropolitan LHN
- Implementation of flexible work arrangements
- Implementation of enhanced professional development
- Review and implementation of contemporary models of care such as caseload midwifery models

What about the claim for 10 hour minimum break between completing overtime and commencing the next shift?

Our claim for an increased break after overtime was rejected outright by the Government. However, we have indicated that we will seek to prosecute health sites where they fail to give adequate time for recovery after overtime is worked.

We are encouraging members to contact us to report fatigue or other health and safety risks arising from inadequate break between shifts.

What about recognition of private sector experience in increment progression?

Within 6 months from the date of the approval of the agreement, a review will be undertaken to determine whether private sector experience should be included for incremental progression.

All public sector experience across LHNs will now be included in incremental progression.

Authorised by Adj. Assoc. Professor Elizabeth Dabars AM, CEO/Secretary, ANMF (SA Branch), Ridleyton SA 5008

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Classification	Increment	1/1/2022	1 Ja	1 January 2023		1 Jai	1 January 2024	;	1 Ja	1 January 2025	<u>د</u>	(one off payments x 2)	Total \$ increase over the life of the
		(\$) per annum		3%			3%			3%		+ \$2400 (CPD)	
			Fortnightly Increase	Annual Increase	Annual F Wage	Fortnightly Increase	Annual Increase	Annual Wage	Fortnightly Increase	Annual Increase	Annual Wage		
Assistant in Nursing/Midwifery	1st increment	\$54,080 ¢ee 601	\$62.20	\$1,622 ¢1 670	\$55,702 ¢e7 ae1	-	\$1,671 ¢1 771	\$57,373 ¢E0.077	\$65.96 \$67.04	\$1,721 ¢1 773	\$59,094 ¢60,044	N/A unless permanent	\$5,014 ¢5.162
	1st increment	του/cc¢ ¢58 561	\$67.35		21,001 CC, 718	06.00\$	\$1,810 \$1,810	\$67.178	\$71 AG	\$1 86A	\$63 997	¢5 400	501/5¢
	2nd increment	\$59,521	\$68.46		\$61,307	\$70.51	¢1,839 \$1,839	\$63,146	\$72.63	\$1,894	\$65,040	\$5,400	\$10,919
Earollad Nurca (Cartificata) - nat authoricad in	3rd increment	\$60,800	\$69.93		\$62,624	\$72.03	\$1,879	\$64,503	\$74.19	\$1,935	\$66,438	\$5,400	\$11,038
Linuical nuise (certificate) - not autionised in medication administration	4th increment	\$62,080	\$71.40		\$63,942	\$73.52	\$1,918	\$65,860	\$75.75	\$1,976	\$67,836	\$5,400	\$11,156
	5th increment	\$63,360 664 540	\$72.87 \$74.25		\$65,261 ¢cc rao	\$75.06 \$75.57	\$1,958 \$1,007	\$67,219 ¢corrc	\$77.34	\$2,017	\$69,236 670,533	\$5,400 65,400	\$11,276 222 202
	6th increment 7th increment	\$64,640 \$65.920	\$75.82 \$75.82	\$1,939 \$1.978	\$66,579 \$67.898	\$78.09 \$78.09	\$1,997 \$2.037	\$69.935 \$69.935	\$78.87 \$80.44	\$2,057 \$2.098	\$70,633 \$72.033	\$5,400 \$5.400	\$11,393 \$11.513
	1st increment	\$60,800	\$69.93	\$1,824	\$62,624	\$72.03	\$1,879	\$64,503	\$74.19	\$1,935	\$66,438	\$5,400	\$11,038
	2nd increment	\$62,306	\$71.66		\$64,175	\$73.81	\$1,925	\$66,100	\$76.03	\$1,983	\$68,083	\$5,400	\$11,177
Enrolled Nurse (Diploma) or Enrolled Nurse (Certificate) -	3rd increment	\$63,728	\$73.30		\$65,640	\$75.50	\$1,969	\$67,609	\$77.76	\$2,028	\$69,637	\$5,400	\$11,309
authorised in medication administration	4th increment	\$64,960 \$55 553	\$74.71 676 FF		\$66,909 \$68,509	\$76.96	\$2,007 \$3.057	\$68,916 \$70,511	\$79.24	\$2,067	\$70,983	\$5,400 65,400	\$11,423 211,423
	5th increment 6th increment	/ددرەمچ \$68,481	دد.ه/خ \$78.76	\$2,054	\$70,535	\$/8.8/ \$81.13	رد0,2¢ \$2,116	\$72,651	\$83.56	\$2,180 \$2,180	\$74,831	\$5,400	\$11,750 \$11,750
Advanced Skills Envelled Nursee	1st increment	\$68,481	\$78.76	\$2,054	\$70,535	\$81.13	\$2,116	\$72,651	\$83.56	\$2,180	\$74,831	\$5,400	\$11,750
Auvanced Junis Enforced Marise	2nd increment	\$69,760	\$80.23	\$2,093	\$71,853	\$82.67	\$2,156	\$74,009	\$85.12	\$2,220	\$76,229	\$5,400	\$11,869
	1st increment	\$68,481	\$78.76		\$70,535	\$81.13	\$2,116	\$72,651	\$83.56	\$2,180	\$74,831	\$5,400	\$11,750
	2nd increment	\$70,626 \$73 646	\$81.23 \$84 70	\$2,119 \$7 200	\$72,745 \$75 855	\$83.67 \$87.75	\$2,182 ¢2 276	\$74,927 \$78.131	\$86.18 ¢80.86	\$2,248 \$7 344	\$77,175 \$80.475	\$5,400 \$5,400	\$11,949 ¢17 270
	4th increment	576.797	588.33		579.101	590.98	\$2.373	581.474	\$93.71	\$2.444	583.918	\$5.400	\$12.521 \$12.521
Registered Nurse/Midwife (Level 1)	5th increment	\$79,998	\$92.01		\$82,398	\$94.77	\$2,472	\$84,870	\$97.61	\$2,546	\$87,416	\$5,400	\$12,818
	6th increment	\$83,216	\$95.71	\$2,496	\$85,712	\$98.55	\$2,571	\$88,283	\$101.54	\$2,648	\$90,931	\$5,400	\$13,115
	7th increment	\$86,436 ¢80.654	\$99.41 \$103 17	\$2,593 \$7 600	\$89,029 ¢07 244	\$102.40 \$105.31	\$2,671 \$2,770	\$91,700 ¢05 114	\$105.47 \$100.40	\$2,751 ¢7 052	\$94,451 \$07,067	\$5,400 \$5,400	\$13,415 \$13 713
	9th increment	\$93,439	\$107.47	\$2,803	\$96,242	\$110.69	\$2,887	\$99,129	\$114.01	\$2,974	\$102,103	\$5,400	\$14,064
	1st increment	\$79,998	\$92.01	\$2,400	\$82,398	\$94.77	\$2,472	\$84,870	\$97.61	\$2,546	\$87,416	\$5,400	\$12,818
	2nd increment	\$83,216	\$95.71	\$2,496	\$85,712	\$98.55	\$2,571	\$88,283	\$101.54	\$2,648	\$90,931	\$5,400	\$13,115
	3rd increment	\$86,436	\$99.41	\$2,593	\$89,029	\$102.40	\$2,671	\$91,700	\$105.47	\$2,751	\$94,451	\$5,400	\$13,415
Climited Minute (1 mind 2)	4th increment	\$89,654 603 430	\$103.12 \$107.17	\$2,690 \$7,807	\$92,344 ¢06 747	\$106.21	\$2,770 ¢2,887	\$95,114 ¢00,120	\$109.40	\$2,853	\$97,967 ¢107.107	\$5,400 65,400	\$13,713 \$11.051
CIIIIICAI MAISE/IMIAMISE (FEAEI Z)	6th increment	\$94,583 \$94,583	\$108.78		\$97.420	\$112.05		\$100.343	\$115.41 \$115.41	\$3.010 \$3.010	\$103.353	\$5.400	514,U64 \$14,170
	7th increment	\$96,762	\$111.29		\$99,665	\$114.63		\$102,655	\$118.09	\$3,080	\$105,735	\$5,400	\$14,373
	8th increment	\$98,941	\$113.80		\$101,909	\$117.19		\$104,966	\$120.73	\$3,149	\$108,115	\$5,400	\$14,574
	9th increment	\$101,120 \$04 E82	\$116.30	\$3,034	\$104,154 \$07 ADD	\$119.82 ¢117.05	53,125	\$10/,2/9	\$123.39	\$3,218	\$110,497	\$5,400 65,400	\$14,777 \$14.170
	2nd increment	\$96.762	\$111.29		\$99,665	\$114.63		\$102.655	\$118.09	\$3.080	\$105.735	\$5.400	\$14,373 \$14,373
Associate Nurse/Widwife Unit Manager (Level 2)	3rd increment	\$98,941	\$113.80		\$101,909	\$117.19		\$104,966	\$120.73	\$3,149	\$108,115	\$5,400	\$14,574
	4th increment	\$101,120	\$116.30	-	\$104,154	\$119.82	_	\$107,279	\$123.39	\$3,218	\$110,497	\$5,400	\$14,777
Nurse/Midwife Unit Manager; Nurse/Midwife Consultant: Nurse/Midwife Educator: Nurse/Midwife	1st increment	\$114,560 \$117 110	\$131.76 ¢124.70	\$3,437	\$117,997 ¢120.622	\$135.71 ¢120 75	\$3,540 ¢2,610	\$121,537 ¢124 252	\$139.79 \$147 04	\$3,646 ¢2 770	\$125,183 \$127 090	\$5,400 ¢E 400	\$16,023 \$15 251
Consummy, runse/minumje zuducu, muse/minumje Manager (Level 3)	3rd increment	\$119,682	\$137.65		\$123,272	\$141.76		\$126,970	\$146.03	\$3,809	\$130,779	\$5,400	\$16,497
Adv. Nurse/Midwife Unit Manager; Adv.	1st increment	\$120,960	\$139.12		\$124,589	\$143.32	-	\$128,327	\$147.60	\$3,850	\$132,177	\$5,400	\$16,617
Nurse/Midwife Consultant; Adv. Nurse/Midwife	2nd increment	\$124,160 \$136,000	\$142.80	\$3,725	\$127,885 \$120,863	\$147.11 \$110.25	\$3,837	\$131,722 \$133 758	\$151.50 \$152 84	\$3,952 \$4,012	\$135,674 \$137,771	\$5,400 65,400	\$16,914 \$17,001
		¢131 830	\$151.63	+	\$135,002 \$135,794	¢156.18	+	¢130 868	\$160.87	54 196	\$144 064	55,400 55,400	120/17¢
Nursing/Midwifery Director (Level 5)	5.2	\$147,199	\$169.30		\$151,615	\$174.38		\$156,163	\$179.61	\$4,685	\$160,848	\$5,400	\$19,049
	5.3	\$154,879	\$178.13		\$159,525	\$183.48		\$164,311	\$188.98	\$4,929	\$169,240	\$5,400	\$19,761
	6.1 2.2	\$131,839	\$151.63	-	\$135,794 6110 705	\$156.18 \$167.30		\$139,868	\$160.87	\$4,196 \$1,196	\$144,064	\$5,400 25.400	\$17,625
	0.2 6 3	913,9513 6177 100	\$160.47	\$4,18b \$1.416	43,7U5 4151 615	\$17/ 38	54,311 ¢4 548	\$148,UIb \$156.162	\$170.61	\$4,44U \$4.685	424,426 4160 848	\$5,400 \$5,400	518,337 619 019
Director of Nursing/Midwifery (Level 6)	6.4	\$154,879	\$178.13		\$159,525	\$183.48		\$164,311	\$188.98	\$4,929	\$169,240	\$5,400	\$19,761
	6.5	\$162,559	\$186.97		\$167,436	\$192.58		\$172,459	\$198.35	\$5,174	\$177,633	\$5,400	\$20,474
	9.9	\$176,640	\$203.16		\$181,939	\$209.26	\$5,458	\$187,397	\$215.54	\$5,622	\$193,019	\$5,400	\$21,779
	6.7	\$193,279	\$222.30	\$5,798	\$199,077	\$228.94	\$5,972	\$205,049	Ş235.84	Ş6,151	\$211,200	Ş5,400	Ş23,321