

Ref: 2013-06/006

27 June 2013

Brenda Wraight
Health Workforce New Zealand
Ministry of Health
1 The Terrace
WELLINGTON 6011

Attention: Abigail Milnes

Tēnā koe

## Voluntary Bonding Scheme for Nurses: 2014 Terms and Conditions

Thank you for your letter of 7 June 2013 received by email on 11 June 2013 seeking comment on the Voluntary Bonding Scheme hard to staff communities and hard to staff specialties.

The New Zealand Nurses Organisation (NZNO) comments are specific to nursing / midwifery. For ease of reference we have used your questions as headings and our comment is below.

1. Are there specialties that should be or should no longer be considered 'hard-to-staff'? if so, why?

No. We consider all the listed specialties should remain and be considered 'hard to staff' in some locations in particular with experienced staff.

2. With consideration to the factors above, what hard to staff communities for nurses would you suggest? Please explain.

Depending on the definition of 'community' we strongly suggest high risk communities in areas such as chronic care (including respiratory, diabetes, rehabilitation and disability support); families (including maternity, primary health care, health literacy); and disadvantaged Pacific, Māori and refugee communities.

It has not been possible to provide quantifiable information or data in respect to the above as requested in your letter. It is our considered view that it is HWNZ's responsibility to have such information at source. This has previously been brought to your attention. Such information is not directly available to the NZNO. We source this via different avenues.

In the time we had to prepare this response, we have been unable to consult with staff and members on this matter and continue to be concerned about the lack of information and data to support some of the underlying assumptions.

NZNO has some very real concerns which it considers need to be addressed. One of these is incentivising new graduates to work in high risk areas without the necessary support and nursing leadership required to sustain safe and high quality practice – for both nurses and patients. Without further research it is difficult to understand whether VBS is the appropriate tool to address the issues of hard-to-staff specialties and to adequately service certain communities.

"Hard-to-staff" is not an adequate descriptor of a community, and there are numerous factors (funding, location, culture, professional support, etc.) involved in the understaffing of health services for some communities, some of which would be appropriate targets for the VBS and others which would not. It would be inappropriate to incentivise new graduates to go into areas where there is inadequate support and more risk to nurse and patient. Similarly, it may be appropriate for particular nurses to be incentivised to work in some hard to staff communities, for example where there was a strong cultural connection, but not for others.

The community / speciality preference suggests competing objectives – retaining nurses, attracting them to less attractive areas, and, possibly, addressing health disparities. Yet the inherent differences between attracting and retaining nurses in a popular, urban based, acute care specialty with strong professional and clinical support, as opposed to working in isolation in a rural area or a service with little professional support, remain and will require different approaches, for example professional development and support, variations in compensation, relocation incentives.

Thank you for your consideration of the above. We are happy to meet with you to discuss this further. Should you wish to do so please contact Fiona Shand on (04) 494 6834 or fionas@nzno.org.nz.

Nāku noa, nā

Memo Musa Chief Executive

CC: Hilary Graham-Smith Marilyn Head

## **ABOUT NZNO**

The New Zealand Nurses Organisation (NZNO) is the leading professional and industrial organisation for nurses in Aotearoa New Zealand, representing over 46 000 nurses, midwives, students, kaimahi hauora and health workers on a range of employment-related and professional issues. Te Runanga o Aotearoa comprises our Māori membership and is the arm through which our Te Tiriti o Waitangi partnership is articulated.

NZNO provides leadership, research and support for professional excellence in nursing, negotiates collective employment agreements on behalf of its members and collaborates with government and other agencies throughout the health sector. Nurses are the largest group of health professionals comprising half the health workforce.

The NZNO vision is "Freed to care, Proud to nurse". Our members enhance the health and wellbeing of all people of Aotearoa New Zealand and are united in their professional and industrial aspirations to achieve a safe, sustainable and accessible system of public health care for all New Zealanders.