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Shortages Review  
Immigration New Zealand  
Ministry of Business Innovation and Employment

By email: [shortages.review@mbie.govt.nz](mailto:shortages.review@mbie.govt.nz).

Tēnā koe

### **Review of Essential Skills in Demand Lists**

The New Zealand Nurses Organisation (NZNO) welcomes the opportunity to once again contribute to the current review of occupational categories on the essential skills in demand lists. NZNO is the leading professional association and registered union for nurses in Aotearoa New Zealand, representing over 47 000 nurses, midwives, students, kaimahi hauora and health workers on a range of employment-related and professional issues.

This submission is informed by information from NZNO's members and staff, in particular members of NZNO's Colleges and Sections and the national student nurse unit, nursing delegates and organisers, and professional nursing, industrial, policy and research advisers. It has also been informed by significant and widespread discussion amongst nursing leaders, who remain concerned that current employment and immigration strategies are undermining New Zealand's ability to sustain and develop the nursing workforce needed to meet predictable and escalating health demand. The information in this submission largely draws on NZNO's nursing workforce research; Ministry of Health information about new graduates; Nursing Council New Zealand's Nursing Cohort Report (NCNZ, 2014); and resources referenced in the many submissions NZNO has made to Immigration New Zealand, including our submissions on last year's review of the ESID lists. We trust that the web links provided, will suffice in this instance, but would be happy to provide further detail if required.

Currently four nursing categories are on the long term skills shortages list (LTSSL) – perioperative, critical care and emergency, medical, and aged care. One nursing category, mental health, is on the immediate skills shortages list (ISSL). NZNO submits that there is strong new evidence to support the case we made last year for removing all nursing categories from the skills in demand lists. Further, we reiterate our particular concern with the aged care category, since there is evidence that there are qualified New Zealand nurses willing to work in aged care who have not been employed. As a recent report on the New Zealand Aged Care Workforce confirmed, the significant drivers of skills shortages and staffing turnover in this area are high workloads and inferior conditions of work (Ravenswood, Douglas, & Teo, 2014). Both put patient and staff safety at risk. Having the aged care nursing category on the LTSSL fundamentally undermines the Ministry of Health's strategy to attract New Zealand nursing graduates into aged care by making it priority area for voluntary bonding. We note that

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according to the latest report, 41.2 percent of the 2013/14 IQN cohort work in rest home/residential aged care; this was one of the priority areas where more New Zealand nurse graduates applied for positions, than were employed. In 2016 there were 821 new graduates (57%) known to be employed and 630 still looking for work through the Advanced Choice of Employment system (ACE). The table below lists new graduates whose preferred first choice of practice setting is continuing care elderly who cannot get work in this area (Ministry of Health, 2016).

<b>New graduates still looking for work whose first choice practice setting is continuing care elderly as at 20/1/2016</b>	
<b>DHB preference 1</b>	<b>Number preferring continuing care elderly setting</b>
Auckland	3
Counties Manukau	1
Hawkes Bay	1
Hutt Valley	1
Northland	2
Taranaki	2
Waikato	1
<b>Total</b>	<b>11</b>

IQN make up a substantial proportion of NZNO's existing and new membership, as they do of the nursing workforce in general, and we are very aware of the complex issues affecting the balance of employment and migration. Our information and analysis of nursing employment in all health sectors, but particularly aged residential care and District Health Boards (DHBs), is passed on to Immigration New Zealand in response to regular requests for information in relation to accredited employer and approval in principal applications. The outstanding feature of these applications is that they are increasingly seeking approval to recruit to generic nursing positions, *not* specialised ones, and that applications have not abated, although nursing supply has increased to the extent that there is significant unemployment of new graduate and second year nurses.

New graduates identify mental health, surgical and medicine (i.e. three of the five nursing categories on the ESID lists) as their preferred areas of employment, yet these are the same areas where employers have sought recruitment of IQN for the past *twenty years*, over which time the proportion of IQN in New Zealand's nursing workforce has *doubled* from ~12.5 percent in 1994 to ~25 percent in 2014. That trend supports NZNO's long held and well communicated contention that immigration has been used not as a short term response to skills shortages, but as an alternative to sound workforce planning and structured pathways to nursing leadership.

Moreover, despite the regularly articulated need to increase the Māori and Pacific health workforces, there are new graduate Māori and Pacific nurses who applied for jobs who did not get them, including in the areas prioritised by the Ministry! Two of the three prioritised specialty areas of nursing, aged care and mental health, are nursing categories on the ESID lists, and both require only three, not five, years of experience. It is not clear why the government would want to facilitate preferential employment of IQN with only three years experience, when there are less experienced but fully qualified New Zealand nurses available and who do not have the same cultural hurdles to contend with. The following two tables outline the Maori and Pacific new graduate nurses still looking for work (Ministry of Health, 2016).

<b>Māori new graduates still looking for work by first choice DHB as at 20/1/2016</b>	
DHB preference 1	Number of Māori graduates looking for work
Auckland	3
Bay of Plenty	2
Canterbury	3
Capital & Coast	16
Counties Manukau	8
Hawkes Bay	7
Hutt Valley	9
Lakes	6
MidCentral	7
Nelson Marlborough	5
Northland	6
Tairāwhiti	3
Taranaki	1
Waikato	2
Wairarapa	2
Waitemata	3
Whanganui	1
<b>Total</b>	<b>84</b>

<b>Pacific new graduates still looking for work by first choice DHB as at 20/1/2016</b>	
DHB preference 1	Number of Pacific graduates looking for work
Auckland	12
Bay of Plenty	3
Capital & Coast	10
Counties Manukau	15
Hawkes Bay	1
Hutt Valley	2
Lakes	2
MidCentral	3
Southern Cross Hospitals - Southern	1
Waikato	2
Waitemata	1
<b>Total</b>	<b>52</b>

Aged care and mental health are services where the need for cultural awareness, competence and safety is particularly acute. The high Māori use of mental health services underlines the imperative to boost the very low numbers of Māori mental health nurses, and the Ministry of Health has prioritised mental health nursing alongside aged care. Ironically, however, Māori nurses who have applied for mental health nursing positions have not been employed.

Recruitment of IQN to mental health services counteracts and undermines government initiatives to develop the New Zealand-specific mental health workforce needed.

Global migration of health professionals offers considerable advantages to New Zealand, but overreliance on internationally qualified health professionals exposes us to risk in many ways, and can be unethical. As a developed country, New Zealand must be responsible for planning and developing a self-sustainable workforce to meet its health needs, rather than using the health workforce resources of developing countries. Nursing Council's latest nursing cohort report indicates that IQN are increasingly coming from developing countries, that they are young, and that they are not staying. The latter underlines the caution NZNO expressed, based on the results of our nursing employment research that without sound retention strategies, there was a high risk that IQN would not stay in New Zealand. Similarly, NZNO's research indicates that, even amongst older nurses, retention until retirement cannot be taken for granted.

NZNO strongly recommends that the nursing categories on the ESID lists are reviewed and removed. We would welcome further discussion and would be happy to provide further information should you require it.

Nāku noa, nā



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### References

Katherine Ravenswood, Julie Douglas, Stephen Teo. 2014. *The New Zealand Aged Care Workforce Survey 2014: A future of world programme Report*. AUT: Auckland. Retrieved May 2015 [http://www.aut.ac.nz/\\_\\_data/assets/pdf\\_file/0004/542155/NZ-Aged-Care-Workforce-Survey-report.pdf](http://www.aut.ac.nz/__data/assets/pdf_file/0004/542155/NZ-Aged-Care-Workforce-Survey-report.pdf)

Ministry of Health. (2016). *Office of the Chief Nurse: Sector update*. Wellington: Ministry of Health.

### Resources – retrieved May 2016.

NZNO submission ESID Review 2015

[http://www.nzno.org.nz/Portals/0/Files/Documents/Activities/Submissions/2015-05%20Essential%20skills%20in%20demand\\_NZNO.pdf](http://www.nzno.org.nz/Portals/0/Files/Documents/Activities/Submissions/2015-05%20Essential%20skills%20in%20demand_NZNO.pdf)

NZNO Research

<http://www.nzno.org.nz/resources/research>

Nursing Council of New Zealand Cohort Report 2014

<http://www.nursingcouncil.org.nz/News/The-Nursing-Council-Cohort-Report-2014>

Ministry of Health

## NEW ZEALAND NURSES ORGANISATION

NZNO is the leading professional nursing association and union for nurses in Aotearoa New Zealand. NZNO represents over 47,000 nurses, midwives, students, kaimahi hauora and health workers on professional and employment related matters. NZNO is affiliated to the International Council of Nurses and the New Zealand Council of Trade Unions.

NZNO promotes and advocates for professional excellence in nursing by providing leadership, research and education to inspire and progress the profession of nursing. NZNO represents members on employment and industrial matters and negotiates collective employment agreements.

NZNO embraces te Tiriti o Waitangi and contributes to the improvement of the health status and outcomes of all peoples of Aotearoa New Zealand through influencing health, employment and social policy development enabling quality nursing care provision. NZNO's vision is *Freed to care, Proud to nurse*.