

Education (Tertiary Education and Other Matters) Amendment Bill

Submission to the Education and Science Committee

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New Zealand Nurses Organisation Tōpū Tapuhi Kaitiaki o Aotearoa

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*.

Executive summary

1. The New Zealand Nurses Organisation (NZNO) welcomes the opportunity to comment on the Education (Tertiary Education and Other Matters) Amendment Bill ("the Bill").
2. NZNO has consulted members and staff in the preparation of this submission, including the National Nursing Student Unit, nurse educators, the Nursing Research Section and professional nurse and policy advisers.
3. The Bill is highly relevant to our nurse and midwife members, who have higher level tertiary qualifications from publicly funded tertiary institutions and also to our nursing support members who have post-secondary school training and certification from private and public education providers.
4. NZNO supports the submissions of the New Zealand Council of Trade Unions Te Kaue te Mahi (NZCTU) and the Tertiary Education Union Te Hautū Kahurangi o Aotearoa (TEU).
5. While NZNO supports some technical amendments to the Education Act 1989 ("the Act") the Bill proposes, we entirely reject the oxymoron of "equal treatment" for public funding of private and public education providers and observe that the competitive model.
6. NZNO holds the view is that students, employers, public, and private education providers all contribute to funding higher education, each according to their purpose. , That does not allow public funding to be diverted from public education providers which have a unique purpose to meet the needs and aspirations of all New Zealanders. We also note that competitive funding models have not been successful in several public sectors including health, science and education.



7. NZNO **opposes** the Bill as it stands and recommends that you:

- delete clauses 11-13 which constrain independent oversight of the funding needs of the tertiary education sector;
- delete changes to the proposed funding mechanisms that would see public tertiary education providers have to compete with private tertiary providers; and
- agree that separate definitions for non-profit and for profit tertiary education providers.

8. NZNO **supports** provisions in the Bill relating to:

- improved pastoral care for international students; and
- flexible meeting arrangements for governance bodies.

9. NZNO does not wish to appear before the Committee

Discussion

10. NZNO has wide experience in working with both private and public tertiary education providers and regulatory authorities and is regularly consulted on nursing education programmes, the development of specialist knowledge and skills frameworks and nursing support and primary healthcare education and qualifications.
11. Nurses are regulated under the Health Practitioners Competence Assurance Act, 2003, (HPCA Act) and all nursing programmes are accredited by the New Zealand Nursing Council (NCNZ) in collaboration with agencies such as the New Zealand Qualifications Authority (NZQA) and the Council for University Academic Programmes.
12. In Aotearoa New Zealand there are 16 schools offering Bachelor of Nursing programmes on 22 sites, and nine schools that offer the Diploma in Enrolled Nursing programmes. The Bachelor of Nursing Māori and Bachelor of Nursing Pacific are specifically designed for Māori and Pacific students, focusing on the health needs of both their respective communities and non-Māori and non-Pacific communities.
13. Te Tiriti o Waitangi articles upholding and protecting the rights of Māori are enacted by the dedicated programme for Māori nursing students. Importantly, as with the dedicated programme for Pacific nursing students, such self-governing programmes also enhance health outcomes and equity for populations which continue to face inequitable access to medicines and health care and significantly poorer outcomes.
14. Besides regulated nurses, midwives, and anaesthetic technicians, NZNO's members include kaiāwhina or health care assistants (HCAs), whose education and qualifications are generally provided by private industry training organisations such as CareerForce, often in conjunction with employers and government agencies eg Health Workforce New Zealand, NZQA. It should be noted that training for unregulated health and disability workers by private providers includes higher education levels.



Tertiary education in the health sector

15. In a growing, diverse and inclusive social democracy there is room for both public and private provision of tertiary education, but the purpose and function of each is quite distinctive. That distinction needs to be reflected in funding mechanisms that distinguish private for profit providers from public non-profit providers.
16. Public funding by definition must support public tertiary education institutes (TEIs) , (ie universities, polytechs etc) which have a wide mandate to deliver services tailored to the educational, scientific, cultural and labour needs of Aotearoa New Zealand's citizens. Private education providers (or "private training establishments" PTEs) are necessarily driven by profit, and have only to respond to "the market". They are not constrained by public good goals to promote equity, fairness, cultural identity or long-term cost-effectiveness, and are not subject to the same public oversight and accountability measures as public institutions are, including obligations with regard to te Tiriti o Waitangi.
17. As several public reviews, papers and consultations have shown¹, even in an environment where public funding is distinct, overlapping public and private provision of post-secondary school education has led in to duplication and the proliferation of qualifications, which can be confusing, undermine quality and public trust, and disadvantage students.
18. In the health sector, particular problems have arisen with multiple providers of education programmes where the distinctive role and responsibility of regulated health workers is blurred rather than recognised. This can, and has, led to 'role creep', duplication, and substitution with cheaper, less qualified staff, putting both patients and health workers at risk, and undermining the protection offered by the HPCA. It is neither safe, nor necessarily cost-effective² and has adversely impacted the sustainability and stability of the health workforce. The increased number of qualifications for unregulated roles overlapping regulated roles has mainly come from the private sector, which is motivated quite differently from state-funded tertiary providers, and not required to consider integrated workforce planning in the national interest.
19. Private provision of education has also been problematic in the largely privatised aged residential care sector. For example, several large corporate providers eg Oceania and BUPA developed their own non-transferable and costly 'qualifications' for their employees, which limited, rather than enhanced their employment opportunities. In some cases, they charged fees for their own 'mandatory' (ie imposed by the provider)

¹ eg NZQA's Targeted Reviews of various qualifications; the 2008 Skills Strategy discussion paper (see NZNO submission on the 2008 Skills Strategy Document <http://www.nzno.org.nz/resources/submissions>)

² eg Buchan, J; Dal Poz, M. (2002) Skill mix in the health care workforce: reviewing the evidence. WHO: Geneva. Retrieved June [http://www.who.int/bulletin/archives/80\(7\)575.pdf](http://www.who.int/bulletin/archives/80(7)575.pdf)



qualifications, even when manifestly unnecessary eg requiring internationally qualified nurses (IQN) to undertake a certificate of basic hygiene.

20. After literally decades of effort and investment by NZNO and others, negotiating with some very powerful private employers, and multiple private education providers of tertiary education of variable quality, transferable training and qualifications for HCAs have been introduced in aged care, improving safety for residents and health workers.
21. It would be untenable, hugely inefficient, and unsafe to duplicate that lengthy experience (which continues in other areas of health) and to fuel the unnecessary growth of private education providers of tertiary education at the expense of maintaining capacity in the public sector through 'equal treatment' in relation to public funding.
22. Tertiary students make a substantial investment in their education, and our observation and experience is that public institutions generally offer more security and quality assurance than private providers, who come and go.
23. It is also important that employers to contribute to workers' education as they also benefit from having a stable, well trained and qualified workforce. And while that does point to a role for private education providers to deliver work-specific training and education, it does not point to the government's responsibility to fund education to support an "industry" rather than a "public" good.
24. Accordingly we recommend distinguishing 'for profit' and 'not for profit' providers of tertiary education be redefining them in the Education Act respectively as "private education providers" and "community tertiary education providers".
25. We further recommend deleting cl11-13 in the Bill, which cover proposed changes to funding mechanisms associated with equal treatment of public and private providers and also restricts future government's ability to maintain governance capacity and flexibility.

Conclusion

26. Accelerated social change, scientific and technological advancement, globalisation and the planetary challenges of climate change, antimicrobial resistance, and displacement of peoples, require collaboration, not competition. The public - including students, employers, employees, business owners etc. – individually contribute to, and benefit, from high quality tertiary education. Public education institutions are unique in their purpose and scope, and the government is expected to maintain them through tax revenue. Private for profit education providers are businesses which do not require subsidising.
27. In conclusion, NZNO **does not support** the bill and recommends that you:



- **delete** changes to the proposed funding mechanisms that would see public tertiary education providers have to compete with private tertiary providers;
- **agree** that not-for-profit providers of tertiary education be defined in section 159 of the Act as Community Tertiary Education Providers' (CTEPs), while for-profit providers be defined as Private Tertiary Education;
- **delete** clauses 11-13 which constrain independent oversight of the funding needs of the tertiary education sector;
- **note** NZNO supports provisions in the Bill relating to:
 - improved pastoral care for international students; and
 - flexible meeting arrangements for governance bodies; and
- **note** that NZNO does not wish to appear before the Committee.

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