

# Membership Committee Report for BOD

## July 2018

The Membership Committee met in the afternoon on June 21 enabling the committee to be hosted in the evening by Te Poari to celebrate Matariki. They joined some board members, staff and special guests, sharing another wonderful opportunity to have cultural knowledge expanded, relationships renewed, and common interests reflected on. At a time of much concern around the MECA negotiation, staffing frustrations and ongoing uncertainties this provided some welcome relief and balance for us all.

We took time out to welcome and get to know our three new members who have joined us. From GWR - Rebecca Isaac, Canterbury - Erica Donovan, West Coast -Andrea Reilly. We still have one more College and Section vacancy to fill. The group discussed how the M/C works together, with a presentation from Joan on the "Form storm norm and perform" model. And CUSS model – "can you help me understand". Importance of succession planning and importantly shared workload.

Requests to the Board include policy prompters, NZNO Facebook page being used more with consultations posted, and an app with the constitution on it rather than going through the website?

### **Regional Conventions;**

Feedback on Regional Conventions has been generally positive with good attendance in most regions. Robust discussions were had on proposed changes to how members vote, and to the changes that will be required to the way we may vote on remits in the future. Collated and analysed feedback to be posted on the website. There was acknowledgement that delegate preparedness needs to be improved and the membership committee was reminded that they are required to communicate back to the group they represent. Committee members need to put the work in and be aware of the work required. There is clearly an expectation that you are able to talk about the committee's activities.

### **Environmental reports;**

As stated in previous reports, every region has highlighted that chronic over work and understaffing has reached a crisis point. Burnout, increasing disillusionment and concerns round the provision of appropriate and quality of care, would indicate industrial action is imminent if MECA negotiations do not result in improved working conditions and pay. Other issues raised include the following;

- Some nurses are frightened to speak up around MECA breaches.
- Others reluctant to move up a level in PDRP due to the work involved. The MECA allows only 1 day study time prior to presenting portfolio. Commonly DHB's are allowing access to in house education only.
- Organiser workload was noted. Organisers are focused on the MECA negotiations. Other matter put to the side. ?not enough organisers in some regions. Insufficient work place meetings. Delegates and members frustrated that they cannot organise their own meetings and this has put some nurses off voting.
- Hardship funds, the criteria and who sets the criteria. This information needs to be available to members.
- Lack of visibility of the President and Kaiwhakahaere.
- Lack of knowledge about NZNO's activities by some members and students
- Lot of anger about the cancellation of the first strike.
- Beginning of a groundswell to ditch CCDM and replace it with ratios. Apparently there is a lot of positive research coming from the US & Oz about ratios.

### **Regional activities include;**

- Work is underway in Tauranga looking into what triggers dementia patients. Also investigating how to use HCA's better. Concern about extra beds opened during winter but insufficiently staffed.
- Stage 2 of rebuild of the Taranaki hospital progressing. Ombudsman visited mental health unit, as it is a designated place of detention. Half of the unit was redesigned and rebuilt last year and concerns have arisen re seclusion units, and requirements for a member of staff needed to be with them at all times. Transit lounge in medical and surgical area has performed well. Currently a rostering project underway to have rosters issued hospital-wide rather than by ward.
- In Nelson models of care for future health needs are being looked into.
- CCDHB undertook a survey looking at a range of things related to safety. Staff are concerned there are safety issues restricted to providing safe gear. This is now being provided by external contractor. Trendcare is in testing phase but there is a concern about data use, and whether data is correct and reflective. Payroll are still addressing historical underpayments. Also people being overpaid and then wages being taken back. With the living wage going through within CCDHB means that some staff may be paid more than the MECA for HCA's (\$20.50 an hour). Mental Health – across 3 DHBs there are huge staff shortages everywhere. NESP programme - some leave after a year which is reflective of the pressure. Aged care sector – fatigue and short staffing is worse than in the DHB's. Wakefield, Bowen and Royston Hospitals are looking at a combined CA. There is a restructuring at Plunket affecting admin, and is affecting Plunket nurses' ability to do undertake their work.

- West Coast reports significant staff shortages particularly in mental health. There is a concern that nurses are being asked to do radiology due to staff shortages.
- The West Coast held a well-run delegate training day. There are 4 new delegates, but delegates are still to represent rural nurses and midwifery. One of the reps is working with Otago University to bring courses to the area.
- Canterbury report issues with the stained glass window in the Nurses' Chapel and being asked to pay resource consent. Primary health, mental health and aged care are trying to find better ways to communicate between themselves. In mental health there have been meetings set up with management, including a steering committee and working group. Also staff are being asked to move to areas where they don't have experience and feeling insecure as a result. There is a clause in the Employment Relations Act (Section 84) that says that you can refuse to work on the grounds of safety or health but not something easily actioned for some.
- C&S: Gastroenterology would like to have a subgroup for Hepatitis. CPHCN AGM on 23<sup>rd</sup> August with 2 awards. Rheumatology nurses are interested in creating a section and also nurse educators.
- Hawke's Bay Regional Council facilitating forum on Healthcare into Future, Technology and Digitalisation. The Regional Council aim is to raise its profile and encourage a broader interest in NZNO while bringing cutting edge information to the fore. Purpose built Endoscopy Suite to open in October with the launch of the Bowel screening programme.

#### **NSU report:**

- Polytechnic – Whitireia are merging with Weltec, and there is a concern about Māori and Pasifika programmes.
- Quality of papers, and marking is different amongst schools. Clinical learning opportunities and placements in particular vary greatly. Delivery of papers, skills developed, pastoral support, initiatives around cultural safety, bullying, self-care etc. There needs to be more a consistent and nationalised system.
- Some schools are only beginning placement when the references for ACE are due, meaning that some students are requesting references from nurses they have only known for a week.
- Need more jobs!!!! Can NETP and/or NESP positions be opened up in the private sector?
- Preparation for mental health placements inadequate with little teaching. Nationwide feedback on the quality and delivery reflected a paper that was 'terrible, average or okay', 'FLIP' learning means students take initiative but for some schools means tutors are not actually teaching much at all. Recommend that the national mental health inquiry look into quality, delivery and content of nursing school mental health papers.
- Students are affected placement-wise by the strike but unsure what's going on. However, interested in supporting the industrial activities.
- Struggling to be able to afford accommodation while on away placements. It was suggested that NZNO members set up a forum, wherein which they can offer cheap accommodation rates for student NZNO members while on placement.
- Mentorship, supervision and pastoral support need improvement, and promotion countrywide.
- Online delivery replacing face to face teaching is a concern in schools particularly Massey!
- Work underway on NZNO presence at school graduations and NZNO talks given in third year as well as first year by organisers, with rep involvement.

**End of life bill – Leanne Manson:** This bill went to the justice select committee and not the health select committee. At the submission presentation the committee wanted to focus on neonatal nurses and child and youth. Protection for nurses and guidelines to support nurses in their practice were put to the side. Criteria for end of life choices – dying within 6 months, need to see 2 doctors, and see a psychologist. 6 months is a short time to get all this done. They only have doctors on this panel and NZNO would like to see also nurses and cultural advisers present. David Seymour is writing a report to respond to submissions, they have received 30,000 written submissions. Oral submissions are happening every Monday from the 21st of May. Consultations are on the NZNO website and any questions can be directed to [leanne.manson@nzno.org.nz](mailto:leanne.manson@nzno.org.nz) and [Marilyn.head@nzno.org.nz](mailto:Marilyn.head@nzno.org.nz)

**Member Support Centre Presentation – Georgie Araboglos:** Presentation was excellent and informed the committee how MSC has improved service to members. Requested to share it out amongst NZNO networks, Comforting to know that the staff are well trained and kept updated on issues. This gives confidence to delegates to encourage members to call MSC when in any doubt.

**MECA update - Cee Payne:** She reported that negotiating team holds the mandate to make decisions. The Industrial team has meetings every morning with the Communications Adviser, Campaigns Adviser and CEO for a situation update. Facebook following has spiked up and membership has increased in the last 2 months. Members are engaging, bulletins are going out membership-wide and there is a reporting system in place to see who is opening the emails. The need for safe patient care needs to be in the offer. There's also concern about working in substandard, unhealthy, leaky workplaces. Membership queried the NZNO leadership involvement. While not their role to run this campaign, they can help present NZNO's key messages. There was a wish for greater visibility of elected leaders in representing NZNO.

**Improve communication and overcoming geographical isolation:** Work on geographical isolation has not been progressed due to other priorities. Implementation of the advice from recommendations by the volunteer sustainability project has been delayed for budgetary reasons. The committee's recommendations is that this is given further consideration.

- Travel is a significant issue and restricts member involvement in NZNO meetings etc. The M/C are trialling the use of Zoom as an alternative to teleconference calls. Also an option in place of face to face meetings where appropriate. Some groups are already using Zoom, however it is not NZNO wide yet. The current NZNO video conferencing (VC) system is due for update in about 18 months so NZNO will assess organisation needs then, both between NZNO offices, but also between members and external agencies. Currently the VC is only internal and cannot connect with other systems such as DHBs without intervention from both sites. A free Zoom subscription covers unlimited point to point and group calling with up to 100 meeting participants with a time restriction of 40 minutes. We feel that there could be merit in looking into the costs of a business level subscription and investigate how broad it can be. Whatever media is adopted needs to be sturdy and available nationally.

#### **Honorary Membership Group:**

- This group was set up to acknowledge members and delegates who dedicate a lot of time to the NZNO. Note the difference to the Award of Honour, which is tied to nursing work not to NZNO work. The group would like to find a way to present the honorary membership. This could be inserted into the Regional Council Handbook, there needs to be a nationally consistent certificate. Haromi Lardelli may be contacted to check who was particularly active with NZNO. Te Poari have sent an update to the working group.

**Committee name change:** Put on shelf as remit needs to be put in for it to be changed in Constitution – current favoured name is Member Representative Committee.

**Graduation gifts:** As per previous discussion around graduation gifts, Keep cups, retractable NZNO lanyards and flowers seem to be more favourable than fob watches as student nurses generally get the fob watch as part of their uniform. Investigation could occur on whether NZNO could increase their merchandise and also have the keep cup available for sale?

**Florence Nightingale:** Reminded of the importance of belonging on this committee as a lot of work goes into it. There were over 100 applications the last round.

#### **Conference preparation:**

- Membership Committee Stall: Laminated copies of the NZNO waka membership structure to be put on each table and poster versions for the Membership Committee stand.
- A survey could be created about ideas to resolve geographic isolation, with poetry books as a prize for survey.
- It was suggested that we get a purple button badge with "Membership Committee" on it in white, so that MC members are identifiable at AGM.
- To will follow up on idea of taking photos of a waka with members around it to signify different parts of NZNO structure. Will look at a model of a waka but this would come with a cost to NZNO.

#### **2018 'One member, One vote' Remit:**

- Presentation to be sent out to College and Section Chairs, NSU, Regional councils.
- Mental Health Section has discussed it at committee level – and they are in favour.
- One concern is whether people are actually going to turn up to vote – member engagement.
- The vote may not be simply for or against, there are other things to consider, like knowing what reservations people have, or what could make them change their mind from no to yes. If there are amendments to the remit, it's good to have the conversation at AGM to allow the remit to be amended in a way that it could potentially be passed. Note: Remits are sent out 19<sup>th</sup> July.
- Order of remits this year is a particular issue as one remit has a consequence to another. The remits may be going in numerical order of the constitution. There is potential for the remits to be changed, passed, voted against or passed on to an all member ballot.
- Jenny was acknowledged for her work on the remit.

**Structural Diagram** video presented to the group, still some amendments to be made. Before it goes on NZNO website. Acknowledgement at AGM is being planned.

**Next teleconference** – 24<sup>th</sup> July 5.30pm – this will be done on Zoom as a trial.  
**Chairperson Sandra Corbett**

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