

NEW ZEALAND NURSES ORGANISATION TŌPŪTANGA TAPUHI KAITIAKI O AOTEAROA

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**New Zealand Nurses Organisation Group** 024-25 **Annual Report** 

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Vision

# Freed to care, proud to nurse



#### Mission

NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa is committed to the representation of its members and the promotion of nursing and midwifery. NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa embraces Te Tiriti o Waitangi and works to improve the health status of all peoples of Aotearoa New Zealand through participation in health and social policy development.

### Contents

About Us	3
Strategic Plan 2024–2025	4
Our Members	6
Financial Overview	9
Year in Review	11
Reports	24
Board of Directors' Report	25
Kaiwhakahaere Report	27
President's Report	28
Chief Executive's Report	30
Te Poari o Te Rūnanga o Aotearoa	34
Membership Committee Report	36
National Student Unit Report	38
Regional Councils	40
Colleges & Sections	48
Governance	65
Our Staff	68
NZNO Directory	70
Financial Report	71



### **About Us**

The New Zealand Nurses Organisation Tōpūtanga Tapuhi Kaitiaki o Aotearoa (NZNO) is the leading professional union for nurses in Aotearoa New Zealand.

NZNO represents more than 62,000 nurses, midwives, health care assistants, kaimahi hauora, nursing tauira (students) and health workers on professional and employment-related matters. NZNO is affiliated to the International Council of Nurses (ICN) and the New Zealand Council of Trade Unions (NZCTU).

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 (te Tiriti) 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 nursing care provision.

NURSES

### Recognising our members' commitment

Volunteer support is the backbone of any member-based organisation and NZNO is no exception. We are fortunate to enjoy a high level of volunteer support from our committed membership.

We take this opportunity to recognise and acknowledge the countless number of volunteer hours contributed by our members in their work as delegates on regional councils, in college and section committees, in the national student unit, on Te Poari, as part of Te Rūnanga, on the Membership Committee and Board of Directors.

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### Strategic Plan 2024–2025

Maranga Mai! is a call for action; to rise up! It is a call for NZNO members wherever they work, and the wider community, to get behind the campaign!



#### Purpose

To win a quality public health system that is patient and whānau centred with the necessary political and resourcing commitments needed to address the crisis permanently across the whole health sector.

#### Goals

#### **Outward facing**

- Patient outcomes that are culturally safe and equitable across the whole health sector.
- Every nurse has the power and resources to do their job.
- Decisions on nurse resourcing are based on NZNO's Maranga Mai! fixes.
- NZNO is the leading voice in health.

#### Inward facing

- Every member across the sector is engaged and actively participates.
- New ways of campaigning are utilised.
- Membership lifted.

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• Member leadership driving change at all levels.

#### Context

- The health and disability system is under significant stress, increasing health complexities, worsening health determinants and demands, budget cuts, and privatisation, which means managing resources is becoming more difficult.
- Across the entire nursing workforce ongoing systemic failure has meant moral injury/distress, fatigue and burnout. Nurses are facing increasing demands and significant shortages in nursing supply.
- Reports such as the Wai 2575 (Kaupapa Māori Health Inquiries), Health and Disability System Review and the Health reforms all acknowledge the deficit in health equity for Māori as a representation of systemic racism and failures.
- NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa has failed so far to create a sustained force for change that is built on collective member power that wins hauora for both users and workers.
- This campaign redesign must work offensively and defensively to collectively bring members together to use political, professional, and industrial power to address the nursing workforce issues and the attack on our public health system.



#### Every nurse, everywhere

#### **Strategic directions**

- Actualising te Tiriti.
- Building political power.
- Organising on the ground wide spread action.
- Winning public support.
- Leveraging health and safety.
- Driving the NZNO vision of the health system of the future.

#### The fixes

- An evidence-based political commitment to a quality public health system.
- Ensure te Tiriti is actualised within and across the health system right now.
- Fix the number needed of trained and qualified nurses across the health system.
- Fix pay and conditions that are equal across the health system and meet nurses' values and expectations.
- Fix the number of people in nursing training to meet current and future needs.
- Fix the number of Māori and Pacific nurses to meet the need.

#### **Areas of focus**

We identified 11 areas of focus to support us to actualise Te Tiriti o Waitangi; build political power; organise on-the-ground, widespread action; win public support; and leverage health and safety. These are our priorities over the next three years.

- 1. Tino rangatiratanga
- 2. Building member power
- 3. Workforce
- 4. Education
- 5. Registration
- 6. Health and safety
- 7. Bargaining
- 8. Political
- 9. Immigration
- 10. Allies
- 11. Te tai āo

Our operational plans contain more detail under each Area of focus.

Find out more about Maranga Mai! at: maranga-mai.nzno.org.nz

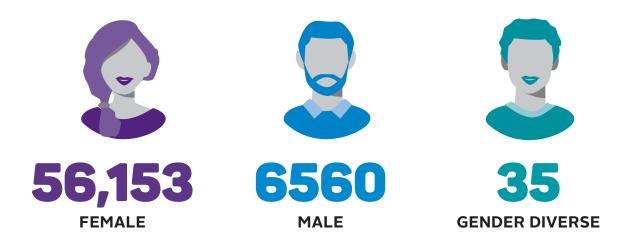
About Us

NZNO's role is to represent the interests of all members: nurses, midwives, students, kaimahi hauora and health workers. We are a bicultural organisation, committed to te Tiriti o Waitangi. The health and socio-political context within which NZNO and its members function is complex, ever-changing and involves many stakeholders. NZNO must be flexible and adapt to emerging challenges, while continuing to provide leadership and advocacy services for its members employed in a range of settings in the health sector. The Strategic Plan will enact the objects of NZNO as set out in the Constitution.

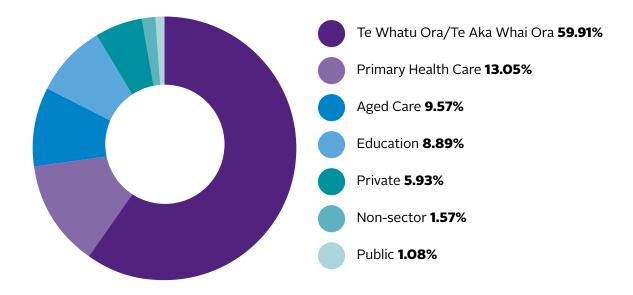




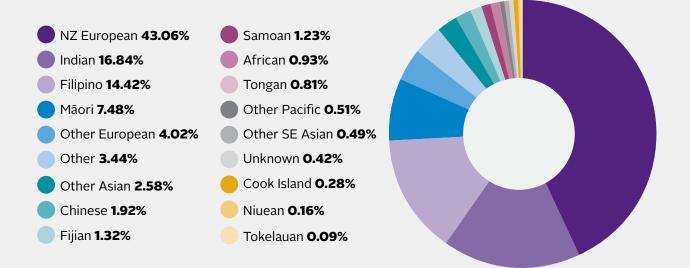
Our membership is made up of

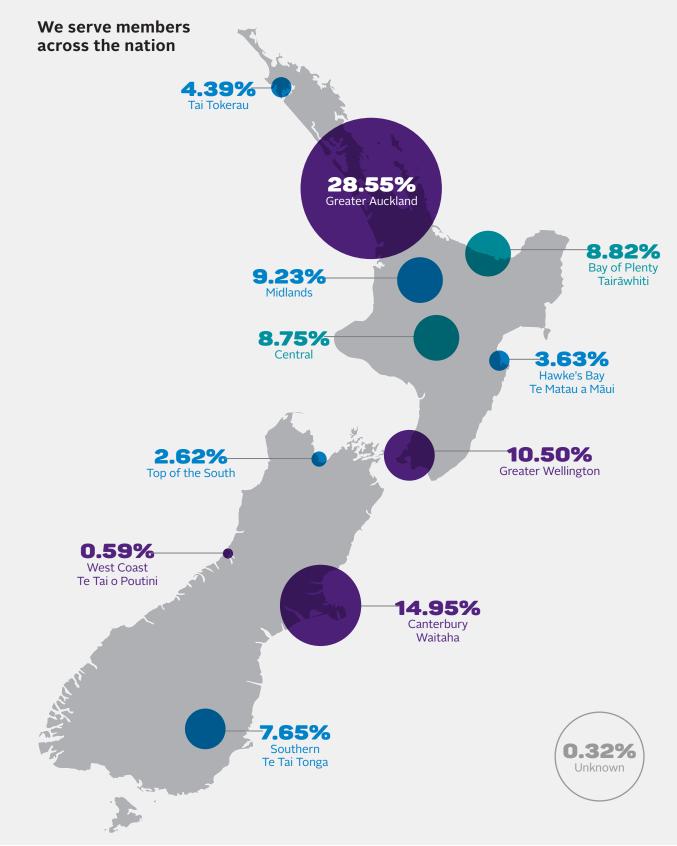


#### We represent a range of health sectors



#### Our members are from diverse ethnic backgrounds





**About Us** 

### Financial Overview – NZNO (Parent)





#### Where our income comes from





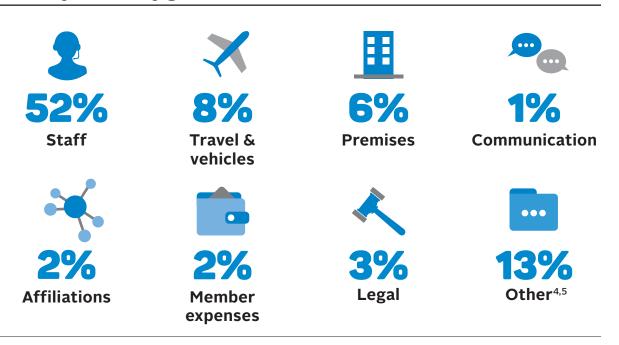
Sponsorship & registrations



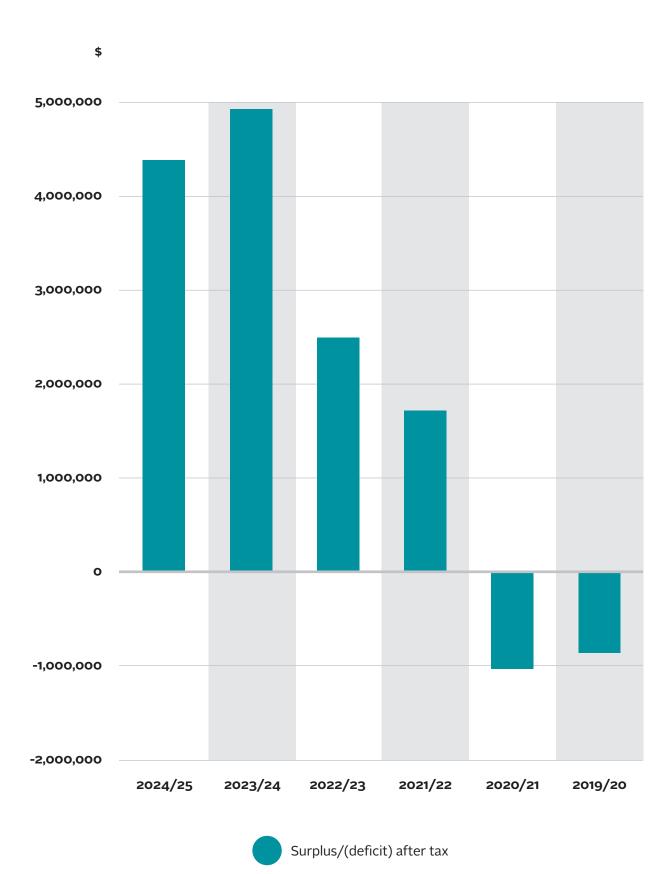
Bargaining fees



#### Where your money goes<sup>3</sup>



- 1 Includes advertising, rent and other income.
- 2 Interest and dividends, and Colleges and Sections' income.
- 3 As a percentage of total income.
- 4 Includes advertising, consultancy, information technology, depreciation, donations and grants, financial, general expenses, printing, stationery and publications.
- 5 Colleges and Sections' conference expenditure is 2%.



#### **Financial Performance**



For a better working life

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## Year in Review

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### **Year in review**

#### Area of focus: Tino Rangatiratanga

Over the past 18 months Aotearoa has seen more challenges on Tino Rangatiratanga than it has in the past few decades. The Government's move to redefine the principles of Te Tiriti o Waitangi was one of the greatest attempts to deconstruct the Māori-Crown relationship to date. Other concerns are more than a dozen policy changes that directly affect Māori including funding reductions to Māori services; disestablishment of the Māori Health Authority Te Aka Whai Ora; and removing Māori kupu from public service titles and documents. These are all seen as systematic legislative attacks on Māori.

New Zealand Nurses Organisation Toputanga Tāpuhi Kaitiaki o Aotearoa (NZNO) took the lead and stood at the steps Parliament on the day the Principles of the Treaty of Waitangi Bill was first tabled in Parliament. This was a week before the largest hīkoi in New Zealand history was due to arrive in the capital to protest the Bill.

NZNO also supported hundreds of our members to write submissions on the Bill and submitted both written and oral submissions on behalf of all of our members.

NZNO was represented at the hui called by the late Māori King Kiingi Tūheitia for the many iwi and many elements of te ao Māori to "kotahitanga" – to unite, at Turangawaewae in Ngaruawahia. This was followed by our representation at Rātana Pā in January and at Waitangi on 6 February.

These were the most significant political events in the Māori events calendar, since our last report.

#### Area of focus: Building Member Power

NZNO continues to organise and campaign around the key issues for the health workforce. Despite the headwinds of a Government that is hostile to the health system, NZNO acts as the leading voice for patients and the health workforce.

#### Te Whatu Ora

The members at Te Whatu Ora continue to suffer from the myriad of problems created by understaffing. This was already an issue and is now exacerbated by cuts



NZNO Kaiwhakahaere Kerri Nuku delivers her speech at Parliament on the day the most controversial proposed law in the history of Aotearoa, Treaty Principles Bill, was tabled in the House. She is flanked by Te Poari's Tracey Morgan (left) and Charleen Waddell (right).

to "non-frontline" staff. This is the core claim in their negotiations – to have our hospital system staffed sufficiently so they can do their job of looking after patients. Te Whatu Ora has not committed to this and combined that with a below-inflation pay offer, so effectively a pay cut.

Members took strike action in a national day in December as soon as this bargaining parameter was confirmed. They then continued with two weeks of rolling strikes around the country before Christmas.

While the negotiations headed into facilitation with the Employment Relations Authority (ERA), the offer was not significantly improved. Members are heading into ratification and if that is rejected, further industrial action will result.

#### Pay equity

NZNO was progressing 12 pay equity claims (and one review) when the Government changed the law under urgency and cancelled all existing pay equity claims. This resulted in significant and immediate opposition to the changes including numerous protests which NZNO reacted quickly to support. This campaigning will continue.

#### **Delegate training**

Since late 2024 NZNO has been expanding its training offerings to delegates. The first of these was the Age Safe training for delegates to support the campaign. The second ran from January to March 2025 and focused on industrial action and campaigning for the Te Whatu Ora delegates. NZNO will continue to develop and deliver bespoke education for delegates when relevant to a campaign.

A new suite of courses is being developed for delegates who have completed the Stage I (Foundations) and Stage II (Being an Active Delegate). Delegates will then be able to choose from the new selection of courses on offer. Expected to be launched in late July 2025, the initial offerings will be Organising Around Health and Safety, Pay Equity, and Supporting Members.

#### Area of focus: Workforce

#### Role of the nurse and midwife

Nurses and midwives are among the most important part of our health care system, providing not only clinical expertise but also emotional support, advocacy, and continuity of care. Over the past year, our members have continued to demonstrate extraordinary resilience, innovation, and leadership across all areas of practice.

NZNO has looked to define the role of the nurse/ midwife through qualifications, guidelines and policies that emphasise professional standards, responsibilities, and the scope of practice. From there NZNO has worked towards the development of a policy that articulates the role of the nurse/midwife to influence government, ministry policy settings, funding decisions and the delivery of health care and services across the heath sector.

This policy is a direct response to challenges the nursing/midwifery workforce has experienced, with role dilution, substitution or encroachment of others, such as Health Care Assistants, kaiāwhina, vaccinators, physician assistants, anaesthetic technicians, and paramedics.

NZNO will continue to fight and remind everyone of Maranga Mai! Every nurse everywhere.

#### Area of focus: Education

NZNO's Nursing Education Policy was published 2024 and now underpins all work in this area of focus.

#### Undergraduate and postgraduate

#### Education and nursing practice will integrate te Tiriti and Kawa Whakaruruhau (cultural safety)

NZNO contributed to the development of the Nursing Council of New Zealand's new standards of competence and scopes of practice for Enrolled Nurses and Registered Nurses through 2023 and 2024. These also changed expectations around direction and delegation and as they are rolled out they will flow through to nursing education and practice.

#### Undergraduate nurse placement

### Travel and accommodation expenses will be fully funded

The NSU Student Survey has been conducted again in 2025 and will follow up issues identified in the 2023 survey. This includes the need for solutions to the acute financial hardship that nursing students' experience, especially while they are completing clinical hours at clinical placements.

### Te Whatu Ora will fund nurse education providers

#### To employ older nurses still in practice, to support undergraduate/new graduate/IQNs to improve recruitment and retention capacity

Pay parity remains a significant issue for the recruitment and retention of the nurse educator workforce. The uncertainty in the Institutes of Technology and Polytechnics (ITP) sector continues with the disestablishment of Workforce Development Councils and Te Pūkenga confirmed early in 2025.

#### Pre-entry to nursing training

#### Availability will meet supply and demand

Industry Skills Boards (ISBs) will replace Workforce Development Councils. A Social and Communities Industries ISB will include health and wellbeing; dementia care; community health and support; disability support; diversional therapy; aged care; and mental health and addiction.

### Staircasing (Ara) education and recognition of prior learning

#### From HCAs (level 4 – pre-entry) to Nurse Practitioner (level 8)

Changes in the ITP sector continue to present challenges to health workforce planning especially at the entry levels to the pathway to nursing education. Undergraduate and postgraduate degrees in nursing are 'populated' with tauira who have begun their learning at pre-degree level.

#### **Area of focus: Registration**

Nursing Council New Zealand data shows a continued growth in nurse registration numbers in Aotearoa across all levels, with more than 100 newly registered Nurse Practitioners for the period December 2023– December 2024. Registered nurse numbers grew by 8000 in the same period. It is important to note that not all nurses with an Annual Practising Certificate (APC) are actively working as nurses.

#### Area of focus: Health and Safety

Understaffing continues to be the largest contributor to health and safety issues, particularly in hospitals and aged care. There is a challenge around its definition as a specific risk (our position) or a factor that may influence risks (employer position). NZNO has 969 health and safety representatives.

#### **Employment Relations Authority cases**

In late 2024, NZNO filed with ERA an issue of safe staffing against Te Whatu Ora. The matter concerns a particular commitment to safe levels of staffing in the collective agreement. The case (if successful) may set a precedent that is relevant to the general duty of an employer to provide a healthy and safe workplace with respect to safe staffing. The initial matter filed was about the situation at all Waitemata hospitals, but a second matter has been filed for Christchurch and further filings are expected.

#### **Worker Participation Agreements**

Also in 2024, the Worker Participation Agreement with Te Whatu Ora was completed which is allowing a refresh of health and safety organising and worker engagement at our largest employer. One of the highlights is the reporting requirements which allow better mapping based on employer data for our organising efforts. Other Worker Participation Agreements are in the process of renegotiation.

### Police phased withdrawal from mental health

New Zealand Police has made the decision to change the way they deal with mental health and their interactions with the health system, by reducing the amount of resource and time they spend supporting the health system. Te Whatu Ora had significant advance notice of these changes and only engaged in consultation with unions very late in the piece. Three of the main challenges have been: police withdrawing staffing resource and the health system having nothing to replace it with; the differing statutory powers the police have and taking them out of the equation; and general confusion and poor execution of the changes.

NZNO and our allied unions have pushed back significantly on these changes, through consultation and in the media. This has resulted in the changes being delayed twice and the phase two changes being done in district tranches. It has however not stopped the Police from deciding to withdraw creating increased risk to our members. We continue to work in this space and are particularly supported by the Mental Health Nurses Section.

#### Area of focus: Bargaining

#### Aged care

In 2024, pattern bargaining in aged care continued to be shaped by pay equity delays, funding pass-through disputes, and restructures. Most major providers – including Oceania, Bupa, Heritage, and Metlifecare – passed on the 3.2% 2024 funding uplift through negotiations. Radius negotiations are ongoing due to their refusal to pass it on. Although disparity funding was allocated to aged care nurses in previous years, it has not closed the gap with Te Whatu Ora rates.

In response, NZNO raised a pay equity claim for aged care nurses. Summerset remains the only provider to offer 100% of Te Whatu Ora rates. Collective agreement bargaining has been more assertive with improved engagement from members, though ratification turnout remains low. Restructures at multiple providers have added pressure on members, with industrial and legal strategies used to respond. NZNO continues to link bargaining to our wider Maranga Mai! campaign, advocating for minimum safe staffing and pay equity across the sector.

#### Te Whatu Ora

NZNO set out to achieve key goals in 2024 – determined through claims meetings with members – with respect to the new round of bargaining. These were:

- Progress Maranga Mai! goal of actualising te Tiriti through achieving the cultural component of staffing ratios and identified cultural clauses in the collective agreement.
- Achieve sufficient extra funding for the health sector.
- Grow our organisation and density through the course of the campaign and activating membership.
- Achieve fair nurse-to-patient ratios (including increase in Māori/Pacific nurses).
- Fair pay rises.
- Strengthen health and safety rights.

Alongside member governance, key activities were mapped out to achieve the goals in the lead up to bargaining and beyond.

To activate membership and put the focus on ratios in the public eye a number of activities were held throughout 2024. These included a National Day of Action for Ratio Justice, a Ratio Justice Bus Tour and a Ratio Justice conference. These are discussed further in the Political area of focus in this document.

Outside of ratio activities NZNO celebrated the day of initiating bargaining with members. The purpose was to focus members on standing together in the months to come to fight for their issues and demonstrating our collective power and resolve to the employer. The resulting photos from across the country presented a powerful image to Te Whatu Ora on the first days of bargaining.

After the initial few days of bargaining it was clear we had a fight on our hands with Te Whatu Ora making it clear they had very limited bargaining parameters, well below members' expectations.

Stop work meetings were held in November with the express purpose of getting a mandate from members for the union to reject Te Whatu Ora's bargaining parameters and run an online strike ballot. It also gave an opportunity for Te Whatu Ora to witness the resolve of our members.

An emergency meeting with Te Whatu Ora National Delegate Committee (NDC) and bargaining team was pulled together to determine the shape of the strike action needed.

In the stop work meetings members unanimously rejected Te Whatu Ora's bargaining parameters and endorsed a plan for a national strike on 3 December followed by rolling strikes through the districts before Christmas. We received excellent media coverage on our national strike day actions and a good level of participation from members. It was difficult to keep momentum with the fightback due to the Christmas break falling at that time.

Ward meetings were held across the country in January and February, where members discussed more localised organising structures for industrial action and what these actions might look like. District committees were formed to determine future actions.

Since then various actions have been held, with national strike action looming. There is also the likelihood that other health unions will join us, as their bargaining has stalled. We are working closely with the Association of Salaried Medical Specialists (ASMS) and Public Service Association (PSA), given their offer is identical to ours.

#### **Primary Health Care**

The focus for 2024 in Primary Health Care (PHC) was the renegotiation of the PHC MECA, which ran through to 2025.

This bargaining round faced many obstacles to achieving desired results for members. These barriers included:

- Lack of transparency in wages actually paid by employers in the sector.
- Employer advocacy that lacked cohesion and authority to reach resolution.
- Lack of unity in employer advocate groups' approaches leading to split offers which served mainly to generate ire with members.
- Lack of organising presence, member density and industrial power in the sector, meaning the anticipated efficacy of industrial action was limited.
- Persistent under-funding of the sector using a capitation model that does not incentivise provision of a quality service but instead leads to under-provision to contain costs.
- Ongoing pay disparity between this sector and Te Whatu Ora that is enhanced by under-funding pay disparity funding provided by the previous government.
- Ongoing industrial action in Te Whatu Ora alongside long delays in PHC negotiations as employer advocates 'surveyed' their constituents before being able to reach a position on issues under discussion.

After two rejected offers to members, and growing frustration with the inability to progress negotiations with multiple advocate teams, the NZNO negotiations team took a day out from negotiations to construct an offer. Based on member feedback, the offer was thought to be good enough to go to members for a vote. The NZNO counter offer was presented to the employer advocates via a video call in early January. In the offer NZNO raised claims which the employer advocates had already rejected in August 2024 but which members wanted to progress. It also contained three pay increases across a two-year term. The employers reduced this to two pay increases of 5% and 3% at ratification and in July 2025 respectively. The offer was accepted by members, with ratification being 26 March, expiring on 30 June 2026.

NZNO and two of the larger employer advocates from PHC MECA negotiations have met and are developing a campaign strategy to challenge the funding in the primary sector. As a part of this campaign activity, NZNO has also increased social media presence and is seeing some good results from a positive and fresh social media approach.

Other complex bargaining included strike notices being issued by Plunket members in late 2024. This required mediation to settle the collective for a 3.2% increase prior to strike action needing to occur. Similarly, Sexual Wellbeing Aotearoa members issued a two-day strike notice and mediation was needed to achieve a 3.5% pay offer for members. Future funding uncertainty in the entire primary sector is leading to employers being very cautious in their approaches to offers in bargaining.

#### Private hospitals and hospices

The largest bargaining to take place in the private sector at a national level was the Evolution Healthcare collective agreement. This was a difficult negotiation but maintained Evolution as one of the better paying employers in the sector, maintaining their Te Whatu Ora +2% wage level. A dispute regarding applicability of the settlement to members due to gaps in data following the NZNO membership system transition was eventually resolved.

Preparations for bargaining in the hospice sector were started in late 2024 and continued in 2025. The hospice sector is currently fragmented regarding collective coverage, and mapping of collectives is underway to try to consolidate this and lead to more uniform member terms and conditions in the sector.

There are opportunities in 2025 to consolidate some bargaining on both private hospitals and hospices. In particular there are possible consolidations that can be done in Evolution Healthcare. There are growth opportunities where we do not have member density, and where we have little or no collective coverage, and organising plans will focus on growing this area in 2025.

#### Pay equity

In May 2024, the Pay Equity Taskforce that was part of the Public Services Commission (PSC) was disestablished. The Taskforce was critical in providing support for employers and unions involved in pay equity claims. Alongside the disestablishment of the Taskforce all the resources were removed from the PSC website and the Funded Sector Framework was also repealed. The impact of this move by the Government was to slow down or completely stall a number of the pay equity claims that were in progress. It also raised significant concerns for the employer parties about what funding would be available to pay for pay equity settlements. A positive side of the change was that the complicated milestone reporting process was no longer required and allowed the parties to a pay equity claim (employers and the union) to move the process along more quickly between themselves.

At the time of the dismantling of the Taskforce NZNO had three pay equity claims in progress: Hospices, Plunket and Primary Practices and Urgent Care Centres. NZNO was also party to the Care and Support Representative claim along with E tū and PSA. Unfortunately, due to lack of progress on this claim, once the funding became uncertain, the unions filed an application with the Employment Relations Authority to have the pay rates fixed. The pay rates proposed had been calculated based on the evidence and data gathered through the work assessment process and through 'bargaining discussions' with the employers. The hearing is set down for August 2025. In order to protect the interests of other Care and Support members the unions raised two subsequent claims, which largely for NZNO, cover our Aged Residential Care members. This was in order to have the settlement that will eventually be reached for the first Care and Support claim, to be extended to the rest of the Support Sector.

Regardless of the obstacles, NZNO has continued to raise pay equity claims across the health sector. In addition to the claims referred to above (Plunket, Hospices and Primary Practices) we have claims being progressed for Access/HealthCare NZ/Total Home Care, Awanui Labs, Sexual Wellbeing Aotearoa and Aged Care Nurses, and a strategy to engage with Māori and Iwi providers has been agreed with our Mana Motuhake Roopu.

#### **Area of focus: Political**

This year has provided many challenges following the election of a government which has attacked and underfunded the health system from the outset. The Government has made it clear it will not engage with unions through formal structures, hence our need to focus on mobilisation on the streets.

#### National Day of Action for Ratio Justice

NZNO took to the streets on Thursday 9 May 2024 holding rallies across the country. We deliberately planned an action before Budget Day 2024 (30 May) to send a strong message to the Government to increase funding to health in Budget 2024, to put more money into health to fund increased nurses, midwives, health care assistants and health workers. The rallies were colourful, energetic with a clear message that we were in a crisis of understaffing. It was great to see nurses, midwives, HCAs and nursing students leading these rallies, with strong support from other union members and the public.

#### National bus tour for Ratio Justice June 2024

The Ratio Justice Bus Tour was a coordinated series of local actions and events to unify NZNO members across Aotearoa around the call for staffing ratios. It was also to build public awareness and support for staffing ratios as a solution to unsafe staffing levels. Its purpose was to provide a rallying focus for members and the opportunity for communities to stand up for patient care, shoulder to shoulder with the largest health workforce.

In the week prior to the bus tour, Budget 2024 was announced which revealed no extra funding to deal with the staffing crisis in health care. It became necessary to focus our bus tour messaging on the need for better health funding. There is no point talking about ratios if we are not also talking about the need for the funding to allow ratios to happen.

Over two weeks three buses simultaneously toured the North and South Islands with events organised in towns and cities to coincide with the arrival of the buses. The buses arrived at public locations such as town centres where NZNO delegates and staff interacted with members of the public about the ratios issue. The bus also parked up outside health care facilities such as hospitals, where delegates and staff interacted with members.



#### These were an important demonstration to the Government that workers across the country were ready to fight back against their agenda.

All of this activity was intended to create an opportunity for NZNO to lead the way in ratios, with the likelihood of strong visibility, both locally and nationally.

We had significant media coverage, particularly with regional media and a large number of politicians were lobbied through the course of the tour.

#### Safe staffing lobbying

Members and organisers held local lobbying meetings to put pressure on the Government, and where nurses told their stories to local MPs. We let our local MPs know they will be held accountable by voters for putting patient and whānau safety and well-being at risk by failing to resource our hospitals properly.

#### **Community meetings**

Hui for Health were held in Auckland and Christchurch to deepen the public's understanding of why NZNO members are taking action on these issues and to build community support by telling our stories. We will continue to hold these meetings across the country in the lead up to the election.

#### Fight back together

In October 2024 the CTU ran a series of stop-works across the country under Fight Back Together Maranga Ake. These were an important demonstration to the Government that workers across the country were ready to fight back against their agenda. NZNO members showed up in force at the events across the country (the CTU ran these events in 2025). The health unions felt it would be an important opportunity to highlight the particular issues facing the health sector under the current government.

#### **Policy contribution**

NZNO actively works towards improved health outcomes for all people of Aotearoa New Zealand. One way we do this is by making and/or contributing to submissions on health and social policy-related issues.

Submissions this year were diverse and included multiple responses on proposals to restructure Te Whatu Ora Health New Zealand, Prescribing Diabetes medications, the Principles of the Treaty of Waitangi Bill, the Regulatory Standards Bill and Puberty Blockers safety measures.

#### Area of focus: Immigration

Nurses Council of New Zealand data shows that although IQNs represent 47% of the nursing workforce, 48% of Registered Nurses, 10% of Enrolled Nurses and 26% of Nurse Practitioners, there is a slowing down of IQNs applying for registration. Internationally Qualified Nurses (IQNs) coming to New Zealand expecting employment found that jobs weren't available, and many holding New Zealand APCs and work visas were unable to secure work.

New Zealand Competence Assessment (NZCA) has replaced the Competency Assessment Programme (CAP) for IQNs with the Objective Structured Clinical Examination (OSCE).

The OSCE is specifically designed to teach IQNs about what it means to be a nurse in Aotearoa and how to work in our context compared to other countries.

It is a practical assessment of clinical competence for nurses, with an online theoretical exam, a two day orientation and preparation course and the OSCE itself. This is completed at the Nurse Maude Simulation and Assessment Centre in Christchurch.

#### **Area of focus: Allies**

NZNO continued to build relationships and engage with key allies and other health unions through various forums including with Te Whatu Ora, funded sector and pay equity forums. Regular engagement has helped to continue the development of important meaningful relationships with these other unions who we share common issues with in the sector.

Our union is leading Fight Back Together for Health which is a cross-union health campaign endorsed by the CTU National Affiliates Council. The purpose is for the CTU health unions to coordinate and build political power throughout 2025 around our agenda for the health system, heading into the general election next year. Another area of focus is to coordinate industrial action between the unions – this is complicated but regular discussions are underway. This cross-union health sector campaigning will be a focus for our work going forward.

The need for cross-union solidarity and coordination is being driven by members taking action in Te Whatu Ora, primary health care and aged care. These campaigns are exciting opportunities for NZNO members to work alongside other union members locally and nationally to build a powerful response to the Government's agenda.

#### Area of focus: Te Tai Āo

Mahi progressed on the internal climate change plan to establish our baseline carbon use and then set targets for reduction. Reducing printing and paper usage and singleuse or plastic products is a priority where possible.

EKOS New Zealand was engaged to assist us assess our data sources and work with us to complete a certified carbon audit. EKOS will be our carbon offsetting partner and we will purchase carbon credits for our air and car fleet travel. These credits will primarily support New Zealand and Pacific-based carbon offsetting projects.

Our Auckland office moved into newer premises in Newmarket in early 2025 where we are targeting a four-star NABERSNZ energy rating. We are co-tenants with the union NZEI Te Riu Roa and share common tea-room areas, boardrooms and heating and cooling, which help to minimise the 'footprint' and emissions of the office. There are also additional dedicated audiovisual meeting rooms reflecting efforts to do more meetings on-line reducing travel-based emissions.

#### Operations

#### Major operational risks

#### Cyber security

During 2024/25 we implemented many new cybersecurity measures; the most significant was the introduction of CloudFlare software. This software automatically blocks attempts to access our network from designated countries. It also ensures that requests for access to our network are only granted where the two factor authentications provided are correct and where the request comes from an NZNO registered device. This has already proved its worth many times.

Cyber365 completed a full external cybersecurity review. The review has driven a plan for remediation broken into short-, medium- and long-term actions needed to bring our cyber security up to best practice standards, with those actions being aligned to the urgency of the need. The initial step involves implementing cyber security training for all NZNO staff.

#### Staff health and safety

We launched GOSH, our new online staff health and safety portal. Staff can now report issues in GOSH which are then systematically investigated, followed up and resolved. Data about events is able to be drawn and collated and is now being reported to the Board and the H&S Committee.

The H&S Committee has spent time refining draft procedures and guidelines which will soon be consulted on more widely with staff. The priority for activity in the 2025/26 year will be training appropriate staff in event investigation and resolution.

#### Information Technology (IT) Infrastructure

Most of our IT structure has been migrated to Cloud-based services with only a couple of physical servers remaining on premise and are expected to be decommissioned shortly.

Our old membership system has been retired and our new Customer Relationship Management System (iMIS) went live in late 2024. As with any major IT project, this implementation had its issues which are being resolved.

The CRM will allow us to better track our engagement with members and non-members, implement modern digital communications much more effectively, and provide better data streams to assist in decision-making.

Other elements of IT such as payroll and finance software are under review to ensure we continue to take advantage of software based digital solutions to improve our efficiency and build our capacity.

#### Member Support Centre

Summarised statistics are as follows:



### 447 calls

Call volumes averaged per week (450 in previous year)



### 242 calls

Call advisers answered and triaged, average calls per week (322 previous year)



### 335 emails

Email volumes averaged per week (327 per week previous year)

#### 788 inwards contacts

Average total inwards contacts per week (emails and phone calls combined)

The breakdown of calls per category are as follows:

- 54% Industrial (55% 2023-2024)
- 29% Membership (32% 2023–2024)
- 13% Professional (8% 2023-2024)
- 4% Administration (5% 2023-2024)

Unfortunately, we are unable to provide a breakdown of the number of enquiries closed by the Member Support Centre (MSC) in each category, as the current reporting functionality does not support this level of detail.

Between April and July 2024, MSC triaged over 5000 calls and more than 4000 emails. During the busiest week within this period, the team handled more than 600 calls and 1086 emails.

In November 2024, we transitioned to the new CRM database. Unfortunately, the migration encountered challenges, which necessitated the closure of our phone lines from November 2024 through to early February 2025. During this period, MSC Call Advisors utilised an Excel spreadsheet to log all inbound contacts. Once the new CRM was operational, these records were retrospectively entered into the database. While the spreadsheet provided a functional means of recording inbound contacts, it nonetheless carried an inherent risk of data inconsistencies. MSC Call Advisors made every effort to replicate the triaging and notification processes previously used in the MEMS database to minimise disruption to both staff and members. However, a key limitation of using the Excel spreadsheet was the inability to view notes or updates from staff working on a case. As part of the ongoing systems improvements, we migrated our IPFX system to the IPFX Cloud platform in September 2024. While the new platform closely mirrors the previous version, it incorporates several enhancements and new features. The MSC team undertook training to ensure they were fully prepared to navigate and utilise the updated version effectively.

Key highlights for the MSC are from the following large pieces of work:

- Te Whatu Ora Holiday Act Remediation Programme (HARP)
- Health New Zealand Te Whatu Ora MECA negotiations
- Primary Health Care MECA negotiations
- Ongoing organisational restructuring within Health New Zealand Te Whatu Ora

Significant developments that generated enquiries for MSC were the expiry of both the Health New Zealand Te Whatu Ora MECA and the Primary Health Care MECA, along with the commencement of bargaining for these two collective agreements. The dynamic and frequently evolving environment within Health New Zealand Te Whatu Ora generated a significant number of enquiries to the MSC. These included internationally qualified nurses (IQNs) struggling to secure roles; recruitment freezes affecting new graduates; and the cancellation or reduction of casual shifts. However, staffing concerns remained a consistent theme throughout the year. Additionally, in the middle of the year Te Whatu Ora notified NZNO of further delays to the HARP payments with some districts not able to provide a date at all. This prompted enquiries to MSC from frustrated members.

#### **Competency advisory services**

The following is a breakdown of cases/members supported by the NZNO Competency Advisor in 2024/25:

- There were 26 new competency cases opened in 2024: of these one was a Social Worker, one Enrolled Nurse (EN), and the rest were Registered Nurses (RNs).
- Twenty cases were closed in 2024. There is still one open case from 2023 and 12 open cases from 2024 in progress.
- Eleven new cases opened between January and May 2025.
- Four nurses are being supported to work through Orders under the HPCA Act (2003).
- Three cases from 2024 were transferred to the health pathway.
- Six nurses went to a full competency review in 2024 with a further three reviews occurring up to the end of April 2025.
- One social worker was supported through the Social Worker Registration Board review process. This is ongoing due to internal delays within the Social Worker Registration Board.
- Nurse members were supported with one Section 38 meeting, one Section 39 meeting and one Section 43 meeting with assistance from the legal team.
- Five Internationally Qualified Nurses (IQNs) were supported with meetings with the Registrant Quality Committee as a result of failing to successfully complete CAP programmes up to April 2025. This issue seems to be diminishing with the winding up of many CAP programmes and the instigation of the new NCNZ process for gaining New Zealand registration. However there are still some emerging issues with many IQNs from India struggling to find jobs. Professional Nursing Advisors have also supported a number of nurses through this process.

#### **Employment law**

During this year our lawyers have been particularly focused on helping members take action for safe staffing. On 29 August 2024, NZNO members working at Dargaville Hospital went on a health and safety strike. Under the Employment Relations Act 2000, workers are protected to take strike action where they reasonably believe the strike is justified health and safety grounds. Whenever NZNO members take any kind of strike action like this, we always ensure they have received expert legal advice from our lawyers.

#### Medico-Legal

Files were opened for 339 members in relation to the following matters:

- 64 Coroner
- 11 Coroner/ Police Witness
- 39 HDC
- 1 Midwifery Council Competence
- 2 Midwifery Council
- 40 Nursing Council Assessment
- 2 Nursing Council Competence
- 44 Nursing Council Health
- 3 PCC Conviction
- 39 PCC Disciplinary
- 5 Nursing Council s64
- 4 Other Authority
- 5 Police Inquiry
- 56 Police Witness
- 4 Witness (other)
- 2 NC APC
- 1 Criminal Inquiry
- 14 Internal Inquiry
- 3 HPDT

#### Library and record services

The NZNO library continues to provide information services to our members and staff. The library provides a range of resources including journal articles, online databases and books. Searching is conducted for members by the library team on topics such as workplace anti-racism policies, optimum time to treatment, nurse resilience, case law on hours of work clauses, and model of care post-anaesthetic. In the past year another two online databases were added, taking the number of databases that members can search via the NZNO website to 15 **online journals and databases**.

The Nursing Education and Research Foundation (NERF) commissioned a series of oral history interviews with nurses over many years, and these are deposited with the Alexander Turnbull Library in Wellington. The NZNO Library gave permission for access to 15 inquirers over the last year.

#### Policy

NZNO is developing a suite of policies identifying the current health system, what it should look like, and what needs to happen to achieve the health system we need. An overview has been completed, and the policy development will be carried out in collaboration with NZNO staff and external writers to provide further input and oversight.

Key areas of the policies will look at key issues facing the health system, things that need to be addressed, and putting those issues on record. They will look at:

- hospital sector
- primary care
- aged care
- mental health
- Māori
- equity
- funding
- health status determinants.

With supporting policies:

- Te Tiriti
- Role of the Nurse
- Workforce
- Public vs private.

This suite of policies will be presented at 2025 AGM.

#### Communications

#### **Communications and media**

NZNO's media presence grew in the year to 31 March, with coverage of NZNO issues and spokespeople increasing almost 10% on the previous financial year, from 1576 to 1725 direct mentions. Much of this coverage was focused on Te Whatu Ora, including: NZNO's release of understaffed ward data in May; our concerns over its hiring freeze and failure to hire student graduates; its inability to meet safe staffing ratios; and the push for Holiday Pay remediation. There was also significant national and regional coverage of the Te Whatu Ora strikes in December.

Other issues catching media attention were: police plans to withdraw from mental health call outs; the October student rally; and tragically, increasingly frequent assaults on health care workers and concerns about their safety and security. NZNO put out 72 media releases in the year to 31 March.

#### NZNO issues and spokespeople increasing almost 10% on the previous financial year, from 1576 to 1725 direct mentions.

Work was also done to improve NZNO's social media presence with the establishment of an Instagram channel and a boost in posts to our Facebook page.

There was a high level of communications to members with emails on bargaining, paid union meetings, training, conferences and rallies. The member newsletter continued to be well read with 24 editions sent out to all members over the financial year. A new quarterly newsletter for Colleges and Sections was also launched to assist with collaboration between the groups.

The Communications and Media team underwent some changes in the year to 31 March driven by the establishment of a new communications manager role. This resulted in the initiation of more stories and issues with high profile health journalists to help drive the media narrative and move away from a reactive media approach. This new proactive approach focused on utilising delegate and member voices, building a catalogue of spokespeople covering all sectors and regions, and an attempt to use Colleges and Sections spokespeople as the experts in their respective fields.

To ensure more consistency in messaging, a key message bank has been set up that can be accessed by the Communications and Media and the Campaigns teams. The Communications and Media team has also been working more closely with *Kaitiaki* to ensure both resources and content can be shared across channels to improve efficiencies. This has resulted in the sharing of spokespeople, the use of NZNO media releases by *Kaitiaki* and the media team referring mainstream media to the expert content on the *Kaitiaki* website.

#### Kaitiaki Nursing Research

In November 2024 the 15th edition of *Kaitiaki Nursing Research Journal* published research focused papers which contributed to a diverse set of nursing issues. These included 'Growing our own: The abyss of data monitoring and support for New Zealand's domestic nursing workforce pipeline.' by Sharon Brownie and Patrick.<sup>6</sup> This article is timely given the current debates around nursing education and nursing workforce sustainability.

 $6 \ {\tt www.nzno.org.nz/resources/kaitiaki/kaitiaki\_nursing\_research}$ 

This latest issue featured a strong, researched viewpoint on poor data monitoring and lack of support for the New Zealand nursing pipeline; other articles looked at what motivates nurses to move from clinical to educator roles, how well nursing students are prepared for caring for older adults, and how to create a trauma-informed workforce.

This edition also included articles on clinical issues: an integrative review of the contribution of behaviour therapy to the well-being of adults with epilepsy; a literature review on the motivation for RNs to move from clinical to education roles; and a research brief on the preparation of nursing students to work with older adults. A methodology article explored the role for *ResearchGate*, a tool for improving access to research findings to support nurses' evidence-based practice.

Te Wāhanga Rangahau Tapuhi – NZNO's Nursing Research Section published abstracts from their October 2024 forum, a practice that mirrors those of international research journals. Collaboration with organisers of professional and research conferences to publish presented findings supports the dissemination of research outcomes.

The journal is supported by an Editorial Advisory Committee, chaired by Dr Patricia McClunie-Trust, an academic staff member at Wintec in Kirikiriroa. This group includes NZNO staff: a Professional Nurse Advisor, Librarian, Nursing Policy Adviser/Researcher Merian Litchfield, nursing academic, researcher and author. They contribute in a number of ways, including reviewing submitted articles, liaising with NZNO's Colleges and Sections, specifically the Nursing Research Section, and increasing readership and subscriptions.

The Committee has also started to investigate the impact of Artificial Intelligence (AI) on submissions to the journal. It is aware of potential benefits while also having a responsibility to protect the scholarly credibility of the journal.

#### Kaitiaki Nursing New Zealand

*Kaitiaki* has continued its strong growth over the financial year with 170,000 individuals viewing *Kaitiaki* 324,000 times. This reflects a 35% increase in individual readers and 20% increase in overall views from the previous financial year when 126,000 individuals viewed *Kaitiaki* 269,000 times.

*Kaitiaki*'s overall advertising views also grew by 17.5% over the financial year, from 3.3 million in 2023/24 to 3.9 million in 2024/25 – an increase of 585,000. But despite this, with the current economic downturn and 2024 decision to no longer accept overseas recruitment campaigns, advertising revenue has dropped from \$84,406 in 2023/24 to \$59,342 in 2024/25.



Kaitiaki has continued its strong growth over the financial year with 170,000 individuals viewing Kaitiaki 324,000 times. This reflects a 35% increase in individual readers and 20% increase in overall views from the previous financial year when 126,000 individuals viewed Kaitiaki 269,000 times.

Over the year, *Kaitiaki* moved from NZNO's professional team into its communications team. The appointment of a communications manager with a journalism background and *Kaitiaki* co-editor Māori over the year has strengthened its news and te āo Māori coverage as well as aligning *Kaitiaki* more closely with NZNO's strategic and campaign priorities.

#### **Projects**

#### Senior Nurse/Nurse Practitioner/ Senior Midwife Project

This project was approved by the NZNO board and started in early 2024. It sits alongside several other NZNO projects and the Te Whatu Ora collective agreement negotiations for senior nurses.

This project:

- Has researched Senior Nurse/Nurse Practitioner/ Senior Midwife roles and responsibilities, political influence, industrial and professional activism, relationship, and engagement with the health sector.
- Will identify and develop NZNO structures to provide support to senior nurse and midwife members.
- Will promote the development and influence of Senior Nurse/Nurse. Practitioner/Senior Midwife roles across the health system with a particular focus on Māori nurses and midwives.
- Will facilitate development of Senior Nurse/Nurse Practitioner/Senior Midwife roles through industrial bargaining, professional representation, organising those working in primary care, aged care, and other community settings.

Data relating to senior nurse/nurse practitioner/senior midwife roles and job titles and responsibilities has been collected and analysed, and includes data from the Pacific Nurses Section and Te Rūnanga o Aotearoa. This work was completed before the release of the series of Te Whatu Ora change proposals, including the clinical leadership proposal.

The benefits of senior nurse/nurse practitioner/senior midwife roles for patients and their value for employers is well evidenced in the international 'ratios' literature.

Exploring NZNO structures to support senior nurses and nurse practitioners continues to progress in close collaboration with the NZNO Nursing Leadership Section, NZNO Tapuhi Mana Whakatipu (NLS).

The Senior Nurse/Nurse Practitioner/Senior Midwife project team is linked with Te Whatu Ora collective bargaining, to enable broader access to senior nurse/ nurse practitioner/senior midwife members of NZNO. This supports the work of the bargaining team as they address the challenges posed by the situation. Many 'very senior nurses', directors of nursing and midwifery and similar roles, are on individual employment agreements and therefore experiencing significant loss of pay and conditions in comparison with those nurses they lead and manage.

A comprehensive operations plan will drive the work in this project over the next 12 to 24 months.

### NZNO Colleges and Sections – Lifting their Reach and Influence Project

Colleges and Sections play a vital role in establishing NZNO as the professional voice for nursing in Aotearoa. NZNO's 20 Colleges and Sections (C&S) bring together members who are focused on a specific field of nursing.

C&S activities include:

- Keeping members informed and abreast of changes in their specialty.
- Providing expert advice to members, government and other national bodies.
- Participating in consultation and submissions to ministries, select committees, Te Whatu Ora Health New Zealand, Pharmac etc.
- Promoting and providing professional development opportunities.
- Developing evidence-based knowledge and skills frameworks and specialty competencies.
- Publishing articles, newsletters and journals.

This project aims to increase membership and engagement within the C&S so they can be more visible and influential in their specialty areas. Two examples, the Nursing Leadership Section Tapuhi Mana Whakatipu and Nursing Research Section Te Wāhanga Rangahau Tapuhi reported a 10% plus growth in membership in the last 12 months.

Key focus areas and priorities of this project:

- Explore how the C&S currently operate within NZNO; identify how the organisational structures, systems and policies can support their mahi to best effect.
- How membership may be further promoted, increased and engaged.
- Enhance C&S influence interface with other groups; genuine engagement with Māori; political advocacy and influence.
- Professional growth and value, including provision of education.

A project report went to the Senior Leadership Team in mid-2024 and included themed analyses and recommendations for improved efficiencies, influence, engagement and reach. The second phase supported and developed C&S planning to lift membership numbers, activism, and influence and to provide support to extend their professional influence in their specialty area.

Project progress 2024/25:

- New 'tile' has been created on the NZNO website home page linking to the 20 C&S.
- QR code for ease of joining C&S, with promotion at regional conventions.
- Two highly successful events were run in March 2025 – the Colleges and Sections Forum for C&S Committees and the first College and Section Induction Days with a programme designed to support new C&S Committee members into their roles.
- Facilitating a comprehensive review of the College and Section Handbook with the aim of achieving a publication that supports the effective functioning of this key member resource.



Colleges and Sections play a vital role in establishing NZNO as the professional voice for nursing in Aotearoa.

# Reports

### **Board of Directors' Report**

Maranga Mai!, our Tōpūtanga Tapuhi Kaitiaki o Aotearoa New Zealand Nurses Organisation (NZNO) strategic vision and purpose, our vehicle for change, is in everything we do. Maranga Mai! guides our advocacy and action within our membership. Our strategy is a living document and is updated annually to ensure our organisation's direction is current and future facing. Maranga Mai! has lifted our gaze from the everyday challenges to our present and future ambitions for our health system, public, private, primary and aged care, our members, and those we care for.

It is therefore fitting that our newest board member, Tracy Black, Tumu Whakarae spoke to the meaning of Maranga Mai! – 'rise up or wake up'. It is a powerful call to action across the union inviting members to actively participate in transformational change and to co-create a more inclusive and equitable organisation.

The first fix of Maranga Mai! focuses on actualising Te Tiriti o Waitangi. Strengthening te Tiriti partnership and transforming governance structures have been key priorities for both Te Poari and the Board of Directors. This commitment has been demonstrated through joint governance meetings, with further engagements planned. The growing whanaungatanga between governance committees is laying the foundation for shared understanding, alignment on priorities, and collective leadership. True ownership of this journey sits with all of us as a union, in our teams, and as individuals.

The current board has journeyed together for some time now however during the year we acknowledged, thanked and farewelled Titihuia Pakeho (Tumu Whakarae, Te Rūnanga; Audit and Risk) for her many years of mahi and commitment to Toputanga Tapuhi Kaitiaki o Aotearoa (NZNO). It has been an exciting and rewarding experience to be part of a diverse and dynamic Board of Directors. The diversity within the board has not only enriched our perspectives but has also allowed us to build strong relationships that are key to the growth of this organisation. Together, we have worked to strengthen and promote member-led leadership roles, fostering deeper connections with members.

We will continue to build momentum in voicing our concerns about the inequities within healthcare. Our commitment to advocating for change remains strong as we stand firm against the Government's decisions, upholding of Te Tiriti o Waitangi. It is essential that we continue to fight for fairness and equity, while remaining politically savvy. By staying informed, united, and strategic, we can advocate for the changes necessary to create a more just and equal system for all.

Our strategic direction also needs a cohesive and future facing infrastructure to support the mahi that is being done now and in the future. Board members and Te Poari members have worked in partnership on the Constitution review which has been ongoing for the past five years. Members voted for a full and independent review of the NZNO Constitution in 2020, seeking better bicultural and democratic processes. Substantial progress was made under the leadership of Tracy Black and Grant Brookes in the past two years. Their commitment to this pivotal mahi for our members, and that of the panel, has been huge as it is done over and above their work commitments. The proposed Constitution review has undergone three AGM sessions, two member surveys and two member group consultations. The panel had met 30 times, heard from thousands of members and was touring the country to publicise the proposed new Constitution.

The Chief Executive Employment Committee has continued in its work in being the delegated 'employer' of the Chief Executive of NZNO. In the main this consists of undertaking the annual review of the CE's performance and providing them with support where required. The Board remains pleased with the direction and professionalism that the CE has brought to the organisation and is looking forward to the continued development of the organisation.



The Audit and Risk Committee is supporting the improvement and modernisation of the NZNO systems that enable the Board to have transparent and robust reporting in terms of finances and health and safety. NZNO is now in a much more stable position financially, ensuring our sustainability and ability to meet our members' needs. These reports are fundamental to board decisions made to enhance the health, safety and wellbeing of our staff and our members. This includes committing to changing NZNO work premises where the buildings are deemed unsafe.

The Nurses Education and Research Fund (NERF) board members and NZNO staff who provide operational support, have been working together to future-proof NERF through the development of a clear and cohesive strategic plan that puts Te Tiriti o Waitangi at the centre of our mahi. This work has identified a need for a review of the Trust deed and the service level agreement NERF has with NZNO. It is an opportunity to embrace new ways of working that will improve the efficiency and effectiveness of NERF to support NZNO members in their studies and research. This is necessary, as NERF applicants are growing substantially and we are committed to growing our capacity to enhance the mana of nurses and nursing.

The Board acknowledges and thanks President Anne Daniels and Kaiwhakahaere Kerri Nuku, and CEO Paul Goulter for their strong leadership over the past year, where the challenges have been many, and the wins few. The growth in NZNO numbers acknowledges

members trust and confidence in the Board in meeting those challenges and standing on the power of our membership. Leading the way, rather than being led, speaking out rather than being silenced has seen strong advocacy and action for Ratio Justice, Te Tiriti o Waitangi justice, and justice for those who are suffering war, starvation, and climate change challenges; all of which affect the health and well-being of those we care for and us, the carers. Our focus is national and international. A national Ratio Justice conference focusing on safe culturally appropriate staffing ratios underpinned by a fit-for-purpose CCDM tool was a major highlight of the year. Strong international engagement and advocacy work has seen positive relationships grow with other organisations such as the United Nations, GNU, and ICN.

We stand strong together. We go forward together. We win together.

### **Kaiwhakahaere Report**

Nau mai, haere mai to all our members, partners, colleagues and whānau who support the kaupapa of Tōpūtanga Tapuhi Kaitiaki o Aotearoa New Zealand Nurses Organisation.

Right now we should be pushing for safe staffing ratios, especially culturally safe staffing ratios, and retaining and building our workforce. Unfortunately the coalition Government is making it impossible for us to make any progress.

The focus for Te Poari and Te Rūnanga has been to fight these attacks because they are taking Māori health, and the health of the entire nation, backwards.

While we fight, we take inspiration and strength from the theme from the 2024 NZNO Conference – Kotahitanga. This continues to remind us of our Kaupapa and our purpose in a time that's hard to be a nurse, a Māori and especially a Māori nurse, midwife or healthcare worker.

The Kaiwhakahaere encapsulates the bicultural relationship honoured in Te Tiriti o Waitangi and exemplifies NZNO's commitment to te Tiriti and its mission to improve the health of all people of Aotearoa.

Kotahitanga is how we will honour te Tiriti, unite as Māori and non- Māori and improve the health of our nation.

As we continue to be impacted by the economic decisions of the Crown and their stakeholders, Te Poari is mobilising and activating members at grassroots level to take action throughout the mōtu. This has led to engagement with iwi and other elements of te ao Māori, NGOs, other unions and when they will listen – the various parts of the Government.

Engaging with te ao Māori comes naturally to the Tumu Whakaere, Te Poari and myself. Sending emails, letters and texts do not work in te āo Māori. To be taken seriously, you need to show up so the people can see your face, see you walking your talk – and that's exactly what every level of Te Poari and Te Rūnanga has been doing consistently since the coalition Government came into force. Our team will continue to strategise and operate through the kaupapa of Kotahitanga – unity. Our aim is to respond to the attacks from the Government of the day with action, with an eye to the future.

#### Kotahitanga is how we will honour te Tiriti, unite as Māori and non-Māori and improve the health of our nation.

Regardless of who is in power, the health and safety of Māori remains in jeopardy until we achieve tino rangatiratanga and mana motuhake.

Our focus also remains on growing and engaging our membership power through grassroots and social justice organisation. We continue to build NZNO's relationship with international indigenous healthcare leaders, and promoting the true implementation of Te Tiriti o Waitangi in the Draft Constitution. This is not just about fighting for the sake of fighting. We must have a strong focus on the future, to think and plan generationally – and we welcome you on our shared journey.

Alus

**Kerri Nuku** Kaiwhakahaere

### **President's Report**

'Ma tina ma mano ka rapa te whai.' Many hands make light work.

#### Tena koutou, Tena koutou, Tena Koutou katoa.

Last year, I wrote "Our professional challenges and aspirations inform our industrial advocacy and action." Inferred in this statement is the growing political strength of our union.

The last year has seen Tōpūtanga Tapuhi Kaitiaki o Aotearoa, New Zealand Nurses Organisation stand up in a way that is unprecedented. Our Maranga Mai! (Rise Up) campaign is the cornerstone of building union power to a level that cannot be ignored. From the Te Tiriti o Waitangi hikoi presence in the far North to Wellington (estimated 50,000 attendees), to the Save our Services (Dunedin Hospital new build campaign – estimated 35,000 attendees) in the South, and a great deal in-between, our members have been standing on strike and protest picket lines for each other and those we care for. Why? Our Maranga Mai! campaign is a call to action to every member, everywhere, because we are under attack.

But we are Standing Up and Fighting Back to protect our patients and our profession so we can provide high standards of safe quality care, where and when it's needed. The Government and those who have the power to do so, are trying to silence us, but we will not be silenced. And we are not alone. The public, alongside many unions and different organisations, are standing with us in our fight to push back against the attacks on patient and staff safety, patient wait times, poor patient outcomes, the appalling attacks on the health workforce, and on our Te Tiriti o Waitangi founding agreement, in many forms.

Our professional challenges inform our industrial and political action. What has that looked like in the last year?

#### **Outward facing**

The Government's austerity measures are coming home to roost. A Te Whatu Ora/Health New Zealand Clinical quality and safety review provided evidence that many patient outcomes, directly attributable to nurse capacity, had deteriorated. This is because there are simply not enough nurses to provide the timely, preventative care needed to keep our patients safe. Deep vein thrombosis, pulmonary embolus and pressure area injuries were some examples but lack of access to primary and tertiary health care was significant as was Emergency Department selfdischarge mortality. The human and financial costs of patient harm are in the billions of dollars. In the last year, research into the economic benefits of investing in nursing found the opposite. For every dollar invested in nursing a saving of \$4 is made in terms of reduced patient harm, length of stay, readmissions, and so on.

NZNO has provided strong irrefutable evidence and opportunity to the Government and employers of the need for culturally appropriate nurse-topatient ratios, underpinned by a fit-for-purpose Care Capacity Demand Management (CCDM) in many of our campaigns. This culminated in the Ratio Justice conference to which many of those in government were invited, but chose not to attend. Long-standing evidence of positive patient outcomes when nurseto-patient ratios are applied to the clinical context, was presented by international researchers such as Professor Linda Aitken and national researchers such as Dr Rhonda McKelvie. But to date this evidence has been ignored by the Government and employers.

Our Maranga Mai! campaign strategy aims to realise that every nurse has the power and resources to do their job. This requires evidence-based workforce planning, implementations and continuous evaluation that is conducted in partnership with employers and NZNO in real partnership as agreed when the independent Safe Staffing Unit was established. This unit has now been subsumed by Te Whatu Ora and the partnership with NZNO is reflected in its tokenism and refusal to enact the current agreements that demand real partnership. The Care Capacity Demand Management tool, used to identify how many nurses are needed in any specialty area, underpinned by years of research and trials, has been paused in the guise of a recruitment freeze. NZNO is fighting back through strikes and court action to ensure that decisions on nurse resourcing, in public, primary health care and aged care will be based on NZNO's Maranga Mai! fixes.

Increasingly, our members are demonstrating that NZNO is the leading voice in health – there was a time when many members with the knowledge and experience to speak to issues in the media, and to politicians, would shy away from doing so... that has changed ten-fold. For example, members and delegates joined the bus tour leading up to the Ratio Justice conference and spoke to politicians, media and the public, to raise awareness and support for our campaign for safe staffing in all health sectors. Fewer nurses mean longer wait times for care, and as a result, violence and abuse of nurses and other health workers in escalating rapidly. The risk to member safety is being embedded by government withdrawal of police, alarm systems not working, and security guards being hired to work in tertiary sector hospitals. None of these fix the contributing issues of lack of access to care, affordability of care, timeliness of care. Many nurses are speaking up and standing up for their colleagues using the Health and Safety in Employment Act to get action from employers when none has been forthcoming.

Our power is in our people, and our power is growing as our numbers keep growing. Our collective power is guided by our Maranga Mai! campaign which is intentionally being integrated into everything we do, professionally, industrially and politically.

#### Inward facing

Maranga Mai! goals focus on encouraging every member across all sectors to actively participate in ways that will see membership lifted where our hearts and minds have hope that our future as a profession will meet the current and future needs of those we care for. And we are doing that through board governance and direction, remembering that most board members are practicing registered nurses, informed by their own experiences; their colleagues and the wider membership of Te Poari and Te Rūnanga; Colleges and Sections; Regional Councils; the National Delegates Committee; the Membership Committee; and latterly the Kaiāwhina/Health Care Assistant special interest committee.

The exemplary work of the Constitution Review Panel led by Grant Brookes and Tracy Black (until recently) demonstrated real partnership over the last year. The results have been communicated to members through presentations at the last AGM, Regional Conventions and through the CEO Paul Goulter's member newsletter and will, if accepted by members, lead the way into stronger collective decision-making, planning and action throughout the organisation.

A plan of action developed and agreed by the Colleges and Sections is now well underway to support improved information about membership through a new IT membership database. Colleges and Sections are transforming annual plans to integrate Maranga Mai! in order to be intentional, directional and develop strength in collectivism. These plans include reviewing standards and competency frameworks to support the integration of Te Tiriti o Waitangi, tikanga and the new Nursing Council competency standards that all nurses (Registered Nurses, Enrolled Nurses, Nurse Prescribers, Nurse Practitioners) must now demonstrate in their practice.

The Nurse Education and Research Foundation Trust Board (NERF) that Kaiwhakahaere Kerri Nuku and I co-chair, has seen a great deal of change in the last year. Kevin Simmonds, who had put his heart and soul into the work of NERF as accountant and financial adviser was farewelled. It was timely for the board to develop a strategy to guide the work of the board going forward. NERF has seen a large increase in applications for scholarships which now requires consideration of how we manage the success of the Fund in a way that will meet applicants' needs in a timely manner, and improve efficiency. Our relationship with NZNO was also reviewed to support consolidated financial auditing to occur.

Our membership has also come under attack from legislative and regulatory reform in the last year. Needless to say, in partnership with our staff and members, the leadership group has been very active in this space, meeting with government officials, submitting responses to Parliamentary select committees and speaking to them. NZNO now has a strong media presence. Our political relationship with other unions is strengthening through collectivism and collaboration. It is rare today to hear a mention of a doctor without the nurses also being heralded. This is recognition that we are all in this together; that we are standing up and fighting back for our nation's health and wellbeing, and a public health system that meets the needs of everyone, everywhere is providing hope for all. We will see what the next year brings.

Finally, to those who supported me to continue in the role as your President for a second term, thank you. It is my hope that the future will realise Maranga Mail's main purpose – to win a quality public health system that is patient-centered with the necessary political and resourcing commitments needed to address the health system and workforce crisis permanently across all health care sectors.

Ngā mihi nui

Anne Daniels NZNO President

### **Chief Executive's Report**

Maranga Mai! (Rise Up!) was the call to action and the direction New Zealand Nurses Organisation Tōpūtanga Tapuhi Kaitiaki o Aotearoa (NZNO) needed in the year to 31 March 2025.

NZNO was under attack on many fronts in the last year. We faced attempts to weaken the role of the nurse, health care assistants and nurse practitioners, efforts to undermine the power of the union movement, and cynical politics aimed at trampling on the mana of Māori.

But it was also a year of collaboration as we strengthened the ties with our allies and forged new relationships by joining forces with like-minded and similarly focused organisations.

I'd like to thank all our members who have contributed to this report, from the regional committees to the colleges and sections. I urge you to read this report in its entirety as I am only able to cover some of the highlights of what was a busy but beneficial year.

#### Te Whatu Ora

Following the success of settling the pay equity claim for our 36,000 Te Whatu Ora members last financial year, the year to 31 March felt like an uphill struggle against our biggest employer. This was on a number of fronts but mainly on the need for safe staffing. Our ongoing concern is that Te Whatu Ora now manages its nursing workforce based on operating within an artificial and opaque budget, rather than to meet patient need. That is a point we will never concede.

Ahead of Budget 2024, we publicly released 2023 ward staffing data we had finally received under the Official Information Act. It showed that in the 2023 calendar year more than a quarter of nursing shifts were below target staffing numbers, and some wards operated below safe staffing levels nearly all of the time. Concerningly this involved children's, oncology, surgical and mental health wards.

On the back of that data, we called for increased health funding in the 2024 Budget to support safe nurse-topatient ratios and held public rallies at more than 20 locations to raise public awareness of our concerns. We also called for the Budget to fund the Coalition Government's pay parity promise for primary and community health care workers and an increase in funding for Māori and iwi health providers so they could pay their staff better.

By mid-year it became clear Te Whatu Ora was quietly wiping unfilled vacancies in a covert recruitment freeze that NZNO was not consulted about. At the same time the mid-year intake of graduates into the hospital workforce was halted. NZNO responded by holding a nurse-to-patient ratio conference to raise public awareness about safe staffing, with international experts brought to Aotearoa to share their knowledge on how ratio justice could be introduced here. Concerns for the future of our tauira (students) were realised in November when only half were offered jobs in hospitals. In the past they were almost guaranteed to start their careers in that crucial on-the-job training environment.

Bargaining for NZNO's largest collective agreement kicked off in September and Te Whatu Ora quickly moved to manage expectations, offering little on safe staffing and a total negotiating package of only 1% of all wage costs. These initial parameters outraged our members who held a national strike in early December followed by rolling regional strikes in the lead up to the summer break. The energy and creativity members brought to these actions was inspiring and there are photos from that remarkable effort throughout this report.

As the financial year ended, NZNO was headed for facilitation with Te Whatu Ora before the Employment Relations Authority.

#### Primary and community health care

NZNO initiated bargaining for our 3475 primary and community health workers covered by the Primary Health Care (PHC) MECA in May 2024. It's our largest collective agreement in the primary care sector and covers 477 employers.

An initial first offer was overwhelmingly rejected in December before a second offer of an initial 5 percent on ratification and a further 3% in July was accepted just before the end of the financial year in late March.

In the absence of any indication Prime Minister Christopher Luxon would keep his election campaign promise to pay all nurses the same as their Te Whatu Ora counterparts, NZNO has begun work on a pay parity campaign for primary and community care members. This campaign will have a political, organising and media element and will utilise our burgeoning social media channels as well as traditional media.

To meet NZNO's ambition of having every member outside Te Whatu Ora covered by a pay equity claim as part of the journey to pay parity, primary and community care workers were also hoping to see their rates lifted through the Primary Practices and Urgent Care Centres pay equity claim which was lodged in December 2023. It covered Registered Nurses, Enrolled Nurses, health care assistants, medical receptionists and administrative staff employed at more than 800 employers. Similar claims were laid for nurses in aged residential care and for other employers.

#### Pay equity

The Primary Practices and Urgent Care Centres claim was just one of NZNO's 13 pay equity claims including three covering our care and support workers, and claims for aged residential care, Plunket, Hospices, Access, Healthcare NZ and Nurse Maude, Sexual Wellbeing Aotearoa, Awanui and Labtests. We were also reaching out to our Māori and Iwi providers to discuss how a pay equity claim could improve the pay and conditions, and most importantly health outcomes in their sector.

NZNO marked 28 March 2024 as 1000 days since the "original" representative pay equity claim for Care and Support workers was raised under the former Labourled government's regime. A media release highlighted our calculation that if the claim had been settled, our members would have earned around \$18,661.66 or an extra \$145.85 per week.

But as we now know, years of hard work on pay equity claims were lost when the Coalition Government scuppered all 33 live pay equity claims in May 2025 to pay for their Budget for business and landlords. So the rest of this saga, and our work to keep fighting for our members to have gender-based wage discrimination confined to the history books, will be featured in next year's annual report.

#### **Constitution Review**

Much work was done over the past year to strengthen NZNO's governance and operations, to make sure we are as transparent, democratic and financially prudent for our members as possible. This included progressing NZNO's constitutional review which began five years ago and has involved dozens of presentations to member groups around the country.

The proposed new constitution aims to ensure NZNO fully meets its obligations under te Tiriti, embeds democratic processes for members in a bicultural context, is fit-for-purpose in terms of achieving the goals of Maranga Mai! and works to become a more efficient and effective organisation.

Among the proposed changes, NZNO's regional councils and national membership committee would be replaced by local organising groups partnered with Te Rūnanga members to create new rōpū (groups) called ngā hapū. Te Poari would have equal status with the national executive, both meeting at least three times a year in joint hui to decide major issues.

National delegate structures are proposed in our key sectors to lead and co-ordinate actions towards our Maranga Mai! goals.

Around the end of the financial year, Te Poari endorsed the proposed new constitution and a Special General Meeting then agreed to send it to a member ballot. Every member is now being urged to vote on whether it should be adopted.

#### **Colleges and sections**

The work of our colleges and sections has never been more important than now as the attacks on the role of the nurse, funding restrictions and lack of staff compounded an already alarming crisis in health. The expert voice provided by our colleges and sections was critical over that time (and continues to be) as a counterpoint to the budget driven approach of the Government.

There was a firm focus this year to enhance the administerial, financial and technological support NZNO provides to our colleges and sections, which are a crucial part of our professional wing.



We have been working to improve the NZNO new member processes and databases to make it as easy as possible for new nurses to join colleges and sections. This work is ongoing and links across to the new membership system that is being introduced.

Our communications and media team worked closely with colleges and sections' chairs and committees to support them to become the expert voices in their respective fields.

A new quarterly newsletter for colleges and sections was launched last year to improve collaboration and learning opportunities between groups, particularly around work such as submitting on proposed policy changes. Our nursing magazine *Kaitiaki* is also doing a monthly deep dive on a different college and section.

#### The role of the nurse

Concerns that Government plans to introduce cheaper workforces would weaken the scope of nursing were heightened this year when a long-awaited review of the Health Practitioners Competence Assurance Act (HPCA) was announced.

The Minister of Health's shoddy and overtly political consultation document was rife with artificial scenarios and misleading questions to ensure that, if anyone managed to lodge a submission in the short one-month period, they gave the Health Minister Simeon Brown the answers he wanted to hear. NZNO expressed its concerns directly with the new Director General of Health Audrey Sonerson and the Health Quality and Safety Commission about the document and a lack of evidence, context and transparency in the consultation process.

Some of our gravest fears are around the Minister's plan to regulate physician associates as a new profession in New Zealand. NZNO views this as an unnecessary quick and cheap fix to the doctor shortage when we have a competent and experienced nurse workforce available to do this work. Another concern we have is the extension of the scope of practice of anaesthetic technicians when there is a perioperative nursing workforce already doing their role and much more.

#### Attack on Māori

NZNO's other significant concern with the HPCA Act review is that the consultation document dismisses cultural safety and competencies which are critical to ensuring accessible and clinically safe health care for all New Zealanders.

This is just a small part of a much wider attack on Māori by the Coalition Government which has scrapped Māori health initiatives to improve inequitable health outcomes, disestablish the Māori Health Authority Te Aka Whai Ora, limit the use of Te Reo, reduce the influence of the Waitangi Tribunal, and remove requirements for legislation to consider the principles of te Tiriti through the Treaty Principles Bill. Tens of thousands of New Zealanders – with NZNO flags waving proudly in the crowd – marched the Wellington streets to Parliament in November for Hīkoi mō te Tiriti. It was powerful and moving. While the Treaty Principles Bill didn't get through Parliament, the Coalition Government has already agreed to pass ACT Party's Regulatory Standards Bill which despite its innocuous title, will also remove the principles as well as strengthening individual property rights and weakening regulatory bodies. This is a dangerous Bill and NZNO will be closely watching its progression.

#### **Cross union actions**

Our fellow health and affiliate unions share many of NZNO's concerns about the direction of the Government, so it's perhaps not surprising we have been working more closely with them in the past year. This was evident at the Maranga Ake Fight Back Together paid work meetings around the motu in October, led by our umbrella body the Council of Trade Unions (CTU) Te Kauae Kaimahi.

A series of further actions are planned for the coming year as the CTU and other health unions share our ambition of making health the number one issue for the 2026 election.

NZNO has been working particularly closely with the Association of Salaried Medical Specialists who began bargaining shortly after us and are facing similar issues of under-staffing and a workforce leaving for considerably better pay and conditions across the Tasman.

#### **Patient Voice Aotearoa**

The best chance we have of making sure the public understands the issues facing health workers is to demonstrate the impact of under-resourcing on patients and whānau. NZNO members know they are often forced to ration care, and their patients are waiting longer for them to get to them.

That's why it was important NZNO became a signatory to the Buller Declaration. The Buller Declaration was created by Patient Voice Aotearoa co-founder Malcolm Mullholland and was launched on the West Coast in September. NZNO were initial signatories along with Association of Salaries Medical Specialists, the Royal College of GPs, the Rural Health Network, and the Buller Health Action Group.

The Buller Declaration has now travelled the country for public hui which have shone a spotlight on some of the dire workforce and capacity issues facing the health system, particularly in towns and rural areas. Our members spoke at these hui, giving an important nursing perspective to what were often heart-breaking stories of people struggling to get the care they need.

#### Looking ahead

The coming financial year is shaping up to be just as jam-packed as the last. Te Whatu Ora members – who make up more than half our membership – are still to settle their collective agreement and their fears about the lack of safe staffing ratios continue unabated.

NZNO will continue its fight for pay parity for all nurses, everywhere. It may be back to the drawing board on pay equity but our commitment to achieving this for our members is stronger than it has ever been.

We will continue to rise up under Maranga Mai! We will stand side-by-side with our fellow unions because we are stronger together.

While the struggle is often what gets attention, we will also continue to support and boost the professionalism of our members, and our colleges and sections. One of the joys of my job is meeting members at conferences, meetings and on the picket line.

I'd like to end by thanking NZNO staff for their mahi last year. I also want to give a special thank you to the Board and Te Poari for their commitment, leadership and support.

Maranga Mai! Ngā mihi nui,

"anfouth

Paul Goulter, Chief Executive NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa

### Te Poari o Te Rūnanga o Aotearoa

Kei te ū tonu a Te Poari o Te Rūnanga o Aotearoa ki te whakakaha i āna mahi ki ngā uara, ngā mātāpono me te mātauranga Māori i tuku iho mai i ō tātou tīpuna. Mā ā mātou mahi o ia rā, ka whakakaha i te whakawhanaungatanga, ka tiaki i te mana ahurea, ā, ka whakatupu hononga whai tikanga ki ā mātou mema me Te Ao Māori.

Ko tā mātou Kaupapa he whakanui i ngā tikanga tuku iho a te Māori, me te whakamana i ngā reo Māori. Ko tēnei aronga te kaiwhakatere i ngā kaupapa e whakaata ana i ngā wawata, te oranga, me te mana o tō tātou iwi. Ka kitea tēnei ūmanga i roto i tō mātou whai wāhi ki ngā kaupapa Māori matua, pēnei i a Te Rā o Rātana, Te Rā o Te Tiriti o Waitangi, Hīkoi ā-Motu mō te Pire Matapono o Te Tiriti, me ētahi atu kaupapa Māori.

Ka taea e mātou te rīpoata i te pikinga o te tokomaha o ngā mema ki te 5.95%, e whakaatu ana i te kaha tipu, te whakawhirinakitanga, me te kotahitanga e whanake haere ana i roto i te hapori tapuhi Māori whānui.

Ko tētahi o ngā ekenga nui i tēnei tau ko te whakarewatanga o ā mātou hui ā-rohe tuatahi i hono mai ai ngā rohe maha. I tū te hui tuatahi ki Papakura Marae, i reira hui ai ngā mema nō Te Tai Tokerau, Te Manawa Taki o Waikato, me Tāmaki Makaurau. I whai mai ko te hui o Te Waipounamu i tū ki Wai-Ora i Ōtautahi, i whakakotahi ai ngā mema o Te Waipounamu. Kei te whakaritea kētia ngā hui ā-rohe e toe ana mō tēnei tau. E haere tonu ana ngā mahi ki te whakatinana i Ngā Hapū o ia Rohe, hei whakapakari ake i ngā hononga ki te whānau me te hapori.

I tua atu i tēnei, kei te mahi ngātahi mātou me te Poari Matua ki te whakapakari i te hononga i raro i Te Tiriti o Waitangi, kia noho tonu ai hei pou tokomanawa mō ā mātou whakahaere.

E titiro whakamua ana, ānei tētahi whakataukī hei arahi i a tātou

"Poipoia te kākano, kia puāwai"

E whakaatu ana tēnei whakataukī i te haepapa ki te whakatipu i te reanga rangatira Māori e whai ake nei, mā te poipoi i a rātou i tēnei rā, ka puāwai rātou āpōpō.

Ngā mihi nui,

Grack

**Tracy Black** Tumu Whakarae



Poipoia te kākano, kia puāwai Te Poari o Te Rūnanga o Aotearoa remains firmly dedicated to ensuring our work is grounded in the values, principles, and mātauranga Māori passed down by our tīpuna. Through our daily practices, we strengthen whakawhanaungatanga, uphold cultural integrity, and foster meaningful connections with our members and Te Ao Māori.

Our kaupapa-led approach continues to honour Māori traditions while empowering Māori voices. It drives initiatives that reflect the aspirations, wellbeing, and mana of our people. This commitment is further demonstrated through our active involvement in key kaupapa Māori events, such as Te Rā o Rātana, Te Rā o Te Tiriti o Waitangi, National March for the te Tiriti Principles Bill and other kaupapa Māori events.

We can report a 5.95% growth in membership, reflecting the growing strength, trust, and unity within the wider Māori nursing community.

A significant achievement this year was the launch of our first combined regional conventions, marking an important step in nurturing relationships across rohe and deepening whakawhanaungatanga. The hui took place at Papakura Marae, where members from Te Tai Tokerau, Te Manawa Taki o Waikato, and Tāmaki Makaurau gathered together. This was followed by the Te Waipounamu convention at Wai-Ora in Ōtautahi, bringing together members from the South Island. Planning is already underway for the remaining regional conventions, which will be held later this year. Work continues on the implementation of the Ngā Hapu o ia Rohe model, further strengthening our connection to whānau and communities.

In addition, we have been working closely with the Board of Directors to further strengthen our partnership under Te Tiriti o Waitangi within the organisation, ensuring it remains a foundational pillar of our operations.

Looking to the future, a guiding whakatauki:

"Poipoia te kākano, kia puāwai – Nurture the seed and it will blossom."

This whakataukī reflects the enduring responsibility to cultivate the next generation of Māori leaders, nurturing their growth today so they may flourish tomorrow.

Ngā mihi nui,

Grack

**Tracy Black** Tumu Whakarae

# 99

Nurture the seed and it will blossom

# **Membership Committee Report**

The Membership Committee advocates for members, their issues, their concerns – both governance and operational – and recommends potential solutions for improvement.

This year the Committee went back to basics: refined the committee role, purpose and goals within the Maranga Mai! campaign, and become more confident in the narrative. The committee had regular face-toface meetings to identify member issues, having robust discussions and enabling brainstorming for potential solutions. These were reported back to the BOD and NZNO leadership. This work was enhanced by being able to have face-to-face conversations with our NZNO leadership team.

#### Our work this year: Issues identified

#### **Constitutional review process**

The Committee reviewed the draft document and put together a comprehensive report of questions and concerns which were presented and addressed at last year's AGM. At the end of last year, the Committee raised concerns regarding the timing of a proposed Special General Meeting during Te Whatu Ora strike action and the holiday period. Concerns were also raised that there is a lack of awareness amongst members regarding the proposed constitution change. The meeting at the beginning of this year saw the committee having robust discussions regarding the new constitution and viewed the current presentation with the co-chairs in attendance. Even though the Committee still has concerns, the main priority moving forward is to ensure that in order for members to have the power to vote, information needs to be adequately socialised and is presented in plain English.



#### **Volunteer fatigue**

There are many NZNO committees and structures that rely on volunteer involvement. A concerning trend of volunteer fatigue was raised in discussions with CEO Paul Goulter. This is happening for many reasons: the legacy of COVID, challenging conditions for the healthcare workforce and general hardships in just living.

These issues are not within the MC's immediate influence. However, it was identified that there are communication inefficiencies and gaps in member knowledge and education, so there is a need to provide multifaceted education. The website is an essential tool in both educating and communicating; however, it is hard to navigate and doesn't reflect the bicultural relationship which is becoming essential to NZNO. The call centre could also better reflect our multicultural membership and could look at multilingual options. This issue will continue to be on the MC's agenda.

#### Notebooks for graduate students

Notebooks are given as graduation gifts but there was an issue when the supplies were running out. This was a historical piece of work to ensure standardisation for all graduates across the motu. Notebooks are considered the best gift option and appreciated by all graduates; receiving the gift is the first time that the student felt that they belonged, that they were a part of NZNO. Gifts are generally given to all graduates and it provides opportunity to enable recruitment and connect with current members, engaging and supporting new graduates into being active members of the union. Therefore, we recommended that further notebooks are purchased and distributed as graduation gifts.

#### **Our representative groups**

#### **Regional Councils**

Over the past few years regional councils have struggled, committee membership has declined and obtaining representation on the membership committee has been challenging. This is a direct result of volunteer fatigue from healthcare challenges, workforce burnout and a lack of education and ineffective communication within NZNO.

Regional councils' structures change in the proposed new constitution. MC has voiced its concerns that there was not enough consultation into why these structures are failing and if this will be resolved with the proposed new constitution. MC will continue to advocate and support regional councils.

#### **Colleges and Sections**

The MC has always advocated for C&S, highlighting their value within NZNO. This year MC supported the Colleges and Sections' Day returning to the twoday format. This was invaluable to their growth and support, a time to hear from NZNO leadership and staff, and for networking. The result was a desire to increase collaboration, share challenges and triumphs and to learn from each other. Issues were raised around operational challenges, budgets, member reports, and concerns remain regarding a lack of communication or consultation about relevant campaigns and initiatives – i.e. the induction day being so close to Colleges and Sections' Day. It was great to hear about all their amazing work and achievements, and the MC will continue to engage, monitor and advocate for Colleges and Sections.

#### **NSU: The National Student Unit**

MC continues to work closely with and support the NSU by way of having NSU Chair and Vice Chair as part of our committee. The input and discussions of students' needs and concerns are vital to our commitment to support the students in their journey towards graduation. The issues this year have included the lack of jobs for graduates, the paid placement campaign and the gift for graduates. Our discussion with CEO Paul Goulter in relation to the notebooks also raised further issues regarding students which require further investigation, discussions and support. Concern was also raised regarding the proposed new constitution and the disestablishment of the MC, as what would happen to the student voice within NZNO. The input and discussions of students' needs and concerns are vital to our commitment to support the students in their journey towards graduation.

#### Other areas of involvement

MC has representatives on the Maranga Mai! fund committee joining Te Poari, with the selection process completed in April every year. It was encouraging to see an increase and quality of applicants and be able to provide financial assistance for educational opportunities. The MC also has a representative on the remit committee.

#### Looking forward

Though it is challenging times MC needs to be united in the fight; nurses like to care, but the role as advocates also needs to relate to being activists. MC may be disestablished as a standing committee in the proposed new constitution, but there is hope that the value as advocates for members, for education, for empowerment, and for positive change will ensure that MC can remain in some capacity even if only transitional.



# **National Student Unit Report**

The National Student Unit's (NSU) focus this year was on highlighting and advocating the lived experiences of nursing tauira while reconnecting with our membership nationwide.

NSU established three primary goals for 2025 during their first hui for the year.

- To develop an impactful survey to lay the foundation for NSU's objectives in 2026.
- Strengthening NSU's commitment to te Tiriti principles by fostering biculturalism and true partnership within the unit.
- Expanding NSU representation, aiming for two representatives in every nursing kura across New Zealand.

Planning for the 2025 National Student Survey involved input from focus groups on current issues affecting tauira across all learning institutions. Job uncertainty was identified as a significant concern likely to shape the student responses, anticipated by hiring freezes and workforce instabilities. This impacts student wellbeing, contributes to nursing programme attrition, and requires a thorough investigation. Focus groups sought to deconstruct these challenges, including broader educational difficulties such as the adequacy of facilities, curriculum design, minority representation, and support for international students. These insights will allow us to gather comparisons with data from previous surveys to reflect the changes and causation, and re-evaluate where students require the most support. The NSU aims to foster a sense of kotahitanga through the survey for tauira across the motu to have their say and help assist the paid training campaign already being pushed by the NSU and multiple other organisations nationwide.

Our efforts have also focused on strengthening the whanaungatanga established by our predecessors and ensuring a continued student presence in the NZNO through succession planning. Both incumbent and outgoing members have ensured wrap-around support for incoming representatives, encouraging them to participate freely and actively as they grow into their roles. This has been implemented by leadership oneon-one meetings with new representatives to help awhi them and initiate whakawhanaungatanga so they feel part of the whanau before their first hui. The NSU has complete confidence in the capability and leadership of our current co-leaders, whose energy and direction are shaping a commitment to longevity, student wellbeing, and faithful representation of a myriad of voices. We aim to have two student representatives for each Kuratini around the motu by the end of the year. We appreciate that this can be hard to attain due to the many barriers students face. Therefore, the NSU is determined to revise gaps in membership annually and work together with their networks to try and remedy this so all students have a voice.

Currently, the membership numbers for students nationwide is approximately 3974, with 751 of those being Māori tauira. The NSU was built using a bicultural lens and strives to uphold the Te Tiriti o Waitangi principles, advocating for true partnership both within the unit and across the motu. Co-chair of the NSU, Davis Farrar Ferguson, participated in the Call to Action protest outside Parliament on the morning of the Treaty Principles Bill discussion. He was standing alongside NZNO to uphold the principles of Te Tiriti o Waitangi and protect the rights of Māori in healthcare. NSU meetings ensure that representatives are aware of their colleagues' potentially differing views and opinions. Manaakitanga, aroha, respect and also active listening are upheld during these interactions with other NSU peers and with the communities of students they advocate for to remain fully informed regarding nursing students within New Zealand.



NSU has helped bring national attention to concerning trends such as students sleeping in cars and experiencing other significant hardships to attend clinical placements. Nursing students must complete over 1100 hours of unpaid clinical work, often covering full patient loads during long shifts. During this time, they must manage transport, meals, and basic living costs without any financial support. This can be incredibly destructive to their families and their well-being. In the context of a cost-of-living crisis and reduced employment opportunities, dropout rates are increasing as tauira start to doubt the benefits of becoming a nurse. This is surprising, as students have reasoned that their drive to study nursing was to be able to fulfil the desire to serve their communities. Multiple representatives have spoken to the media about the conditions nursing students face and their ongoing needs. Co-chair of the NSU, Bianca Grimmer, also highlighted the lack of employment for new graduates during multiple media interviews, describing it as a failure to the future workforce of New Zealand.

NSU want to call students around the motu to stand together as one and continue to fight for the rights they deserve. We need to plan for and allocate adequate resources and attention to ensure a future workforce is available to care for our mokopuna.

# 99

Currently, the membership numbers for students nationwide is approximately 3974, with 751 of those being Māori tauira.



# **Regional Councils**

#### Bay of Plenty/Tairāwhiti Regional Council

Chair: Sharon Powley

BOP/Tairawhiti Regional Council meets in the Tauranga NZNO office with members travelling from Rotorua, Whakatane, Gisborne, East Cape, and within Tauranga. Having an active membership from a geographically large region, in 2024 BOP/TRC met via Zoom for alternate meetings to reduce expenses and direct those savings to activities benefiting the membership. This continued into 2025 as it proved to be a fiscally prudent decision and much more beneficial to the members.

Highlights include:

- Membership numbers continued to increase from 5297 in 2024 to 5544 in 2025.
- Celebrated Matariki in June, joining the Te Rūnanga at Whetu I te rangi Marae in Welcome Bay; will support the 2025 event at Horowhitu Marae in Whakatane.
- Regional convention in Rotorua provided education and an opportunity for networking between the different sectors of health care; 85 attendees, and 11 awards presented.
- Established a regional Facebook page to celebrate and promote regional achievements and events; continue to embrace technology with an online Zoom forum with hubs in Gisborne, Whakatane, Rotorua and Tauranga; Anna Elders spoke on essential stress antidotes for workers in healthcare; communication with membership continues to evolve.
- Celebrated Nurse Appreciation Day across our region including networking opportunities and afternoon teas.
- Five education grants approved for 2024–2025 valued \$100 each.
- Continued to support industrial activities for all sectors encouraging members to be involved when possible.
- Student rally in Tauranga was well supported, gaining media attention on the cost-of-living crisis and health crisis in Aotearoa.

#### Membership numbers continued to increase from 5297 in 2024 to 5544 in 2025.

The state of the health system gives uncertainty in all workplaces. The challenge for RC is to support members through these times in a meaningful way.

A new constitution will change the way RC works, providing flexibility and opportunity to try new things. RC stands united to face any challenges that may arise.

#### Canterbury/Waitaha Central Regional Council

Chair: Erica Donovan

Canterbury Central Regional Council (CCRC) supported member-led actions by organising on-the-ground widespread action including the Hui for Health. In May 2025 members hosted a public hui in Ōtautahi calling for staff and health consumers to unite for a stronger public health care system – this was livestreamed and attracted media attention from *Radio New Zealand* and *The Press*.

#### **Building member power**

- With a strong and diverse membership, members attend meetings from across all sectors of health, ranging in experience from Enrolled and Registered Nurses to Student Nurses. CCRC strongly supports retaining the regional council model, and will continue to run well attended meetings.
- Workplace Organising Committees (WOCs) are located at Christchurch Public Hospital and Burwood Hospital.
- Continued to engage with media having members interviewed by *Radio New Zealand, The Press* and student media.

#### Workforce

• Hosted a successful Nurses Appreciation Week event at He Puna Taimoana Hot Pools.

#### Education

- Hosted the largest regional convention, with members from Christchurch, The West Coast, Timaru and Ashburton attending.
- Highlight speakers from 2025 included a Registered Nurse talking about her journey working in the community, a discussion on economics and funding, and a nurse leader from youth health.
- Provided grants to those who want ongoing education or to attend conferences. This is possible by running scholarships through Thomas Tippet, Pop Black Trust and Canterbury Regional Council Education Fund. This valuable mahi will continue this into the oncoming year.

#### Health and safety

• Continued to supporting members to take action within their workplaces and taking issues back from WOC to Regional Council. This year there were a number of ARC facilities cutting staff, and this was a big focus for members and NZNO staff.

#### Allies

 Provided support for other groups in health and social services such as members attending and speaking at events related to pay equity, aged care staffing cuts, strike days for fellow healthcare union members and pride.

In October 2024, there was a strong member attendance and voice at the Fight Back Together Hui in conjunction with the CTU and several other unions. A motion demanding better public investment in infrastructure was passed unanimously.

#### **Central Regional Council**

Interim Chair: Jennie Rae

Central Regional Council continued to function with a core group of delegates from Taranaki, Whanganui and Mid-Central districts. Most delegates are from Te Whatu Ora but also includes student representation and a prison nurse delegate.

Highlights include:

- Responded to the Constitutional review proposal, participated in the SGM and regularly attend the leaders huis.
- Face-to-face meetings held in Whanganui, approximately quarterly, with Zoom meetings in-between.



- Hosted a successful Convention with Central Region in conjunction with Te Rūnanga Chair; farewelled long standing delegate and previous Chair Trisha Hurley who started her nursing journey in Whanganui in 1974 and has given 51 years of service to caring for patients. She has been an extremely active delegate in the workplace and region for over 20 years.
- CRC awaits the outcome of the vote for the Constitution to see what the future holds.

#### Greater Auckland/Tāmaki Makaurau Regional Council

Chair: Marianne Harris

Greater Tāmaki Makaurau/Auckland Regional Council (GAR) continued to meet monthly throughout the year, using a combination of in-person and Zoom formats. There was regular participation from delegates across the region, many who balance full time clinical and leadership roles alongside their voluntary contributions to NZNO. Meetings provide a space of connection, shared purpose, collective support to discuss challenges such as burnout and safety and reflect on campaign developments. GAR acknowledges the commitment of all delegates who give their time and energy in support of their profession. New members and the return of student nurses to meetings brought fresh energy and perspective.

Highlights include:

• Focus on growing and supporting member advocacy, developing a plan to increase communication; continued to support NZNO campaigns and industrial actions, actively participated in bargaining; bringing together members from varying sectors demonstrating the strength of collective voice; mahi directly supports the Maranga Mai! strategic goals of building member power and public support.

- Remain committed to ensuring diverse voices, including Māori and Pacific, are heard and respected across the region; continue to hold space for these perspectives to be woven naturally into our mahi as relationships, capacity, and opportunities grow.
- Coordinated 2024 and 2025 RC Conventions, reaching full capacity both years with 100 attendees each; convention provided a powerful platform for nurses to connect, learn, and reflect.
- Preparing survey to capture the breadth of issues and opportunities facing members of the Tāmaki Makaurau region, including questions focused on equity, member experiences, support and communication preferences; insights gained will directly inform the 2025–2026 plans and priorities.
- Acknowledged the transition in Vice Chair position; thanks to Deborah Isaac for her long-standing service, leadership, and support in this space; welcomed Jade Power as Vice Chair who also served as the National Delegate for Te Whatu Ora at her workplace.

More mahi is needed to improve engagement and ensure broader representation across the region. However, the dedication shown by those currently involved speaks volumes about the strength of the profession and the deep commitment to advocacy that exists within the region. The voluntary nature of the mahi is something to be celebrated. Every meeting attended, forum coordinated, and conversation had builds a stronger, more equitable future for nurses.

#### Greater Wellington Regional Council

Chair: Grant Brookes

Membership of the Greater Wellington Regional Council (GWRC) remained stable this year with 13 representatives, farewelling one Regional Councillor and welcoming a newcomer. GWRC's small group has focused on a subset of the Maranga Mai! strategic directions and focus areas to optimise effectiveness.

Highlights include:

#### Education

- Driving the NZNO vision of the health system of the future, were features of the 2024 Greater Wellington Regional Convention.
- Topics included culturally safe care for transgender people and enhancing refugee health the role of nursing, advocacy and social change.

#### Health and safety/ratios

- Supported and participated in the Ratio Justice Bus Tour.
- Visited towns and cities from Te Whanganui-a-Tara up to Taranaki, asking members of the public to sign messages supporting culturally appropriate nurseto-patient and midwife-to-patient ratios in all health care settings.
- Spokesperson conducted media interviews about health and safety impacts of the changes in Police response to mental health call-outs.

#### Allies

- Strengthened connections with other unions affiliated to the NZ Council of Trade Unions Te Kauae Kaimahi.
- Represented on the local affiliates council, Unions Wellington, and participated in a range of crossunion activities; including the 2024 May Day march and concert, the Reimagining Aotearoa Together policy process, Living Wage Movement events, the Maranga Ake! Fight Back Together rally for Labour Day and the Unions Wellington stall at the 2025 Newtown Festival.
- In return, received in-person support from the PSA, Maritime Union, PPTA, Workers First Union and Unite Union, on picket lines at Wellington Regional Hospital during the December 2024 strikes.

#### Bargaining

- Participated in the strikes and meetings in support of Te Whatu Ora bargaining, and helped to mobilise other members to take action.
- Joined the picket mounted by striking NZNO members at Access Community Health.

#### Education

• Regional Convention 2024 was attended by 53 members; 77% of respondents rated the Convention as "excellent" and a further 20% rated it as "good".

#### Winning public support

- Collected 105 messages signed by members of the public at the Newtown Festival, calling for better funding for Primary Health Care and culturally appropriate nurse-to-patient ratios.
- Messages were later delivered to Labour Health spokesperson, Dr Ayesha Verrall.

Capacity to deliver on a bigger work plan was constrained by low participation. Average attendance at bimonthly meetings was five RC members, with no representation from sectors outside Te Whatu Ora, or from NZNO Colleges, Sections or the National Student Unit.

GWRC supports the proposed new NZNO Constitution which aims at creating more inclusive and active geographical member structures to implement the full range of Maranga Mai! strategies.

#### Hawkes Bay/Te Matau a Māui Regional Council

Co-Chairs: Sandra Corbett and Liz Banks

Te Matau a Māui had a number of highlights over the last 12 months despite Co Chairs' resignation. Replacement office holders were not elected due to the constitutional review underway. RC continued to carry out the necessary functions and met as required. Te Rūnanga and student membership is strong and have regularly attended and supported the work of the RC. Te Rūnanga is very active in Te Matau a Māui with hui and wananga, sharing their skills and enthusiasm, and providing support to colleagues as issues arise.

Highlights include:

- Regional Convention well supported with lots of members new and old present.
  - Acknowledged and celebrated the amazing contributions of our NZNO Kaumatua/Kuia Nan Ira Tanira who passed away on 1 December 2023. She spent her life working tirelessly with whānau, and community while aspiring and contributing to improved outcomes for all who she met her manaakitanga will not be forgotten.
  - Her niece Merehinekete McNaughton, Te Rūnanga Proxy vice chair and active NZNO member, supported this emotional tribute as the first Regional Convention without Nan was held.
  - Her legacy has been embedded within the membership and her whānau who continue to support hauora and reflect the values she shared she will always be remembered.
  - Heard from Taiwhenua o Heretaunga team, providing nurse led primary care services for rural areas using a mobile van, developing multi-skilled health professionals and improved access to meet need – vaccinations, screening, kaumatua check-ups, diabetes checks etc.

- Chief nurses zoomed in and the disconnect of the reality of what nurses face on the ground was felt. There are different perceptions of what the nursing workforce looks like particularly in areas impacting on safety for patients, staffing levels etc.
- All presentations provided a stimulating and reflective day, not least our Constitutional Review discussions.
- Shared discussions around te Tiriti submissions and fundraising initiatives with great turn out at our December gathering.
  - Provided some sponsorship for members to form a netball team and attend the Māori Health Netball tournament in Tāmaki Makaurau.
  - Provided opportunity for NZNO and Te Matau a Maui to build relationship with Te Kaunihera o Ngā Neehi Māori.
  - Sponsorship contributed to and supported wellbeing of members, enabling whakawhanaungatanga in a relaxed and therapeutic context; shared public health and population screening knowledge with students while they reciprocated with an update on current student life.
- Social issues have plagued the school of nursing at EIT ever since the cyclone in 2023; ongoing effects are still being felt as there has been a total fracture of student relationships across cohorts.
  - Social divide is driven by a lack of interaction and networking, worsened by cohorts competing for resources, such as facility space or lab equipment, within the school due to a lack of proper infrastructure.
  - TRT and NSR striving to start the healing process between cohorts and break down the barriers that have been built, engaging with each group and asking for their input and voice instead of speaking for them – a trusting NSU network has started to develop.
  - The school has shown their support and offered to provide resources or space to make this easier.
  - Student Te Rūnanga rep shared the progress that TRT and NSR have made on set goals to build a stable platform for students that will cement a better structure both for the NSU and future students at EIT.
  - Local delegate numbers are rising and students from each cohort voicing their concerns as well as praises in the areas that deserve them.

- The school of nursing leadership has provided good opportunities for TRT and NSR to engage with students demonstrating the school is very willing to help build the presence of NZNO and student advocacy in EIT.
- HBRC hauora Te Kupenga has been active with new delegates Karene Chilton (Nurse Prescriber Intern) and Katrina Witton (RN).
  - Working alongside NZNO increasing membership for non-clinical staff, as 100 percent of the clinical staff are already members.
  - Indemnity insurance, collective agreements, membership and industrial action conversations positively received by the CEO.
  - Kōrero continues with whakawhānaungatanga, and learnings about how NZNO can support them in their mahi.
  - Ongoing work to raise awareness, provide information and increase membership with QR codes, website links, etc.

### Midlands Regional Council

Chair: Emily McLeod

Midlands Regional Council (MRC) represents members from various constitutional bodies within the Waikato District. The council continues to meet regularly in person but also via Teams, to reach members and delegates out of town. With vastly improved technology MRC is able to reach members living remotely or who are unable to attend in person. These meetings maintain lines of communication with MRC members and NZNO, to help raise awareness across all health sectors about the role and function of the regional council.

MRC meetings start with a karakia, and are a great opportunity for members to discuss upcoming events and receive information from NZNO organisers. Discussions include current issues affecting members in their workplace, need for support, education and resources available to delegates in their workplaces, and the ongoing discussion about collective agreements.

Highlights and achievements include:

 Held MRC regional convention, attracting 88 delegates and NZNO members. Awards were presented to four delegates, to acknowledge their work not only as a delegate but also highlighted their dedication to NZNO, initiatives they had taken, and on-going work relating to health and safety. Their hard work is acknowledged and appreciated.

### There are 2663 NZNO members in Tai Tokerau, including students.

- Provided three members financial support from the Midlands Education Grant, and wished recipients well for their future education endeavors.
- Held education forums, one of which focused on cultural awareness and members found informative to better understand the multicultural workforce in New Zealand. These forums received positive feedback with great engagement from members.
- Recently presented newly graduated nurses with small gifts at the Wintec graduation, while raising awareness of NZNO and encouraging recruitment. The members who presented these gifts were representatives from Te Rūnanga, NZNO, DHB, and Enrolled Nurses Section.

#### **Te Tai Tokerau Regional Council** Vice Chair: Sacha Young

Te Tai Tokerau Regional Council has 14 members covering a wide range of sectors which includes Te Rūngana members and students. An average of eight-to-10 members attend meetings, supported by our Organisers. RC members have been active throughout the year attending and supporting Union rallies, strikes, and actions. There are 2663 NZNO members in Tai Tokerau, including students.

Highlights include:

#### Building political and member power

- Alongside Te Rūnanga, RC members attended two Whakawātea in 2024 to celebrate and welcome New Graduate Registered and Enrolled Nurses into the profession at NorthTec Tai Tokerau Wānanga, presenting them with NZNO notebooks.
- NorthTec is a great ally of NZNO who was given the opportunity to share its purpose.
- Vicki Te Waiti and Uirakohu were awarded the NZNO Tai Tokerau Regional Council Student Nursing Excellence Taonga for outstanding mahi as representatives.

- Met with Unit One students at NorthTec each semester during the year to inform students about the union/professional body purpose, introduce them to and show them how to navigate the webpage, explain the role of the student rep, and encourage and support membership.
- Individual RC members developed a great working relationship with local Green Party Health spokesperson Hūhana Lyndon who is informed of all upcoming rallies, strikes and actions, and turns up to give full support including speaking with media to support the cause.

### Education and promoting nursing as a profession

- Facilitated two professional forums via Zoom in June with Professional Nurse Advisor (PNA) Catherine Montgomery covering documentation, and a face-to-face in November to discuss AI in the health setting/workplace. Both well attended and the AI topic was extremely relevant particularly among the General Practice Nurses who are using some form of AI on a daily basis.
- Held successful Regional Convention with education and organisation sessions run by Organisers and PNAs; members and delegates were able to carry forward into strike planning and actions. An array of local speakers shared their work sector roles and experiences including Health Care Assistants, Community Nurses, and Rhoena Davis, Mahitahi Hauora Director of Nursing who sadly succumbed to terminal illness on 16 August 2024. Kua haere ia ki tōna moenga roa.
- Created six International Day posters celebrating local nurses and these were displayed at workplaces throughout the region and at Regional Convention. Participants included The Neonatal Unit; Rhoena Davis – DON PHC; Acute Medical Flow Nursing Team; Student Nurse and HCA Kayla, and Enrolled Nurse Ariana at Te Hau Awhiowhio o Otangarei; Nursing and Midwifery Directorship.

Regional Council thanks its members for their ongoing dedication and mahi towards organising successful events.



# Held regional convention in Balclutha... with the theme

Nurses: A voice to lead.

#### Te Tai Tonga/Southern Regional Council

Chair: Jo Wilson

Te Tai Tonga/Southern Regional Council (TTT/SRC) had a full year with a steady team of members offering their time and support, enabling the events to be successful and to encourage member support.

Highlights include:

- Held regional convention in Balclutha 9 April 2024 with the theme *Nurses: A voice to lead.* Great attendance with a variety of presenters and topics; heard from local nurses about supporting the refugee community and development of a multiethnic programme to meet the needs of the community.
- Nursing graduate badges were presented at the Te Pūkenga celebration ceremonies in Dunedin and Southern Institute of Technology to graduating nursing students around the region. The word chosen by third-year nursing students was diligence and the badges were well received and NZNO support and input throughout the year was acknowledged.
- Annual AGM/Conference Kotahitanga Together we are the leading voice of nursing. Held in Wellington 18–19 September 2024 and attended by delegates throughout the region.
- Christmas function held at Ombrellos on 14 November.
- Members in Invercargill hosted two events attended by members across the region: Matariki Celebration Hui that held at Waihopai Marae and also October hui.
- Membership Committee representation received no expressions of interest so position is yet to be filled.
- Celebrated International Nurses' Day 7 May, and heard from Michale Sutton on meeting the challenges of on-boarding multiple team members from multiple cultural backgrounds.
- TTT/SRC contributed to the distribution of cake and chocolates to nurses around the region to celebrate nurses.

#### **Top of the South Regional Council**

Vice Chair: Hamish Duncan

Highlights include:

- Representation on the council was minimal, with most of the workload carried out by two members, impacting on the councils ability to deliver to plan/ perform effectively.
- Chairperson Carolynn Hannah stepped down from her position but remains a delegate and consulting/ educating remaining council members/vice chair. This leaves the position vacant, with Hamish Duncan acting interim chair.
- Vacancies within the council have not been filled over the past few years, with minimal interest from members to be involved; those who are involved feel the uncertainty of regional councils.

#### Activity

- Enthusiastic, but low number of members for S26 meetings; members rode double decker bus to meetings and joined fellow unions for a robust and well-presented rally.
- Strike action had great turn out for the picket in front of the hospital and march to the centre of the city; overall response was positive from members, and public support was felt.
- There has been intense focus on Nelson Hospital with strong media activity and multiple nurses and doctors speaking out about the hospital's conditions; positive feedback from these reports, but no change seen so far.

Strike action had great turn out for the picket in front of the hospital and march to the centre of the city; overall response was positive from members, and public support was felt.

#### Forums

• Only one forum was held this year in Nelson due to limited participation and lack of committee members available; the cannabis clinic in Nelson delivered an educational forum which was well received.

#### **Regional convention**

• Regional convention had positive feedback overall, multiple comments sharing disappointment with not having more time with the NZNO management team; wide variety of topics were presented.

#### Annual dinner forum

• Held forum the night before the regional convention with positive feedback received.





### INVOICE

Attn: Te Wh PO Box

# Colleges & Sections

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# Colleges

#### College of Air and Surface Transport Nurses

Chair: Lynette Will

COASTN committee continues to work on setting the standards for transport nursing providing a voice when decisions are made that impact members. COASTN is committed to representing the college and profession with continued engagement with members, and to improve outcomes for patients.

Highlights include:

- Two committee members are now on the Aeromedical Commissioning Programme (ACP) group making decisions about the future for transporting patients in New Zealand.
- Joined with Aeromedical Society of Australasia (ASA) to run a successful international conference in September.
- Awarded the outstanding nurse of the year award to Di Fuller.
- Ran aeromedical course for group of flight nurses in February at AUT:
  - Flight nurses from New Zealand and Australia were in attendance.
  - First two days offered students new perspectives to the complex facets of air retrieval unique to the field.
  - Day three was HUET training at Den Ray Marine; the course offers insight into the hazards associated with aircraft ditching into water.
  - Day four focused on SIM training using a simulated clinical environment to help students practice skills and decision-making in a safe and controlled setting.
  - The last day covered SOS survival training in Muriwai.
  - Ongoing support and generosity from New Zealand Air Ambulance Service.

**99** 

Two committee members are now on the Aeromedical Commissioning Programme (ACP) group making decisions about the future for transporting patients in New Zealand.

#### **Cancer Nurses College**

#### Chair: Shelley Shea

This year NZNO Cancer Nurses College navigated a time of considerable systemic pressure and transformation. Amid workforce constraints, tightened budgets, and ongoing sector reforms, the unwavering commitment of cancer nurses to delivering safe, equitable, and patient-centred care has stood strong.

Highlights include:

- This year's work was underscored by a shared recognition that equity remains central to our mission.
- Annual conference theme *Addressing Inequities across the Cancer Nursing Continuum*, reinforced the importance of equity-focused models of care and standardisation in practice.
- Presentations such as Jason Gurney's on equity through standardised care catalysed renewed momentum across our mahi – highlighting the role nursing leadership must play in reducing variation and dismantling systemic barriers across Aotearoa's cancer care landscape.
- Nationally, Te Whatu Ora's Cancer Clinical Network has now replaced the former Te Aho o Te Kahu Clinical Assembly and the Medical Oncology, Haematology, and Radiation Oncology Working Groups.
- New structure includes a strategic group alongside an operational group and the development of Technical Advisory Groups (TAGs).

### Launched new initiatives including a dedicated YouTube channel to host free educational webinars, broadening access to knowledge-sharing across the sector.

- Currently advocating for the establishment of a cancer nursing-specific TAG to ensure CNC voice and expertise remain central to the shaping of cancer services.
- Contributing to a nationally agreed Cancer Nursing Education Pathway, an important step toward aligning workforce capability with current and future models of care; this work reflects CNC continued commitment to strengthening nursing expertise and visibility across the continuum.
- Remains active in supporting professional development despite fiscal constraints.
- Maintained grants for postgraduate study, conference attendance, and other educational opportunities.
- Launched new initiatives including a dedicated YouTube channel to host free educational webinars, broadening access to knowledge-sharing across the sector.

There is urgency for CNC to articulate the complexity and impact of the work. Many outpatient and community settings fall outside of the CCDM framework, making the reliance on Clause 33 of the MECA insufficient in truly resourcing equity-driven, best-practice care. The question remains: does safe staffing alone equate to quality outcomes for patients, and how the outcomes cancer nurses seek can be better defined? Establishing nationally agreed-upon patient-based nursing outcomes must be a strategic priority in the coming year.

Leadership across cancer nursing also remains an area of concern. Where once there were national and regional nurse leads, there is now a fragmented picture with limited formal leadership roles and shrinking FTEs – particularly for cancer-specific nursing leadership positions within Te Whatu Ora. CNC must continue to advocate for sustainable and strategic nursing leadership structures that can support workforce advancement – from Clinical Nurse Specialists to Nurse Practitioners – and influence future models of care. It has been a year of challenge and recalibration but also one of resilience, clarity of purpose, and strategic positioning. CNC will continue to build strong partnerships, foster nursing leadership, and continue advocacy to embed equity and excellence in cancer care across Aotearoa.

#### **College of Child and Youth Nurses**

Co-Chairs: Jo Clark-Fairclough and Donna Burkett

College of Child and Youth Nurses Tapuhitia Ngā Mokopuna Mō Apōpō (CCYN) remains committed to child health and the child health nursing workforce. The committee continues to work hard to align the College's activities and projected work plans with the NZNO Strategic Plan – Maranga Mai! This is to ensure the College is moving in a similar direction and encourages members to unite to advocate for change in the current nursing climate.

#### Te Tino Rangatiratanga

- Launched and socialised new Māori college name, Tapuhitia Ngā Mokopuna Mō Apōpō in 2023, which sits proudly alongside the official College of Child and Youth Nurses, NZNO title.
- Māori college name and tohu speaks to Māori nurses, of the College's commitment to supporting more Māori nurses working in child health. The vision is to support more Māori nurses into the child health workforce; this will act to serve, and assist in promoting equitable health outcomes for Māori tamariki, and their whānau who they live with, care for and support.
- Welcomed second Māori committee member in February this year to ensure a diverse representation across our ropū.
- Continuous enhancement and consistent use of te reo Māori in communications with our members and stakeholders.
- Continue to embed tikanga within all committee activity, such as opening and closing meetings with a karakia, and increased use and practice of te reo Māori at both online and face-to-face hui.

#### **Building member power**

• Launch of a new LinkedIn professional network page in 2024; allowed increased facilitation of professional networking with other groups with similar interests, fostered collegial connections and promoted the work of the College in another platform; followers increased each month.



#### Māori college name and tohu speaks to Māori nurses, of the College's commitment to supporting more Māori nurses working in child health.

- Continued to facilitate and maintain an accessible and very active Facebook page; this helps promote and publish any local, national and international news, research, education or events related to child health and nursing as a profession; followed by over 750+ people or groups online.
- Actively worked to increase student nurse membership as part of its strategic succession plan, by liaising with Heads of Nursing School throughout Aotearoa as well as the NZNO National Student Unit.
- Published Time Out committee newsletter biannually; acts as a resource that remains very popular with various health professional and other stakeholder groups as well as for membership; includes local, national and international news, research, education, and events related to child health and nursing as a profession.

#### Allies

- Continued connection and collaboration with AUT Child and Youth Health Research Group; promoted research activities, report on the latest research, and promote the College to postgraduate nurses working and studying in child health.
- Successful renewal of MOU 2024–2027 with the Paediatric Society of New Zealand.
- MOU development underway with Society of Youth Health Professionals Aotearoa NZ (SYPHANZ).
- Continued to update and maintain administration of an up-to-date key stakeholder list of all potential services across Aotearoa that intersect with child and youth health (either directly or indirectly); stakeholder list receive regular communications throughout the year such as Time Out newsletter, to help nurture relationships and foster collaboration.

#### Education

- Awarded two educational-focused scholarships to eligible Tapuhitia Ngā Mokopuna Mō Apōpō members, over the past 12 months; scholarships provide support for members to attend professional development (PD) activities; the current nursing workforce environment remains challenging, so to seek financial support to prioritise and attend PD opportunities is an important contribution the College can commit to.
- Launched a revised and contemporary Child Health Standards Framework Aotearoa, replacing the previous Knowledge and Skills Framework Publication.
- Disseminated and promoted Child Health Standards Framework Aotearoa regionally and nationally through membership and key stakeholders; received official endorsement and support of this framework by Paediatric Society of New Zealand (PSNZ).
- Continued promotion of educational opportunities related to child health through our social media channels.

#### Political

- Contributed to several submissions on behalf of the Tapuhitia Ngā Mokopuna Mō Apōpō, these include:
  - May 2025: feedback on the Paediatric, Adolescent and Young Adult Palliative Model of Care.
  - April 2025: signed the statement on safety measures for the use of puberty blockers in young people with gender related health needs – showing our support for the continued use of puberty blockers for this vulnerable group of rangatahi.
  - December 2024: feedback on review of Starship Bronchiolitis guideline.
  - July 2024: sent feedback on HDC Act and Code Review consultation.
- Proud and committed to continuing to help in informing policy discussion and change in various areas related to child health and the nursing profession in Aotearoa.

#### New Zealand College of Critical Care Nurses

Chair: Rachel Atkin

New Zealand College of Critical Care Nurses (NZCCCN) continue to be active and meet monthly. This year's highlights and achievements are examples of how NZCCCN add value to the New Zealand and international critical care nursing landscape.

#### Actualising te Tiriti

- Embedded karakia into monthly meeting agenda.
- Members who identify as Māori (up until April 2025) = 64 out of 1247.
- Ensures all parties acknowledge their responsibilities to the host iwi, and their authority (kāwanatanga), inclusion and shared decision-making, while planning conference.
- Māori nurse representation is contributing to kaupapa with a Te Ao Māori perspective on the work being done to review NZ Critical Care Education standards; this work is ongoing with support from NZCCCN.

#### Building political and member power

- Continue to increase our membership with a particular focus on engaging with RNs who work in the coronary care and high dependency settings.
- Publication of the digital Critical Comment newsletter for members three times per year, including member contributions.
- Chairperson representation at bimonthly meetings with the joint Australasian committee of The College of Intensive Medicine, Australia and New Zealand Intensive Care Society and the Australian College of Critical Care Nurses.
- Supportive of, and contributed towards the Te Whatu Ora funded, eLearning modules to support the learning needs of staff commencing work in ICU across the motu; many members have been instrumental to leading, supporting and contributing to this eLearning platform; supporting our special interest group (NZ Nurse Educators Forum) as the caretakers of this platform.
- Actively mentoring newer committee members into the office-bearing roles for effective transitioning to ensure sustainability.
- Continue to be fiscally responsible and reinvesting back into our members, including scholarships to attend conference; providing travel funds for members to engage in national work on our behalf; actively seeking alternative funding sources to continue to support critical care nurses to attend conferences/workshops.

- Developed a memorandum of understanding with our Australian colleagues (ACCCN); this will enable NZCCCN members to gain the discounted member registration fees for ICU conferences held in Australia and discounts for webinar-based education provided by ACCCN; members are encourage to take advantage of this generosity.
- Providing membership with free education via a webinar platform hosted by a governmentfunded provider (MyHealthHub); promote critical care nursing and engage critical care nurses with relevant information, topical events and information sharing across Aotearoa/New Zealand via social media platforms.

### Organising on-the-ground widespread action

- Continue to encourage members to participate in NZNO industrial activities; recent examples include the current governments request to conduct a second COVID enquiry and the pending review of the HPCA act and health workforce regulation.
- Winning public support.
- Ensuring the future of critical care remains safe for staff and patients by supporting recruitment and retention initiatives.

#### Leveraging health and safety

- Committee member representation on the ANZICS Safety and Quality committee.
- Committee continues to participate as a key stakeholder in the Australasian ICU workforce development working group; this work has included development of the ICU workforce standards for Australia and New Zealand document now in the final stages, and due for publication late 2025.
- The sepsis quality improvement project run by the Health Quality and Safety Commission and the Sepsis Trust NZ have been working on the 'Raise the Flag' quality improvement project; the project aims to develop and test sepsis care pathways to focus on early identification and timely treatment.
- NZCCCN are stakeholders in this work and formed part of the sepsis advisory group; this work is still in progress but when complete there will be national pathways for adult, paediatric and maternity sepsis.

### Driving the NZNO vision of the health system of the future

 Advocating for and commissioning a review of critical care nurse post graduate education in New Zealand to ensure it meets the needs of patients and their whānau in New Zealand ICUs.



Development of a Māori and Pacific diabetes nurses postgraduate study grant which was awarded for the first time in February 2025.

#### Aotearoa College of Diabetes Nurses

Chair: Amanda de Hoop

Aotearoa College of Diabetes Nurses had a successful year continuing with core business, as well as progression of projects. Our membership at of November 2024 was 417 members.

#### Actions

- Annual Study Day facilitated 1 May 2024 in Ötautahi Christchurch; study day 2025 in Kirikiriroa Hamilton; additional primary care nurses study day planned for October 2025 in Ötautahi Christchurch.
- Annual webinar via the New Zealand Study for the Study of Diabetes presentation on hybrid closed loop insulin pump therapy on 19 November 2024.
- Accreditation process continues for proficient and specialist diabetes nurses; currently three proficient registered nurses, 24 specialist registered nurses, and 10 specialist nurse practitioners accredited.
- Submissions feedback to Ministry of Health on proposal to increase prescribing duration; and to Pharmac on the proposal to fund a new type of insulin for the management of diabetes.
- Successfully lobbied Nursing Council of New Zealand alongside the New Zealand Society for the Study of Diabetes, and the Māori Clinicians Network, to update the medicines list for designated registered nurse prescribers in primary health and specialty teams. Two diabetes medications classes (GLP1RA and SGLT2i) are now class based listings, rather than listing specific medications only. This future-proofs the list if further supply chain issues occur, and if Pharmac funds alternate medicines.
- Professional Grants continue to be awarded twice yearly, with eight awarded in the past 12 months.

- Development of a Māori and Pacific diabetes nurses post-graduate study grant which was awarded for the first time in February 2025.
- Prescribing allowance claim utilised our Diabetes Clinical Nurse Specialist Pay Scale Survey developed and reported on by Solita Donnelly for Te Whatu Ora; employed Diabetes Clinical Nurse Specialists to raise a claim for an RN prescribing allowance in the current Health New Zealand MECA negotiations.
- National Diabetes Workforce Document finalised

   provided content for the New Zealand Society
   for the Study of Diabetes National Workforce
   Document on diabetes nurse specialist and nurse
   practitioner roles within secondary care diabetes
   services; document shows FTE deficits for all
   health care professionals with secondary care
   multidisciplinary teams in Aotearoa, and gives
   recommendations for adequate FTE.

#### **Future plans**

- Develop a bi-cultural co-chairperson model to actualise Te Tiriti o Waitangi.
- Finalise the update of the National Diabetes Nursing Knowledge and Skills Framework.
- Review and update the diabetes accreditation process.

#### College of Emergency Nurses New Zealand

Chair: Lauren Miller

Emergency Nursing is a speciality within a profession to promote excellence in Emergency Nursing within Aotearoa New Zealand, through the development of frameworks for clinical practice, education and research.

#### Achievements

- Published Te Pae Tawhiti Māori Health Strategy; shared by committee member and author Natasha Hemopo at the 2025 College and Sections Forum.
- Released Volume 25 of the CENNZ Journal, with a focus on elder health; it featured contributions from nurses across the motu showcasing their endeavours and projects aimed at enhancing emergency nursing practices nationwide.
- Recommenced a working group for the Knowledge and Skills framework; aim to finish work started in 2023 and to acknowledge Te Tiriti o Waitangi principles "Aspects of Responsive to Māori"; provided a toolkit to enable culturally responsive care in practice within ED; includes Māori knowledge frameworks to reflect matauranga values.

- Delivered redeveloped triage course over 10 months, aligning with current challenges encountered in EDs. These enhancements notably incorporate emphasis on kawa whakaruruhau (cultural safety), nursing interventions from the waiting room, and the critical significance of early sepsis detection; course was well received by students and instructors.
- Ongoing discussion and awareness of improving equity within ED; met with Honorable Dr Shane Reti, Minister of Health in May 2024, to discuss equity issues within ED; including advocating for increasing Māori nurses support and sharing CENNZ Māori Health Strategy with the ministerial office.
- Published Pae Ora survey and feedback articles in CENNZ Journal. Pae Ora education and awareness was also discussed with Nurse Educators and Triage Instructors.
- Captured ethnicity data of CENNZ members on registration since 2023 to capture increasingly culturally diverse workforce; has shown an increase in Māori membership from 8 percent to 10 percent.
- Sustained commitment to fostering networking groups tailored for Nurse Educators, Nurse Managers, and Advanced Nurses, facilitating collaborative endeavours and ongoing professional advancement nationwide; CENNZ remains dedicated to supporting these initiatives through the provision of online and face-to-face meetings and networking opportunities.
- Continued to supply grants and scholarships to members to help further education opportunities; increased support for Māori Nurses by promoting the grants available and providing easier access to these grants.

#### Training

- Expanded the number of triage courses across the country to meet the escalating demand for triage training, ensuring staff are equipped with the necessary skills for effective triage responsibilities in New Zealand.
- This course brings in committee income which in turn provides support to ED Nurses across Aotearoa by providing grants and awards.
- Advocated in our position statement of education our support towards staff completing triage, trauma, advanced life support courses to specialise in emergency care.



Awarded \$6400 via seven scholarships to support ongoing study and attendance at conferences which can be crucial in removing barriers to professional development.

#### Actualising Te Tiriti o Waitangi

- Redeveloped the triage course and Knowledge and Skills Framework to integrate Pae Ora and te Tiriti principles in all aspects.
- Continuing to develop journal articles and webinars to educate members about the ongoing work on principles aimed at actualising te Tiriti.
- Continuing to work with ACEM on Mannaki Mana and Te Rūnanga national committee.
- Expanding educational opportunities for Māori nurses by enhancing access to grants for further studies.

#### Building political and member power

- CENNZ committee members met with the Honorable Dr Shane Reti, Minister of Health, in May 2024 to address concerns in emergency departments nationwide; offered recommendations for improvement from the frontline perspective of those actively working in the field.
- Currently have representation on the NZNO bargaining team, Te Rūnagea and Manaaki Mana, ACEM.

### Organising on-the-ground widespread action

- Increased use of social media to encourage grants and awards the CENNZ offers to members.
- Representatives visiting to wider areas of the regions to promote and support members.
- Organisation underway for the next CENNZ conference; to be held in Auckland 18–20 March 2026.

#### Winning public support

• Increased presence in the media with statements regarding the heath response in New Zealand. CENNZ has made an effort to have a media voice about pressing issues that affect our Emergency Nurses daily.

#### Challenges

- Growing CENNZ workforce has become increasingly difficult due to budget cuts, hiring freezes, and having to have available FTE for new graduates.
- Existing ED staff feeling utilisation fatigue due to the ongoing onboarding, increase in student placements, and increase in churn; staff are leaving skilled areas to work in more attractive areas overseas or in higher senior roles.
- Unmet need in the community, hospitals at capacity, and long waits to be seen by speciality services has meant access block and overcrowding within EDs across the motu.
- Trendcare usage has increased, however not in all EDs due to IT infrastructure and support from management; therefore delaying safe staffing.
- Increased aggression and violence in our communities, has resulted in an increase in aggression and violence towards staff, patients and an increase in trauma related injuries; trained security required in all EDs; access to security requirements is inequitable across the motu.

#### **Gastroenterology Nurses College**

Chair: Karen Kempin

Gastroenterology Nurses College (GNC) continues to grow with almost 500 members and three strong subspecialty groups for hepatology nurses, inflammatory bowel disease nurses and nurse endoscopists. Two networks are also being established for enteral nutrition and bowel screening nurses. GNC offers support with funding and expertise to all nurses in the gastroenterology specialty through the education fund, and establishing knowledge and skills frameworks within the College's specialities. GNS works closely with the New Zealand Society of Gastroenterology, sharing an annual conference and having a position on their committee to bring the thoughts and concerns of nurses to the medical group. Highlights include:

#### Workforce

- Continued to nurture and support GNC specialist clinical nurses and nurse practitioners to encourage endoscopy nurses to think about senior roles and attract more nurses into the field of gastroenterology.
- Launched knowledge and skills framework in late 2024 to help guide nurses caring for patients with acute and chronic liver disease into a career path and role expansion.

#### Education

- Co-chaired a high-quality annual conference in partnership with GNC doctor specialists.
- IBD, hepatology and nurse endoscopist sub groups also offer study days, funded in part by the college to make the cost to the individual nurse as small as possible.
- Offered online self-directed learning packages and endoscopic skills assessment guidance documents (DOPS) to ensure nurses within the specialty can be assessed in their knowledge and skills in specific endoscopic procedures.



Secured position on International Federation of Perioperative Nurses (IFPN) working party on the international position statement of the Role of the Perioperative Nurse. Work to commence late 2024.

#### Health and safety

- GNC is part of a broader group with Australia that focuses on infection prevention and control to prevent harm to colleagues, patients, and the environment.
- GNC has been part of the update of the GENCA/ GESA document Infection Prevention and Control in Endoscopy (2025), with the latest edition just launched in Adelaide.

The college committee looks forward to the remainder of 2025 with meetings planned for IBD and hepatology nurses. GNC annual conference will be hosted Palmerston North in November 2025.

#### **College of Gerontology Nursing**

Chair: Bridget Richards

#### Te Tino Rangatiratanga

- Building effective relationships with colleagues in NZNO, especially with the Industrial team and being actively involved in the Age Safe campaign, providing professional support and advice.
- Launched refreshed Knowledge and Skills framework at Conference in May utilising a Pae Ora approach.

#### **Building member power**

- Newsletter distributed to members three times a year.
- Refreshed social media platforms are actively updated.
- Carried out members survey which provided good feedback to the committee and will inform CGN work over the next year; sixteen respondents indicated they would be able to support the committee with submissions or other areas of work; active communication with these members on several occasions.
- Four members joined a face-to-face committee meeting with a view to potentially joining the committee at the BGM, growing depth.

#### Political

- Written submissions over the past year include:
  - Aged care sector's current and future capacity to provide support services for people experiencing neurological cognitive disorders.
  - 2. Review of End of Life Care Act.
  - Future of Aged Care Service and Funding Models

     Engagement Survey.
  - 4. Therapeutic Products Act Repeal Bill.
  - 5. Targeted consultation on Cremation Regulations.
  - 6. Second Covid Enquiry.

99

Nursing needs to make an impact. Nursing needs to make a mark so employers and manager's circle back to the nurse and nurses making the right decisions and the right choices that impact on healthcare and patient outcomes.

- 7. Review of HDC Act.
- 8. Law Commission Review of Adult Decision Making Capacity Law.
- Oral presentation well received by the Health Select Committee in September on the aged care sector's capacity to provide support for people with neurological cognitive disorders.

### Workforce, health and safety, immigration

- Encouraged members to be involved in the Age Safe campaign by being interviewed or completing the Age Safe survey.
- Aggression and violence against nursing staff continues to be an issue; the hiding of this issue is something that the College actively discourages; without more light being shone on this, it will not improve for staff, residents/kaumātua or family/whānau.

#### Education

- Biennial conference in May at Waipuna Conference Centre, Auckland; titled *Surfing the waves of Ageing* with Professor Victoria Traynor as key note speaker; she is a founding member of the Gerontological Alliance of Nurses Australia and expert in older adults care especially in the field of dementia care.
- Provided three members with scholarship awards to enable them to attend conferences.

#### Registration

- Submissions made to Nursing Council regarding changes to RN scope of practice.
- Made a submission to the Government on the recent Putting Patients First: Modernising health workforce regulation paper.

#### Allies

- CGN has members across other organisations, including NPNZ, other colleges and sections, and plans to engage the membership more actively.
- Connected with the Gerontological Alliance for Nurses in Australia and plan to work more closely together, the opportunity to network with Victoria Traynor at conference is invaluable.
- NZACA and NZAG are potential partners to meet with over the next year.

#### Infection Prevention and Control Nurses College

Chair: Lisa Gilbert

IPCNC continues to support the infection prevention staff around the motu, and membership is nearing 1000 members.

- Held successful conference in Hamilton in August 2024 with the theme of Kaitiakitanga – IPC guardians for the future; an opportunity for members and non-members to learn and make connections with their colleges within New Zealand.
- Supported two Solomon Island IPC nurses to complete the fundamentals of IPC programme increasing the IPC knowledge in their hospitals; provided an insightful and challenging talk at the conference on their experience within IPC.
- Planning underway for 2026 Wellington Conference with everyone welcome.
- Providing an additional submission to the second Royal Commission of Inquiry on COVID in New Zealand and providing membership and input into the Health New Zealand Infection Services Network advisory group; it is vital for IPCNC to be part of the discussions around how infection services will be structured and how infection risks are managed as a country; advocating for a wider healthcare view of infection services and how all parts of the system work together for the health and safety of everyone in a health care facility.

#### Neonatal Nurses College Aotearoa

#### Chair: Merophy Brown

NNCA had stable committee membership.

#### **Building member power**

- Represent 640 members across 22 NICUs/SCBUs in Aotearoa, a slight increase in membership from the previous year.
- Maintained core business with regular meetings:
  - Virtual hui approximately every six weeks for nurse managers, educators and nurse practitioners.
  - Promoting whanaungatanga, discussion on shared issues and facilitate consensus on national issues.
- Continued to work to operationalise transitional care, which will reduce unnecessary admissions to SCBU/NICU, reducing pressure on cots and unnecessary separation of mama and pēpi.
- Representation on National Newborn Clinical Network.

#### Workforce

- NICU's and SCBU's around the country continue to exceed resourced capacity in addition to increasing levels of acuity; NNCA contributes to related national work streams and is exploring ways to lobby in 2025 in the absence of data to support nurse's experiences.
- Organised and hosted a symposium in Queenstown in May, with a theme *Bouncing Back*. Registrations exceeded 100 delegates, and the programme included addresses from Dr Liza Edmonds, Neonatologist and Claire Achmad, Chief Children's Commissioner.

#### Education

- Awarded \$3500 scholarships to four NNCA members in the 2024/2025 financial year to contribute to their professional development and academic study in the field of neonatal nursing; scholarships contribute to reducing barriers to professional development for nurses.
- Funded places for 20 neonatal nurses to undertake FINE level 1 training, with an additional five places being gifted by the training provider, at a total cost of \$8800. Māori nurses and those working in rural areas are prioritised for funded places; FINE Level 1 programme is an educational pathway in familycentred neurodevelopmental care; FINE Level 1

focuses on raising awareness of the theory and evidence that supports developmentally supportive care; NNCA has an ongoing plan to continue to fund more FINE training in future years.

- Review of the Knowledge and Skills Framework was delayed by the changes to the Nursing Council's Standards of Competence; finalisation will occur shortly.
- Collaborated with Fisher and Paykel to restructure the Neonatal Nurse of the Year Award; it has changed to the Fisher and Paykel Neonatal Nursing Achievement Awards with categories of Quality and Innovation, Equity in Action and Emerging Leader, each award attracting \$1000 toward professional development; intention of this change is to make the awards more accessible to younger practitioners and reflect our commitment to support equity in care.
- Continued participation in Australian New Zealand Neonatal network (ANZNN).

#### **Effective organisation**

- Annual Plan incorporates a Maranga Mai! focus, particularly in the areas of meeting processes, promoting equitable outcomes in neonatal health and nursing education.
- Continued to establish relationships with Australian College of Neonatal Nurses (ACNN) and the Little Miracles Trust (formerly the Neonatal Network) with aim of having a MOU with these key organisations in the future.
- Continued to be financially healthy, enabling NNCA to continue to support initiatives to improve Neonatal Nursing and ultimately outcomes for vulnerable pepi and their whānau in Aotearoa New Zealand.
- Bi-annual newsletter is currently on hold as ways are sought to reduce the time burden and explore online platforms to reach members.

#### **Perioperative Nurses College** Chair: Emma Ladley

Perioperative Nurses College (PNC) saw significant growth in terms of education and national membership, positively impacting their collective ability to advocate for the profession.

However, PNC also faced a number of challenges, particularly with the introduction of new workforces in the perioperative space, and the ongoing issues surrounding delayed surgical wait times. Despite these challenges, their achievements over the past year reflect their resilience, commitment, and the strength of PNC's united voice. Highlights include:

#### Successes

- Successful review of the Scope of Practice and competencies for both Enrolled Nurses and Registered Nurses.
- Perioperative Nurses Conference 2024 in Wellington – Embracing the Future: Everything Counts; brought together leaders, educators, and practitioners to discuss the evolving landscape of perioperative nursing and the innovations shaping the future of the profession.
- Met with the former Health Minister to discuss key issues affecting the perioperative sector; discussions covered a wide range of topics, from workforce shortages to the need for increased investment in surgical services; PNC will continue to build on these conversations to advocate for the profession.
- Delivered regular education to our national membership through the My Health Hub platform; these provided valuable opportunities for members to update their knowledge, enhance their skills, and engage with other perioperative nurses on relevant topics.
- Made substantial progress updating Knowledge and Skills Framework, to ensure it reflects the current best practices in perioperative care; this serves as a vital resource for ongoing professional development and supports the continued growth of members.

#### **Membership growth**

- Membership grew steadily over the past year; stands at 401 current members with more to be expected for the next year, a significant increase from the previous year.
- Much of this growth can be attributed to the success of the October 2024 conference, where PNC showcased the value of perioperative nursing, highlighting the benefits of membership, and connecting with potential new members.
- Increase in membership further strengthens members' collective voices and ensures a continued powerful presence in shaping the future of perioperative nursing.

#### **Future aspirations**

• Preserving the Future of Perioperative Nursing; it is essential that PNC continue to advocate for the future of perioperative nurses, ensuring that these roles are not overshadowed by unregulated workforces.

- Planning underway for Conference 2026 in Auckland; the opportunity to gather as a profession, share knowledge, and discuss the future of perioperative nursing; theme and programme being developed.
- Continue to collaborate with the Health Minister; nurture the relationship to ensure that the needs and concerns of perioperative nurses are heard at the highest levels of government.
- Actively engage with undergraduate education providers to ensure that the next generation of nurses is prepared for the challenges of the perioperative environment; with increased exposure to perioperative nursing early in their education, students will be inspired to consider this specialty providing them with the necessary skills to excel in the sector.

This year marked significant achievements in education, membership growth, and advocacy, despite the challenges the profession faced. PNC continued to move forward with a united commitment to delivering safe, high-quality care to patients. PNC remains optimistic about the continued growth and success of perioperative nursing in New Zealand, and will continue to evolve, adapt, and ensure that perioperative nurses remain at the forefront of healthcare.

#### College of Primary Health Care Nurses

Chair: Tracey Morgan

"Kaua e mate wheke mate ururoa". Strive for your goals by being strong and resilient like a hammerhead shark... do not give up no matter how hard the struggle is.

Whakatauki demonstrates the continual struggle endured by all those working in the Primary Health Care Sector. Primary and community health care in Aotearoa is in 'crisis' with chronic staff shortages. CPHCN will continue to advocate and be a lead voice for primary health to ensure nurses voices are heard.

#### **National Executive Committee**

- National Executive Committee represents the college members on many external working groups and at times members are called upon to represent as well.
- Committee acts in the best interest of NZCPHCN and provide reports as identified by NZCPHCN Chair of participation and progress; provide overview of external groups represented.

- Executive Committee the Sub Committees; Professional Practice Committee (PPC) and Logic Committee continue to work hard to ensure members voices are being heard and needs addressed.
- Continued to hold monthly meetings online and have a face-to-face meeting twice a year.

#### **Professional Practice Committee (PPC)**

- Continued to work to get the pay equity gap for nurses working in all sectors of primary health; will continue to apply pressure on the Government.
- Updated information on website to ensure brochures for each sector in primary health is current.
- Key focus is to ensure the success of the symposium scheduled for October.

#### Logic committee

- Responsible for publicatons, contributions and relevant correspondence within Primary Health.
- Managed and and led production of College journal.
- Is the conduit to National Executive Committee.
- Had an editorial piece in the NZ Doctor Magazine which ensures the nursing voice and stories continue to be heard and read in this magazine; quarterly editorials are provided for the members to keep updated.

#### Pay parity

- Governement must pay parity so all nurses with the same skills, qualifications and experiences are paid the same.
- Pay parity with Te Whatu Ora will help stop nurses leaving Primary Care and returning to the hospital or leaving to go overseas.
- Pay parity for nursing staff in Primary Health will allow better access for New Zealanders in their own community and lower the demand on crowded emergency departments.
- Communities deserve accessible care and nurses deserve fair pay.

#### Primary Health Care Meca bargaining

• Bargaining initiated for renewal of PHC Meca on 17 May 2024; notice covered 477 employers and covers around 3475 NZNO members; health system is in crisis and not everyone receives fair and equal care; demanding pay parity where all nurses with the same skills, qualifications and experience are paid the same.

- Paying incentives to GP clinics to hire nurses will not fix the systemic funding issues causing chronic staff shortages in Primary and Community Health Care; unless Primary Nurses are paid partly with their hosptial counterparts nothing will improved.
- Voting closed Friday 21 March 2025 and the offer was accepted for Primary Health from the members.
  - full reimbursement of APC
  - long service leave 10 years instead of 15 years
  - lump sum payment 3% back pay to July 2024 for qualifying staff
  - a 5% increase from ratification and signing
  - 3% (or the full captitation funding increase if less than 3 percent) from 1 July 2025.

#### **General Practitioners Leadership Forum**

- GPLF is a collective of individual sector organisations working together for common good and is aligned to the GPLF purpose; committee comprises elected leaders and senior managers of national membership organisations representing General Practice; there is no legal constitution or identity.
- Each GPLF member organisation retains its own identity which NZNO is a representative on this Committee; the relationship goes from strength to strength each year; representation ensures the nursing voice will be heard.

#### **College of Respiratory Nurses**

Chair: Jacqueline Westenra

College of Respiratory Nurses continues to promote and support excellence in Respiratory Nursing in Aotearoa New Zealand. CRN has a particular focus on Maranga Mai! and is committed to embedding Te Ao Māori in our policies and processes to positively influence actions.

Membership to the College enables access to opportunities and resources which support nurses' professional development in respiratory nursing. These include grants for further education,CRN bi-ennial symposium and the 'Airways' newsletter released three times a year. The newsletter provides updates on respiratory health/nursing and college activities. 'Airways' is a platform for members to share knowledge and experiences amongst colleagues. Highlights include:

- Held successful bi-annual symposium on 30 August 2024 in Auckland; the theme *We are what we breathe how environment impacts lung health* was informative and inspiring thanks to our expert speakers.
- Continued to advocate for better health outcomes for all New Zealander's, especially those living with respiratory disease; advocacy promotes health equity and supports Te Tino Rangatiratanga and the actualisation of Te Tiriti o Waitangi.
- Advocacy is through submissions on a range of important issues to government ministries and agencies; submissions included College support not to repeal insulation (housing) requirements, ban of manufacturing engineered stone and access to respiratory medications such as the triple therapy inhaler for patients with COPD.

CRN continues to work alongside NZNO to improve the visibility of College's and Sections to grow membership and promote nursing excellence throughout Aotearoa New Zealand.

#### College of Stomal Therapy Nursing

Chair: Maree Warne

Highlights include:

#### Political

- Met with Pharmac Engagement Lead of the Device Programme, focused on strengthening CST's relationship with Pharmac to enhance the influence of Stomal Therapy Nurses on various issues; including procurement processes, consumable access, and supply chains essential for Ostomates of New Zealand.
- Pharmac assured the Committee they recognise the importance of engaging with Stomal Therapy Nurses on ostomy products and expressed an eagerness to keep the community informed and solicit expert input as their strategies develop.
- Pharmac also acknowledged the College of Stomal Therapy Nurses' experience in change management, emphasising the necessity of involving the committee in future processes.

#### Education

- Collaborated with Coloplast for the Patricia Blakely Scholarship to assist with Stomal Therapy Education for nurses in New Zealand and Australia; the scholarships are to enable nurses working in ostomy care to undertake postgraduate education in stomal therapy management or a related area of practice. Committee member Fran Horan was on the adjudicating panel for 2024 and 2025.
- Offered the Bernadette Hart award for members to extend their skills and knowledge in the specialty of Stomal Therapy Nursing via study or conference.
- Chair participated in a course advisory and industry reference group meeting with the Australian College of Nursing for input on their Stomal Therapy Nursing Course.
- Ongoing talks with Curtin University regarding accessibility to the Stomal Therapy Nursing Course for New Zealand nurses.
- Published online journal *The Outlet* three times a year; journal is well received by members, with submissions from members and useful resources for the specialty as well as wider health care professionals who encounter patients with stomas; CSTN appreciates the support from advertisers to ensure the journal can be published.

#### Focus for 2025

- Planning 2026 conference in Christchurch, with the theme of resilience.
- Collaboration with colleagues in the Australian Association of Stomal Therapy Nurses to celebrate New Zealand's very first Stomal Therapy Week in June; the theme Ostomateship, recognises the connection between Ostomates and those that support them.
- Engaging with the Ministry of Health in reviewing and updating the National Service and Specification document that guides Stomal Therapy Services across New Zealand.
- Continue involvement with appropriate and meaningful consultation with Pharmac in regards to medical device management.
- Adding to Clinical Guideline document on common procedures and assessments within Stomal Therapy.

#### Women's Health College

Chair: Jill Lamb

Highlights include:

- Held a successful conference in Queenstown May 2024 with an increase in participation numbers, and significant growth of College membership.
- Attracted new members with social media and a competition for one free conference registration.
- Privileged to have Professor Bev Lawton (ONZM), New Zealander of the year attend conference in Queenstown.
- Committee members engaged with NZNO by attending College and Section and Orientation Days, with the opportunity to contribute to how NZNO can best support College and Section work and functions.
- Committee has also looked to engage more politically in the interest of nursing and health services for women/wāhine.
- Contributed to and made submissions on the recent consultation from the Minister of Health *Putting Patients First, Modernising Health Workforce Regulations* and submitted WHC support for the proposal to fund Cerazette.
- Conference 2025 in Auckland, offering a train the trainer, long-acting reversible contraception (LARC) training workshop; also a new initiative workshop giving nurses and midwives an interactive experience using new technologies and seeing live presentations of new equipment; opportunity to build new skills with hands on experience.
- Hysteroscopy training is moving forward with three trained and more training.
- Chair represented Aotearoa New Zealand in May 2025 in Zanzibar at the first congress for nurses/ midwives in hysteroscopy, presenting two posters and one paper; this was a significant networking opportunity.
- Thanks the current and past committee members who volunteer for this work to enhance their own and the patient's journey; there is opportunity to invite other nurses and midwives to consider joining, as members join and leave every four years.

## Sections

#### **Enrolled Nurse Section**

Chair: Michelle Prattley

Enrolled Nurse Section (ENS) and most healthcare sectors are facing the same challenges as last year. ENS has continued to meet with stakeholders at face-to-face meetings, these included NZNO, NCNZ and Ministry of Health.

#### Strategic direction/Maranga Mai!

- Win the political and resourcing commitments needed to address the nursing and midwifery shortage crisis permanently across the whole health sector.
- Build membership in all regions.
- Build relationships with all health stakeholders.
- Get Enrolled Nurse graduates ENSIPP positions in all health settings.
- Strengthen Enrolled Nurse's future in the health workforce.
- Provide a supporting role for new members to achieve good communication.
- Have two Enrolled Nurses on the bargaining team to ensure EN voices are heard.
- Set up Māori/Pacific education grant.
- Regional study days and 47th Annual Enrolled Nurse conference (Celebrating 60 years of Enrolled Nurses).
- Meet with stakeholders to hold them accountable for the future of Enrolled Nurses.

Highlights include:

- Implementation of the new Scope of Practice January 2025.
- New career/employment opportunities the new scope will bring.
- Celebrated 60 years of Enrolled Nurses in NZ 1965-2025.
- Regional and National study days and conference.
- Number of Enrolled Nurse students nationwide still growing.
- Supporting three Enrolled Nurses with funding to the 2025 conference.

#### **Future aspirations**

- Educate stakeholders (internally and externally) on the role of Enrolled Nursing.
- Education on the new scope and standards of competence.
- Enrolled Nurse Section is the lead voice on the profession of Enrolled Nursing in Aotearoa.
- Ensure the employment of Enrolled Nurses despite the challenges in the current environment.
- Conference 2025 Forging forward for enrolled nurses 20–22 May; celebrating 60 years of Enrolled Nurses.
- Recognition of skills to be standardised throughout the health system nationally.
- Study and progression of Enrolled Nurses.
- District variation of Enrolled Nursing practice due to history of bias and restrictive policies to be standardised throughout the health system nationally.
- Win the political and resourcing commitments needed to address the nursing and midwifery shortage crisis permanently across the whole health sector.

#### **Mental Health Nurses Section** Chair: Helen Garrick

chair. Helen Garrick

Highlights and achievements include:

- Strengthening committee with the election of a new member.
- Provided written submissions on the Suicide Prevention Strategy, Revision of Mental Health Act, Putting Patients First, NCNZ Standards of Competence.
- Oral submission on Mental Health Act spoke about advanced directives, options of health professionals, children not to be secluded, unsafe to staff.
- Member survey sent which highlighted safety concerns around withdrawal of police.
- Chair of committee spoke to media around withdrawal of police.
- Collaboration with other MH groups such as MH Foundation on same issue.
- Contact with Minister of Mental Health.

#### Ongoing

- Committee continues to be concerned about the lack of priority service provision for people with acute mental health issues and high and complex needs; the current and previous governments have placed their funding emphasis on primary prevention and mild mental distress; this resulted in over occupancy of acute mental health beds and diminished access to crisis and community mental health services.
- Poor access to service provision is exacerbated by severe mental health nurse and psychiatrist shortages and addressing the issues raised by the phased withdrawal of NZ Police from mental health calls.
- MHA Workforce the focus is on growing an unregulated workforce and peer support and now a new professional group "psychology assistants".
- No improvements for protection of nurses from workplace violence; a continued chasm between the reality of acute mental health nursing practice and the ideology of zero seclusion initiatives, which do not consider overcrowded acute environments, shortages in staffing and the impact of substance intoxication on health consumers.

#### Nurse Leadership Section/ Tapuhi Mana Whakatipu

Chair: Sarah Linehan

Highlights include:

- Cancelled Leadership Conference 2024 in Auckland

   a lack of registrations due to employer restrictions
   on study leave and financial support.
- Held AGM in November.
- Resignation of five committee members including Chair, Secretary, Treasurer and membership coordinator in November; new committee stood up that same month focused on the mandatory aspects required i.e. grant applications, annual reports, financial responsibility.
- Continued coaching and mentoring workshops.
- Leadership blogs/posts/information set for release to Section members June 2025.
- Reviewed survey results November 2024 and new survey prepared for final quarter.
- Submission on Principals of the Treaty of Waitangi Bill.
- Chair attended College and Section days.
- Committee member attended Section induction days.
- First face-to-face meeting in Wellington with new committee.

- Difficulty accessing Section email address caused delays in acknowledging grant applications – working through back log.
- Welcome letter to all new Section members acknowledged the delay in communications due to inability to access membership details.

#### Nursing Research Section Te Wāhanga Rangahau Tapuhi Acting Chair: Lorraine Ritchie

Nursing Research Section (NRS) intends to raise the profile of research in all areas of nursing by inspiring and encouraging nurses in research. NRS provides a platform to bring together nurses who are future focused and interested in sharing knowledge and ideas to enhance evidence-based nursing practice.

Highlights include:

- Reached full committee membership in 2024.
- Held a successful research forum/hui at Ko Awatea, Middlemore Hospital, Auckland in October, 2024.
   Research from existing and emerging researchers from Aotearoa was presented. About 60 people were in attendance.
- Published abstracts from the research forum in the *Kaitiaki Nursing Research Journal*.
- Published three issues of the NRS Newsletter.
- Created LinkedIn and Facebook profiles to increase social media reach.
- Updated NRS Rules, taking into account the NRS commitment to Te Tiriti o Waitangi.

#### **Pacific Nursing Section**

Chair: Eseta Finau

Pacific Nurses Section (PNS) continued to work with the PNS Board and other agencies to ensure that a number of relevant issues were addressed as a priority. These issues include Pacific Nursing workforce, Pacific cultural safety, connections to Pacific NNAs, pathways to nursing and section membership growth.

#### Growing the Pacific workforce

The notion of growing and nurturing Pacific nurses has been embedded in activities to attract, recruit, nurture, develop and retain a home grown Pacific nursing workforce.

PNS is mindful that Pacific countries face their own workforce issues and is cognisant that migration of Pacific nurses cannot be relied upon to boost New Zealand's workforce and only engage with migrant Pacific nurses once they are in New Zealand.

- Maintained a position that aligns with ethical recruitments and not promoting programmes that directly recruit Pacific nurses from their home countries.
- Pacific nursing workforce gains have been slow however PNS is committed to growing the workforce.
- Actively engaged and worked with a variety of stakeholders to progress Pacific workforce issues, cultural safety programmes and membership growth.
- Stakeholders include, the Nursing Council of NZ, NZNO, Pacific Perspectives, Le Va, and tertiary institutions that have nursing programmes.
- Actively involved in the refreshed registration bridging programme funded by Te Whatu Ora and run by Whitireia; congratulations to all the Pacific trained nurses who successfully completed the 18-month programme and passed the state finals.

PNS will continue to work towards ensuring that all activities are aligned with the needs of the Pacific community and remain focused on supporting better health outcomes for Pacific people and nursing workforce. **99** 

Actively involved in the refreshed registration bridging programme funded by Te Whatu Ora and run by Whitireia; congratulations to all the Pacific trained nurses who successfully completed the 18-month programme and passed the state finals. Creed health media valued marped

Time to head health cuts

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# Governance

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## Governance

#### **Board Members**

- Anne Daniels, President
- Kerri Nuku, Kaiwhakahaere
- Nano Tunnicliff, Vice President
- Tracy Black, Tumu Whakarae
- Simon Auty
- Grant Brookes
- Saju Cherian
- Margaret Hand
- Lucy McLaren
- Tracey Morgan
- Anamaria Watene

#### **Board Committees**

The NZNO Constitution requires the establishment of the Membership Committee and te Poari o Te Rūnanga o Aotearoa. The Constitution gives the Board the power to establish other committees of the Board for a particular purpose. The Board has established an Audit and Risk Committee, a Governance Leaders Employment Committee and a Chief Executive Employment Committee.

#### Audit and Risk Committee

- Lucy McLaren (Chair)
- Anne Daniels, President (ex officio)
- Kerri Nuku, Kaiwhakahaere (ex officio)
- Nano Tunnicliff, Vice President
- Tracy Black, Tumu Whakaere
- Grant Brookes
- Margret Hand

#### **Governance Committee**

- Nano Tunnicliff (Chair)
- Kerri Nuku, Kaiwhakahaere (ex officio)
- Anne Daniels, President (ex officio)
- Rangi Blackmore (co-opted Te Rūnanga representative, from October 2024)
- Sandra Corbett (co-opted Te Rūnanga representative, from October 2024)
- Saju Cherian
- Lucy McLaren
- Tracey Morgan

#### Chief Executive Employment Committee

- Kerri Nuku, Kaiwhakahaere
- Anne Daniels, President
- Simon Auty (Chair)
- Anamaria Watene

#### **Board Committee Functions**

#### Te Poari o Te Rūnanga o Aotearoa (Te Poari)

The functions of te Poari are to support the Board by working in partnership to achieve the NZNO strategic aims in giving effect to Te Tiriti o Waitangi and by working with the Board to give full recognition of the Memorandum of Understanding of July 2000 between Te Rūnanga o Aotearoa and the NZNO. The aim of te Poari's advice must be to ensure that NZNO processes reflect and uphold Tikanga Māori, and articulate Te Rūnanga regional issues.

#### **Membership Committee**

The functions of the Membership Committee are to support the Board by working in partnership to achieve the NZNO strategic aims in giving effect to Te Tiriti o Waitangi. The aim of the Membership Committee's advice is to ensure that the needs of the membership are canvassed and known, and articulated to the Board.

#### Audit and Risk Committee

The Audit and Risk Committee has been established for the purpose of providing advice and recommendations assisting the Board in discharging its responsibilities with respect to overseeing all aspects of financial and non-financial reporting, control and audit functions and organisational risk. The Board has delegated to the Audit and Risk Committee the function of providing advice and recommendation to the Board to assist in the proper auditing of its financial affairs, liaison with the external auditors, the annual accounts, financial scrutiny, insurance contracts, debt funding and risk management.

#### **Governance Committee**

The Governance Committee has been established for the purpose of providing advice and recommendations assisting the Board in discharging its employment responsibilities in respect of the President and Kaiwhakahaere. The Board has delegated to the Governance Committee the functions of providing advice and recommendations to assist the Board in making decisions on all employment issues relating to the President and Kaiwhakahaere and on general remuneration issues. The Convenor shall call a meeting of the committee if requested by the Board or at the request of one of the governance leaders.

#### Chief Executive Employment Committee

The Chief Executive Employment Committee has been established for the purpose of providing advice and recommendations assisting the Board in discharging its employment responsibilities in respect to the Chief Executive and on general remuneration issues. The Board has delegated to the Chief Executive Employment Committee the functions of providing advice and recommendations to assist the Board in making decisions on all employment issues relating to the Chief Executive and on general remuneration issues. The Convenor shall call a meeting of the Committee if requested by the Board or at the request of the Chief Executive.

#### **Being a good employer**

NZNO adheres to good employer requirements, and actively maintains and implements programmes and policies to promote equity, fairness and a safe and healthy working environment. NZNO has systems and processes to retain its status as an accredited Living Wage Employer.

#### Workforce profile

#### Investment in staff

Workforce profile Investment in staff NZNO believes in investing in employer professional development as part of our efforts to ensure that we have an effective organisation.

At NZNO we have approximately 133 employees and over the last financial year NZNO has invested \$76,342.62 in employee development which can be broken down as follows:

- Staff Professional Development Fund (PDF) \$38,110.42
- Staff personal development/training outside of PDF \$25,551.10
- Professional memberships \$12,681.10.

The return on investment in professional development is more effective and better trained employees, a more loyal workforce leading to less turnover and higher staff engagement.

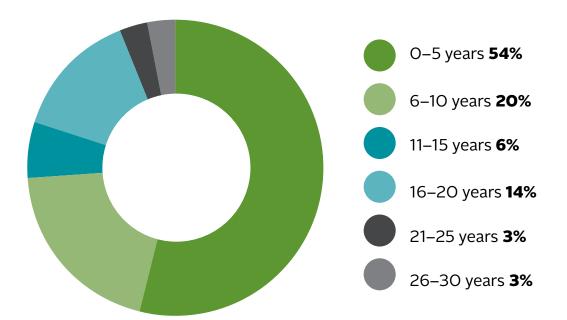
# **Our Staff**

#### Gender breakdown



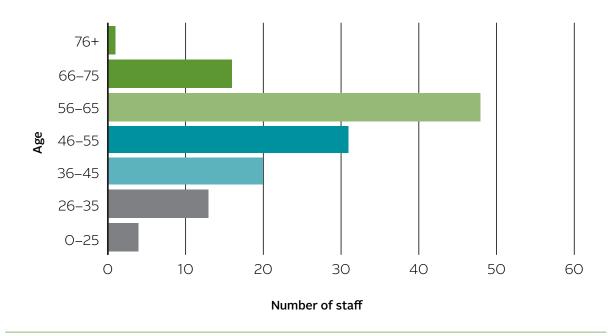
#### Service

NZNO enjoys a stable staff complement, with 46% of staff employed for longer than five years and 26% staff employed for longer than 10 years.



Governance

Age profile The age profile of all staff who have provided information (including permanent and casual staff):



#### **Remuneration ranges**

During the year, the number of employees who received remuneration and other benefits in their capacity as employees of NZNO, the value of which was or exceeded \$50,000 was as follows:

Remuneration Ranges	FY25	FY24
\$50,000 to \$59,999	3	4
\$60,000 to \$69,999	10	9
\$70,000 to \$79,999	5	11
\$80,000 to \$89,999	20	10
\$90,000 to \$99,999	11	11
\$100,000 to \$109,999	13	13
\$110,000 to \$119,999	22	28
\$120,000 to \$129,999	13	11
\$130,000 to \$139,999	4	18
\$140,000 to \$149,999	19	3
\$150,000 to \$159,999	-	-
\$160,000 to \$169,999	3	1
\$170,000 to \$179,999	1	1
\$180,000 to \$189,999	-	2
\$190,000 to \$199,999	2	-
\$200,000 to \$209,999	-	-
\$210,000 to \$219,999	-	-
\$220,000 to \$229,999	-	-
\$230,000 to \$239,999	-	-
\$240,000 to \$249,999	-	1
\$250,000 to \$259,999	1	1
Total	127	124

Note: Includes employees who left during the year who were paid more than \$50K.

# **NZNO Directory**

#### **Board Members**

- Anne Daniels
   President
- Kerri Nuku Kaiwhakahaere
- Nano Tunnicliff Vice President
- Tracy Black Tumu Whakarae
- Anamaria Watene
- Margaret Hand
- Simon Auty
- Grant Brookes
- Lucy McLaren
- Saju Cherian
- Tracey Morgan

#### **Registered office**

National Office Level 3, 57 Willis Street, Wellington 6011

#### **Postal Address** PO Box 2128, Wellington 6140

#### Auditor

**BDO Wellington Audit Ltd** 

#### **Bankers**

**ANZ Wellington** 

#### **Management team**

- Paul Goulter Chief Executive
- Andrew Casidy
   Director of Operations
- Mairi Lucas
   Director of Nursing and Professional Services
- John Crocker Director of Organising
- Tali Williams
   Director of Campaigns





## **Independent Auditor's Report**

To the Members of New Zealand Nurses Organisation

#### Report on the Audit of the General Purpose Financial Report

#### Opinion

We have audited the general purpose financial report of New Zealand Nurses Organisation ("the Parent") and its controlled entities (together, "the Group"), which comprises the consolidated and separate financial statements on pages 74 to 93, and the consolidated statement of service performance on pages 94 to 96. The complete set of consolidated and separate financial statements comprises the statements of financial position as at 31 March 2025, the statements of comprehensive revenue and expense, statements of changes in equity, statements of cash flows for the year then ended, and notes to the consolidated and separate financial statements, including a summary of significant accounting policies.

In our opinion the accompanying general purpose financial report presents fairly, in all material respects:

- The financial position of the Parent and the consolidated financial position of the Group as at 31 March 2025, and their financial performances, and their cash flows for the year then ended; and
- the consolidated statement of service performance for the year ended 31 March 2025, in that the service performance information is appropriate and meaningful and prepared in accordance with the Group's measurement bases or evaluation methods,

in accordance with Public Benefit Entity Standards Reduced Disclosure Regime ("PBE Standards RDR") issued by the New Zealand Accounting Standards Board.

#### **Basis for Opinion**

We conducted our audit of the consolidated financial statements in accordance with International Standards on Auditing (New Zealand) (ISAs (NZ)) and the audit of the consolidated statement of service performance in accordance with the ISAs (NZ) and New Zealand Auditing Standard 1 (NZ AS 1) (Revised) *The Audit of Service Performance Information (NZ).* Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the General Purpose Financial Report section of our report. We are independent of the Group in accordance with Professional and Ethical Standard 1 International *Code of Ethics for Assurance Practitioners (including International Independence Standards) (New Zealand)*  issued by the New Zealand Auditing and Assurance Standards Board, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other than in our capacity as auditor we have no relationship with, or interests in, the Parent or the Group or any of its controlled entities.

#### **Emphasis of Matter**

We draw attention to Note 25 to the consolidated and separate financial statements, which describes a prior period error identified in relation to the controlled entities not being consolidated in the previous year financial statements. Our opinion is not modified in respect of this matter.

#### **Other Matter**

The financial statements of the Parent for the year ended 31 March 2024 were audited by another auditor who expressed an unmodified opinion on those statements on 19 August 2024.

#### **Other Information**

The Board of Directors are responsible for the other information. The other information obtained at the date of this auditor's report is information contained in the general purpose financial report, but does not include the consolidated statement of service performance and the consolidated and separate financial statements and our auditor's report thereon.

Our opinion on the consolidated statement of service performance and consolidated and separate financial statements does not cover the other information and we do not express any form of audit opinion or assurance conclusion thereon.

In connection with our audit of the consolidated statement of service performance and consolidated and separate financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the consolidated statement of service performance and the consolidated and separate financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated.



If, based on the work we have performed on the other information obtained prior to the date of this auditor's report, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

#### **The Board of Directors' Responsibilities for the General Purpose Financial Report** The Board of Directors are responsible on behalf of the Parent and the Group for:

- a. the preparation and fair presentation of the consolidated and separate financial statements and consolidated statement of service performance in accordance PBE Standards RDR;
- b. the selection of elements/aspects of service performance, performance measures and/or descriptions and measurement bases or evaluation methods that present a statement of service performance that is appropriate and meaningful in accordance with PBE Standards RDR;
- c. the preparation and fair presentation of the statement of service performance in accordance with the Parent and the Group's measurement bases or evaluation methods, in accordance with PBE Standards RDR;
- d. the overall presentation, structure and content of the statement of service performance in accordance with PBE Standards RDR; and
- e. such internal control as the Board of Directors determine is necessary to enable the preparation of the consolidated financial statements and consolidated statement of service performance that are free from material misstatement, whether due to fraud or error.

In preparing the general purpose financial report the Board of Directors are responsible for assessing the Parent and the Group's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Board of Directors either intend to liquidate the Group or to cease operations, or have no realistic alternative but to do so.

# Auditor's Responsibilities for the Audit of the General Purpose Financial Report

Our objectives are to obtain reasonable assurance about whether the consolidated and separate financial statements as a whole, and the consolidated statement of service performance are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (NZ) and NZ AS 1 (Revised) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate or collectively, they could reasonably be expected to influence the decisions of users taken on the basis of this general purpose financial report.

A further description of the auditor's responsibilities for the audit of the general purpose financial report is located at the XRB's website at: www.xrb.govt. nz/standards/assurance-standards/auditorsresponsibilities/audit-report-13-1

This description forms part of our auditor's report.

#### Who We Report to

This report is made solely to the Members, as a body. Our audit work has been undertaken so that we might state those matters which we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Group and the Members, as a body, for our audit work, for this report or for the opinions we have formed.

800 Wellington Audit Cimited

#### **BDO WELLINGTON AUDIT LIMITED**

Wellington New Zealand 15 July 2025

# **The New Zealand Nurses Organisation Group Statements of Comprehensive Revenue and Expense** For the year ended 31 March 2025

	9	Parent (NZNO)		Group	
	Notes	2025	2024	2025	(restated) 2024
REVENUE					LOLT
Revenue from exchange transactions					
-		20 272 567	26 409 990	20 272 567	26 109 990
Member subscriptions		28,372,567	26,408,880	28,372,567	26,408,880
Bargaining fees		553,765	422,329	553,765	422,329
Magazine advertising & subscriptions		80,381	115,994	79,009	115,994
Sponsorship		283,841	186,890	308,841	213,890
Registrations		222,795	247,647	222,795	247,647
Interest received		603,345	329,010	700,953	419,173
Dividends received		107,075	95,308	107,075	95,308
Rent received		45,161	40,744	45,161	40,744
Colleges & Sections conferences		475,255	242,995	475,255	242,995
Other income		443,924	522,305	968,990	473,255
Total revenue from exchange transactions		31,188,109	28,612,102	31,834,411	28,680,215
Revenue from non-exchange transactions					
Donations & bequests	5	-	-	10,000	470
Total revenue from		-	-	10,000	470
non-exchange transactions					
Total Revenue		31,188,109	28,612,102	31,844,411	28,680,685
LESS: EXPENDITURE					
Affiliations & subscriptions		762,552	664,757	762,552	664,757
Colleges & Sections conferences		625,240	302,101	625,240	302,101
Communications		207,219	254,528	207,219	254,528
Depreciation & amortisation	14, 15	381,842	180,042	381,842	180,042
Donations & grants		151,567	130,306	257,027	275,926
Information technology		1,099,814	785,775	1,101,095	786,149
Legal		785,723	644,775	786,804	644,775
Members expenses		631,056	546,109	631,056	546,109
Other expenses	7	1,679,322	1,338,059	1,821,613	1,428,035
Premises rent & operating expenses		1,931,733	1,785,862	1,931,733	1,785,862
Personnel	17	16,303,686	14,998,707	16,303,686	14,998,707
Travel & motor vehicle expenses		2,399,701	2,163,877	2,412,183	2,169,552
Total expenditure		26,959,455	23,794,898	27,222,051	24,036,543
Surplus/(deficit) from operations before taxation		4,228,654	4,817,204	4,622,360	4,644,142
Income Tax Benefit / (Expense)	8	52,548	(2,287)	36,024	8,823
Surplus/(deficit) from operations after taxation		4,281,202	4,814,917	4,658,385	4,652,965
Other Comprehensive Revenue and Expense					
Gain/(Loss) on revaluation of investment portfolio		250,678	320,344	(9,106)	1,267,342
Gain/(Loss) on revaluation of shares in Fifty-Seven Willis Street Limited		(223,725)	(190,000)	(223,725)	(190,000)
				(000.00)	1077040
Total Other Comprehensive Revenue and Expense		26,953	130,344	(232,831)	1,077,342

These financial statements should be read in conjunction with the Notes to Financial Statements.



# **The New Zealand Nurses Organisation Group Statements of Financial Position** For the year ended 31 March 2025

		Parent (NZNO)		Group	
	Notes	2025	2024	2025	(restated)
ASSETS					2024
Current assets					
	0	2 407 05 4	2 077 2 4 4	2 7 2 0 0 0 7	4 014 96 4
Cash & cash equivalents	9	3,497,054	3,877,344	3,730,887	4,014,864
Term deposits Accounts receivable & prepayments	10 11	10,083,758	7,370,586 514,958	10,437,551	9,274,026 E16 9E7
Income tax receivable	8	1,830,112		1,786,231	516,857
Total current assets	0	334,436 <b>15,745,360</b>	170,954 <b>11,933,842</b>	334,436	170,954 <b>13,976,701</b>
Total current assets		15,745,500	11,955,042	16,289,105	13,970,701
Non-current assets					
Investments portfolio	12	9,368,451	9,163,423	17,898,160	16,127,888
Shares in Fifty-Seven Willis Street Limited	13	3,216,275	3,440,000	3,216,275	3,440,000
Property, plant & equipment	14	1,117,581	666,465	1,117,581	666,465
Intangible assets	15	243,846	20,129	243,846	20,129
Total non-current assets		13,946,153	13,290,017	22,475,862	20,254,481
TOTAL ASSETS		29,691,513	25,223,859	38,764,967	34,231,182
LIABILITIES					
Current liabilities					
Income in advance		249,883	500,822	249,883	500,822
Monies held in trust		921	4,834	921	4,834
Bequests		98,760	93,760	98,760	93,760
Accounts payable	16	941,471	641,382	949,456	700,635
Goods & Services Tax (GST)		111,916	252,054	111,916	252,054
Employee entitlements	17	1,453,480	1,395,060	1,453,480	1,395,060
Deferred Lease Incentive	22	27,159	-	27,159	-
Total current liabilities		2,883,589	2,887,912	2,891,574	2,947,166
Non-current liabilities					
Employee entitlements	17	364,715	383,057	364,715	383,057
Deferred Lease Incentive	22	182,165	-	182,165	-
Total non-current liabilities		546,880	383,057	546,880	383,057
TOTAL LIABILITIES		3,430,469	3,270,969	3,438,454	3,330,223
NET ASSETS		26,261,044	21,952,890	35,326,513	30,900,959
EQUITY					
Asset revaluation reserve		4,146,821	4,119,869	4,834,036	5,066,866
Colleges & Sections reserves	20	1,810,626	1,797,088	1,810,626	1,797,088
Accumulated Funds		20,303,597	16,035,933	28,681,852	24,037,004
Total Equity		26,261,044	21,952,890	35,326,513	30,900,959

These financial statements should be read in conjunction with the Notes to Financial Statements.



#### New Zealand Nurses Organisation (Parent) **Statement of Changes in Equity**

For the year ended 31 March 2025

	Notes	Asset revaluation reserve	Colleges & Sections reserves	Accumulated revenue and expense	Total
Opening Balance at 1 April 2023		3,989,525	1,936,503	11,081,600	17,007,628
Total comprehensive revenue and expense for the year		130,344		4,814,917	4,945,261
Transfer to / (from) Colleges & Sections reserves	20		(139,415)	139,415	
Closing Balance as at 31 March 2024		4,119,868	1,797,088	16,035,933	21,952,889
Opening Balance as at 1 April 2024		4,119,868	1,797,088	16,035,933	21,952,889
Total comprehensive revenue and expense for the year		26,953	-	4,281,202	4,308,155
Transfer to / (from) Colleges & Sections reserves	20	-	13,537	(13,537)	-
Closing Balance as at 31 March 2024		4,146,821	1,810,625	20,303,598	26,261,044

# **New Zealand Nurses Organisation Group Statement of Changes in Equity** For the year ended 31 March 2025

	Notes	Asset revaluation reserve	Colleges & Sections reserves	Accumulated revenue and expense	Total
Opening Balance at 1 April 2023 (previously reported)		3,989,525	1,936,503	11,081,600	17,007,628
Prior period error	25	-	-	8,163,023	8,163,023
Restated Balance as at 1 April 2023		3,989,525	1,936,503	19,244,623	25,170,651
Total comprehensive revenue and expense for the year as previously reported		130,344	-	4,814,917	4,945,261
Prior period error	25	946,998	-	(161,952)	785,047
Restated comprehensive revenue and expense for the year	21	1,077,342	-	4,652,965	5,730,307
Transfer to / (from) Colleges & Sections reserves		-	(139,415)	139,415	-
Restated Balance as at 31 March 2024	25	5,066,866	1,797,088	24,037,004	30,900,959
Restated Balance as at 1 April 2024	25	5,066,866	1,797,088	24,037,004	30,900,959
Total comprehensive revenue and expense for the year	21	(232,831)	-	4,658,385	4,425,554
Transfer to / (from) Colleges & Sections reserves		-	13,537	(13,537)	-
Closing Balance as at 31 March 2025		4,834,036	1,810,626	28,681,852	35,326,513

These financial statements should be read in conjunction with the Notes to Financial Statements.

76



## The New Zealand Nurses Organisation Incorporated Consolidated Statements of Cashflows

For the year ended 31 March 2025

	Parent (NZNO)		Group	
Notes	2025	2024	2025	(restated) 2024
Cash flows from operating activities				2024
Receipts				
Member subscriptions	32,284,790	30,352,991	32,284,790	30,352,991
Receipts from customers	3,897,987	2,025,847	3,896,409	2,024,847
Interest received	587,207	291,529	683,868	339,852
Dividends received	127,329	95,308	127,329	95,308
Rent received	45,161	40,744	45,161	40,744
Income tax received	68,914	-	68,914	-
Other receipts	87,362 37,098,750	32,806,419	122,362 37,228,833	27,470 <b>32,881,212</b>
	,,	, , ,	,,	,,
Payments				
Payments to employees	(16,057,565)	(14,917,926)	(16,057,566)	(14,917,926)
Payments to suppliers	(17,430,426)	(13,165,565)	(17,514,517)	(13,247,128)
Grants paid	(151,567)	(130,306)	(320,633)	(243,087)
Income tax paid	(200,102)	(104,328)	(200,102)	(104,328)
	(33,839,660)	(28,318,125)	(34,092,818)	(28,512,469)
Net cash from operating activities	3,259,090	4,488,294	3,136,015	4,368,743
Cash flows from investing activities				
Receipts Sales/maturities of investments portfolio	716,226	305,748	6,669,624	1,898,991
Term deposits matured	114,287	611,096		1,050,551
			1.530.000	1.031.096
	830,513	916,844	1,530,000 <b>8,199,624</b>	1,031,096 <b>2,930,087</b>
	830,513			
Payments		916,844	8,199,624	2,930,087
Purchase of property, plant and equipment	(779,047)	<b>916,844</b> (159,125)	<b>8,199,624</b> (779,047)	<b>2,930,087</b> (159,125)
Purchase of property, plant and equipment Purchase of investments portfolio	(779,047) (633,091)	<b>916,844</b> (159,125) (311,736)	<b>8,199,624</b> (779,047) (7,782,814)	<b>2,930,087</b> (159,125) (311,736)
Purchase of property, plant and equipment Purchase of investments portfolio Investment in term deposits	(779,047)	<b>916,844</b> (159,125)	<b>8,199,624</b> (779,047)	<b>2,930,087</b> (159,125)
Purchase of property, plant and equipment Purchase of investments portfolio	(779,047) (633,091) (2,811,321)	<b>916,844</b> (159,125) (311,736)	<b>8,199,624</b> (779,047) (7,782,814) (2,811,321)	<b>2,930,087</b> (159,125) (311,736)
Purchase of property, plant and equipment Purchase of investments portfolio Investment in term deposits	(779,047) (633,091) (2,811,321) (246,434)	<b>916,844</b> (159,125) (311,736) (6,692,166)	<b>8,199,624</b> (779,047) (7,782,814) (2,811,321) (246,434)	<b>2,930,087</b> (159,125) (311,736) (8,572,166) -
Purchase of property, plant and equipment Purchase of investments portfolio Investment in term deposits Purchase of intangibles	(779,047) (633,091) (2,811,321) (246,434) (4,469,893)	<b>916,844</b> (159,125) (311,736) (6,692,166) ( <b>7,163,027)</b>	8,199,624 (779,047) (7,782,814) (2,811,321) (246,434) (11,619,616)	<b>2,930,087</b> (159,125) (311,736) (8,572,166) - <b>(9,043,027)</b>
Purchase of property, plant and equipment Purchase of investments portfolio Investment in term deposits Purchase of intangibles	(779,047) (633,091) (2,811,321) (246,434) (4,469,893)	<b>916,844</b> (159,125) (311,736) (6,692,166) ( <b>7,163,027)</b>	8,199,624 (779,047) (7,782,814) (2,811,321) (246,434) (11,619,616)	<b>2,930,087</b> (159,125) (311,736) (8,572,166) - <b>(9,043,027)</b>
Purchase of property, plant and equipment Purchase of investments portfolio Investment in term deposits Purchase of intangibles Net cash from investing activities Net (decrease)/increase in cash	(779,047) (633,091) (2,811,321) (246,434) (4,469,893) (3,639,380)	916,844 (159,125) (311,736) (6,692,166) (7,163,027) (6,246,183)	8,199,624 (779,047) (7,782,814) (2,811,321) (246,434) (11,619,616) (3,419,992)	2,930,087 (159,125) (311,736) (8,572,166) - (9,043,027) (6,112,940)

These financial statements should be read in conjunction with the Notes to Financial Statements.

#### The New Zealand Nurses Organisation Incorporated **Notes to the Consolidated and Separate Financial Statements**

For the year ended 31 March 2025

#### 1. **REPORTING ENTITY**

The New Zealand Nurses Organisation Group is a public benefit entity for the purposes of financial reporting in accordance with the Financial Reporting Act (2013).

This general purpose financial report for the year ended 31 March 2025 comprises the separate financial statements for NZNO and the consolidated statement of service performance and consolidated financial statements for NZNO and its controlled entities, the Nursing Education and Research Foundation Trust Board (NERF) and the Nurses' Trust Management (NTM) (together, "the Group").

NZNO is a nursing union incorporated under the Incorporated Societies Act 1908.

NZNO represents the interest of its members including nurses, midwives, students, kaimahi hauora, health care workers and allied health professionals. The principal activities of NZNO are to provide professional support and representation to its members.

The national office of NZNO is based at Level 3, 57 Willis Street, Wellington. Regional offices are located in Whangarei, Auckland, Hamilton, Tauranga, Palmerston North, Wellington, Nelson, Christchurch and Dunedin.

These financial statements have been approved and were authorised for issue by the Board on 15 July 2025.

#### 2. STATEMENT OF COMPLIANCE

The financial statements have been prepared in accordance with Generally Accepted Accounting Practices in New Zealand ("NZ GAAP"). They comply with Public Benefit Entity Standards Reduced Disclosure Regime ("PBE Standards RDR") issued by the External Reporting Board for Not-For-Profit entities. For the purposes of complying with NZ GAAP, the Group is a public benefit not-for-profit entity and is eligible to apply PBE Standards RDR on the basis that it does not have public accountability, and it is not defined as large.

The Group has elected to report in accordance with Tier 2 Not-For-Profit PBE Accounting Standards and in doing so has taken advantage of all applicable Reduced Disclosure Regime ("RDR") disclosure concessions. The NZNO Group qualifies as a Tier 2 not-for-profit public benefit entity as operating expenditure exceeds \$5 million but remains below \$33 million.

#### **Basis of preparation**

These financial statements have been prepared on a going concern basis.

#### SUMMARY OF ACCOUNTING POLICIES 3.

The significant accounting policies used in the preparation of these financial statements as set out below have been applied consistently to both years presented and apply to both the separate and Group financial statements.

#### **Basis of measurement** 3.1

These financial statements have been prepared on the basis of historical cost with the exception of Fifty-Seven Willis Street Limited shares and investments that are recognised at fair value.

#### 3.2 Functional and presentational currency

The financial statements are presented in New Zealand dollars (\$), which is the functional currency. All financial information presented in New Zealand dollars has been rounded to the nearest dollar.

#### 3.3 Changes to accounting policies

NZNO, NERF and NTM have consolidated as the Group from this financial year. The comparatives have been re-stated to reflect this consolidation. Refer to note 25 for the impact of the prior period error.

There have been no new or amended standards adopted.

#### 3.4 Basis of consolidation

#### **Controlled entities**

Controlled entities are entities controlled by the Group. The Group controls an entity if all three of the following elements are present: power over the investee, exposure to variable returns from the investee, and the ability of the investor to use its power to affect those variable returns. Control is reassessed whenever facts and circumstances indicate that there may be a change in any of these elements of control. The financial statements of the Group's controlled entities are included in the consolidated financial statements from the date that control commences until the date that control ceases.

Subsequent changes in a controlled entity that do not result in a loss of control are accounted for as transactions with owners of the controlling entity in their capacity as owners, within net assets/equity.

The financial statements of the controlled entities are prepared for the same reporting period as the controlling entity, using consistent accounting policies.



#### Loss of control of a controlled entity

On the loss of control, the Group derecognises the assets and liabilities of the controlled entity, any non-controlling interest, and the other components of net assets/equity related to the controlled entity. Any surplus or deficit arising on the loss of control is recognized in surplus or deficit.

If the Group retains any interest in the previously controlled entity, then such interest is measured at fair value at the date that control is lost. Subsequently, the retained interest is either accounted for as an equityaccounted associated or a financial asset at fair value through other comprehensive revenue and expense depending on the level of influence retained.

#### Transactions eliminated on consolidation

Intra-group balances and transactions, and any unrealised income and expenses arising from intragroup transactions, are eliminated in preparing the consolidated financial statements.

Unrealised gains arising from transactions with equity accounted associates and jointly-controlled-entities are eliminated against the investment to the extent of the Group's interest in the investee.

Unrealised losses are eliminated in the same way as unrealised gains, but only to the extent that there is no evidence of impairment.

#### NZNO (Parent) investment in NERF and NTM

Investment in NERF and NTM is measured at cost less any impairment charges, where there is no quoted market price and where value cannot be reliably measured. The cost of each of these investments is \$nil.

#### 3.5 Financial instruments

Financial assets and financial liabilities are recognised in NZNO's statement of financial position when NZNO becomes a party to the contractual provisions of the instrument.

Financial assets and financial liabilities are initially measured at fair value, except for trade receivables that do not have a significant financing component which are measured at transaction price. Transaction costs that are directly attributable to the acquisition or issue of financial assets and financial liabilities (other than financial assets and financial liabilities at fair value through surplus or deficit (FVTSD) are added to or deducted from the fair value of the financial assets or financial liabilities, as appropriate, on initial recognition. Transaction costs directly attributable to the acquisition of financial assets or financial liabilities at fair value through surplus or deficit are recognised immediately in surplus or deficit. After initial recognition, cash and cash equivalents, term deposits and accounts receivable are financial assets measured at amortised costs. NZNO derecognises a financial asset only when the contractual rights to the cash flows from the asset expire, or when it transfers the financial asset and substantially all the risks and rewards of ownership of the asset to another entity.

On initial recognition, NZNO may make an irrevocable election (on an instrument-by-instrument basis) to designate investments in equity instruments as at fair value through other comprehensive revenue and expense (FVTOCRE). Designation at FVTOCRE is not permitted if the equity investment is held for trading or if it is contingent consideration recognised by an acquirer in a business combination. Investments in equity instruments at FVTOCRE are initially measured at fair value plus transaction costs. Subsequently, they are measured at fair value with gains and losses arising from changes in fair value recognised in other comprehensive revenue and expense and accumulated in the revaluation reserve. The cumulative gain or loss is not reclassified to surplus or deficit on disposal of the equity investments, instead, it is transferred to retained earnings.

A financial asset is held for trading if:

- it has been acquired principally for the purpose of selling it in the near term; or
- on initial recognition it is part of a portfolio of identified financial instruments that NZNO manages together and has evidence of a recent actual pattern of short-term profit-taking; or
- it is derivative (except for a derivative that is a financial guarantee contract or a designated and effective hedging instrument).

Financial liabilities that are not (i) contingent consideration of an acquirer in a business combination, (ii) held-for-trading, or (iii) designated as at fair value through surplus or deficit (FVTSD), are measured subsequently at amortised cost using the effective interest method. Financial liabilities measured at amortised costs include accounts and loan payable. NZNO derecognises financial liabilities when, and only when, NZNO's obligations are discharged, cancelled, or have expired. The difference between the carrying amount of the financial liability derecognised and the consideration paid and payable is recognised in surplus or deficit.



#### 3.6 Impairment of non-financial assets

The carrying amounts of NZNO's assets are reviewed at the balance date to determine whether there is any indication of impairment. If any indication exists, the asset's recoverable amount is estimated.

If the estimated recoverable amount of an asset is less than its carrying amount, the asset is written down to its estimated recoverable amount and an impairment loss is recognised in the Statement of Comprehensive Revenue and Expense.

The estimated recoverable amount of assets is the greater of their fair value less costs to sell and value in use. Value in use is determined by estimating future cash flows from the use and ultimate disposal of the asset and discounting these to their present value using pre-tax discount rate that reflects current market rates and the risks specific to the asset. For an asset that does not generate largely independent cash inflows, the recoverable amount is determined for the cash generating unit to which the asset belongs.

#### 3.7 Income tax

The income tax expense relates to NZNO and includes both current year's provision and the income tax effect of:

- Taxable temporary differences, except those arising from the initial recognition of assets that are not depreciated; and
- Deductible temporary differences to the extent that it is probably that they will be utilised.

Deferred tax is recognised for deductible temporary differences, unused tax losses and unused tax credits, to the extent that is probable that taxable profit will be available against which the deductible differences can be utilised.

#### 3.8 Goods and services tax (GST)

Revenues, expenses, and assets are recognised net of the amount of GST except for receivables and payables, which are GST inclusive.

The net GST recoverable from, or payable to, Inland Revenue Department is included as part of receivables or payables in the statement of financial position.

Cash flows are included in the statement of cash flows on a gross basis. The GST component of cash flows arising from investing and financing activities, which is recoverable from, or payable to, the Inland Revenue Department is classified as part of operating cash flows.

NZNO is registered for GST, while NERF and NTM are not. Accordingly, revenues and expenses for NERF and NTM are recognised on a GST-inclusive basis, as GST is not recoverable from Inland Revenue.

#### 3.9 Equity

Equity is the member's interest in the organisation, measured as the difference between total assets and total liabilities. Equity is made up of the following components:

#### Accumulated fund

Accumulated comprehensive revenue and expense is the accumulated surplus or deficit since its formation.

- Colleges and Sections fund The fund represents the special interests of members representing applicable accumulated surplus or deficit since its formation.
- Asset revaluation reserve
   The reserve records fair value movements
   of investment funds and shares.

#### 4. SIGNIFICANT ACCOUNTING JUDGEMENTS, ESTIMATES AND ASSUMPTIONS

Preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts of revenues, expenses, assets and liabilities, and the accompanying disclosures, and the disclosure of contingent liabilities. Uncertainly about these assumptions and estimates could result in outcomes that require a material adjustment to the carrying amount of assets or liabilities affected in future period.

#### Judgements

In applying the accounting policies, management has made the following judgements, which have the most significant effect on the amounts recognized in the financial statements.

#### **Estimates and assumptions**

Key assumptions concerning the future and other key sources of estimation uncertainty at the reporting date, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year, are described below. NZNO based its assumptions and estimates on parameters available when the financial statements were prepared. However, circumstances and assumptions about future developments may change due to market changes or circumstances arising beyond the control of the organization. Such changes are reflected in the assumptions when they occur.

Judgements made by management in applying accounting policies that have a significant effect on the financial statements and estimates with a significant risk of material adjustment in the next year relate to the following in particular:



- Employee long service entitlements calculated at the rates applicable and term incurred at the end of the financial year.
- Revaluation of Fifty-Seven Willis Street Limited significant assumptions applied in determining the fair value are disclosed in note 13.
- **Deferred tax asset** No deferred tax asset has been recognised in respect of this amount, as it is not considered probable that there will be future taxable profits available.
- Assessment of control for consolidation NZNO has power over both NERF and NTM and benefits from their activities and therefore the financial statements of the three entities have been consolidated.

#### Useful lives and residual values

The useful lives and residual values of assets are assessed using the following indicators to determine potential future use and value from disposal:

- The condition of the asset.
- The nature of the asset, its susceptibility and adaptability to changes in technology and processes.
- The nature of the processes in which the asset is deployed.
- Availability of funding to replace the asset.
- Changes in the market in relation to the asset.

The estimated useful lives of the asset classes held by NZNO are listed in notes 14 and 15.

#### 5. REVENUE

Revenue is measured at the fair value of the consideration received. The following recognition criteria must be met before revenue is recognised.

#### **Revenue from exchange transactions**

#### Membership revenue

Membership subscription is received in exchange for access to membership goods and services. It is initially recorded as revenue in advance and recognised in revenue evenly over the membership period.

#### Interest revenue

Interest revenue is recognised as it accrues, using the effective interest method.

#### Other revenue streams

All other revenue streams are recognised in the accounting period in which the goods are delivered or services are rendered.

Other revenue includes management attendance on external boards and *Kaitiaki* magazine subscriptions.

#### Revenue from non-exchange transactions

#### Bequests

Bequests received totalled \$10,000 (2024: \$Nil). There were no conditions specified in the bequests that would require a liability to be recorded by the Group.



#### 6. AUDITOR'S REMUNERATION

The Board appointed BDO Wellington Audit Limited (BDO) as auditors during the year replacing Deloitte Limited (Deloitte). BDO provided audit services to the Group of \$75,352 for the year (2024: \$63,054).

Non-audit related services were provided by Deloitte for taxation advisory at the cost of \$62,775 during the year (2024: \$39,360).

	Parent (NZNO)		Group	
	2025	2024	2025	2024 (restated)
Audit fees				
Current auditor	65,600		75,352	10,344
Previous auditor	-	44,710	-	52,710
Advisory services				
Current auditor	-	-	-	-
Previous auditor	62,775	39,360	62,775	39,360
Total auditor's remuneration	128,375	84,070	138,127	102,414

#### 7. OTHER EXPENSES

	Parent (NZNO)		Group	
	2025	2024	2025	2024 (restated)
Advertising & Marketing	63,345	77,809	63,345	77,809
Consultancy	432,168	231,756	512,972	246,907
Financial	241,343	166,735	298,730	236,571
Course	22,701	72,617	22,701	72,617
Meetings	591,706	399,841	591,737	400,023
Administrative & general	98,767	116,143	102,836	120,950
Printing & stationery	142,041	162,582	142,041	162,582
Publications & books	86,511	110,575	86,511	110,575
Loss on disposal/writedown of assets	740	-	740	-
	1,679,322	1,338,059	1,821,613	1,428,035

#### 8. INCOME TAX

NERF is wholly exempt from New Zealand income tax having fully complied with all statutory conditions for these exemptions.

NTM is wholly exempt from New Zealand income tax having fully complied with section CW 41 of the Income Tax Act 2007.

NZNO is assessed on all income and expenditure not directly related to its activities with members. The income tax expense has been calculated as follows:

#### 8.1 Income tax recognised in surplus/(deficit) from operations

	2025	2024
Deferred tax – current year	(53,267)	-
Current tax – current year	719	2,287
	(52,548)	2,287



The income tax expenses for the year can be reconciled to the surplus/(deficit) from operations before taxation as follows:

	2025	2024
Surplus from Operations before taxation	4,228,654	4,817,204
Tax calculated at 28% (2023: 28%)	1,184,023	1,348,817
Plus/(less) tax effect of:		
Non-asessable income	(7,962,072)	(7,505,953)
Non-deductible expenses	6,860,660	6,189,074
Imputation credits	(13,911)	(13,586)
Foreign investment funds (FIF) income	1,918	1,486
Portfolio investment entity (PIE) tax charge	83,044	72,371
Foreign tax withheld	719	2,287
Tax losses utilised	(206,930)	(92,209)
Tax calculated at 28% (2023: 28%)	(52,548)	2,287

#### 8.2 Current Income tax payable/(receivable)

	2025	2024
Opening balance	(170,954)	(68,913)
Over/(under) provision from prior years	-	-
Current taxation	719	2,287
Resident withholding tax payment	(180,021)	(104,328)
Refund received	69,087	-
	(281,169)	(170,954)

#### 8.3 Deferred tax asset/(liability)

	2025	2024
Opening balance	-	-
Recognised in surplus/(defict) from operations	53,267	-
Recognised in other comprehensive revenue and expense	-	-
Total deferred tax – closing balance	53,267	-

As at 31 March 2025, NZNO has unused tax losses of \$190,240 available for offset against future profits (2024: \$606,257).

#### 8.4 Income Tax Receivable

	2025	2024
Current Income tax receivable	281,169	170,954
Deferred tax asset/liability	53,267	-
	334,436	170,954



#### 9. CASH AND CASH EQUIVALENTS

Cash and cash equivalents are short term, highly liquid investments that are readily convertible to cash and which are subject to an insignificant risk of changes in value. NZNO holds an overdraft facility with ANZ Bank of \$50,000.

Cash and cash equivalents include:

	Parent (NZNO)		Group	
	2025	2024	2025	2024 (restated)
Cash at bank	1,056,494	377,745	1,216,793	447,772
Subscriptions trust	774,514	1,802,319	774,514	1,802,319
On-call deposit accounts	206	194,269	73,739	261,762
Colleges & sections accounts	1,152,061	1,110,219	1,152,061	1,110,219
Portfolio cash account	513,779	392,792	513,779	392,792
	3,497,054	3,877,344	3,730,887	4,014,864

#### 10. TERM DEPOSITS

Term deposits are initially measured at the amount invested. Interest is subsequently accrued and added to the investment balance. The deposits have terms from three to 18 months, with interest rates ranging from 4.15% to 6.18% per annum. All deposits will mature within 12 months of balance date.

The term deposits are held with ANZ Bank New Zealand Limited and have been assessed to have a low credit risk based on the banks Standard & Poor's credit rating of AA-.

#### 11. ACCOUNTS RECEIVABLE AND PREPAYMENTS

	Parent (NZNO)		Group	
	2025	2024	2025	2024 (restated)
Trade debtors	134,634	80,569	90,753	80,467
Sundry debtors	24,038	24,273	24,038	26,273
Revenue accrued	159,489	-	159,489	-
Prepayments	1,511,951	410,116	1,511,951	410,117
	1,830,112	514,958	1,786,231	516,857

#### 12. INVESTMENTS PORTFOLIO

The Group has invested funds with ANZ Private Bank Limited, Mercer New Zealand Limited and Harbour Asset Management Limited. Investments are recorded at market value.

	Parent (NZNO)		Group	
	2025	2024	2025	2024 (restated)
Opening Balance	9,163,423	8,897,768	16,127,887	16,537,931
Interest & dividends reinvested	88,868	78,556	214,267	263,694
Net cash movement during the year	(158,473)	(120,870)	1,172,698	(1,714,113)
Gains/(Losses)	274,633	307,969	383,308	1,040,375
Closing balance	9,368,451	9,163,423	17,898,160	16,127,888



#### 13. SHARES - FIFTY-SEVEN WILLIS STREET LIMITED

NZNO owns shares in Fifty-seven Willis Street Limited, a body corporate. The ownership of these shares provides an effective perpetual ownership/occupation right to Levels 3, 5 and some basement car parking at 57 Willis Street, Wellington. Membership in Fifty-seven Willis Street Limited is based on the floor space that NZNO owns.

The share value is based on an Independent Registered Valuer's assessment of \$3,470,000 for Levels 3 and 5, amended to factor in actual outgoings for the year, resulting in a value of \$3,216,275 (2024: \$3,440,000). The registered valuation is based on the net annual estimated income being capitalised at a risk rate of 10.5% (2024: 10.5%) established from an analysis of sales of similar properties.

	2025	2024
No. of shares held	1,484,500	1,484,500
Shares valuation	\$3,216,275	\$3,440,000

#### 14. PROPERTY, PLANT AND EQUIPMENT

All property, plant and equipment is owned by the Parent and measured at cost less accumulated depreciation. Cost includes expenditure directly attributable to the acquisition of the asset. When an asset is disposed of, a gain or loss is recognised in the Statement of Comprehensive Revenue and Expense and calculated as the difference between the sale price and the carrying value of the item.

Depreciation is provided on a straight-line basis on all property, plant and equipment, at a rate which will allocate the cost of the assets to their estimated residual value over their useful life.

Leasehold improvements	10 years
Equipment	5 years
Furniture	10 years
Fixtures & fittings	10 years

Depreciation methods, useful lives and residual values are reviewed at each reporting date and are adjusted if there is a change in the expected pattern of consumption of the future economic benefits or service potential in the asset.

Summary of property, plant and equipment owned by the Parent:

31 March 2025	Cost/Valuation	Accumulated Depreciation	Net Book Value
Leasehold improvements	1,310,673	662,949	647,724
Equipment	693,122	378,632	314,490
Fixtures & fittings	86,157	44,109	42,048
Furniture	142,546	29,227	113,319
Other	7,111	7,111	-
Total	2,239,609	1,122,028	1,117,581
31 March 2024			
Leasehold improvements	728,498	415,279	313,220
Equipment	485,895	214,971	270,924
Fixtures & fittings	86,157	33,506	52,651
Furniture	46,895	22,100	24,795
Other	7,111	2,237	4,874
Total	1,354,557	688,092	666,465



Reconciliation of the carrying amount at the beginning and end of the period:

2025	Opening balance	Additions	Disposals	Depreciation	Closing balance
Leasehold improvements	313,220	582,175	-	(247,670)	647,724
Equipment	270,924	136,079	(3,024)	(89,490)	314,490
Fixtures & fittings	52,651	-	(640)	(9,963)	42,048
Furniture	24,795	95,651	-	(7,127)	113,319
Other	4,874	-	-	(4,874)	-
Total	666,465	813,905	(3,664)	(359,125)	1,117,581

#### 15. INTANGIBLE ASSETS

Intangible assets are owned by the Parent and includes membership database software. Intangible assets are amortised on a straight-line basis over five years.

An impairment loss is recognised where the recoverable amount of the asset is less than the carrying amount.

31 March 2025	Cost/Valuation	Accumulated Amortisation	Net Book Value
Software	372,634	128,788	243,846
Total	372,634	128,788	243,846
31 March 2024			
Software	126,200	106,071	20,129
Total	126,200	106,071	20,129

Reconciliation of the carrying amount at the beginning and end of the period:

2025	Opening balance	Additions	Amortisation	Closing balance
Software	20,129	246,434	(22,717)	243,846
Total	20,129	246,434	(22,717)	243,846

#### 16. ACCOUNTS PAYABLE

	Parent (NZNO)		Group	
	2025	2024	2025	2024 (restated)
Trade Creditors	720,103	456,350	708,693	497,535
Accrued expenses	221,368	185,032	304,369	203,101
	941,471	641,382	1,013,062	700,635

#### 17. EMPLOYEE ENTITLEMENTS

#### Wages, salaries, and annual leave

Liabilities for wages and salaries, and annual leave are recognised in surplus or deficit during the period in which the employee provided the services.

#### Long service and retirement leave

Employees of NZNO become eligible for long-service leave after a certain number of years, depending on their contract. The liability is recognised and measured as the current value of payment to be made in respect of service provided by employees up to the reporting date.

	2025	2024
Current		
Annual leave	1,279,397	1,224,915
Long service leave	136,776	132,283
Retirement leave	34,307	37,862
Other	3,000	-
	1,453,480	1,395,060
Non-current		
Long service leave	364,715	352,074
Retirement leave	-	30,983
	364,715	383,057
Total employee entitlements	1,818,194	1,778,117

Payments to defined contribution plans for NZNO employees were \$630,614 for the year (2024: \$591,162).

#### 18. RELATED PARTY TRANSACTIONS

#### Industry Retirement and Insurance Services Limited

NZNO is one of the four unions that set up Industry Retirement and Insurance Services Limited. The company is a retirement and insurance scheme for union members and is not included in the financial statements, due to be it being set up for the benefit of the union members, and no benefit to NZNO. Any transactions between NZNO and the company are the contribution to their staff's employer's contribution.

#### Fifty-Seven Willis Street Limited

Andrew Casidy, Director of Operations & Membership was appointed to the Board in April 2023. NZNO pays a proportionate share of expenses and outgoing incurred by Fifty-Seven Willis Street Limited for repairs, maintenance, insurance, and provision of services. NZNO made payments of \$209,376 during the year (2024: \$164,798).

#### Key Management Personnel

Key management personnel of the Parent constitute the governing body and includes the Board of Directors, Chief Executive Officer, Director of Operations & Membership, Professional Services Manager, Director of Organising and Director of Campaigns. Until December 2023, the Industrial Services Manager was included as part of key management personnel.

The President and Kaiwhakahaere are renumerated as per their contractual agreement with NZNO. All other board members are reimbursed for wages foregone due to attendance at board meetings as per the Member Leave Without Pay Policy.

NERF and NTM are governed by Trustees, including the President and Kaiwhakahaere of the Parent. They are only included in the number of individuals for the Parent. While NERF Trustees are remunerated for their services, NTM Trustees are not.



The aggregate remuneration of key management personnel and the number of individuals receiving renumeration is as follows:

	Parent (NZNO)		Gr	oup
	2025	2024	2025	2024 (restated)
Remuneration				
Board of Directors/Trustees including President & Kaiwhakahaere	347,172	277,913	350,742	281,663
Senior Leadership Team	1,000,724	1,204,332	1,000,724	1,204,332
	1,347,896	1,482,245	1,351,466	1,485,995
Number of individuals				
Board of Directors/Trustees including President & Kaiwhakahaere	11	11	18	18
Senior Leadership Team (Full-time equivalents)	5	5.75*	5	5.75*

\* The Industrial Services Manager role was filled from April to December 2023 and is therefore included as 0.75 FTE for the year

#### 19. CONTINGENT ASSETS AND LIABILITIES

NZNO carries professional indemnity insurance on behalf of its members, to give comprehensive cover defending accusations or claims related to professional duties of members resident in New Zealand. In addition, NZNO indemnifies members for legal and professional fees in respect of such accusations or claims. It is not practicable to estimate the amount of the potential liability.

#### 20. COLLEGES AND SECTIONS

NZNO Colleges and Sections represent the special interests of members.

		Plus	Plus	Less	Full Year	
Colleges and Sections	Opening Funds 1-Apr-2024	Income from other sources	National Office Funding	Expenditure	Surplus/ (Deficit)	Closing Equity 31-Mar-2025
COASTN	44,658	29,383	11,478	48,243	(7,383)	37,276
Cancer	96,111	29,566	11,478	39,759	1,285	97,396
Child & Youth	31,044	1,850	11,478	10,043	3,285	34,329
Critical Care	63,695	5,559	11,478	28,481	(11,444)	52,251
Diabetes	56,259	6,837	11,478	19,085	(770)	55,489
Emergency	272,454	222,267	14,292	202,837	33,722	306,176
Enrolled	74,059	56,788	11,478	61,240	7,026	81,085
Gastroenterology	86,047	55,939	14,292	72,227	(1,996)	84,051
Gerontology	79,351	1,688	11,478	18,225	(5,059)	74,292
Infection	217,616	274,683	14,292	301,576	(12,601)	205,015
Mental	19,649	946	11,478	8,351	4,073	23,723
Neonatal	104,941	3,804	11,478	18,214	(2,932)	102,009
Nursing Leadership	45,230	5,915	11,478	31,518	(14,125)	31,105
Pacific	13,616	682	11,478	5,739	6,420	20,037
Perioperative	270,782	250,167	14,292	278,511	(14,051)	256,731
Primary Health Care	52,837	2,729	14,292	32,387	(15,366)	37,472
Research	52,410	1,536	11,478	15,673	(2,659)	49,751
Respiratory	87,382	7,818	11,478	12,042	7,254	94,635
Stomal	75,629	55,508	11,478	48,173	18,813	94,442
Women's Health	53,320	95,403	11,478	86,838	20,042	73,362
	1,797,088	1,109,069	243,632	1,339,165	13,537	1,810,625



#### 21. CATEGORIES OF FINANCIAL ASSETS AND LIABILITIES

The carrying amounts of financial instruments presented in the statement of financial performance relate to the following categories of assets:

	Parent (NZNO)		Gr	oup
	2025	2024	2025	2024 (restated)
Financial assets measured at amortised cost				
Cash & cash equivalents	3,497,054	3,877,344	3,730,887	4,014,864
Term deposits	10,083,758	7,370,586	10,437,551	9,274,026
Accounts receivable	1,830,112	514,958	1,786,231	516,857
	15,410,924	11,762,888	15,954,669	13,805,747
Fair value through other comprehensive revenue & expense				
Investments Portfolio	9,368,451	9,163,423	17,898,160	16,127,888
Shares – Fifty-Seven Willis Street Limited	3,186,275	3,440,000	3,186,275	3,440,000
	12,554,726	12,603,423	21,084,435	19,567,888
Financial liabilities measured at amortised cost				
Accounts payable	1,056,387	893,435	1,127,978	952,689
	1,056,387	893,435	1,127,978	952,689

#### 22. LEASES

Operating leases are held by the Parent and are not recognised in the Statement of Financial Position.

Payments on operating lease agreements, where the lessor retains substantially the risk and rewards of ownership of an asset, are recognised as an expense on a straight-line basis over the lease term.

#### **Operating lease commitments**

During 2025 NZNO entered into three new operating lease agreements for office premises:

- 101 Carlton Gore Road, Auckland: 7-year term
- 130 Grantham Street, Hamilton: 6-year term
- 79 Boulcott Street, Wellington: 9-year term

As at the reporting date, NZNO has entered into the following non-cancellable operating leases in relation to office equipment, premises and motor vehicles:

	2025	2024
Not later than one year	1,721,851	1,315,393
Later than one year and no later than five years	5,434,309	2,687,971
Later than five years	2,526,907	201,859
	9,683,067	4,205,223

#### **Deferred Lease Incentives**

A rent-free period of 8.4months (10% of the initial seven-year term) was negotiated on the Auckland office lease. The incentive amount of \$136,729 is being recognised on a straight-line basis over the initial lease term.

A lease incentive payment of \$82,362 was received in respect of the new Wellington office. The incentive will be recognised on a straight-line basis over the initial nine-year lease term from the start of the lease term in June 2025.



	2025	2024
Current		
Auckland	19,533	-
Wellington	7,626	-
	27,159	-
Non-current		
Auckland	107,430	-
Wellington	74,735	-
	182,165	-
	209,324	-

#### 23. EVENTS AFTER THE REPORTING DATE

After the end of the reporting period, NZNO members voted to change the constitution. The revised constitution was not registered at the date these financial statements were approved.

Board and management have determined the impact of the constitution changes will not significantly affect the operation of the Group. (2024: \$Nil)

#### 24. GROUP ENTITIES

The Group's controlled entities are:

- Nursing Education and Research Foundation Trust Board (NERF), and
- Nurses' Trust Management (NTM).

All controlled entities have the same reporting date as the controlling entity.

#### Nursing Education and Research Foundation Trust Board (NERF)

NZNO has determined that control exists because NZNO holds the power to appoint a majority of trustees, NZNO has exposure to variable benefits from its involvement with NERF, and NZNO has the ability to use its power over NERF to affect the nature or amount of the benefits from its involvement with the other entity.

#### Nurses' Trust Management (NTM)

NZNO has determined that control exists because NZNO holds the power to appoint a majority of trustees, NZNO has exposure to variable benefits from its involvement with NTM, and NZNO has the ability to use its power over NTM to affect the nature or amount of the benefits from its involvement with the other entity.

#### 25. ADJUSTMENT TO PRIOR PERIOD AND CURRENT YEAR RESULTS

Following a control assessment performed during the year under PBE IPSAS 35: Consolidated Financial Statements, it was concluded that NZNO has power over both NERF and NTM and benefits from their activities. Although this control relationship existed in previous reporting periods, it had not been reflected in the financial statements until now.

As a result of identifying the prior period error, the Group has restated its comparative figures for the year ended 31 March 2024 to reflect the consolidation of NERF and NTM from the beginning of that period. This ensures consistent application of accounting policies and comparability between periods in line with the requirements of PBE standards.

A prior period error has been identified and a significant adjustment has been made this financial year restating the prior period comparatives for the consolidation of NERF and NTM. We have determined the period-specific effects of an error for the earliest period for which retrospective restatement is practicable. The effect of this is:



#### Statement of comprehensive revenue and expense

		NZNO	Adjustments				Restated
		(as reported)	NTM	NERF	Elim.	Impact	NZNO Group
	Notes	2024	2024	2024	2024	2024	2024
REVENUE							
Revenue from exchange transactions							
Sponsorship		186,890	-	27,000	-	27,000	213,890
Interest received		329,010	1,803	88,360	-	90,163	419,173
Other income		522,305	-	(14,267)	(34,783)	(49,050)	473,255
Revenue from non- exchange transactions							
Donations & bequests	5	-	-	470	-	470	470
LESS: EXPENDITURE							
Donations & grants		130,306	10,710	134,736	174	145,620	275,926
Information technology		785,775	-	374	-	374	786,149
Other Expenses	7	1,338,059	13,211	116,938	(40,174)	89,976	1,428,035
Travel & motor vehicle expenses		2,163,877	-	9,964	(4,289)	5,675	2,169,552
Income Tax	8	2,287	-	(11,110)	-	(11,110)	(8,823)
Other Comprehensive Revenue and Expense							
Gain / (Loss) on revaluation of investment portfolio		320,344	56,773	890,226	-	946,998	1,077,342



#### **Statement of Financial Position**

		NZNO (reported)	Opening Balance Adjustments*		2024 Movements**			Restated NZNO Group	
			NTM	NERF	ΝТМ	NERF	Elim.	Impact	
	Notes	01-Apr-24	01-Apr-23	01-Apr-23	2024	2024	2024	2024	2024
ASSETS									
Current Assets									
Cash & Cash Equivalents	9	3,877,344	49,777	74,051	27,617	(13,925)	-	137,520	4,014,864
Term Deposits	10	7,370,586	5,501	420,993	-	1,476,946	-	1,903,440	9,274,026
Accounts Receivable & Prepayments	11	514,958	-	-	-	2,000	(101)	1,899	516,857
Non-Current Assets Investments Portfolio	12	9,163,423	864,091	6,776,072	7,782	(683,481)	-	6,964,465	16,127,888
LIABILITIES									
<b>Current</b> Liabilities Accounts payable	16	641,382	7,886	19,575	745	40,654	(9,607)	59,253	700,635
EQUITY									
Asset revaluation reserve		4,119,869	(17,764)	(305,084)	74,537	1,195,310	-	946,998	5,066,867
Accumulated Funds		16,035,933	929,247	7,556,625	(39,883)	(454,423)	9,506	8,001,071	24,037,004

\* These adjustments incorporate the opening balances of NTM and NERF as at 1 April 2023.

 $\ast\ast$  These are the movements between 1 April 2023 and 31 March 2024.



#### **Statement of Cashflows**

	NZNO	Adjustments				Restated
	(as reported)	NTM	NERF	Elim.	Impact	NZNO Group
Notes	2024	2024	2024	2024	2024	2024
Cash flows from operating activities						
Receipts						
Receipts from customers	2,025,847	-	-	(1,000)	(1,000)	2,024,847
Interest received	291,529	1,803	46,520	-	48,323	339,852
Other receipts	-	-	27,470	-	27,470	27,470
Payments						
Payments to suppliers	(13,165,565)	(7,540)	(75,023)	1,000	(81,563)	(13,247,128)
Grants paid	(130,306)	(10,490)	(102,291)	-	(112,781)	(243,087)
Cash flows from investing activities						
Receipts						
Sales/maturities of investments portfolio	305,748	43,844	1,549,399	-	1,593,243	1,898,991
Term deposits matured	611,096	-	420,000	-	420,000	1,031,096
Payments						
Investment in term deposits	(6,692,166)	-	(1,880,000)	-	(1,880,000)	(8,572,166)
Net (decrease) / increase in cash and cash equivalents	(1,757,889)	27,617	(13,925)	-	13,692	(1,744,197)
Cash and cash equivalents at 1 April	5,635,233	49,777	74,051	-	123,828	5,759,061



### **Statements of Service Performance**

For the year ended 31 March 2025

The New Zealand Nurses Organisation (NZNO) represents more than 60,000 nurses and health workers. We are the leading professional union of nurses in Aotearoa New Zealand. Our members include nurses, midwives, students, kaimahi hauora, health care workers, and allied health professionals. Our members are united in their professional and industrial aspirations.

Te Rūnanga o Aotearoa is the arm through which our Te Tiriti o Waitangi partnership is articulated. Our members enhance the health and wellbeing of all people of Aotearoa New Zealand.

NZNO negotiates salary and conditions for nurses, midwives, and health care assistants working in the public and private sectors, other health professionals and health sector workers. We provide professional support and leadership for nurses and midwives and clinical development through special interest sections and colleges.

NZNO is committed to the representation of its members and the promotion of nursing and midwifery. NZNO embraces Te Tiriti O Waitangi and seeks to improve the health status of all peoples of Aotearoa/New Zealand through participation in health and social policy development.

Through our strategic direction "Maranga Mai!", we support our members in their organising and campaigning to:

- give effect to Te Tiriti o Waitangi
- improve the health status of all peoples of Aotearoa/New Zealand through participation in health and social policy development
- achieve workplaces and terms and conditions of employment that reflect their worth, priorities and expectations
- create a just and equitable society
- grow their union and its influence.

#### OUR KEY ACTIVITIES INCLUDE:

- Advocating and campaigning for quality public health care systems and outcomes.
- Organising and bargaining to improve working conditions and standards for health care workers.
- Supporting and contributing to the professional development of health care workers.
- Supporting and assisting members with employment relationship and professional practice issues.
- Communication with members and their communities.
- Promoting excellence in nursing and health care by providing funding opportunities for education and research.

#### **KEY JUDGEMENT:**

In compiling the Group's Statement of Service Performance, the Group made judgements in relation to which outcomes and outputs best reflect the achievement of the Group's primary purposes. One Statement of Service Performance has been presented covering the society and Group on the basis the primary aims and objectives are both aligned.

#### PRIMARY WAYS WE CARRY OUT OUR SERVICE PERFORMANCE ACTIVITIES:

#### Advocating for quality public healthcare systems and outcomes

- NZNO actively works towards improved health outcomes for all people of Aotearoa New Zealand. One way we
  do this is by making and/or contributing to submissions on health and social policy-related issues. Submissions
  in 2024–25 were diverse and included multiple responses on proposals to restructure Te Whatu Ora Health
  New Zealand, Prescribing Diabetes medications, the Treaty Principles Bill, the Regulatory Standards Bill and
  Puberty Blockers safety measures.
- Our professional nurse advisors provide advice, information, and assistance on various types of cases for members, including matters such as drug administering practices, patient management issues and staff management.

	2025	2024
Number of select committee and professional practice body submissions	42	37
Number of member cases attributable to professional nursing advisors	793	518



#### Organising and bargaining

- Strategic industrial advice is provided across all sectors including on bargaining approaches, model and common clauses; analysis of employment trends and legislative changes; briefing papers; interpretations of collective agreements; bargaining; and enforcement.
- Some of our members act as delegates on regional councils, in college and section committees, in the National Student Unit, on Te Poari, as part of Te Rūnanga, on the Membership Committee and Board of Directors. Delegates are workplace employees who are elected by NZNO members as their representatives in union-related matters.
- The 2024 financial year saw our largest collective agreement bargained and settled, covering 32,000 members employed by Te Whatu Ora.

	2025	2024
Total number of members at year-end	62,748	60,624
Number of Māori members at year-end	4,694	4,484
Number of Pasifika members at year-end	2,754	2,558
Number of worksite delegates at year-end	1,883	1,836
Number of collective agreements bargained and settled	52	47
Number of members covered by the collectives bargained and settled	9,175	39,806

#### Supporting and contributing to the professional development of health care workers

- We deliver conferences, symposiums and forums which are high quality cost-effective, accessible education that especially support members in obtaining the necessary education for maintenance of Annual Practising Certificates and overall professional development. These measures do not include events organised by Colleges and Sections.
- NZNO provides delegate education courses for members' professional development. The education programme is part of the organisation's commitment to empowering members to influence their working lives and NZNO.

	2025	2024
Number of conferences, symposiums and forums delivered	13	21
Number of attendees at conferences, symposiums, and forums	997	783
Number of delegate education courses delivered	82	66
Number of attendees at delegate education courses	894	641

#### Membership support

- NZNO provides members access to the call centre advisors, professional nursing advisors, medico-legal and employment advice.
- Medico-legal lawyers' core work for members is providing advice and representation in relation to various types of assessment of, or investigation into, a member's practice or the care they provide.
- Employment cases involve providing advice and representation in relation to members' employment. Cases are deemed resolved by the employment lawyer when a case is unlikely to have further proceedings.

#### Our member support services:

	2025	2024
Number of inbound calls and emails received during the year	41,255	39,460
Total number of cases resulting from inbound communications	2,530	708
Number of legal employment cases – opened	103	70
Number of legal employment cases – resolved	112	64
Number of medico-legal cases – opened	339	318
Number of medico-legal cases – resolved	289	261





#### Health and safety

• Health and safety is core union business and NZNO has been engaging comprehensively with Te Whatu Ora. As a result, we have trained 374 health and safety representatives to be able to submit Provisional Improvement Notices (PINs) as part of the escalation pathway to ensure safe staffing. A PIN is a written notice to a person, or a PCBU (person conducting a business or undertaking) asking them to address a health and safety concern in the workplace.

	2025	2024
Number of members trained to submit a Provisional Improvement Notice (PIN)	374	442

#### Communications with members and their communities

- We produced twelve online *Kaitiaki* magazine issues, bringing together articles including nursing news, features, letters, viewpoints and professional development.
- NZNO contributes to mainstream news including TV, online, newspapers, magazines, and newsletters.

	2025	2024
Number of online Kaitiaki issues	12	12
Number of views of Kaitiaki	324,000	265,000
Number of unique viewers of Kaitiaki	170,000	124,000
Direct mentions of NZNO in media	1,725	1,576
Number of media release	72	58
Number of member newsletters	27	25

#### Promote excellence in nursing and health care by providing funding opportunities for education and research

• The NZNO Group provides funding opportunities for education and research through two charitable trusts: Nursing Education and Research Foundation (NERF) and Nurses' Trust Management (NTM).

#### Nursing Education and Research Foundation (NERF):

	2025	2024
Total funds paid to applicants for scholarships and grants – NERF	\$101,690	\$134,736
Number of meetings held for the scholarship and grants assessment committees	2	3
Maintenance of investment capital base:		
Foundation Funds Balance	\$7,851.4K	\$7,819.8K
Surplus in funds compared to minimum capital base	\$39.7K	\$224.OK
Investments were informed by the values, ethics,		
and aspirations of New Zealand nurses	Yes	Yes
There were no investments that were repugnant to New Zealand nurses	Yes	Yes
The investments provided a sustainable cash flow to meet cash flow		
requirements	Yes	Yes
The real value of the investment capital base was protected	Yes	Yes

#### Nurses' Trust Management (NTM):

	2025	2024
Total funds paid to applicants for grants – NTM	\$3,655	\$10,710
Grants as a percentage of opening accumulated funds	0.39%	1.18%
Unspent grants budget brought forward	-	\$35,948

### Statement of Responsibility

For the year ended 31 March 2025

The Board and Management of The New Zealand Nurses Organisation Incorporate acknowledge responsibility for the preparation of the Financial Statements and the judgements made therein.

In the opinion of the Board and Management of The New Zealand Nurses Organisation Incorporated:

- The internal control procedures are considered to be sufficient to provide a reasonable assurance as to the integrity and reliability of the Financial Statements; and
- The financial statements have been prepared in accordance with New Zealand Equivalents to International Financial Reporting Public Benefit Standards reduced disclosure regime and fairly reflect the financial position, results of operations and cash flows of The New Zealand Nurses Organisation for the year ended 31 March 2025.

The financial statements were authorised for issue on 15 July 2025.

Anne Daniels President

Paul Goulter Chief Executive

Kerri Nuku Kaiwhakahaere





#### New Zealand Nurses Organisation

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