



2<sup>nd</sup> July 2013

Brenda Wraight  
Director  
Health Workforce New Zealand

Submission to: Abigail\_Milnes@moh.govt.nz

**Re: Feedback on Voluntary Bonding Scheme 2014 – Nursing**

This submission represents the opinion of The College of Nurses (Aotearoa) (“the College”). The College is a professional body of New Zealand registered nurses and nurse practitioners from all regions and specialties both within and outside of the District Health Board (DHB) setting. It provides a voice for the nursing profession and professional commentary on issues that affect nurses, and also the health of the whole community, aiming for excellence in nursing practice and health care delivery which addresses disparities in health.

Data from the evaluation of the nursing Advanced Choice of Employment<sup>1</sup> (ACE) pilot suggests that of the 1232 graduates who applied for employment through ACE, 723 RN graduates (59%) were offered employment. While there is variability in the number of vacancies, data suggests that the ratio of graduates to DHB RN vacancies ranged from 1:16 to 1:51. The clinical practice settings graduates most frequently identified as their 1<sup>st</sup> choice were: surgery; medicine and mental health and addictions. With the exception of South Canterbury and the West Coast DHB data suggests there are no ‘hard to staff’ specialities within DHB’s.

*The College would therefore recommend that areas that warrant inclusion under the VBS programme are generalist nurses working in primary health care, aged care, non-DHB mental health services and rural communities.*

There are a large number of programmes and initiatives aimed at increasing the number of Māori and Pacific nurses in all specialties and in all communities. Despite inclusion of Māori health and nursing workforce development activities in most if not all DHB strategic and annual plans, there were disparities in rates of employment for Māori and Pacific graduates identified in the ACE report.

Māori and Pacific graduates who predominantly chose to work in their local DHB were unable to gain employment. The ACE report goes on to say that DHB’s who have not employed local Maori and Pacific graduates are also DHB’s who have a large gap between the demography of the Māori and Pacific population and the demography of the RN workforce.

It is the position of the College, as it has been previously that it is not just specialties or communities that are hard to staff, but there are Māori and Pacific graduates who are facing barriers to employment and are therefore ‘hard to retain’. As at 15 November 2012, a total of 245 nurses had received payment as part of the VBS scheme, 16 of the nurses identified as

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<sup>1</sup> Hargraves & Watson (2013). Report on the evaluation of the nursing ACE pilot. <http://www.health.govt.nz/our->



## COLLEGE OF NURSES AOTEAROA (NZ) Inc

P O Box 1258  
Palmerston North 4440  
P: (06) 358 6000  
E: [admin@nurse.org.nz](mailto:admin@nurse.org.nz)  
[www.nurse.org.nz](http://www.nurse.org.nz)

NZ Māori<sup>2</sup> suggesting Māori nurses also face barriers in terms of access to employment in roles that meet the VBS criteria and access to VBS payments.

*The College recommends that improving the number of Māori and Pacific graduates gaining employment in regions with high Māori and Pacific populations is a critical priority and should qualify for VBS payments to retain this critical resource.*

We could also like to take the opportunity to mention that as VBS is based on the nurse being employed (and remaining employed) in a hard to staff area, that the employer should also be advised the nurse has registered for VBS. It is a long-standing issue but one HWNZ have never moved on. We do not see this being a logistical issue as the nurse is required to identify the 'hard to staff area' to determine whether their application meets the criteria. The employer is then required to provide a statement of service so therefore should be advised in the first instance rather than after the fact.

Please feel free to contact us if further information or clarification of this submission is required.

This submission was completed by:

Taima Campbell – Co-Chair, Margareth Broodkoorn; Ngaira Harker – Board members (Maori Caucus)  
College of Nurses (Aotearoa)  
PO Box 1258  
PALMERSTON NORTH  
Email: [admin@nurse.org.nz](mailto:admin@nurse.org.nz)

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<sup>2</sup> The Voluntary Bonding Scheme – Information on Māori Registered Nurses and Midwives. Data request to HWNZ Nov 2012.