



Australian
Nursing &
Midwifery
Federation



SOUTH PACIFIC
NURSES FORUM

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Country Report
AUSTRALIA

1. Developments in nurses' working conditions

Nurse to Patient Ratios

The most significant development in nurses' working conditions since the last meeting of the Workforce Forum, is that nurse-to-patient ratios have now been enshrined in legislation in two of Australia's eight states and territories, Victoria and Queensland.

Nurse-to-patient ratios have been in place in the Victorian public sector since 2002 and partially in the New South Wales public sector since 2011 under arrangements in the states' respective enterprise agreements. However, as these agreements are renegotiated every 2-4 years, the future of maintaining nurse-to-patient ratios under these arrangements is somewhat precarious.

Therefore, during recent state elections, the Australian Nursing and Midwifery Federation's (ANMF's) Victorian and Queensland branches campaigned for legislation of nurse-to-patient ratios. With changes in the Governments in both these states, the branches' campaigns were successful.

The *Safe Patient Care (Nurse to Patient and Midwife to Patient Ratios) Bill 2015* was passed by the Victorian Parliament on 8 October 2015 and the Queensland Parliament passed the *(Safe Nurse-To-Patient and Midwife-To-Patient Ratios) Amendment Bill 2015*, fittingly, on 12 May 2016, International Nurses' Day. Ratios in Queensland have been phased in throughout the state from 1 July 2016.

The laws outline the minimum number of nurses and midwives needed in most public hospital wards and departments based on the level of care required by patients and the time of day. Ratios in Australia, both in legislation and enterprise agreements, set the minimum, not the

maximum staffing. A ratio must be applied to the actual number of patients in each ward. Ratios vary according to hospital complexity and clinical specialty and may vary from shift to shift, with different ratios applying at night.

Public sector agreement outcomes

ANMF Branches in Queensland, Victoria and Western Australia are currently negotiating new agreements covering nurses and midwives employed in the public sector providing increases in wages and allowances and other work related conditions. South Australia and Tasmania commence negotiations later this year.

These agreements commonly include a range of improvements to employment conditions including implementation of staffing mechanisms such as nurse to patient ratios; qualification allowances, professional development allowances and leave and shift and rostering arrangements.

The outcomes achieved in the public health sectors of the states and territories continue to be important as they not only establish a benchmark for ANMF negotiations in the private acute and aged care sectors, but also apply to the majority of the nursing workforce.

Family and Domestic Violence Leave

Another significant development for nurses and midwives across the country is the ongoing inclusion of clauses providing paid leave for family and domestic violence purposes in enterprise agreements across the country.

Days of paid leave generally ranges from 10 to 20 days and is in addition to existing leave entitlements such as sick or carers leave. Leave is provided for a range of purposes such as attending counselling appointments, medical appointments, legal proceedings or other related matters.

Paid Parental Leave

The development related to paid parental leave for nurses and midwives has been the protection of current entitlements rather than furthering them.

On 1 January 2011, Australia's first national Paid Parental Leave (PPL) scheme was introduced bringing Australia into line with almost all other OECD countries. Evaluation of the scheme showed clear benefits have been gained by the introduction of government funded PPL, while indicating there are still improvements to be made. This is why in August 2013 nurses and midwives welcomed the then Federal Opposition's proposal to expand the PPL scheme.

The Coalition's PPL policy promised that it would deliver *a genuine paid parental leave scheme to give mothers six months' leave based on their actual wage* to help women to take time out of the workforce to establish a family while reducing financial pressures.

Following election to Government, the Coalition revised this policy withdrawing their commitment from 26 weeks of PPL to the 18 week scheme already in existence. As part of the 2015 Federal Budget, a further revision was announced seeking to withdraw access to both employer funded and government funded PPL for eligible women.

The ANMF, along with other unions and women's groups, therefore participated in the Community Affairs Legislation Committee, warning of the detrimental impacts changes to the current paid parental leave (PPL) scheme will have on working families. At the time of writing this report current entitlements remain in place.

Developments outside nursing

The most significant development that has occurred nationally outside nursing has been Australia's Federal Election in July 2016 and the subsequent Parliament elected. In May 2016, the previous Government called a full election of Australia's two houses of Parliament (*Double Dissolution*), which is an unusual occurrence in Australian politics.

The Prime Minister took this step in an attempt to remove a number of 'fractious' Senators (upper house representatives) who were consistently blocking legislation. It should be noted that the ANMF supported the Senators blocking this legislation as, from our perspective, it was largely regressive, inequitable and underpinned by a neo-liberal agenda.

The election attempt failed. The previous Government was returned but with a dramatically reduced majority (they now have a 1 seat majority in the lower house) and an increased number of potentially 'fractious' Senators in the upper house of Parliament.

The Government has announced its intention to continue with much of its previous agenda, however this will be difficult to achieve as it now has to negotiate with a wider range of parties and independents in both houses of parliament for the passage of legislation.

The election was interesting for a number of reasons not least of which were: the shift of voters back to the centrist/left party from the left and conservative parties, largely due to the threat to Australia's current system of universal health coverage; and, the rise of minor parties, in particular the return of a far right party.

The ANMF, along with other unions and health groups, will continue to oppose policies which threaten the delivery of quality health and aged care services across Australia.

National Nursing Association (NNA)

The key challenges facing the ANMF (Australia's NNA) are those posed by the current Federal Government as outlined above. The major issues of concerns for nurses and midwives and nursing support workers are the removal of significant federal funding for public hospitals and health services and all aged care services, the attempt to dismantle Medicare (Australia's universal health insurance scheme) and the threat to workplace rights, most significantly penalty rates.

Graduate employment

Over the last few years, the ongoing lack of employment for graduates has been one of the profession's biggest workforce problems, with an estimated 30 – 40% of nurse and midwife graduates, in varying proportions across all states and territories, unable to find permanent employment in their professions over the last two-three years (2012-2015).

In response to the need to meet increased demand for nurses and midwives into the future in Australia, there has been a significant increase in the number of people completing undergraduate nursing and midwifery courses over the last decade. However, the improvement in the numbers of nursing and midwifery graduates has been negated by the lack of employment opportunities for new graduates.

This not only has a demoralising and devastating effect on graduates unable to find work but also constitutes a loss of the public investment in the education of qualified nurses and midwives and the loss of the contribution they could make to the health system and the future nursing and midwifery workforce.

The ANMF has been working on a range of measures to improve employment opportunities for newly graduated nurses and midwives, including convening a roundtable of key stakeholders to work on solutions.

The National Graduate Nurse and Midwife Roundtable included representatives of the Council of Chief Nursing and Midwifery Officers, the Nursing and Midwifery Board of Australia, the Council of Deans of Nursing and Midwifery, the Congress of Aboriginal and Torres Strait Islander Nurse and Midwives, the Australian College of Nurses, the Australian College of Midwives,

federal politicians, public sector and aged care employers, nurse educators, a number of professional nursing associations and, of course, new graduates themselves.

Since then a working party formed from roundtable participants has continued to meet to work on the 4 key objectives agreed at the graduate nurse and midwife roundtable:

- Recommend changes to the collection of workforce data, data mining and minimum data set and their associated definitions
- Develop *mythbusters* to address the myths of graduating nurses and midwives
- Identify and recommend mechanisms to communicate and collaborate with government and other service providers regarding graduate transition and available resources
- Contribute to the identification of research topics regarding recruitment and retention of early career (year one and year two)/nursing and midwifery graduates in the Australian context.

Graduate employment has improved in 2016, largely due to the election of new state governments with a greater commitment to nursing and midwifery graduate employment. However, another change in government could see this situation reversed.

The ANMF therefore is continuing to work with all stakeholders to implement permanent solutions and plans to reconvene the roundtable in November this year.

2. Issues Related to Equality (i.e., pay, gender, etc.)

The most significant issue continues to be the gender pay gap in Australia and its impact on economic security for women in retirement. The ANMF participated in a Senate Standing Committee on Economics inquiry into economic security for women in retirement arguing the need for a more equitable superannuation system for women workers.

Australian Bureau of Statistics (ABS) figures show there is currently a 47% gap between the super balances of men and women aged 55-64 and given that over 90% of our nursing and midwifery workforce are women, there is a pressing need for better retirement arrangements and a more equitable super system for women workers.

The ANMF presented our concerns regarding the current structural arrangements for superannuation in Australia which mean that nurses, midwives and assistants in nursing (AINs)

simply won't have sufficient savings to support them and give them a decent standard of living in their retirement.

3. Evolution of the Role of Nursing Unions in Today's Environment

The national nursing union and its branches in Australia continue to evolve and are currently amongst the most successful unions in the country. In a context of nationally declining union membership, now estimated to comprise only 15% of workers across Australia, the nurses' union continues to grow. With more than 250,000 members nationally, the ANMF is increasing its membership by approximately 4% per year and is currently the largest union in the country.

The ANMF is an affiliate of the national peak union body, the Australian Council of Trade Unions (ACTU), and is working with them and other unions on addressing the challenges currently being experienced by the broader union movement in Australia. In addition, as an affiliate of ACTU, we are provided with a mechanism for the representation of Australian unionism in the international arena, opposing discrimination and oppression and supporting human rights. The ACTU aid agency, APHEDA – Union Aid Abroad, contributes to humanitarian projects in many countries.

ANMF branches also work with organisations such as Global Nurses United and Public Service International.

In the Pacific region, ANMF is a member of the South Pacific Nurses Forum, a cooperative organisation of NNAs across the South Pacific working collaboratively on issues affecting nurses and midwives in the region.

Adapting to meet the needs of the younger generation

ANMF continues to recruit young nurses and midwives and new graduates as members. We continue to be successful in this by using their tools, e.g. social media, digital and online means, for effective communication with them and by trying to understand their values and what they look for in an association or union.

4. Campaigns and Communication in the Age of Social Media

Given the threats to public health care, especially Medicare, aged care and workplace rights for nurses and midwives from the Coalition government as outlined above, the ANMF ran a strong

issues based federal election campaign focused on four key issues; public healthcare funding, Medicare, safe staffing in aged care and protection of penalty rates. The campaign, *If You Don't Care, We Can't Care*, was designed to seek commitments from politicians and support from the community on these issues.

The campaign involved raising awareness about the ANMF's core election issues through broadcast and online and social media. It comprised a wide range of campaign materials developed in consultation with branches, from TV, radio and billboard advertisements to banners, stickers, pledges and t-shirts, complemented by on the ground actions from members across the country.

ANMF members took an active role in helping to safeguard the health and aged care systems by seeking out their local MPs and candidates and informing them about the issues that really mattered to nurses and midwives.

Underpinning these activities was a coordinated online and social media strategy which engaged support from nurses and midwives and community supporters via a dedicated campaign website and Facebook page.

The ANMF formally sought commitments from the major parties on our 4 key issues. Responses were received from the three major parties to our correspondence, though not all in a timely manner. The ANMF therefore published the parties' positions on our key issues to members and supporters via social media and EDM's based on the best available information.

To supplement our formal correspondence, ANMF Branches developed campaign pledges for use by nurses and midwives to sign the pledges themselves and to take to their local MPs for them to sign and commit to our issues. The ANMF published these commitments as they were received via social and digital media. We also published any refusals from politicians.

National Aged Care Phone-in

As the federal election campaign progressed, it became clear that Medicare and health care were the most important issues for voters while the issue of safe staffing in aged care was failing to attract attention. In an attempt to raise awareness about the need for safe staffing in aged care, the ANMF decided to hold a national aged care phone-in.

The national phone-in, coordinated by ANMF's Federal Office, was held on 18 June and was promoted through advertisements in local newspapers and media releases, EDMs to our members and supporters, and ads on Facebook.

The survey, which ran from 17 – 21 June 2016, was conducted primarily online with a national phone-in held on 18 June 2016. A total of 2,423 people, comprising 1,724 aged care nurses and care workers and 699 community members, mostly relatives of people in aged care, participated.

Social media campaign evaluation

The ANMF measured the impact of the social media component of the campaign via Facebook and Google analytics to measure reach and engagement and assessed conversions of engagement into actions. We also assessed responses and actions to EDMs.

We assessed engagement via Facebook against cost of Facebook advertisements, results were:

- an average cost of 89 cents/click thorough to campaign website
- an average cost of 23 cents/engagement with boosted post
- an average cost of 2 cents/campaign video view.

We tracked actions directly - ANMF members and community supporters from across the country engaged in our digital campaign, with more than 11,000 sending emails on the 4 key issues for nurses and midwives to the three major parties' leaders.

5. Global Strategy on Safe Staffing

Australia's key development in national staffing strategies is the pursuit of nurse-to-patient and midwife-to-patient ratios in the public, private and aged care sectors (as appropriate). As outlined above nurse-to-patient ratios have now been made law in two Australian states and are being sought for the public sector by other branches across the country.

The ANMF has also just completed a major national research project, *Aged Care Staffing and Skills Mix*, which identifies appropriate staffing levels and skill mixes of nurses and nursing support workers for residential aged care facilities. This research is the second stage of a two part study that collected evidence relating to the need for a staffing metric that considers both staffing levels and skill mix for residential aged care.

Initial findings suggest:

- Residential Aged Care Facilities (RACF) require a staffing methodology tool.
- The metric tested in the study provides a valid and reliable methodology for staffing and skills mix for residential aged care facilities.

- Applying the Residential and Aged Care desktop modelling calculation for 200 residents resulted in an average 4.30 Resident and Personal Care Hours Per Day (RCHPD) and Skill Mix requirements of Registered Nurse 30%, Enrolled Nurse 20% and Personal Care workers 50% based on the twenty-four nursing and personal and care requirements for a range of validated profiles with complexities.

Impact of the evolving recession and slow economic growth

Australia is experiencing a period of slow economic growth which is expected to persist for some time. The result of this has been for the Federal Government to find 'savings' in the federal budget, which means cuts to Government spending. In Australia's case a significant proportion of these cuts are being made to public hospital and aged care funding.

The result is that many state governments are seeking to implement wage freezes for public sector employees and aged care employers are cutting staff positions and staff hours.

Another interesting aspect related to staffing is that, even though Australia did not suffer significantly from the global financial crisis, since 2009 many nurses who were expected to retire have continued working, citing financial reasons. This has resulted in significantly reduced annual turnover rates and exacerbated the difficulties for some graduates in finding employment. Employers advise that they expect this situation is continuing due to the economic downturn.

6. Revisiting Migration – What Does the Future Hold?

The ANMF continues to support the ethical recruitment and movement of nurses and midwives around the globe to gain further training and different clinical experiences. There is also clear merit in international exchange and diversity, as well as the economic benefit of remittances and transfers in technologies.

We recognise that in many cases the motivation to work in other countries is linked to more and better employment opportunities, higher salaries, better working conditions and improved capacity for career advancement. And increasingly the opportunity to work and live in a better and safer environment. We generally favour permanent migration but recognise there is a place for temporary skilled migration programs to meet genuine short term and unexpected skill shortages.

However, we believe that appropriate policy and regulatory settings should discourage employers accessing offshore labour without first investing in training and undertaking genuine testing of the local labour market and that there are safeguards and protections for both local and overseas workers. We have therefore been lobbying governments to support a robust and transparent labour market testing regime; parity in wages and conditions at the enterprise for local and offshore nurses and an English language standard of IELTS 7 (for licensed nurses).

However, in times when graduates cannot find employment, it cannot be argued that there is a skills shortage. We have also lobbied governments strongly in this regard with some success. Over the last year, the number of skilled migration visas has decreased as graduate employment has increased. This has been somewhat offset by an increase in work visas granted to international students of nursing, see below.

Skilled migration visa grants for nurses have decreased from 1,489 (reported to ICN last year) to 1,009 this year. There are now 1,998 skilled migration visa holders in total in Australia compared with 3,637 two years ago. Last year, 824 temporary graduate primary visas were granted to graduates who met the RN skills assessment requirement in the graduate work stream (international students). Many skilled migration visa holders continue to go on to become permanent residents in Australia.