BH:RM

4 September 2003

The Secretary Standing Committee on Employment and Workplace Relations House of Representatives Parliament House CANBERRA ACT 2600

Dear Ms Kelly

Re: Inquiry into employment: Increasing participation in paid work

Thank you for your invitation to contribute to this important Inquiry. The NSW Nurses Association (NSWNA) is the industrial and professional body that represents over 49,000 nurses in NSW and is also the NSW Branch of the Australian Nursing Federation. The membership of the Association comprises all those who perform nursing work, from assistants in nursing, who are unregulated, to enrolled and registered nurses at all levels including management and education.

Please find attached the NSWNA's submission to this Inquiry. We have focused our submission obviously on the nursing workforce.

The NSWNA would like to be kept informed of the progress of this Inquiry. If you need any clarification of the content of our submission, please do not hesitate to contact Rita Martin, Professional Officer at this office.

Yours sincerely

BRETT HOLMES General Secretary **NSW Nurses' Association**



Submission

House of Representatives Standing Committee on Employment and Workplace Relations

Inquiry into employment: Increasing participation in paid work

Terms of reference:

To inquire into and report on employment issues in both rural/regional and urban/outer suburban areas, with particular reference to:

- Measures that can be implemented to increase the level of participation in paid work in Australia; and
- How a balance of assistance, incentives and obligations can increase participation, for income support recipients.

Introduction

The Inquiry into the issues associated with increasing participation in paid work is welcomed by the Association for a number of reasons. Essentially, the development of effective strategies to facilitate increased workforce participation is a key professional interest of this organisation. Whilst the unmet demand for qualified nurses is well documented domestically and internationally, in NSW there seems to be limited recognition of the fact that there is a very large proportion of registered nurses who have chosen not to seek employment in the profession. Research undertaken in NSW indicates that there are a number of barriers to full labour force participation for many, including issues such as caring responsibilities, inflexibility of working hours, inadequate rewards and stressful working conditions.

The difficulties associated with maintaining an adequate nursing workforce are ongoing and the struggle is intensified by the ageing demographic profile of qualified nurses in this country. Most recent published statistics indicate that in NSW, 61% of the nursing workforce is aged over 40 years old.¹ Clearly, this reflects a growing inability of the profession to attract and retain adequate numbers of new graduates in the profession. The reasons behind this trend must be identified and managed to facilitate increased participation and address future requirements of the nursing workforce.

Another consequence of this ageing of the nursing workforce will be a very imminent and significant loss of invaluable experience and expertise. It is essential that the value of these older nurses is recognised and that appropriate strategies are in place to effectively utilise their experience and expertise.

The urgency of the necessity to initiate effective strategies to increase the participation of nurses in the workforce is inextricably related to changing population demand and demographic trends. Australia has an ageing population, where people have a much longer life expectancy and subsequently the prevalence of more complex disease processes and co-morbidities is growing. Far greater resources are necessary to meet future demands for Aged Care services and the service requirements of those consumers are increasingly acute and complex.

Why nurses are leaving the workforce

In May 2002 the Australian Centre for Industrial Relations Research and Training (ACIRRT) conducted qualitative research with nurses in NSW to identify the barriers and disincentives influencing nurses' decisions to leave the profession. *"Stop telling us to cope" NSW nurses explain why they are leaving the profession" was* commissioned by the NSWNA to further explore the findings of the comprehensive, quantitative research project undertaken by the Nursing and Health Research Consortiumⁱⁱ in 2000.

This submission will present the major findings and recommendations of the ACIRRT report, and highlight some similarities with a very recently published report from the UK which looks at working patterns for nurses over 50, and the wider impact on the public health service and society in general.

The ACIRRT report's key finding was that:

changes in hospital management systems have had major implications for the nature of nursing work.

(ACIRRT, 2002: page i)

In combination these changes have lead to more stressful and less satisfying work that does not have the intrinsic rewards that nursing used to provide.

The report identified a number of themes within this process. The shift to a cost control model of managing health services, has led to:

♦ increased patient throughput, and

♦ increased acuity of need among consumers of services.

This has resulted in an increase of nursing activity with no commensurate increase in staffing levels.

Intrinsic factors were identified in this report which diminished the capacity to provide quality care to patients and also diminished the capacity to give and receive support among nurses themselves. While wages was considered important to nurses, it was generally felt that wage improvements alone without changes to the system in which nursing work is performed, would not be enough to attract nurses back into the workforce.

The rapidly changing nature of nursing work had other contributing factors, which added to longstanding problems associated with recruitment and retention. The most prominent of these are:

- ♦ shift work
- ◊ limited career prospects
- Iimited recognition of the value of nursing within the health sector and the general community
- o nurses withdrawing from the labour market to improve quality of lifestyle and raise children

These findings are mirrored and supported by a very recent survey conducted in the UK for the Joseph Rowntree Foundation.^{III} It found that the NHS was paying too little attention to the needs of nurses in their 50's, and suggests there is more that hospitals could do to retain and recruit experienced nurses, and improve the staff shortages. Reasons for taking early retirement or leaving the nursing workforce included long-term stress and difficulties keeping up with technological change. Like Australia, the NHS has an ageing nursing workforce:

with a growing proportion over 50, a declining proportion under 30, and 7 per cent leaving the nursing workforce annually. The age shift is compounded by a prevailing shortage of nurses. (J. Rowntree Foundation, 2003: page 1)

The pace of technological change and stress were cited as the most common factors affecting nurses' decisions to leave. On the issue of stress, many older nurses admitted to feeling '*worn out*'.

Stress was also associated with high staff turnover and related extra pressures, which can in turn be exacerbated where they result in more staff leaving the NHS. Flexible hours were considered important in both studies, both for employmentrelated matters such as continuing professional development and to external factors such as childcare responsibilities and caring for older relatives.

92% of nurses in NSW are female^{iv}, and many have informal care responsibilities. Researchers have considered how decisions about employment are affected by demands for informal care in all workers:

Many people in their fifties and sixties combine work with caring responsibilities for grandchildren, older relatives or their own children...People in their fifties represent a 'pivot' generation with both care and work roles...Despite increasing demand for elder care and childcare, changes in the population and in work patterns (for example if early retirement becomes harder) mean that fewer people will be available to provide informal care...Nearly as many men as women surveyed undertook informal care, but women's caregiving was more intensive.[∨]

(J Rowntree Foundation, 2003: page 1)

The researchers concluded that without more resources to support carers, their contribution might not be sustainable. They recommend flexible working hours and good-quality affordable support for carers and care recipients would help to maintain this generation in the workforce.

The 2003 annual conference of the NSWNA formally endorsed a policy of work based elder care for nurses. This policy included flexible and family friendly working arrangements and access to affordable elder care services.

A recently published report which considers the *Future of Work^{vi}* in Australia, also highlights the problems of work intensification and stress:

For most Australians work has become more intense. Under-staffing, expanded workloads, increased responsibilities and the accelerated pace of work are associated with time scarcity and lifestyle stresses. Workers compensation claims for stress have become the largest single cause of occupational disease in New South Wales, increasing from 5% of all claims in 1992 to 19% in 1998.

(Fragmented Futures, 2003: page 95)

It draws attention to the problems facing people trying to balance work and life:

Changes in the way families are relating to the workforce have significantly increased the stress and tension between work and family for most people. The increase in the female workforce participation means that most women with family responsibilities are employed:

- The employment rate for all women increased from 47% in 1980 to 62% in 2001
- The employment age for prime age women (25-54 years) in 2001 was 68%

(Fragmented Futures, 2003: page134)

Conclusion and recommendations

While increases in pay are an important factor in improving nurses satisfaction in the workforce, alone it will not be enough to stem the number of skilled nurses leaving paid work, or encourage nurses to join the nursing workforce. It is necessary to improve conditions in the health delivery industry.

Chronic understaffing leads to increasing stress and burnout. The abolition of financial barriers (eg HECS) to participation in undergraduate nursing courses and post-graduate specialist courses would undoubtedly encourage recruitment. Adequate staffing levels would alleviate onerous workloads, and enable nurses to deliver quality care our consumers demand.

Affordable and accessible access to child and elder care would encourage more participation in the workforce, and contribute to a better work/life balance. The problem of reliable and affordable child and elder care will intensify as working life is extended.

Aged care wage parity would improve current and future conditions in Aged care facilities, which will be essential to meet the needs of this future growth sector.

There is widely documented evidence in Australia and overseas, that workers are now working longer and harder than ever. Hours of work, including excessive overtime, are becoming the norm for many people. A move to keep within the regulated hours of work, would create more employment opportunities, and prevent the 'burn-out' experienced by so many nurses. Burnout is frequently sited by nurses at exit interviews and anecdotally as a reason for leaving nursing. Addressing staffing shortages by encouraging excessive overtime to fill gaps, increases pressure on an already over streached workforce. The underlying issues must be addressed. Keeping within contracted hours, would improve the work-life balance, and help to stem the numbers of nurses wanting to retire early.

The NSWNA supports a fully funded public health care system, with fair and equitable access for all. Investment in our future health must be a priority for current and future governments.

References

ⁱ *NRB Board Works,* Newsletter of the Nurses Registration Board of NSW, May 2003 Issue 11 ⁱⁱ *NSW Nursing Workforce Research Project.* NSW Health Department, 2000. The Office of the Chief Nursing Officer, Sydney, Nursing and Health Services Research Consortium, (2000).

Chief Nursing Officer, Sydney. Nursing and Health Services Research Consortium. (2000). *"" "Nurses over 50: Options, decisions and outcomes"* Roger Watson, Jill Manthorpe and JoyAnn Andrews for the Joseph Rowntree Foundation, by The Policy Press. Available from Marston Book Services, PO Box 269, Abingdon, Oxon. OX14 4YN, available on line at www.jrf.org.uk. *" NRB Board Works* op. Cit.

^v The pivot generation: Informal care and work after 50 Ann Mooney, June Statham, Antonia Simon for the James Rowntree Foundation by The Policy Press as part of the Transitions after 50 series (ISBN 1 86134 402 3), available on line www.jrf.org.uk/knowledge/findings/social policy.

policy. ^{vi} Fragmented Futures: New Challenges in Working Life, Ian Watson, John Buchanan, Iain Campbell and Chris Briggs. Federation Press, Sydney, 2003.