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#### **AUSTRALIAN NURSING FEDERATION**

Publishers of the Australian Nursing Journal and the Australian Journal of Advanced Nursing Industrial Services & Journals: Industrial Services & ANF Journals Level 2, 21 Victoria Street, Melbourne Vic 3000 Ph: +61 3 9639 5211 Fax: +61 3 9652 0567 email: anj@anf.org.au industrial@anf.org.au

16 August 2002

Richard Selth Secretary Joint Standing Committee on Migration Parliament House Canberra ACT 2600

Dear Mr Selth

#### Review of Australia's skilled labour migration and temporary entry programs

Thank you for the opportunity to contribute to the review of Australia's skilled labour migration and temporary entry programs. For the information of the committee, I have attached an information pamphlet that describes the Australian Nursing Federation.

International mobility is an important feature of a nursing career. While the ANF is keen to maintain these opportunities for nurses, we are opposed to using migration as a means of overcoming the current shortages in nursing. The ANF fully supports the position of the International Nursing Council which states that, *ICN condemns the practice of recruiting nurses to countries where authorities have failed to address human resource planning and problems which cause nurses to leave the profession and discourage them from returning to nursing (ICN position statement: Nurse retention, transfer and migration).* 

I have attached a copy of our further comments, prepared by the NSW Branch of the ANF, in relation to skilled labour migration and temporary entry programs. In addition, I have attached copies of the ANF policy on overseas recruitment of nurses and the ICN position statement on nurse retention, transfer and migration.

Please contact Victoria Gilmore in the Canberra office (or <u>professional@anf.org.au</u>) if you require any other information.

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#### about the anf

Established in 1924, the Australian Nursing Federation (ANF) is the national union for nurses and the largest professional nursing organisation in Australia. The ANF's core business is the industrial and professional representation of nurses and nursing through the activities of a national office and branches in every state and territory.



The role of the ANF is to provide a high standard of leadership, industrial and professional representation and service to members.

The ANF's primary focus is on:

- > nursing education, policy and practice;
- > trade unionism recruitment, industrial rights, wages and conditions; and
- > health policy, funding and delivery.

The ANF is a member of the Commonwealth Nurses Federation and the South Pacific Nurses Forum and is affiliated with the Australian Council of Trade Unions (ACTU), the Australian Council of Social Services, the Public Health Association of Australia, the National Rural Health Alliance, the National Aged Care Alliance, the National Medicare Alliance, the International Centre for Trade Union Rights and the Australian People for Health, Education and Development Abroad (APHEDA).

<u>members</u>







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#### NEW SOUTH WALES NURSES' ASSOCIATION

In association with the Australian Nursing Federation

RECEIVED - 5 AUG 2002

ABN 63 398 164 405 In reply please quote: SAM:AG

22 July 2002

Ms Victoria Gilmore Australian Nursing Federation POP Box 4239 Kingston ACT 2604

Dear Victoria

#### Re: Review of Australia's skilled labour migration and temporary entry program

Thank you for the opportunity to provide feedback for this important review. Follows an overview of the Association's concerns and recommendations with respect to selected terms of reference.

#### International competition for skilled labour

It's no secret that Australian health care services are labouring under an acute imbalance between demand for services and supply of skilled nursing personnel. However, in the search for a solution it is important to remember that Australia faces a crisis shared by many developed and undeveloped nations around the world.

The International Council of Nurses (ICN) highlights the global nature of the shortage: England reported 22,000 unfilled FTE positions as of March 2000; a hospital in Zambia operates with only 1 in 3 nursing positions filled; Canada's projected need 100,000 nursing graduates over the next decade, but it is currently training nurses at a rate of 5000 annually<sup>1</sup>. The World Health Organisation is concerned by shortages and maldistribution of nurses across Africa, the Americas, Europe, S.E. Asia and the Pacific<sup>2</sup>.

In response to this shortage, the nursing labour market has become increasingly global. Governments and hospitals are looking overseas to recruit nursing staff, and offering substantial enticements. In its submission to the recent Senate Inquiry into Nursing, the Department of Immigration, Multicultural and Indigenous Affairs (DIMIA) reported Government sponsorship of "legislative

<sup>&</sup>lt;sup>1</sup> Trossman, S. 'The Global Reach of the Nursing Shortage: The ANA questions the ethics of luring foreign-educated nurses to the United States', in *American Journal of Nursing*, 102(3) March 2002, pp85-87.

<sup>&</sup>lt;sup>2</sup> WHO, Global Advisory Group on Nursing & Midwifery, Geneva, November 2000, Executive Summary, Sixth Meeting.

Address all correspondence to: General Secretary, 43 Australia Street, Camperdown 2050 (PO Box 40, Camperdown 1450) Telephone: 1300 367 962 Fax: (02) 9550 3667 Web: www.nswnurses.asn.au Email: gensec@nswnurses.asn.au

and policy changes which have increased opportunities for various employers in the Australian health industry to recruit highly skilled overseas nurses" and their intention to continue to do so.<sup>3</sup> DIMIA notes that over the period 1997-98 to 1999-2000 there has been a net gain of 1200 nurses entering this country<sup>4</sup>.

While Australian authorities seek to attract foreign nurses, the rest of the world is doing the same. Australia was the third biggest provider of nurses to the UK, behind the Philippines and South Africa, according to UKCC registration figures for 2000/2001<sup>5</sup>. The UK recruits in South Africa, so the South Africans address their losses by attracting nurses from Ghana<sup>6</sup>. It is a global merry-go-round, and many nurses benefit with opportunities to improve their standard of living through migration, acquire new skills and expand their knowledge while taking advantage of the many inducements currently offered by recruitment agencies.

However, the implications of this international competition for nursing skills invite some ethical consideration. Overall, there is a net movement of nurses from less developed countries to developed countries<sup>7</sup>. The UKCC statistics for 2000/2001 reflects significantly increased recruitment of nurses from Zimbabwe, Nigeria, Ghana, Zambia, Botswana, Kenya and Malawi<sup>8</sup>. It has been claimed that the recruitment of nurses by the NHS is bringing some countries' health care systems to their knees.<sup>9</sup> The WHO and World Bank have highlighted this poaching of health professionals from the African region as having potentially catastrophic consequences as there will not be enough skilled personnel to implement the programs in Africa to combat AIDS, tuberculosis and malaria<sup>10</sup>.

In view of the disastrous consequences of international recruitment practices for less-developed nations, the NSW Nurses' Association views the relaxation of visa arrangements for foreign nurses as a short-sighted strategy, which will do nothing to address the long-term problem of systemic failures of governments and universities to fund and recruit appropriate numbers of undergraduate nursing students. Further, it is morally unsound to seek a solution to the domestic shortage by exporting it overseas. Finally, it is foolhardy in the extreme to direct attention to importing nurses whilst ignoring the underlying cause of the domestic nursing shortage – deteriorating working conditions and limited remuneration.

#### Lessons to be learnt by Australia from the policies of competing nations

In the United States, attempts to relax visa requirements to facilitate the entry of foreign nurses have resulted in a significant number of cases of foreign nurses gaining visas and employment on fraudulent grounds<sup>11</sup>. Not only was there an absence of appropriate credentialling of these applicants and subsequent

<sup>&</sup>lt;sup>3</sup> DIMIA submission to Senate Community Affairs Reference Committee Inquiry into Nursing, August 2001

<sup>&</sup>lt;sup>4</sup> DIMIA submission to Senate Community Affairs Reference Committee Inquiry into Nursing, August 2001

<sup>&</sup>lt;sup>5</sup> Nursing & Midwifery Council, UK, Press statement, 15 August 2001

<sup>&</sup>lt;sup>6</sup> Buchan, J. 'Nursing Brain Drain', in *The Nursing Standard*, 15(4), October 2000, pp22-23.

<sup>&</sup>lt;sup>7</sup> WHO, Global Advisory Group on Nursing & Midwifery, Geneva, November 2000, Executive Summary, Sixth Meeting.

<sup>&</sup>lt;sup>8</sup> Nursing & Midwifery Council, UK, Press statement, 14 August 2001

<sup>&</sup>lt;sup>9</sup> Nursing Standard, 1998, 12(44), p7

<sup>&</sup>lt;sup>10</sup> WHO Nigeria, 2002, www.who-nigeria.org/brain.html

<sup>&</sup>lt;sup>11</sup> American Nurses Association, 15 Jan 1998, Press release

implications for the quality of care provided, the cases also demonstrate the vulnerability to exploitation and abuse such workers confront.

Exploitation and mistreatment of foreign nurses has also been an issue of concern in the UK and Ireland. There have been reports of major worker abuses by ruthless operators, charging exorbitant fees for advice and services, providing substandard accommodation and misleading contracts.

There has also been significant attention in the United States as to the accuracy of attempts to project the scale of future need and shortages. An acute shortage in the US in the 1980s led to the establishment of preferential visa program for nurses in 1989. By 1996 there was significant opposition to the program from nursing organisations, amid claims that the domestic nursing workforce was being supplanted by the pool of foreign nurses.<sup>12</sup>

In a global evaluation of skilled migration programs conducted by the Migration Research Unit at the University College London<sup>13</sup>, it was found that the more successful skilled migration initiatives featured the following:

 A transparent process of consultation with all stakeholders to determine real shortages and negotiate targets;

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- A robust and comprehensive research, data collection and analytical methodology to identify and monitor shortages, training needs and policy planning, as well as ongoing program evaluation; and
- A skill-matching database should be established to link supply and demand to changing labour market demands.

In terms of skill shortages and targeted migration programs, it is important to be cognisant that there is no accurate method to quantify and project future shortages. It is imperative then, that industry groups play an active role in the process of identifying shortages and appropriate levels of foreign intake.

#### How to improve the competitiveness of Australia's skilled migration program

A country such as Australia has a very significant advantage in the global competition for nurses. Climate, high standards of living, minimum labour conditions and a modern health service sector are all significant attractions for nurses from around the world.

Most overseas nurses enter on working holiday visas, which restricts their employment with any one employer to three months.<sup>14</sup> This timeframe serves only to ensure that staff turnover and disruption is maximised, while the opportunity for a foreign nurse to integrate into the ward milieu is limited. It is therefore recommended that the time limit on employment with a single employer is extended to six months.

The recent Senate Inquiry into Nursing recommended simplification and streamlining of registration and recognition of overseas qualifications processes for overseas nurses. However, it is important to ensure that the experiences in the US with fraudulent applications, compromised patient safety and

<sup>&</sup>lt;sup>12</sup> Joel, L. 'Immigration: Why Is It Still Up for Discussion?', *American Journal of Nursing*, 96(1), 1996, 7.

<sup>&</sup>lt;sup>13</sup> Salt & McLaughlan, 2002, 'Migration: Benefiting Australia', DIMIA Conference

<sup>&</sup>lt;sup>14</sup> DIMIA submission to Senate Community Affairs Reference Committee Inquiry into Nursing, August 2001

exploitation and abuse of nurses does not occur here. There must be stringent regulation of overseas nurses' qualifications and assessment of language ability to ensure that the shortage of Australian-trained nurses does not result in an overall decline in professional standards.

Ultimately, highly trained and mobile nurses are spoilt for choice in the globally competitive market. The most important and practical means by which Australia can secure the highest-quality candidates is by ensuring that the pay and conditions of Australian nurses reflect the scarce and valued commodity they have become.

I trust that the issues identified in this paper will assist you in preparation of the ANF submission. An electronic copy will be emailed to you for your convenience.

Yours sincerely

Brett Holmes

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**SANDRA MOAIT** General Secretary

#### (36) RECRUITMENT OF OVERSEAS NURSES

The Australian Nursing Federation recognises that migration is an international phenomenon, however immigration is neither an effective nor desirable instrument to overcome labour market deficiency.

The Australian Nursing Federation adopts the policy that:

- 1. Employers wishing to recruit nurses overseas must demonstrate:
  - 1.1 evidence of a shortage of nurses in Australia
  - 1.2 that they have introduced a range of strategies aimed at attracting, recruiting and retaining nurses residing in Australia
  - 1.3 that they will offer such nurses identical employment conditions to nurses in Australia
- 2. Prior to the recruitment of nurses overseas, the following avenues for nurse employment are to be explored in the following order of priority:
  - 2.1 employment of nurses who are made redundant as a result of services closing
  - 2.2 employment of practising registered nurses
  - 2.3 non practising registered nurses to be encouraged to return to the workforce
  - 2.4 interstate recruitment encouraged, and finally
  - 2.5 then, nurses recruited from overseas.
- 3. Procedures for the assessment of overseas nursing qualifications must be equitable and fair and be based on a proficiency in the English language and clinical competence, recognising previous experience and prior learning in addition to formal educational qualifications.
- 4. Employing agencies seeking specialist nurses must demonstrate a commitment to education and training of specialist nurses.

New South Wales Nurses Association acknowledged

Adopted by Federal Executive, June 1998



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#### Nurse Retention, Transfer and Migration

#### **ICN Position:**

ICN and its member associations firmly believe that quality health care is directly dependent on an adequate supply of qualified nursing personnel.

ICN recognises the right of individual nurses to migrate, while acknowledging the possible adverse effect that international migration may have on health care quality.

ICN condemns the practice of recruiting nurses to countries where authorities have failed to address human resource planning and problems which cause nurses to leave the profession and discourage them from returning to nursing.

In support of the above ICN :

Disseminates information on nursing personnel needs and resources and on the development of fulfilling nursing career structures.

♦ Provides training opportunities in negotiation and socio-economic welfarerelated issues.

Oisseminates data on nursing employment worldwide.

♦ Takes action to help reduce the serious effects of any shortage,

maldistribution and misutilisation of nursing personnel.

♦ Advocates adherence nationally to international labour standards.

♦ Condemns the recruitment of nurses as a strike-breaking mechanism.

♦ Advocates for open and transparent migration systems (recognising that some appropriate screening is necessary to ensure public safety).

♦ Supports a trans-cultural approach to nursing practice.

Promotes the introduction of transferable benefits, e.g. pension.

National nurses' associations are urged to:

International for nursing.

Council of

Nurses 3 Place Jean Marteau 1201 Geneva Switzerland Tel: +41 22 908 01 00 Fax: +41 22 908 01 01 Encourage relevant authorities to ensure sound human resources planning for nursing.

Ore Participate in the development of sound national policies on immigration and emigration of nurses.

Ore Promote the revision of nursing curriculum for basic and post-basic education in nursing and administration to emphasise effective nursing leadership.

♦ Disseminate information on the working conditions of nurses.

Tel: +41 22 908 OI 00 Fax: +41 22 908 OI 00 Fax: +41 22 908 OI 01 Conditions are not acceptable to nurses and professional associations in those countries. email: icn@icn.ch <sup>(1)</sup> Ensure that foreign nurses have conditions of employment equal to those of local nurses in posts requiring the same level of competency, and involving the same duties and responsibilities.

> Insure that there are no distinctions made among foreign nurses from different countries.

Of Monitor the activities of recruiting agencies.

Provide an advisory service to help nurses interpret contracts and assist foreign nurses with personal and work-related problems, such as institutional racism, violence, sexual harassment.

Provide orientation for foreign nurses on the local cultural, social and political values and on the health system and national language.

Alert nurses to the fact that some diplomas, gualifications or degrees earned in one country may not be recognised in another.

Assist nurses with their problems related to international migration and repatriation.

#### Background

The majority of member states of the World Health Organization report a shortage, maldistribution and misutilisation of nurses.

Financial constraints have forced some governments to close health facilities despite the need for services and the ensuing redundancy of nursing personnel.

Management and compensation practices greatly affect the severity of nursing shortages, particularly in health institutions.

In many countries, the career structures for nurses are inappropriate. Some governments have failed to address the identified problems relating to hours of work, ongoing education, re-entry programmes, staffing levels, attitudes of administrators, security, housing and day care services.

Massive recruitment campaigns for foreign nurses have been initiated by some governments and private agencies. These campaigns delay effective local measures that would improve recruitment, retention and long-term human resource planning.

Certain recruitment agencies have unethical methods of work that prevent informed decision-making on the part of the recruited nurse.

#### International

Council of Nurses

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Discriminatory treatment (e.g. pay, working conditions) may occur between national and foreign nurses and between foreign nurses from different countries.

International recognition of nursing diplomas, post-basic studies or degrees is not yet widely established. This may be a source of frustration for nurses emigrating to work or to pursue educational programmes.

Fax: +41 22 908 Migration and repatriation may result in the loss of benefits (e.g. pension, seniority) and is not always considered by the recruited nurse.

**Osition Statemen** 

email: icn@icn.ch

Adopted in 1999	Related ICN Positions:
	Abuse or Violence against Nursing Personnel
	Socio-economic Welfare of Nurses Strike Policy.

The International Council of Nurses is a federation of more than 120 national nurses' associations representing the millions of nurses worldwide. Operated by nurses for nurses, ICN is the international voice of nursing and works to ensure quality care for all and sound health policies globally.

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