

News

'ED has become so dangerous and unsafe that I personally needed to move out'

By Mary Longmore

October 10, 2022

In the second of a series of profiles of the incoming NZNO board, *Kaitiaki* speaks to Wairarapa nurse practitioner Lucy McLaren.



New NZNO board member Lucy McLaren, at centre, flanked by Jenni Roberts and Edna Beech . (Photo supplied by the Wairarapa Times-Age)

Tired of a "dangerous and unsafe" environment in the Wairarapa Hospital emergency department, new NZNO board member Lucy McLaren quit in September to work in a local primary health practice.

"ED has become so dangerous and unsafe that I personally needed to move out," she said. "It's really scary – the sheer volume of what's coming through, you cannot safely do your job as there is just too much to do," said McLaren, who wrote about her experiences in *Kaitiaki* in July.

'Fell' into nursing

Born into a family of health professionals, McLaren started nursing more than 30 years ago. "My mum was a nurse and my dad was a doctor, so I just fell into it," she told *Kaitiaki*. "But when I began, it all made sense."



Lucy McLaren

Starting out in primary health before a stint in the United Kingdom in emergency and gynaecology, McLaren returned to primary health then intensive care in Wellington. Later, moving to the Wairarapa, McLaren took up an office role at the district health board, managing policies and professional development and recognition programme (PDRP) planning – "all the organisational stuff that goes on behind the scenes to keep nursing going at the frontline".

But she missed patient care and after eight years became an associate charge nurse in the ED before qualifying as a nurse practitioner (NP) — a move greeted with "caution" by some.

"Certainly my medical colleagues were very wary at the start. They weren't really sure how the role would work – how my responsibility would sit with their practice — so they felt a bit cautious."

But after an experienced NP joined and supported McLaren, over five years those tensions "turned around", with medical and nursing staff working as a team.

"I think nurses want to help people, or be with people and doing stuff, and that's just part of who I am, and they are."

McLaren said she was "sad and worried" for the colleagues she was leaving behind, who were doing "phenomenal" work in an unsafe environment.

But she feared nothing would change in the near future. "I can see for the next couple of years, Te Whatu Ora is going to be focused on getting primary health up and running and I want to be part of that work," she said.



Lucy McLaren (second from right) was among NZNO delegates who met Health Minister Andrew Little in July over his claims there was no crisis in health care.

"I don't see any focus on really sorting out the hospitals and it's such a hard environment. They're going to be facing short-staffing issues for some time to come and I just needed to step out of that."

Why run for board?

McLaren decided to run for the board after seeing a "really exciting" start from new chief executive Paul Goulter on the pay equity issue. "I thought that looks like a really good place to put my hand up and do some work as well."

"And that's not fair - why should we rural farming-based districts not have access to the same as what the city folks do?"

An NZNO delegate herself for the past three years, McLaren is keen to see delegates, members and the organisation work more closely together. She'd also like to see more support for delegates to be effective in their role, including talking to media, with a focus on "really professional" language. "Nurses are professionals and if we are professional in our approach and have the patient at the forefront, there is so little they can pull us down on."

She was also concerned about health-care inequities faced by rural communities: "The difference in what can be done for patients here compared to Wellington is startling." For example, there were no dermatology services available in the Wairarapa region. "And that's not fair – why should we rural farming-based districts not have access to the same as what the city folks do?"

Challenges

McLaren said the biggest challenge facing nurses right now was to "rise up and be part of what needs to be done while being worked to the bone.

"We're just so tired, it's really hard to keep motivated to fight for the right things, to have the energy to go to meetings and respond to emails . . . when you just want to go home and forget about work."

She lives on a Wairarapa lifestyle block with her husband, four children and horses. When not working, much of the time she is "tied up with kids' hockey".



Lucy McLaren (far right) at home with her family in the Wairarapa

And despite seeing close up the challenges facing nurses, two daughters are taking up the profession — one in her second year ("she is just loving it") and another about to start training. "I haven't managed to put them off!" McLaren says. "I think nurses want to help people, or be with people and doing stuff, and that's just part of who I am, and they are."



News

'I always thought you had to be rich . . . and Māori couldn't be nurses'

By Cate Macintosh

October 26, 2022

Rotorua practice nurse manager Tracey Morgan shares her story, and goals for the NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa board, as part of a series on the newly elected directors who met for the first time this week.

As a child, Tracey Morgan (Ngāti Raukawa) believed being Māori and poor ruled out a career in nursing.

"I did grow up in poverty, so I always thought you had to be a rich person and that Māori couldn't be nurses."

Morgan grew up in the South Waikato town of Putāruru with seven siblings and close ties to her Māori and Pākeha grand-mothers.



Rotorua practice nurse manager and board director Tracey Morgan said there was still a lot to be done to achieve better conditions and pay for all nurses.

As a six-year-old, she clearly remembers being transfixed by a Pākeha district nurse who came to treat an aunty.

"I used to wait for her to come and she would give me her left-over wound pack and gloves, and I used to think I was the coolest."

At about the age of 11, while in hospital, her ideas were challenged when a Māori nurse treated her.

"And I thought I can be a nurse! I was just in awe, and I would tell her 'I think you're amazing'."

"We need to stand and be heard and valued... because it's too sad to see nurses getting burnt out."

Despite her newfound hope, Morgan struggled with high school science, failing to gain the grades needed for nursing study.

"I cried when I got results and thought I will never be a nurse."

After many years in banking and administration, it was motherhood – and Plunket – that became a bridge for Morgan, into a nursing career.

Putāruru Māori Women's Welfare League president Ruthana Bigbie asked Morgan if she would help sign up whānau for the childhood vaccination programme.

When a new role as a Plunket kaiāwhina was created as part of a pilot, Morgan seized the opportunity to get more involved. After eight years in the role and with plenty of encouragement from her nurse colleague, Morgan signed up for the bachelor of nursing programme.

Her four tamariki were aged between four and 13 at the time, and she credits them and her husband for the sacrifices they made for her to do the course.

After graduating, she quickly returned to primary health care but with new skills and responsibilities as a registered nurse.

In the past 15 years she has worked in multiple roles in primary health practices, aged care and tamariki well-child programmes in the Hawke's Bay, South Waikato, Tauranga and Rotorua.

In 2019, she and her husband resigned from their respective roles, and were preparing to join whānau in Perth, Australia – until her husband got cold feet.



Rotorua practice nurse manager and NZNO
Tōpūtanga Tapuhi Kaitiaki o Aotearoa board
member Tracey Morgan wanted to be a nurse as
a child. Pictured far left with siblings.

"I cried when I got results and thought I will never be a nurse."

Thrilled that Morgan was now staying put, her current medical practice owner asked her to manage a centre they had bought in Rotorua.

Within a year of graduating, Morgan was invited to her first regional committee meeting for NZNO in Hawke's Bay. Within a few weeks the chair resigned and Morgan was asked to step up.

"I fell in love with it and I never stopped loving it."

Morgan became involved in Te Rūnanga to support and grow the Māori nursing workforce, and she felt this was key to improving patient outcomes.

Soon she was invited to attend an NZNO AGM in Wellington – and was hooked.

"I loved being around all nurses."

In 2019, Morgan was elected NZNO vice-president and became acting president a few months later – a period she says was extremely challenging.

Dealing with online abuse of the kaiwhakahaere, other members of Te Rūnanga, and herself, was painful, Morgan said.



NZNO kaiwhakahaere Kerri Nuku and then acting president Tracey Morgan lead members through Wellington during the first DHB members' strike in 2021.

In the 2021 leadership elections, Morgan stood unsuccessfully for president, losing to Anne Daniels.

Now, back on the board as a director, Morgan said she wants to focus on representing all members.

"We need to stand and be heard and valued . . . because it's too sad to see nurses getting burnt out."

The Maranga Mai! (https://maranga-mai.nzno.org.nz/) campaign launched in May boosted her confidence in the potential for the organisation to work in unity to achieve it's goals, Morgan said.

"I want to be part of the solution that helps those nurses not go overseas, those young nurses come through and not be burnt out."

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Features

'It's cool to korero' - October

By Kathy Stodart October 10, 2022

Kei te rongo au i te ua. — I hear the rain



Pūroro -- driving rain. PHOTOS: Adobe Stock







Koripo marama — a day's rain.



Kōpatapata — light rain falling in heavy drops.

Haere mai! Welcome back to the kōrero column, the first on the *Kaitiaki* website.

Aotearoa is a rainy country and given the close relationship Māori have traditionally had with the natural world and its weather, it is no surprise that there are many, many words in te reo that describe rain in all its moods.

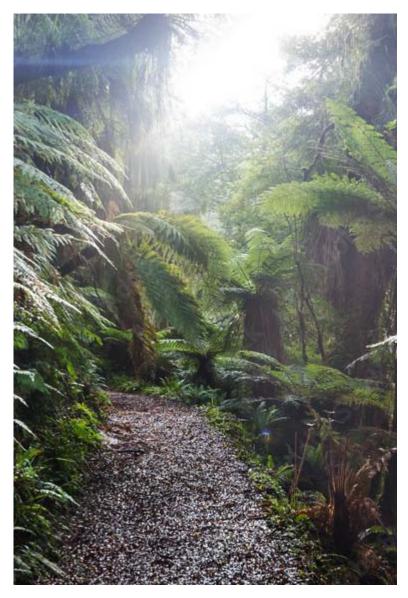
Rain can also be thought of in a spiritual sense — the raindrops symbolising tears of grief.

Kopu hou (new word)

- Ua (rain) pronounced "ooh-ah"
- Kei te rongo au i te ua. I hear the rain.

More words for rain:

- **kōpata** drop of rain
- kōuaua light, scattered rain
- hāuaua drizzle/light rain
- tārū kahika light summer rain
- kopatapata light rain falling in heavy drops
- pūtai misty driving rain/sea spray
- **pūroro** driving rain
- āwhā heavy rain, storm



Maomao — the moment when the rain stops. Huruwhenua (ferns) thrive in the rain-soaked bush.

- ua tata very heavy rain
- koripo marama a day's rain
- maomao the moment when the rain stops

E mihi ana ki a Titihuia Pakeho rāua ko Mairi Lucas.

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News

'The key performance indicator I have to meet is with my people'

By Mary Longmore
October 21, 2022

In the third part of a series on NZNO's board members, Tauranga nurse Anamaria Watene says she finds solace in her marae, Tahuwhakatiki, and sacred local mountain, Mauao, when challenges such as racial prejudice become too much.



Anamaria Watene (second from left) with four generations of girls, from left: Rebecca Watene (kōtiro/daughter), Braylin Watene-Paul (mokopuna/granddaughter), Mereira Rakuraku (mokopuna tuarua/great granddaughter). She has three children, 11 mokopuna and two mokopuna tuarua "and I love them all very very much".

As a Māori nurse, Anamaria Watene feels the pressure to achieve highly in her work. "You have a mission, a kaupapa to be sure your patients have a safe journey through your service and back out into the community."

It can be hard, at times, when confronted with prejudice.

"You're just doing your work ... [people] say 'why are so many Māori going to prison, why are you all protesting for your land back?' That stuff, when it comes onto your ward, I guess that's a challenge," Watene says. "But that's always been a challenge. You get through it and wait for the next one, and the next one — and then the challenge becomes like 'yay, can't wait for the next one!'"

Watene (Ngāi Te Rangi, Ngāti Ranginui, Ngāti Pūkenga, Ngāi Tūhoe) is a clinical nurse manager on Tauranga Hospital's kaupapa ward — an innovative Māori-led 22-bed medical ward set up in the 1980s, where about 75 per cent of staff are tangata whenua.

"[A Māori-led health service] was really controversial back then, a stigma . . . and some of it is still here today," Watene says. "It was a really brave step out."

"I guess when we do have Māori patients here, it's a different type of knowing... we just know, or they just know, without any real explanation"

At the time, koro and kuia from the local iwi — Ngāi Te Rangi, Ngāti Ranginui, Ngāti Pūkenga — looked at Māori health statistics and asked: "Where is the voice of Māori within this organisation, within Tauranga Hospital?"



Ko Kopukairua tōku Maunga



Ko Waitao tōku Awa



Ko Mataatua tōku Waka

Ko Ngaiterangi tōku Iwi Ko Ngā Pōtiki tōku Hapu



Ko Tahuwhakatiki tōku Marae

Ko Rongomainohorangi te Whare Tupuna Ko Tuwairua te Wharekai

Ko Anamaria Watene tōku ingoa

'Re-imagining' the impossible

The late activist/lawyer/academic Moana Jackson and cultural safety pioneer Irihapeti Ramsden threw their weight in behind the initiative, and in 1989 the hospital's first kaupapa Māori service opened. "I guess it's like Moana Jackson's thing around 'reimagining (https://www.indigenousnursesconference.org/)' . . . the impossible becoming possible," Watene says.

As a Tauranga College student, going past the hospital each day on the bus, Watene used to say: 'I'm going to work over there as a nurse'. "Now when I get together with my cousins, they say, 'Anamaria, you were right!' So that was an inspiration too."

It took a little while. She married and raised three children before doing her training in the late 1990s at the then-Waiariki Polytechnic in Rotorua. Watene worked at the hospital in paediatrics for a few years before joining the kaupapa ward — eventually becoming its clinical nurse manager in 2011.

"Nurse managers have KPIs (key performance indicators) they have to meet on a monthly or daily basis, but the KPI that I have to meet is with my people – and that's one of the biggest KPIs in this hospital."

"Now...I can really get down to business without being clouded by these other things."

It has always been a struggle to find enough Māori nurses to staff the ward. Back in the '80s, many were working "out of sight" in the community as enrolled nurses. But NZNO's Te Rūnunga o Aotearoa had worked hard to build relationships with nursing schools such as Toi Ohomai in Tauranga and Te Whare Wānanga o Awanuiārangi in Whakatāne, supporting tauira. Growing numbers of Māori nurses are now entering the workforce. "Not as much as we are wanting, but they are coming through," says Watene, who is Te Rūnanga's Bay of Plenty/Tairāwhiti representative.

Watene — who speaks te reo Māori — says it is particularly gratifying to see a new generation of nurse graduates with fluent te reo Māori, having been immersed from kōhanga reo through to whare kura (high school).

Māori nursing workforce

Growing the Māori nurse workforce — nationally stuck at around seven per cent for the past decade — is a key focus for Watene. "That's my thing, in Te Rūnanga, is growing workforce.

"I guess when we do have Māori patients here, it's a different type of knowing, like a different type of kōrero with them, with us. It's more real, knowing your body language — we just know, or they just know, without any real explanation," explains Watene. "We walk, talk, live those concepts. We live tino rangatiratanga, whakawhanaungatana, manaakitanga... That is part of us, that is who we are."

"We want our tauira to get over the line – that's giving them a chance, because they know these things, but they have to get a tohu, we have to get a paper."

Unfinished business

Despite the challenges of being on NZNO's board of directors over the past three years — Watene was first elected in 2019 — she wanted to return and finish the mahi.

Enduring a period of extended conflict, special general meetings and resignations — "my God, this was not what I thought it to be!" — over time, board relationships grew. "And we would find, oh, we were a whānau!

"And now we can see the light at the end of the tunnel and so that's why I wanted another term, so I can really get down to business without being clouded by these other things."

For Watene, that business is growing the Māori workforce, a te Tiriti focus and seeing the nursing profession valued — "working together for all our members . . . every nurse everywhere, no one left behind".

Along with her matauranga Māori — knowledge of tikanga, kawa, te reo — Watene is big on whanaungatanga — relationships, or maybe kin. A Filipino colleague told her: " 'Oh, Anamaria, you know when we come to New Zealand we have to leave our families in the Philippines ... but what the kaupapa ward has given us is a whānau'. It's all I wanted to hear!"

And for her own personal restoration, she reads, walks around Mauao te Maunga or hangs out at her marae, Tahuwhakatiki.



Ko Mauao te Maunga / Mt Maunganui

"I just love doing that. I just go down there by myself — that's my best place, my happy place."



News

'This was Sue's magic, this is how she touched people'

By Cate Macintosh

October 5, 2022

The sudden death of mental health nurse and NZNO delegate Susan Cade has left colleagues shocked and grieving. Kaitiaki spoke to colleagues and family about the much-loved nurse.



Mental health nurse Susan Cade who died suddenly in a freak boating accident.

A chance encounter with Susan Cade on a track in the Porirua hills is the lasting memory Kathy Knowles will treasure of her colleague.

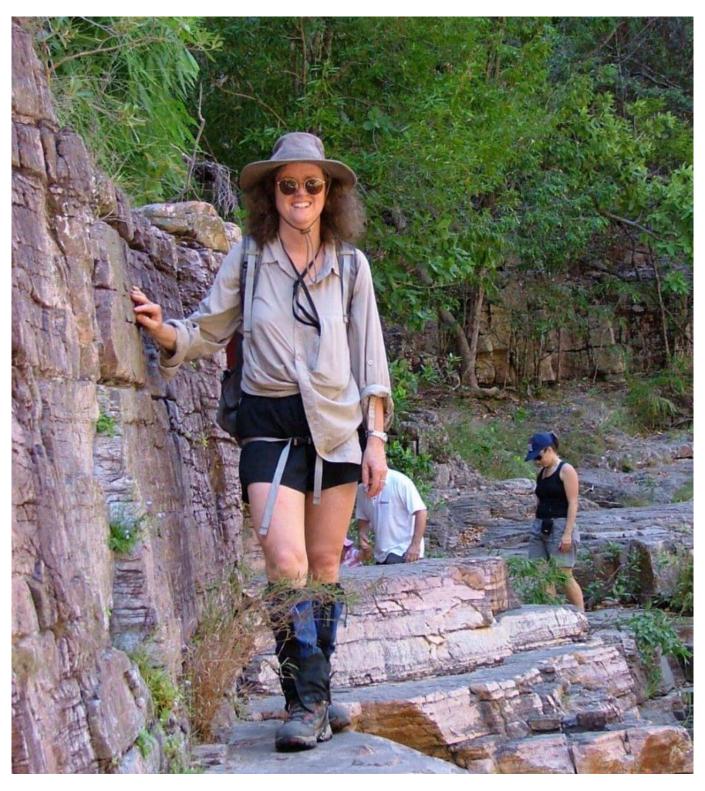
Cade, a long-serving mental health nurse and an NZNO delegate, died suddenly in a freak

boating accident while on a weekend trip in Kaikoura with 10 other people from the Nature Photography Society of New Zealand on Saturday, September 10.

Maritime NZ is investigating the accident in which an eight-metre boat suddenly capsized, resulting in the death of five passengers.

Cade's brother Phil Cade said the family believed it was likely the charter boat struck a whale.

Cade's death has been devastating for her many colleagues.



Mental health nurse and NZNO delegate Susan Cade pictured on one of her many adventures. Cade died last month in a freak boating accident in Kaikoura.

Knowles worked with Cade at Te Whare Ra Uta, the inpatient older person's mental health unit in Kenepuru, Porirua.

She said Cade looked to be in her element on the track, and was "not the Sue I knew from work".

"...instead [she had] wild hair, hiking boots, a bushman's hat slung over her backpack and an ear-to-ear grin."

Knowles told her she was the "quintessential energizer bunny", to which Cade "threw her head back and laughed".

She told *Kaitiaki* Cade was an incredibly dedicated and meticulous nurse, often staying for long periods after her shift finished to complete patient notes or update TrendCare.

"Her work stories were quite a lot more interesting than ours, right up to the last [time they saw her], often with humour."

The union activist

Cade was driven to advocate for colleagues as a NZNO delegate over decades, organiser Jo Coffey said.

"She was very community minded, very patient, kind, always took the time to listen to other people's concerns and to escalate them and try and get results for all their problems and issues.

"She knew [NZNO] was the pathway to get better terms and conditions and to get people's issues heard."

Coffey credits her start on an NZNO career path to Cade, who got Coffey involved in distributing union news to members.

Knowles told her she was the "quientessential energizer bunny", to which Cade "threw her head back and laughed".

[&]quot;... that was Sue's way of growing the union delegates, she would drop off different kits and packs and taught me how to be a delegate – she was very much an activist like that."

Coffey said Cade encouraged her colleagues to have a good work-life balance and loved sharing stories about her out-of-work passions including dancing, photography and tramping.



Susan Cade (front row, right) with her whānau after a walk in the Manawatu Gorge, 2015.

"If she asked you what have you been up to last weekend, and you said you hadn't done anything, she would look at you mortified, and she'd look you up and down as if to say, get out there!"

Fellow Greater Wellington Regional Council member Ann Simmonds said Cade brought her love of detail, and her sense of fun, and passion for improving conditions and pay for nurses to her roles on the council.

"She wanted to make the reasons for going to council meetings and the reasons for participating in unionism visible to all nurses."

A life-long commitment to nursing

Cade's career started with a role at Palmerston North Hospital in 1977.

A decade later she began working in acute psychiatric care at Hutt Hospital, and remained a mental health nurse for the rest of her career, her brother Phil Cade said.

"She was always interested in helping people and looking after people. Right from an early age she always had pets, and my mum had been a nurse too."

He wasn't sure why his sister was drawn to mental health nursing but guessed it was because she loved talking to people.

"For the rest of my walk I felt inspired and so much lighter, her laughter resounding in my ears. This was Sue's magic, this is how she touched people."

"Her work stories were quite a lot more interesting than ours, right up to the last [time they saw her], often with humour."

Phil Cade said his sister went above and beyond her professional duty to support patients, including buying food she knew they liked.



Nature photography was a huge passion for the late Susan Cade, a mental health nurse and NZNO delegate.

Colleagues also recalled Cade stocking the fridge with treats for the patients – including yoghurts, juice, jelly, marshmallows, fruits and ice-cream – to make food or medication more palatable.

Knowles said she would hold on to the memory of Cade in the Porirua hills.

"For the rest of my walk I felt inspired and so much lighter, her laughter resounding in my ears. This was Sue's magic, this is how she touched people."



News

Aussie-run private hospital nurses go on 24-hour strike

By Mary Longmore

October 20, 2022

More than 200 nurses across three private hospitals run by Australian company Evolution Healthcare Ltd went on strike for 24 hours from 7am today, after urgent mediation failed.



Wakefield Hospital staff on strike.

It is rare for private hospital staff to strike but nurses told *Kaitiaki* they were fed up with not being listened to after 15 months of seeking better pay and leave entitlements.

About 230 NZNO members work at Wellington's Bowen and Wakefield hospitals, and Hawke's Bay's Royston Hospital — all owned by Evolution.

Members' demands include a 7.3 per cent increase in wages backpaid to 2020 (the rate of inflation); wages for 2022 onwards at Te Whatu Ora pay equity rates and the same public holiday and sick leave entitlements as Te Whatu Ora. "Evolution has offered well below this. They have resolutely refused to move and not meaningfully engaged in mediation," Wakefield Hospital registered nurse (RN) and NZNO delegate Lisa Blackmore said.



Annette Dillon with NZNO delegates Ruth Whittle and Lisa Blackmore.

There had been no pay increase since bargaining began in 2020, and their pay and conditions now lagged behind Te Whatu Ora. "We are not going to keep our staff, as you can go to elsewhere and earn more," RN Jan Falconer said.

Bowen Hospital theatre nurse Simon Auty said nurses were leaving the Evolution group for other hospitals, including public. "We don't expect internationally competitive rates but you can't just pay the same as Te Whatu Ora with worse conditions and expect people to come and work for you."

Wakefield Hospital nurse Annette Dillon said the latest backpay offer of 4.5 per cent "doesn't even bring some of our members up to a living wage".



Jan Falconer



NZNO organiser Lyn Williams and Royston Hospital RN and NZNO delegate Steph Meeks in Havelock North. (Photo by Paul Taylor courtesy of Hawke's Bay Today)

NZNO organiser Danielle Davies said mediation on October 19 had been "disappointing" with Evolution disengaged and taking a "tick box" approach. "They just sat there, they didn't engage meaningfully — even though I said we were happy to go back to work if they presented us with a new offer."

About 40-50 members turned out in the Wellington suburb of Newtown to protest over pay and conditions outside Wakefield Hospital, with more than 25 turning up at the smaller Bowen Hospital in the surburb of Crofton Downs.

About 55 turned out at Havelock North's Royston Hospital which was "fantastic" turnout, organiser Stephanie Meeks said. "Everyone was really into it. I don't think anyone had had too much to do with a strike before, but we had a great time!"



Danielle Davies at the Wakefield Hospital protest.

Davies said the corporation turned down NZNO's offer to call off the strike during mediation — yet had blamed nurses for delaying 80 elective procedures across the three hospitals.

"We offered to withdraw strike action, but they said 'we don't want nurses thinking strikes work'," she told protestors. "It's absolute greed, and it's absolutely disrespectful."

NZNO chief executive Paul Goulter said all hospitals needed to meet expected pay standards, otherwise their staff would leave. "I don't think this is about the company's ability to pay — I think it's sheer bloody-mindedness," he told nurses in Wellington. "I think they stand condemned.

"I can't understand why, in the middle of the worst nursing crisis, would you want to annoy your nurses?"



Paul Goulter with Lisa Blackmore in Wellington.

In a statement, Evolution's acting chief executive Matthew Clarke said they had offered a 15 per cent median pay rise "plus a range of other benefits" but this was rejected.

"We have been working hard to be one of the first employers to meet our nurses' pay equity expectations and have included a guaranteed top up if the public sector settles at a higher rate during the term of this agreement," he said in a statement. "We have done everything we could to prevent a strike, however we have prepared and have rescheduled about 80 elective procedures across the three hospitals."





Maranga Mai!

Maranga Mai! Tino rangatiratanga – what needs to change?

By Cate Macintosh

October 27, 2022

<u>Maranga Mai!</u> (https://maranga-mai.nzno.org.nz/) – NZNO's campaign to fix the nursing crisis – calls for a renewed commitment to equity and tino rangatiratanga for Māori nurses and patients, amidst reports of "endemic racism within the profession".



Every nurse everywhere



Rural health nurse Gina Chaffey-Aupouri, 63, started her nursing career at the age of 17 and has served her community ever since.

Rural health nurse Gina Chaffey-Aupouri

Chaffey-Aupouri, 61, says for Māori, tino rangatiratanga, or self-determination, is at the centre of te ao Māori, and te Tiriti. She wants to see members come together under Maranga Mai! to support and lift up Māori nurses and health outcomes.

- Greater understanding: Pākehā working with Māori nurses to gain understanding of te ao Māori and cultural competency.
- Growing the Māori workforce: Nurture kaiāwhina who stepped up in the COVID-19 vaccination programme to pursue nursing. "If we pay for our Māori students to be educated in the health realm, we're going to grow our health workforce."
- Pay parity: Lift pay for members employed by Māori/Iwi health providers. ".

 one of my biggest goals as a delegate was to get pay parity because we are so far behind any other nurse."



Whakatāne Hospital paediatric ward clinical nurse manager Sharon Powley.

Nurse Sharon Powley

Whakatāne Hospital paediatric clinical nurse manager Sharon Powley said she wants non-Māori nurses to support Māori.

- Self-determination for Māori nurses:
 Powley said tino rangatiratanga meant
 Māori nurses determining "their own path". "They need to have a pathway that is actually theirs, it doesn't have to belong to the rest of us."
- Pākehā as advocates and allies: Non-Māori nurses needed to advocate for their Māori colleagues, and this may mean challenging old ways of thinking.
- Using NZNO collective power: Recognise the disparities and ensure equity is achieved. "Because they are not on an equal playing field and Pākehā have a whole lot of power in that..."



Tauranga Hospital clinical nurse manager Traci Adams, 47, said it was disappointing to hear racist comments from other nurses.

Nurse Traci Adams

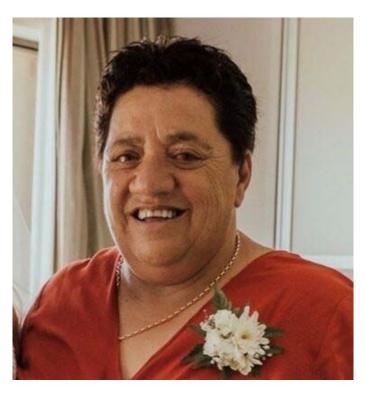
Tauranga Hospital clinical nurse manager Traci Adams

- Meaningful understanding of cultural competency: A better understanding of the impact of colonisation on Māori was needed among nurses.
- Being part of the korero: More advocacy by NZNO for self-determination for Māori in health.
- Tino rangatiritanga: "For me that's about not ceding our sovereignty over our land, and that also applies to the health and wellbeing of our hapu and iwi."

Ngāti Porou Hauora rural health nurse Gina Chaffey-Aupouri is hoping to retire in the next few years.

"In some time . . . give me five years, I'd like to be out of here. Because I've worked really hard."

In the rural health nurse role she has served the population of about 3000 across her East Cape community from her home base in Ruatoria for 27 years.



Rural health nurse Gina Chaffey-Aupouri, 61, started her nursing career at the age of 17 and has served her community ever since.

Chaffey-Aupouri is enthusiastic about Maranga Mai! and hopes it will achieve the goals of growing the Māori workforce, improving cultural competency and actualising te Tiriti.

"Māori struggle, we're given every possible barrier to struggle. And we shouldn't have to, to maintain our tino rangatiratanga, and others within the realm of health should understand what that means.

"Maranga Mai! Tino rangatiratanga – stand up for your rights as Māori."

Chaffey-Aupouri's own nursing career started abruptly 46 years ago, when she was just 17. "I was working in a shop one day and then all the kuia from Tokumaru Bay came to get me to tell me I needed to be a nurse."

Starting as a hospital aide at Te Whare Hauora o Ngāti Porou – Te Puia Springs Hospital, Chaffey-Aupouri completed an enrolled nursing programme in Hawke's Bay – one of the last cohorts trained in the hospital-based system.

"Maranga Mai! Tino rangatiratanga - stand up for your rights as Māori."

She returned home and worked as a practice nurse for a local GP for a few years.

"... he said you should go back to nursing school," Chaffey-Aupouri said.

She followed his advice and finished her bachelor of nursing degree before embarking on a masters in advanced nursing practice.

A long-serving NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa (NZNO) delegate and Te Rūnanga member, Chaffey-Aupouri says her employer – Ngāti Porou Hauora charitable trust – hasn't received enough funding to improve pay but she was hopeful change would come.

"I know they are working diligently to get us pay equity."

In some cases nursing staff employed by Māori or iwi health providers are paid up to 25 per cent less than those under the Te Whatu Ora collective agreement.

Chaffey-Aupouri says her numerous awards – including a Queen's Service Medal (QSM) for services to Māori health and education – belong to her people.

"It is through serving our people that I am enabled. In the waka together we are stronger."

Of 209 iwi and Māori health providers throughout the country, NZNO has collective agreements in place for 15 – including Ngāti Porou Hauora charitable trust – covering 361 members as of September 2022.



Rural health nurse Gina Chaffey-Aupouri, with her daughter Tomairangi Higgins, at Parliament House where she received a Queen's Service Medal for services to Māori in May.

Doing the mahi

A damning report (https://ojin.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals /OJIN/TableofContents/Vol-27-2022/No1-Jan-2022/Rhetoric-Racism-and-the-Reality-for-the-Indigenous-Maori-Nursing-Workforce.html) by Auckland University academics published in January concluded "endemic racism" within nursing was behind a stunted Māori nursing workforce.

While a critical part of the health workforce, Māori nurses were not valued but rather "silenced, rendered invisible, and oppressed", the article published in the *Online Journal of Issues in Nursing* said.

"We're not to be told, because those days are over. We need to work in conjunction, together towards something we feel is our self-determination."

"A general lack of political will has thrived and fueled the absence of a concerted national approach to enact targeted strategies to recruit Māori into nursing," the article concluded.

Launching Maranga Mai! in May, NZNO chief executive Paul Goulter said the organisation wanted to re-invigorate its commitment to te Tiriti, and tino rangatiratanga.

"Right across the motu, we cannot accept the dreadful outcomes [in] Māori health in this

country, and we must give our Māori workforce the right to do what is right to address that," chief executive Paul Goulter said at the campaign launch.

NZNO officially recognised tangata whenua members and committed to giving them a voice at "Ka Awatea – the New Dawn" – the annual conference of 2000.

"Māori nurses were not valued but rather "silenced, rendered invisible, and oppressed"..."

Today, Te Rūnanga has just over 4000 members, who are represented by their committee Te Poari, kaiwhakahaere Kerri Nuku and tumu whakarae Titihuia Pakeho.

NZNO's mission according to the constitution (https://www.nzno.org.nz/Portals/0/publications /Constitution%20-%20NZNO%20Constitution%202020-2021.pdf?ver=DAOCQHbUQ7Vgo7oWuziehw %3d%3d) "embraces te Tiriti o Waitangi" and aims to "give effect to te Tiriti partnership through representation of the concerns and interests of Māori members, and by seeking continued improvements in Māori health".

But many members say the commitment hasn't been realised and more work is needed.



NZNO professional and nursing services manager Mairi Lucas (Ngāti Ranginui, Ngāti Raukawa).

Māori are 16.5 per cent of the population but the Māori nursing workforce has been stagnant at seven per cent since 2015.

NZNO professional and nursing services manager Mairi Lucas (Ngāti Ranginui, Ngāti Raukawa) said the lack of progress on the workforce showed "there has been no commitment to increasing the Māori workforce to support Māori needs within health".

Lucas has worked with kaiwhakahaere Kerri Nuku and Te Rūnanga to develop Maranga Mai's goals under the banner of tino rangatiritanga including:

- Support for Māori self-determination
- Purposeful recruitment and retention of Māori nurses,

and training programmes

• Understanding implicitly, the history of Māori and colonisation.

- Cultural competency assessments by those who are competent in tikanga practice
- Ensuring Māori participation in governance and decision-making.

The revitalised commitment would need to apply to NZNO as much as the health sector, Lucas said.

"We've been a bicultural organisation for many years and yet our [NZNO staff] Māori workforce is less than two per cent. That's worse than the nursing workforce."

Lucas said she wanted to see more nurses employed by Māori and iwi providers represented in bargaining by NZNO.

Clinical nurse manager at Tauranga Hospital Traci Adams, 47, pursued a nursing career while a single mother of two.

A whānau group for students helped her navigate the challenges of study, but she says about eight dropped out from her course.



Tauranga Hospital clinical nurse manager Traci Adams, 47, said it was disappointing to hear racist comments from other nurses.

A cultural competency course was disparaged by many non-Māori students, with some refusing to attend a marae stay, Adams said.

With 10 years under her belt, the respiratory ward nurse manager still comes across racist attitudes from other nurses.

Comments by non-Māori nurses labelling a programme to offer Māori patients the COVID-19 vaccination as "racist" were disappointing, Adams said.

"Just accept that our ancestors got it wrong. And, that it's not about you personally - I think a lot of people get hung up on that."

"Having those negative comments coming from the back is not helpful when we're just trying to help our people get to an equitable level of health."

She said systemic disadvantages resulting from colonisation were not well understood or acknowledged, and could led to resentment and racism for some.

"If I didn't have the background that I do, and if I wasn't as mature as I am, I don't know if I would have had the broad shoulders to deal with that."

But Adams said she has started to see some positive changes over the past five years, as the number of Māori doctors has increased.

A focus on tino rangatiratanga meant pushing for self-determination for health and well-being outcomes, and being part of the decision-making korero, Adams said.

"We're not to be told, because those days are over. We need to work in conjunction, together towards something we feel is our self-determination."

Tino rangatiratanga and Pākehā

Whakatane Hospital paediatric ward clinical nurse manager Sharon Powley is clear about the role Pākehā and NZNO need to play in actualising te Tiriti.

"For Pākehā, our job is to support our Māori colleagues."

Supporting tino rangatiratanga meant understanding and accepting the legacy of colonialism.

"Just accept that our ancestors got it wrong. And, that it's not about you personally – I think a lot of people get hung up on that."



Whakatāne Hospital paediatric ward clinical nurse manager Sharon Powley with colleagues Tracy Black and Tina Murray, Māori nurses who worked with Powley on the ward and have gone on to roles in other parts of the hospital.

Powley said she believed cultural competency training required some individual responsibility, and openness.

"You could provide all the training in the world and some people will never change."

Supporting Māori sovereignty was a "no brainer" for the Maranga Mai! campaign, Powley said.

"... until we relinquish that power and go, 'it's ok, you can have that', it's not going to change and NZNO needs to lead the way."

A new partnership model?

Nuku said NZNO had an opportunity to forge a new path and live up to its te Tiriti commitments.



NZNO kaiwhakahaere Kerri Nuku.

She said the new health system, established under the Pae Ora legislation, had not delivered on the promise of partnership because the Māori Health Authority – Te Aka Whai Ora – did not have equitable funding power.

"I think, given the fact we are not driven by a Government mandate... we've got an opportunity to do it better but it does require a willingness of both parties to do that."

Nuku said going forward it would be up to NZNO to relinquish power to Te Rūnanga, so that true partnership could be achieved.

"I think we have been true to the kaupapa, it's the other party that hasn't come on board with that."

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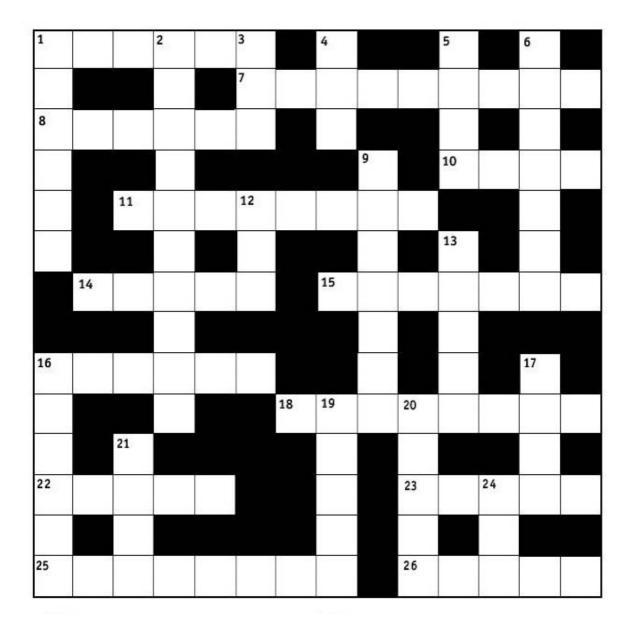
Puzzles

OCTOBER crossword

By Kathy Stodart

October 17, 2022

Print out this crossword grid (see PRINT tab at bottom right of page), and use the clues below.



ACROSS

- 1) Worldwide.
- 7) Irritated at delay.
- 8) Disregard.
- 10) Where the sun rises.
- 11) Queen of the 19th century.
- 14) Loud.
- 15) Glitter.
- 16) Unjust.
- 18) Process for choosing government.
- 22) Female monarch.
- 23) Percussion instruments.
- 25) Leave home for safety.
- 26) Canvas dwellings.

DOWN

- 1) Highly trained Japanese hostess.
- 2) Follow-up similar version of a biological medicine.
- 3) Tell untruth.
- 4) Type of primate.
- 5) Fluid produced by the liver.
- 6) Out of the ordinary.
- 9) Disagreement.
- 12) Child's plaything.
- 13) Edge of pizza.
- 16) One of a kind.
- 17) Verse.
- 19) Large serving spoon.
- 20) Military trainee.
- 21) Large flightless native bird.
- 24) Container for ashes.

September answers

ACROSS: 1. Week. 3. Ambulance. 6. Iron. 7. Rot. 8. Bomb. 11. Poison. 13. Sisters. 15. Rangatahi. 17. Owns. 18. Weary. 19. Toss. 21. Ewe. 23. Solution. 25. Waewae. 27. Fees. 28. Burden.

DOWN: 1. Whisper. 2. Emotion. 3. Apron. 4. Bet. 5. Ambitious. 9. Mōrena. 10. Visitor. 12. Ova. 14.

Raw. 16. Graduate. 18. Wool. 20. Fox. 22. Whā. 24. Here. 25. War. 26. End.

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News

Primary health care nurses to strike on October 27

By Cate Macintosh

October 13, 2022

Nurses providing vital care to patients in the community want movement on stalled pay talks. Over 4000 of them will walk off the job for four hours on October 27.



Hundreds of members attended stop work meetings to discuss negotiations of a primary health care MECA and next steps.

A four-hour strike by more than 4000 primary health care (PHC) members employed by hundreds of medical centres, Plunket and home-based care provider HealthCare New Zealand will go ahead on October 27.

The 3500-member strong group of PHC members employed by medical centres met and voted on Wednesday, October 12.

About 700 Plunket and 176 Healthcare New Zealand members had earlier voted to strike for the same time period from 10am to 2pm on October 27.

It will be the first time Plunket and Healthcare New Zealand members have taken industrial action, NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa industrial adviser Danielle Davies said.

An online ballot opened to PHC members employed by medical centres from 3.30pm to 5pm on Wednesday. Of 1215 who voted, 92 per cent supported proposed industrial action, Davies said.

After 14 months of bargaining, medical centre employers had not moved on their offer of 2.78 per cent.

"If members support strike action on 27 October, this will mean a wave of strikes across the primary health sector by NZNO members on this day."

NZNO is pushing for pay parity between PHC nurses and their colleagues employed by Te Whatu Ora.

Nurses covered by the PHC MECA (those employed by medical centres) can earn a top rate of \$36.02, compared to \$39.88 for those employed by Te Whatu Ora – a 10.7 per cent gap.

Davies told PHC members at stop work meetings in Christchurch that industrial action was never taken lightly, but the bargaining team felt it was time for a circuit breaker, with employers and their funders locked in an intractable dispute.

"We have had discussions with the Ministry of Health and their position is that the employers are adequately funded to meet our claim of pay parity with the DHBs for members employed under this MECA. The employers refute this.

"Right now, we're the ones with the problem: our members are facing rising living costs and lack parity with their DHB colleagues.

At one of two meetings on October 12 in Christchurch



NZNO industrial adviser Danielle Davies spoke to primary health care members ahead of a ballot to strike for four hours on October 27.

some members questioned why the action was limited to four hours, Davies said.

Primary health care nurses employed by medical centres went on strike for eight hours in September and 24-hours in November, 2020.

"... we're all nurses, and we're all doing the same job and caring for patients and we should get paid equally, so yeah, I'm just supporting my colleagues."

But Davies said the four-hour action would be enough to get the message to the Government this time.

"Our objective, or our target, this time is actually not the employers, so we're not looking to impact the employer services as much as possible – our target is a media and political target."

She said planning was underway for large rallies in all main centres on October 27.

"If members support strike action on 27 October, this will mean a wave of strikes across the primary health sector by NZNO members on this day."

The Maranga Mai! – Rise Up campaign, launched in May, aims to achieve meaningful commitments from the Government to address the health crisis through collective action by all members.

The bargaining team strategy – to coordinate the action across these three primary health care groups on October 27 – provided a powerful opportunity to put the wider goals of Maranga Mai! into action, Davies said.

A member at the Christchurch stop work meeting, who didn't want to be named, said she was pleased the proposed strike was for four hours and would vote in favour of the action.

"I've always been against strikes because I think of my patients, but I think a four hour strike is very manageable, short, sharp, gets the message out there."

The nurse said she would vote to strike because she had come to "the realisation that there was such a huge gap in partity".

Her colleague, who also didn't want to be named, said she would vote to strike because she was frustrated there had not been a better offer after 14 months of negotiations.

"... we're all nurses, and we're all doing the same job and caring for patients and we should get paid equally, so yeah, I'm just supporting my colleagues."

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News

Primary health nurses take their message to the streets, the Government, and the Minister

By co-editors Cate Macintosh and Mary Longmore

October 27, 2022

Primary health and Plunket members walked off the job, and onto the streets, to escalate their demand for pay parity with hospital colleagues.

Around the motu, 4200 members employed by GPs and urgent care clinics, and by Whānau Āwhina Plunket, walked off the job for four hours from 10am today in protest over pay offers that fall well below that of colleagues in Te Whatu Ora.

Both groups rejected an employer offer of 3 per cent or less, and further talks have stalled because employers say their funding from Government is too low to offer more.



Christchurch members joined a hikoi in the central city on Wednesday.

About 200 striking Christchurch members took their demand for fair pay direct to the source, stopping outside Ministry of Health offices during a hikoi from the Bridge of Remembrance, along Oxford Terrace and Durham St.

Registered nurse Paula Hill used to work full-time for Whānau Awhina Plunket but said she had to take up work with Te Whatu Ora Waitaha Canterbury to earn a more livable wage.

"I couldn't survive on Plunket pay alone."

"I now work for the [former] DHB, and as a casual for Plunket, hoping that one day they might get a pay rise and I can go back."



Christchurch Whānau Āwhina Plunket nurses at Wednesday's rally.

It was the first time Plunket nurses have taken industrial action in the history of the service.

Karli Wyatt has been a Plunket nurse for six years and said the decision to take industrial action was hard, but necessary to stem the flow of nurses out of the sector.

Wyatt said she currently had about 850 clients – at least 150 more than was recommended, or safe.

"I end up doing a lot of the work in my own time, in the evenings and my time off because families have questions and I feel like they rely on me to answer them."

Practice nurse Hannah Fernando from Merivale Medical Centre also works for Pegasus 24 Hours Surgery and said the primary care roles were more demanding than her previous work in a general medical ward at Christchurch Hospital.



Merivale Medical Centre practice nurses Hannah Fernando and Linda Murinane joined the picket line on Wednesday.

"I feel like there's a lot more individual responsibility as a primary care nurse."

She was constantly asked to do extra shifts at the 24 Hour Surgery.

While Fernado hopes to see a change in nursing pay and conditions, she's unsure how long she will continue in the sector.

The weight of responsibility amidst high and constant patient needs made her feel guilty about taking a dinner break or even going to the toilet, she said.

"I'm just sick of it, and if I keep going I'll have nothing left to give to me."



Newlands Medical Centre nurse Bonnie Harper joined the protest in Wellington with her son.

In the capital, about 100 primary health care nurses and supporters took over a central city park to call for pay parity, blasting out Aretha Franklin's "Respect" to sunny lunchtime crowds.

Nurse and NZNO delegate Hannah Cook, who has worked for Plunket for 21 years, said it was becoming harder "to accept lower wages than my colleagues working at Te Whatu Ora".

"We are told we are valued and respected – but what is the Government doing to show that?"

Newlands Medical Centre nurse Bonnie Harper said the disparity needed to be recognised.

"Nurses aren't going to put up with it anymore, they're walking."

Wellington practice nurses Isabella Mapusua-Laulu and Amiria Rangitutia said rising costs added to the struggle, especially those with families and Māori and Pasifika.



Wellington practice nurses Isabella Mapusua-Laulu and Amiria Rangitutia.

NZNO's Te Whatu Ora collective agreement bargaining team turned out to support their striking colleagues.

"We're behind you, every step of the way," Hawke's Bay nurse Noreen McCallan told the crowd.

Kaiwhakahaere Kerri Nuku told strikers "every nurse, everywhere deserves the same pay".

"We will continue to rally, to gather momentum until the Government realises that this injustice impacts on the quality of care we can provide."

Hard road ahead, but in for the long haul

NZNO chief executive Paul Goulter, who spoke at the Christchurch rally, said the combined action by primary health and Plunket nurses was "very significant", but more may be needed to achieve pay parity.

"... to win this, is going to take a lot of effort and we're running up hard against a Government that's not prepared to listen to you."

Goulter said he met with Health Minister Andrew Little last week and made the case for pay parity for all primary health care nurses.

He said the fact that primary health care nurses were paid 10-25 per cent less than their counterparts was an absolute disgrace. "It's disrespectful to you and to the people you work with."

"So we put that to Andrew, and he said 'yeah, we agree, we're trying'."

Goulter asked the members, "So what do we say to Andrew?"

"Shame," they responded.



NZNO Tōpūtanga Tapuhi Kaitiaki o Aotearoa chief executive Paul Goulter spoke at the Christchurch rally.

Goulter told the crowd that for NZNO, there were no "ifs or buts" about achieving pay parity for members.

"We told him we're not going away and we're going to pursue this right to the finish," Goulter said.

"The Government just has to start pay parity and it has to start . . . when?"

"Now," members responded.

"We told him we're not going away and we're going to pursue this right to the finish," Goulter said.



Auckland Whānau Awhina Plunket nurses take their message to the street during Wednesday's strike.

Strike a 'necessary evil', employers say

GenPro vice chair and Riccarton Clinic owner Angus Chambers told *Kaitiaki* the employers supported the action by practice nurses, describing it as "a necessary evil".

"... but we absolutely agree that there's a significant problem with the differences between primary and secondary pay and we're very keen to get it resolved."

Chambers said an improved offer to nurses was unlikely without a more substantial increase in the Government's capitation funding to GPs. This year it was 2.78 per cent.

He said legislation prevents GPs from raising patient fees, and funding nurse pay increases by reducing the wages of other staff was "not entirely fair" and would risk losing them in a very competitive trans-Tasman market.



Wet weather was no deterrent to Dunedin members for Wednesday's rally.

Funding nurse pay parity from "shareholders' pockets" would eliminate any incentive for GPs to buy into primary health care.

"And we're already seeing individual GPs are reluctant to take the ownership option and, the investment in health care that comes from that."

