

From: s 9(2)(g)(i), s 9(2)(a)
Sent: Sunday, 14 May 2017 9:03 p.m.
To: ESConsultation
Subject: Submission re Level 5 Dementia Care workers, Work Visas, NZ Residency, and INZ

I can foresee substantial difficulties for Level 4 and Level 5 dementia hospitals, in not only attracting, but retaining appropriate staff.

These facilities (even with the new Aged Care pay rates taken into account) do not pay enough to their care staff to meet the 'Higher Skilled' income brackets in Proposal 1.

Level 4 and Level 5 Dementia Hospitals (or hospital Wings) are a very difficult area to work in. I have first hand experience of them. I challenge our law-makers to spend a few hours in a Level 5 Dementia Hospital, and see for themselves.

This is not Low-Skilled work, even though it is low-paid work. The level 5 Dementia Hospital I regularly spend time in cannot attract (let alone retain) NZ citizens to work there. Even with a pay rise, I genuinely believe this would still be the case.

Level 5 Dementia Care Staff are not 'just aged care workers'. They need advanced levels of clinical competency, and conflict de-escalation skills, as well as skills similar to carers of the criminally insane, or dangerous prison inmates.

Level 5 Dementia Care staff are regularly abused in the following ways by their clients:

- *kicked*

- *scratched*
- *punched*
- *grabbed*
- *pinched*
- *intimidated*
- *verbally abused*

The Level 5 Dementia Care staff need to be highly skilled to:

- *keep the residents safe from self harm*
- *keep the residents safe from being harmed by other residents*
- *keep their colleagues safe from being harmed by residents*

In the Level 5 Dementia Care facility I regularly spend time in:

- *not one of the 27+ care staff was born in NZ*
- *the only carer who has English as a first language, and has NZ residency, is the least qualified of all*
- *all of the 26+ Philippino care staff are fully qualified registered nurses in the Philippines, although they are only paid as carers on the minimum wage here in NZ*
- *only 2 out of 26 Philippino care staff have NZ Residency (due to their partner's occupations)*

** all the Philippino staff have good verbal English when communicating with residents, their families, and fellow colleagues*

The maximum duration would need to be set at a length that provides visa holders with the opportunity to transition to a mid- or higher-skilled work visa, while also ensuring that migrants with no pathway to residence do not become well-settled in New Zealand. A maximum duration of three years provides this

balance and also provides employers with sufficient time to recruit new staff or upskill existing staff to fill the role.

The maximum duration is not intended to prevent employers from using lower-skilled migrant labour. Where employers can prove a genuine labour or skills shortage they would continue to be able to access migrant labour.

1.

Level 5 Dementia Hospitals require specialised skills, at a high level of competency, to keep everyone safe. Very few NZ citizens want to work there, or would be capable of the highly professional levels of conflict management, self-control, diversionary-tactics, as well as medical care required. Given the low pay rates (even including the proposed pay increases) in this employment sector, this specialised care skill-set surely qualifies as an Essential Skill that is worth a special exemption in the 3 year employment/stand-down law as proposed.

2.

Level 5 Dementia Hospitals cannot become less labour-dependent. They are short-staffed as it is (to save money for the owners, and because they are so difficult to staff), and the numbers of NZ citizens needing high-level Dementia Care is ever increasing. Unless the Euthanasia laws change, this will continue to be a Growth Industry in NZ. There is no technology that will make these residents 'easier to care for', or 'more attractive to care for'.

3.

Anyone who has visited such a facility for any length of time will understand immediately why this is a difficult industry sector to attract and retain competent, caring, and skilled staff. The intrinsic job-satisfaction is very low due to the cognitive impairments and personality and behavioural challenges of the residents.

This is not a benign aged-care working environment, where there is a significant job-satisfaction due to meaningful interactions with the residents.

** Meaningful interactions with Advanced Dementia residents are rare in this job, and fleeting.*

** Food and faeces are frequently found in inappropriate places; most residents are incontinent but cognitively-impaired enough to behave in a challenging manner with regards to their personal functions.*

** Residents frequently behave in a threatening and/ or disconcerting manner, in their own 'private hell', where they express paranoid thoughts, and rant, and try to use their physical strength to overcome staff, or lash out at staff, or have altercations with other residents, or damage property in a variety of ways.*

4.

A 3-year limit on employing trained, experienced, professional Level 5 Dementia Care Staff will be a disaster for the standards of care for this group of our most vulnerable and challenging elderly. Severe Dementia is distressing for all involved, and the peace of mind families of loved ones with such a distressing condition will be greatly enhanced, if current standards of care can be maintained.

5.

Would we consider training NZ-born Youth and Beneficiaries to be Prison Wardens in High Security facilities, or Units for the Criminally Insane ?

No

Level 5 Dementia Units are probably more demanding on the care staff, than Prisons. It is filthy, dangerous, demoralising and low-paid / low-status work involving high levels of emotional stress, physical effort and risk, and non-family-friendly shift-work.

6.

If NZ Residency Exception can be made for Philippino Dairy Workers in the South Island, then surely one can be made for the Level 5 Dementia Care workers.

High Level Dementia Care is not an export industry, but it is part of our social demographic, and (unless we introduce euthanasia) it is going to increase.

Comparing High Level Dementia Care with general Aged Care, is likely comparing training Lion-tamers with training Kitten-tamers. You try putting the Kitten-tamers in with the Lions, and see how long they last in the job....

Proposal 2b: Introduction of stand down period for lower-skilled Essential Skills migrants

Cabinet has agreed, in principle, that once a lower-skilled worker has reached the maximum duration of time allowed on an Essential Skills visa, there would be a stand-down period where they must spend **one year outside of New Zealand** before they are eligible for another Essential Skills visa in a lower-skilled occupation.

This is to ensure that migrants do not simply transition to another visa category before being granted another lower-skilled Essential Skills visa. The stand down requirements would not, however, apply where an Essential Skills visa holder is eligible for a mid-skilled or higher-skilled Essential Skills visa.

Proposal 2b will leave High Level Dementia Care facilities 'high and dry' without competent staff. This will not only be distressing for the residents and their families, but will undoubtedly put people at risk.

Why is our government willing to put people (residents as well as workers) at risk by ejecting the current workforce after their 3-years are up, and forcing unsuitable local people to 'try it out for a few days', which will:

- *introduce an even higher staff turn-over*
- *vastly magnify risks of elder abuse*
- *vastly magnify risk of staff injuries as well as resident injuries. (The ACC bill will sky-rocket too)*
- *increase general mayhem in such facilities*

This is completely un-necessary. We already have a highly competent workforce (made up primarily of immigrants) who perform a much-needed (and extremely unattractive) service to our society.

This employment is not comparable to 'pumping gas' at the local petrol station, or stacking supermarket shelves, or cleaning an office.

Without the high skill levels that Level 5 Dementia Care workers already have (through being professionally fully trained as nurses already in their home countries), these facilities will be in disarray, and Management know it.

Even NZ-trained nurses will rarely want to work in this healthcare area for long; it is too demanding, too stressful, and has few intrinsic rewards.

The reality is, that the Immigrants we employ in these facilities are desperate for a job, any job, to help feed their extended families 'back home'. They are NOT unskilled, nor are they low-skilled, but they ARE desperate to better their lives by working in a less corrupt country

such as ours. They are so desperate, that they will work in this un-rewarding challenging healthcare sector, as 'angels' who are hugely appreciated by the families of these Severe Dementia sufferers. Treating these Immigrant Workers as an Essential Industry (where the Stand-down period will be waived) is a Win-Win for the workers, their home countries, and our society.

Proposal 3: Require the partners of lower-skilled Essential Skills visa holders to meet the requirements for a visa in their own right

Cabinet has agreed, in principle, that partners of lower-skilled Essential Skills visa holders would no longer be eligible for either a Partner of a Worker Work Visa or a Partner of a Worker Visitor Visa. Partners of lower-skilled Essential Skills visa holders would still be able to come to New Zealand if they meet the requirements for a visa in their own right.

For example, the partner would be able to work in New Zealand if they successfully apply for an Essential Skills visa, and satisfy the labour market test. Alternatively, they could visit New Zealand on a short-term visitor visa for up to nine months (without work rights).

Working in Level 5 Dementia Care is extremely challenging at a personal level. The pay is also not sufficient to be able to sponsor an additional adult effectively, so we should be humane enough to treat the workers with respect as human beings, and allow their partners to work here too.

We need these workers. Are we going to be fair global citizens, and allow them a bit of balance in their lives, and have a partner here too? Or are we just going to treat them like cogs in a wheel, like machines, and wear them out?

For your information, I am a NZ-born Caucasian professional. I am not a Level 5 Dementia Worker, nor am I partnered with, or related to one. I can think of few other professions that are less rewarding, or more challenging, than caring for those suffering from High Level Advanced Dementia.

I know NO-ONE in NZ (other than these immigrants) who are willing to work in this sector. I would also NEVER recommend working in this sector. Being a prostitute, or a rubbish collector, or a road-sign-turner would be preferable to this work, for most people.

Come on Immigration NZ, 'get real'. The Advanced Dementia Care residents, families, and facilities NEED these immigrants. Let's give them a fair deal too.

I am happy to make a submission in person on this matter. I have spent 5+ hours pw in our local Level 5 Dementia Care Hospital, these past 4 years, so I 'know what I am talking about'.

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