



## COVERSHEET

<b>Minister</b>	Hon Andrew Little	<b>Portfolio</b>	Immigration
<b>Title of Cabinet paper</b>	Immigration Rebalance: Green List changes	<b>Date to be published</b>	18 October 2023

### List of documents that have been proactively released

<b>Date</b>	<b>Title</b>	<b>Author</b>
December 2022	Immigration Rebalance: Green List changes	Office of the Minister of Immigration
7 December 2022	Immigration Rebalance: Proposed Green List changes DEV-22-MIN-0303 Minute	Cabinet Office
12 December 2022	Immigration Rebalance: Proposed Green List changes CAB-22-MIN-0569 Minute	Cabinet Office
7 November 2022	Briefing: 2223-1689 Potential Green List additions	MBIE
18 November 2022	Briefing: 2223-1773: Draft Cabinet paper – Immigration Rebalance Green List changes	MBIE

### Information redacted

**YES / NO** (please select)

Any information redacted in this document is redacted in accordance with MBIE's policy on Proactive Release and is labelled with the reason for redaction. This may include information that would be redacted if this information was requested under Official Information Act 1982. Where this is the case, the reasons for withholding information are listed below. Where information has been withheld, no public interest has been identified that would outweigh the reasons for withholding it.

Some information has been withheld for the reasons of confidential advice to government, privacy of natural persons and free and frank opinions.



## BRIEFING

### Draft Cabinet paper – Immigration Rebalance Green List changes

<b>Date:</b>	18 November 2022	<b>Priority:</b>	High
<b>Security classification:</b>	In Confidence	<b>Tracking number:</b>	2223-1773

Action sought		
	Action sought	Deadline
Hon Michael Wood <b>Minister of Immigration</b>	<b>Agree</b> Green List decisions  <b>Provide feedback</b> on the draft Cabinet paper	21 November 2022

Contact for telephone discussion (if required)			
Name	Position	Telephone	1st contact
Andrew Craig	Manager, Immigration Policy (Skills and Residence)	Privacy of natural persons	✓
Clare Devine	Senior Policy Advisor		

**The following departments/agencies have been informed of the proposals in the Cabinet paper:**

Ministry of Health, Te Whatu Ora, Ministry of Transport, Waka Kotahi, Ministry of Education, Ministry for Primary Industries, Department of the Prime Minister and Cabinet, Ministry of Social Development. Within MBIE: Corporate Governance and Intellectual Property policy, Communications policy, Construction Sector Accord Unit. Of the quick feedback received, some but not all has been reflected in this briefing and attached Cabinet paper.

Input was also received from offices of the following Ministers: Minister for Digital Economy and Communications, Minister of Statistics, Minister for Social Development and Employment, Minister for Accident Compensation Corporation, Minister of Education, Minister for Children, Minister of Corrections, Minister of Health.

**Minister's office to complete:**

- |   |  |
|---|--|
| <input type="checkbox"/> Approved             | <input type="checkbox"/> Declined            |
| <input type="checkbox"/> Noted                | <input type="checkbox"/> Needs change        |
| <input type="checkbox"/> Seen                 | <input type="checkbox"/> Overtaken by Events |
| <input type="checkbox"/> See Minister's Notes | <input type="checkbox"/> Withdrawn           |

**Comments**

**Comments**



# BRIEFING

## Draft Cabinet paper- Immigration Rebalance Green List changes

<b>Date:</b>	18 November 2022	<b>Priority:</b>	High
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### Purpose

To seek your feedback on a draft Green List Cabinet paper for consideration at Cabinet Economic Development Committee (DEV) on 7 December and Cabinet on 12 December.

### Recommended action

The Ministry of Business, Innovation and Employment recommends that you:

- a **Note** that we have drafted a Cabinet paper based on your earlier decisions [2223-1689 refers] and subsequent discussions with you on 11 and 15 November *Noted*
  
- b **Note** that we have summarized feedback received from other agencies, but have only incorporated limited into the Cabinet paper *Noted*
  
- c **Provide** feedback on the draft Cabinet paper, to be incorporated prior to Ministerial consultation, specifically to:
  - Confirm that the list of occupations in Table One is the list you wish to consult your colleagues on *Agree / Disagree / Discuss*
  
  - Confirm that you wish to put three options for the health sector to Cabinet *Agree / Disagree / Discuss*
  
  - Confirm that you wish to put the section 49 proposal for aged care nurses to Cabinet *Agree / Disagree*
  
- d **Agree** to consult on the draft Cabinet paper with your Ministerial colleagues from 22-28 November. *Agree / Disagree*

Privacy of natural persons

*AC* Andrew Craig  
**Manager, Immigration Policy (Skills and Residence)**  
 Labour, Science and Enterprise, MBIE  
 18.11.22

Hon Michael Wood  
**Minister of Immigration**  
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## Background

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1. You have directed officials to prepare a Cabinet paper proposing occupations to add to the Green List [2223-1689 refers]. As a result of further discussions with you on 11 and 15 November, we have refined these proposals. We have very briefly discussed these proposals with other agencies, but have not had time to fully consider or incorporate all of their suggestions. We are now seeking:
  - your general feedback on the draft Cabinet paper (attached as Annex One)
  - your decisions on specific options you would like to present to Cabinet in this paper, noting the additional feedback received from other agencies and Minister's offices.
2. The below timeframes will enable the paper to go to Cabinet on 12 December. There is one further Cabinet meeting in 2022, on 19 December, should that be needed.

Your feedback on draft Cabinet paper	21 November
Paper sent to Ministers for consultation	22-28 November
Oral item to CBC, to provide an update on forthcoming Cabinet paper	28 November
Final paper to you	29 November (lodgement 1 Dec)
Lodgement	1 December
DEV	7 December
Cabinet	12 December

3. We note that you signed a briefing seeking to include all medical doctors on the Green List straight to residence pathway on 01 November [2223-1502 refers]. We understand the instructions are yet to be certified, and this decision is yet to be announced or implemented.

## Approach to Green List changes

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### Extending the Green List beyond the original framework

4. Occupations were originally selected for the Green List where they met the policy threshold of: being globally in-demand, where there is an ongoing shortage and a where competitive offer is required to attract the highly skilled migrant workers we need.
5. You have indicated that you are interested in extending the Green List threshold to occupations where there are particular pressure points being reported, and/or where a significant portion of people in that occupation are unlikely to qualify under the new Skilled Migrant Category (SMC). Based on your request, we are proposing the following guidelines for inclusion, which are reflected in the Cabinet paper:
  - the role is highly-skilled or there is a well-documented global shortage, such that a competitive (or more competitive) residence offer is clearly justified – this would include Registered Nurses, midwives, doctors; or

- sector stakeholders are consistently reporting pressing shortages plus there is a case that the role is nationally significant; - this would include roles like teachers and auditors; or
  - it appears that the role will not be eligible for the new SMC due to pay, lack of registration or tertiary-level qualifications, but there is a case that a residence offer is needed to attract migrants to fill ongoing shortages – this would include roles like bus drivers and telecommunications technicians.
6. For most of these occupations, we do not have robust information about global demand.

### **Lower entry requirements increase the risk of the Green List being used as an ‘easy’ residence pathway**

7. The above three groups present progressively less clear cases for the Green List. The first group is more clear cut because of global shortages. The second group is relatively low risk, but the evidence of a shortage is either largely anecdotal, or does not point to long-term gaps. Many candidates in this group are also likely to be eligible under the proposed new Skilled Migrant Category settings. The third group includes occupations where there is an immediate shortage and no residence offer to support recruitment, but their inclusion creates a risk that a residence offer may encourage high levels of migrant recruitment, which could then reduce incentives on employers to upskill New Zealanders, and fail to address or resolve the pipeline issues present in the market. This last group is also most likely to raise comparisons with occupations in a similar situation, but not included. There are particular risks around the inclusion of telecommunications technicians given the low skill level required for that job. Inclusion on the Green List will enable a relatively easy pathway for Post Study Work Rights and this occupation has a history of reported migrant exploitation.

### **Making these decisions ahead of the Skilled Migrant Category review may contribute to a perception that the Green List is the default residence pathway, rather than the SMC**

8. In general, temporary work visas are the most appropriate response to immediate labour market gaps and “surge needs”. The Accredited Employer Work Visa gives employers streamlined access to skilled workers. The Green List and Highly Paid (twice median wage) pathways make New Zealand attractive to the highly skilled, globally in-demand roles we need. The SMC changes will round out the residence offering to the more skilled, without locking in skills that we expect to be able to fill with New Zealanders in the short- to medium-term.
9. Changes to the Green List before the SMC review is complete may lead to people believing that all skilled occupations must be on the Green List. This weakens the integrity of the Green List, and will likely call into question the exclusion of a much longer list of skilled occupations that are not experiencing particular shortages.
10. The new SMC is intended to set out much clearer pathways for registered, formally qualified and highly-paid migrant workers. However, we recognise that for some professions, we have heard from agencies that an immediate and clear pathway is time-critical.
11. There are separate considerations for roles that are unlikely to qualify for the SMC. In those cases, we see justification to add them to the Green List if there is a critical gap. While the Green List is focused on highly-skilled occupations, clear evidence of a shortage in mid-skilled jobs may justify case-by-case exceptions. It is also possible to import a skill level so that only experienced workers qualify. The risk here is less about the integrity of the Green List, and more about the reduced incentive on employers to build a domestic pipeline when it is easier to do so. While additions of this kind to the Green List is possible now, consideration of roles alongside the finalisation of new SMC settings would be a more thorough but less timely approach.

**Through this most recent process, occupations and sectors have not been considered systematically, and other cases may surface once Cabinet has agreed these changes**

12. In this advice, occupations have only been assessed for inclusion if they have recently been put forward by a Minister, agency or sector representatives. This means we have not taken a sector-wide or systematic approach to the proposals, and this has been noted in the draft Cabinet paper. Also, our assessment of the occupations has been limited to the information that was readily available in the timeframes.
13. We think this is a reasonable approach given the timeframes, as we have been consulting widely with sector representatives recently during SMC consultation and we understand that your office has asked other Minister's offices to identify their suggested candidates. If an occupation has not been actively raised, it strongly suggests that immediate inclusion on the Green List (assuming it is justified) is not time-critical. However, the inclusion of some lower-skilled roles may generate calls for other similarly skilled roles.
14. You have agreed that these immediate changes will replace the early 2023 SMC report back to Cabinet on critical gaps (noting that there may be a case to consider some health occupations separately, as discussed below). These changes will also mean that the 2023 Green List review is not likely to result in a large number of additions.

## **Different approaches for the health sector**

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15. The Ministry of Health and Te Whatu Ora have presented a case to you that special consideration is required for the health sector. That case is summarized as follows:
  - We know that we will need more health workers per capita in future than we have today, so there is little risk that New Zealand would achieve an oversupply of health professionals.
  - A shift in approach is time-critical:
    - Te Whatu Ora is about to commence a major international recruitment campaign and could make a better case to prospective migrants if health workforce roles were on the Green List;
    - A mid-2023 review of the Green List will not adjust settings in time to recruit more workers ahead of winter 2023 and this is desirable; and
    - Te Whatu Ora is confident that salaries for health workforces are competitive and there is further investment through Budget 22, but most health professions require at least three years of training so the government cannot rapidly convert increased training into new staff.
16. MBIE agrees that health roles do not present the same risk of future oversupply and weakened incentives to improve pay and work conditions as other sectors, such as construction. However, we do not share the Ministry of Health's view regarding the time-criticality of changes. While legitimate, these reasons appear to be more operational than strategic. For example, from a pure policy perspective, a recruitment drive is not justification alone to rethink immigration settings which are intended to address medium to long-term needs.
17. In our view, the Ministry of Health's analysis is missing commentary on how these changes would fit into the funded health sector's long-term strategic thinking. There is a timing issue here: we understand that Te Whatu Ora is just starting to grow its capability to plan and forecast the workforce. There is currently no national health workforce strategy. [REDACTED]  
Confidential advice to Government [REDACTED]

Confidential advice to Government [redacted] if this progresses as indicated, it would provide the right opportunity to reconsider immigration settings in 2023.

18. Ahead of Cabinet making decisions about the scope of immigration changes for the health sector, we think the key policy considerations are:
- What is the trigger to shift our approach to the health sector?
  - If the trigger is immediate workforce pressures, is it appropriate for the immigration system to respond with widespread changes to residence settings?
  - Are normal residence pathways (i.e. the currently open SMC and the new SMC) insufficient for employers to recruit skilled migrants in the global market?
  - Is a 'guaranteed' or attractive residence offer needed for all health roles, or just those that are most skilled and in-demand?
  - If migrants are attracted at all skill levels through the Green List, will this result in retention of those workers, especially in lower-paid or lower-skilled roles?
  - To what extent will these changes help to resolve chronic shortages in the health sector?
19. Our advice is that you focus the current Green List changes for the health sector on occupations that are clear cut (i.e. those you have previously agreed to), and agree to further consideration in early 2023. We have drafted the Cabinet paper in that manner, while presenting three broad options Cabinet may want to consider. These options are:

### Interim approach

20. An interim approach would be focused only on changes where a more competitive offer is clearly justified and would agree that officials report back on critical gaps in health occupations that may not meet the SMC, either in early 2023 as previously indicated or in 2023 once health agencies update Cabinet on the health workforce strategy (MBIE recommended).
21. This option is the most straightforward and aligns best with the Green List framework. If Cabinet agrees that health agencies need to first provide a progress update on workforce strategy before widespread changes are considered, that will provide the best opportunity for informed policy advice. If Cabinet agrees to the report back in early 2023 as previously indicated, MBIE officials will continue with work in the SMC to identify occupations that are skilled but may not meet the threshold for SMC.
22. This option would result in all Medical Practitioners / Doctors, Registered Nurses and Midwives on the straight to residence pathway. Further occupations would be added (likely to be a very small number) in 2023.

### Wider but principles-based approach

23. Confidential advice to Government [redacted]
24. Confidential advice to Government [redacted]  
Clinical roles are medical doctors, dentists and nurses. Allied health roles require registration and/or three years' tertiary education. They are regulated under the Health Practitioners Competence Assurance Act 2003 or are self-regulated by a professional body.
25. Confidential advice to Government [redacted]



27. We are not sure whether this approach would result in a significantly different list than if we used the approach suggested by the Ministry of Health. It appears that a lot of allied health roles are registered (pharmacists, paramedics, dental hygienists, dental therapists, dietitians, social workers). We can do further work on these two options if you want to put the principles-based approach to Cabinet. If Cabinet wants to take a principles-based approach, agencies would need to work together after Cabinet to finalize a list of occupations based on that approach.
28. This option would see all dentists, doctors and nurses on the straight to residence pathway, as well as a large number of skilled health professionals. Further occupations would be unlikely to be added in 2023, unless there was an exceptional case of a non-professional role that warrants a residence offer.
29. A key concern with this option is that other sectors are likely to want such an approach to be applied to them also.

### Major shift in immigration policy

30. A major shift in immigration policy, as recommended by the Ministry of Health and Te Whatu Ora, would see:
  - Confidential advice to Government
  - All other healthcare roles on the Green List work to residence pathway, paid above the median wage (additional to the principles-based approach).
31. This change would clearly signal that the health sector is being treated differently in immigration settings. We are seeking your feedback on whether you want to put this option to Cabinet. Health agencies' case for change has been outlined above. Our view is that this widespread change is not justified based on the information we have. If you do wish to put this option to Cabinet, we think that it will be important to properly discuss the considerations at paragraph 18.

### Other options

32. For completeness, we also considered an option between the interim approach and the principles-based approach. This would entail adding select skilled and in-demand health professions that have previously been raised as candidates for the Green List by the Ministry of Health, or where health agencies have recently indicated they attach slightly higher priority for the Green List.
33. We have had dentists and physiotherapists raised previously in the formation of the Green List. In their recent analysis, health agencies have flagged audiologists, paramedics, pharmacist, physiotherapists and social workers. However, with insufficient time to assess these roles, there is a lack of clear rationale for this approach. Without robust immigration

data, vacancy data and forecasts, it could create a perception that occupations were randomly chosen and call into question the selection process.

### **Treatment of aged care nurses**

34. As requested, we have put an option in the Cabinet paper which proposes imposing special conditions on aged care nurses. There is precedent to use section 49, usually for more general conditions not tied to an employer. The main current uses are the investor category to impose investment periods, and the parent category to impose sponsorship periods.
35. We do not recommend the use of section 49 of the Immigration Act 2009. While it is technically possible, we do not think it will necessarily achieve the outcomes sought:
  - Imposing more restrictive conditions on aged care nurses may discourage international nurses from entering the ARC sector in the first place
  - Breaching those conditions would make the visa holder liable for deportation, which significantly affects their rights (as outlined in the Cabinet paper) and is a severe consequence
  - The immigration system is moving away from using these conditions, which have the potential to contribute to migrant exploitation due to its impact on the relationship between migrant and employer.
36. We note that pay parity proposals are going to Cabinet shortly and that these may help to resolve the pay parity issues between Te Whatu Ora and ARC nurses.
37. We have not considered the implications of this proposal from an operational perspective (particularly compliance), nor have we have assessed how it interacts with international obligations or domestic human rights legislation.
38. As requested, we considered whether there are other feasible options outside of section 49. We do not think that there are. In our view, the only alternative is the status quo: all nurses on the work to residence pathway, meaning they need to make a two-year commitment to the profession (not the ARC sector specifically).
39. From an employment law perspective, it is between the individual employer and employee as to what terms and conditions they agree to (i.e., it is not something for the government to determine, unless the government has legislated on a term or condition). Section 49 does not create a term and condition of employment, but a condition of a visa.
40. The Ministry of Health does not support the use of section 49 at this time. They note there is insufficient evidence and a lack of analysis to support the effectiveness of this as a retention mechanism. They are also concerned that this could make the Green List less attractive for international nurses.

### **Determining the skill level of occupations added to the Green List**

41. To make the Green List work, further decisions will be needed on the threshold and requirements for each occupation, such as: skill or qualification level (or a proxy such as pay level), ANZSCO occupations and specializations, registration requirements. Some occupations have mandatory registration (such as secondary school teachers) but these still need to be considered in detail. This work will not be able to be completed until 2023, given the complexity of this work and the need to develop skill thresholds with other agencies, and potentially with input from sector bodies. For example, we will need to consult with transport sector representatives about the types of bus drivers and truck drivers that would be covered.

42. In theory, it is possible not to set requirements beyond those specified in the ANZSCO. This would risk attracting relatively inexperienced migrants rather than the skilled workers we need. Where there is no formal qualification, it would require Immigration New Zealand to verify a person's overseas experience which is difficult to do. For example, you could agree that all occupations in minor group 733 Truck Drivers are included in the decision to put truck drivers on the Green List. This would mean to qualify for residence, a truck driver would just need one year of relevant experience (not necessarily driving a truck) and would not need to have an appropriate licence. It would also mean that furniture removalists would have a Green List pathway to residence.

This additional work is not required to add the already agreed medical doctors to the Green List (they have the same registration requirements as the medical doctors already on the Green List) or to move Registered Nurses and Midwives from a work-to-residence to a straight-to-residence pathway (as these registration requirements are already in place).

## Agency and Ministerial feedback

43. The tables below summarize the feedback received from agencies and Minister's offices. We have not had the opportunity to fully consider all of this feedback or reflect it in the paper but will work through the comments during Ministerial consultation (22-28 November).

### Agency feedback

Agency	Summary of feedback	Occupations requested (in addition to roles currently proposed in draft Cabinet paper)
Ministry of Education	Request changes made immediately and backdated to July 2022, rather than March 2023 (in time for school year).  Request more frequent reviews of Green List occupations, clarity about process for adding occupations.	Physiotherapists Speech and language therapists Counsellors Sector agreement for education workforce
Ministry of Transport/Waka Kotahi	Suggested using license class for driver qualification instead of ANZSCO code, but this will require more work.  Warn of distinguishing bus and truck drivers – in the workforce they are relatively interchangeable. Wage and condition differences may have unintended consequences for retention.  Noted that the bus driver shortage ongoing and is difficult to solve within two years on work to residence pathway, and will want to retain workforce beyond that.	Maritime occupations (stevedores, seafarers) Case for full inclusion of 321211 Group 321 Automotive Electricians and Mechanics (could be considered in 2023 review) Panelbeaters Vehicle painters
Construction Sector Accord Unit (MBIE)	No comment	

Communications policy (MBIE)	No comment	
Ministry of Health	<p>Iterated that allied health roles are critical to New Zealand's health system.</p> <p>Does not support bonding aged care workers to their employer, as this may conflict with international agreement with the Philippines, for example.</p>	Refer paragraph 28
Ministry of Social Development	Does not believe immigration is the primary lever for sending signals about labour market need, and considers shortages should be closely tied to training and education sectors.	
Ministry for Primary Industries	<p>Supports the inclusion of halal slaughterers on a work to residence pathway</p> <p>Confident that most primary sector roles can be accommodated through existing visa settings.</p> <p>Noted that some additional roles may be identified through developing the Industry Transformation Plan, but this is appropriate for the 2023 review.</p>	
Ministry for Women	<p>Concerned that predominantly female industries are not well-represented in the Green List, and the gender impacts are not worked through.</p> <p>Does not support employees being bonded to employers.</p>	
Te Whatu Ora	Similar feedback to the Ministry of Health. Requested population impacts section note health risk of insufficient health workers in low socio-economic and rural areas. Noted no Te Tiriti analysis.	Refer paragraph 28
Ministry for Pacific Peoples	No comment	
Ministry for Ethnic Communities	No comment	
Corporate Governance and Intellectual Property policy (MBIE)	No comment	

Department of the Prime Minister and Cabinet	No comment	
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*Ministerial feedback*

<b>Minister</b>	<b>Summary of feedback</b>	<b>Occupations requested</b>
Minister for Digital Economy and Communications	No additional comments.	Telecommunications technicians (ANZSCO 899914)
Minister of Statistics	Salary requirements for ANZSCO 261313 and 261312 (already on the Green List) may be too high. We will seek to clarify whether this feedback represents a request to add occupations.	Analyst Test/Senior Analyst Test (ANZSCO 263211)
Minister for Social Development and Employment	Suggested using the 'MSD undersupply list' for identifying Green List roles, but this list will need to be updated.	
Minister for ACC	No additional comments.	<ul style="list-style-type: none"> <li>• Neuropsychologists</li> <li>• Counsellors</li> <li>• Radiology technicians</li> </ul>
Minister of Education	Considers that additional roles to the Green List work to residence pathway will be more competitive with Australia.	<p>Work to residence pathway:</p> <ul style="list-style-type: none"> <li>• Secondary School Teacher (all specialisations) (ANZSCO 241411)</li> <li>• Primary School Teacher (ANZSCO 241213)</li> <li>• Audiologists and Speech Pathologists / Therapists (ANZSCO 2527)</li> <li>• Physiotherapists (ANZSCO 2525)</li> </ul>
Minister for Children	Noted that will need to work closely with the Social Workers Registration Board to ensure readiness to manage additional registrations from migrants.	<ul style="list-style-type: none"> <li>• Social worker (ANZSCO 272511)</li> </ul>
Minister of Corrections	<p>Noted the meeting the median wage requirement for the Green List is a biggest risk.</p> <p>Noted that a Corrections Officer is an entry level position, but it was deemed essential under the COVID-19 framework, and does require a level of skill.</p>	<ul style="list-style-type: none"> <li>• Corrections Officer/ Senior Corrections Officer/Principal Corrections Officer</li> <li>• Residential Manager</li> <li>• Prison Director/Assistant Prison Director/Deputy Prison Director</li> <li>• Health Care Assistant (ANZSCO 423312),</li> </ul>

		<ul style="list-style-type: none"> <li>National Operations Adviser</li> </ul>
Minister of Health	Noted the dependency on international recruitment to meet the needs of New Zealand's health system.	Confidential advice to Government Confidential advice to Government Work to residence pathway: <ul style="list-style-type: none"> <li>All other healthcare roles</li> </ul>

## Implementation

44. At a high level, we have assessed the work required to implement these decisions and the likely implementation scenarios. Immigration New Zealand can more readily implement changes which move nurses and midwives to straight to residence, as it requires changes to one platform rather than two. Work is already underway to add all medical doctors to the Green List, as you agreed previously. These changes can likely be delivered in late December 2022.
45. In order to deliver the addition of medical doctors in December 2022, a workaround will need to be utilised as these occupations are not currently included on the Green List. Communication will need to be sent to ensure applicants for a Job Check and work visa know to use a specific occupation code when completing the form, until the medical doctor roles can be added as Green List roles in ADEPT. Those who do not correctly use the workaround will still be able to apply, but may have to provide additional information.
46. For the other occupations, there is more implementation and policy work (as outlined in paragraph 39 above), and in addition to staff absences during Christmas there is a scheduled period in December where ICT system changes cannot be made. This means that these further changes are unlikely to go live until March 2023.
47. If Cabinet agrees to a major shift in immigration settings for the health sector, these timeframes do not hold and we would need to assess the work required to implement a list for the entire sector.

Action	Indicative timing
DEV	7 Dec
Cabinet	12 Dec
Announcement of all changes	Shortly after Cabinet
Immigration instruction certified and implementation of: <ul style="list-style-type: none"> <li>Inclusion of doctors on GL STR (</li> <li>Moving registered nurse and midwife roles (not including nurse practitioners and nurse managers) from GL WTR to STR</li> </ul>	Late Dec

Addition of new roles to GL and sector agreements – detailed policy (eg registration and qualification requirements) with other agencies	Mar 2023
Certification of immigration instructions for additional roles	Mar 2023
Implementation of additional new roles to GL and sector agreements	Mar 2023

48. We will work through these further and include firmer timeframes in the next version of the Cabinet paper. Changes to the Green List impact post study work rights. Once these changes are made, we will need to determine qualifications that are eligible for post study work rights (we can do this in 2023).
49. While implementation cannot be done until early 2023, it may be possible to make high-level announcements shortly after decisions are made in December.
50. Some agencies have noted that a March 2023 implementation date will reduce the impact of these proposals for recruiting migrants in the immediate term.

## Next steps

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51. We are seeking your comments on this draft Cabinet paper on 21 November, ahead of Ministerial consultation. We will provide you with talking points to support your discussion at Cabinet on 28 November.

Your feedback on draft Cabinet paper	21 November
Paper sent to Ministers for consultation	22-28 November
Oral item	28 November
Final paper to you	29 November (lodgement 1 Dec)
Lodgement	1 December
DEV	7 December
Cabinet	12 December

## Annexes

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Annex One: Draft Cabinet paper

