



australian nursing federation

3 May 2013

Committee Secretary
Senate Legal and Constitutional Affairs Committee
PO Box 6100
Parliament House
Canberra ACT 2600

By email: legcon.sen@aph.gov.au

Dear Sir/Madam

**Framework and operation of subclass 457 visas,
Enterprise Migration Agreements and Regional Migration Agreements**

Please find attached a submission by the Australian Nursing Federation to the above Inquiry.

ANF would welcome an opportunity to speak to the submission should the Inquiry hold public hearings.

Should you require further information please do not hesitate to contact Nick Blake, Senior Federal Industrial Officer

Yours sincerely

NICK BLAKE
Senior Federal Industrial Officer

Encl.

The industrial and professional organisation for nurses and midwives in Australia

Canberra Office

Unit 3, 28 Eyre Street Kingston ACT 2604 Australia
PO Box 4239 Kingston ACT 2604 Australia
(T) + 61 2 6232 6533 (F) + 61 2 6232 6610
anfcanberra@anf.org.au

Melbourne Office

Level 1, 365 Queen Street Melbourne VIC 3000 Australia
(T) + 61 3 9602 8500 (F) + 61 3 9602 8567
anfmelbourne@anf.org.au

ANF Journals

Australian Nursing Journal
Australian Journal of Advanced Nursing
anj@anf.org.au ajan@anf.org.au
ABN 41 816 898 298



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Framework and operation of subclass 457 visas,
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29 April 2013

Australian Nursing Federation
Level 1, 365 Queen Street, Melbourne VIC 3000
P: 03-9602 8500
F: 03-9602 8567
E: industrial@anf.org.au
Website: www.anf.org.au

Introduction

The Australian Nursing Federation welcomes the opportunity to make this short submission to the Senate legal and Constitutional Affairs Committee inquiry into the Framework and Operation of subclass 457 visas, Enterprise Migration Agreements and Regional Migration Agreements

The Australian Nursing Federation (ANF) is the national union for nurses, midwives and assistants in nursing with branches in each state and territory of Australia. The ANF is also the largest professional nursing organisation in Australia. The ANF's core business is the industrial and professional representation of its members.

The ANF represents over 225,000 registered nurses, midwives and assistants in nursing nationally. They are employed in a wide range of enterprises in urban, rural and remote locations, in the public, private and aged care sectors including nursing homes, hospitals, health services, schools, universities, the armed forces, statutory authorities, local government, and off-shore territories and industries.

Overview

A wealth of culture and knowledge travels on the backs of international workers and nurses are no exception. Australia benefits in a myriad of ways when the workforce is propped up by immigration.

The (ANF) has always supported movement of nurses around the globe to gain further training and clinical experiences; health care has a strong tradition of international collaboration. There is also clear merit in international exchange and diversity, as well as the economic benefit of remittances and transfers in technologies.

The ANF supports a strong permanent migration programme and recognises the importance of temporary migration programmes which are designed to meet short term, unforeseen and genuine labour market need.

Notwithstanding our support for migration programmes generally we respectfully submit that the subclass 457 programme fails to meet its policy objectives principally because of the absence of a robust system of labour market testing and we recommend this inquiry make a strong recommendation for one to be introduced.

A snap shot of temporary migration and nursing

Nursing has historically featured strongly in skilled migration programmes including the subclass 457 and 442 visa programs as well as permanent visa grants. We set out below two tables on visas granted to overseas nurses from 2005/6 to 2011/12. Please note that since the introduction of ANZSCO in 2010 (formally ASCO) there are now 14 Registered Nurse occupations which international nurses can be nominated under, eg. Medical, Aged care, Educator, Nurses practitioner, Community Health and so on.

Table 1: Number of 457 temporary business (long-stay) visa grants to nurses, 2005-06 to 2011-12

	2005	2006	2007-08	2008-09	2009-10	2010-11	2011-12
Registered nurses ^(a)							
457 Business (Long Stay)	2,609	3,011	3,375	3,977	2,624	2,146	3,095
442 Occupational Trainee	88	17	15	80	8	3	23
Total	2,697	3,028	3,390	4,057	2,632	2,149	3,118

(a) ANZSCO code 2544 Registered nurse

Source: Department of Immigration and Citizenship administrative data.

Table 2: Permanent visa grants, 2005-06 to 2011-12

	2005	2006	2007-08	2008-09	2009-10	2010-11	2011-12
Registered nurses ^(a)	2161	2174	2478	3492	4133	3400	3160

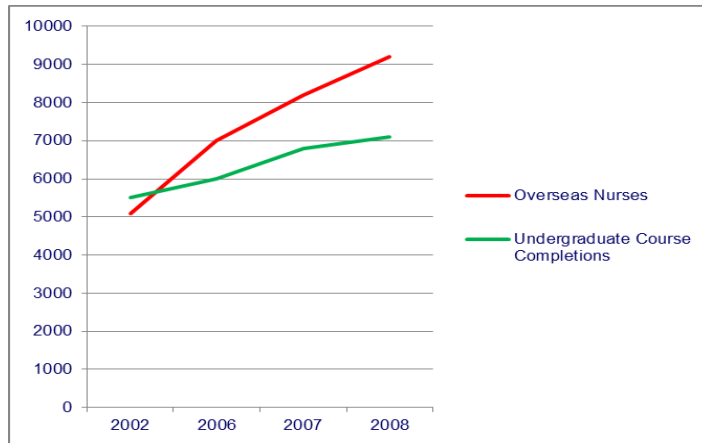
(a) ANZSCO code 2544 Registered nurse

Source: Department of Immigration and Citizenship administrative data.

Temporary skilled migrant nurses are employed across all sectors of health; the largest employers are state and territory public hospitals sectors followed by residential aged care.

It is estimated around 70% of temporary overseas nurses become permanent residents within 12 months of their arrival.

Since around 2003/4 the growth in overseas nurses (both permanent and temporary) has outstripped the numbers of Australians who qualify as nurses domestically.



Labour market Testing

Employers are subject to a range of requirements in terms of their approval as sponsors and in respect of the overseas workers they nominate as appropriate occupations pursuant to the 457 scheme.

However despite the government's claims that the 457 programme requires employers to take steps to recruit local worker before going offshore, there really is no such obligation.

Under the current arrangements there is no requirement for labour market testing, other than an employer making a token gesture of a commitment to local recruitment.

The 457 programme must be underpinned by a genuine labour market testing regime. This means that employers seeking to use 457 labour or other forms of temporary migration they should first have to demonstrate that they have tried to recruit Australian resident workers for the job vacancy on the open market though designated means and has not been able to find a suitably qualified Australian resident worker.

This obligation should include measures such as:

- Advertising vacancies locally and nationally at market rates.
- Offering relocation, housing and utilities assistance where required.
- Reporting on specific measures taken to employ disadvantaged groups, local job seekers and recently retrenched workers.

Nursing graduates

In our view many employers see the relatively easy access to nurses under the 457 programme as preferable to employing new graduates who, in the initial stages of their employment often require close supervision and support

At a time when employers of nurses in both the hospitals sector and aged care remain high users of 457 labour, our state and territory branches are reporting that an increasing number of new graduate nurses unable to find work as nurses.

It is estimated in 2012 , 60% of Tasmanian nursing and midwifery graduates were able to find work , only 10% of graduates in Qld and 800 Victorian , 400 Western Australian and 280 South Australian graduates missed out.

While the failure of nursing graduates to secure employment cannot be sheeted home entirely to the 457 programme, we note that Queensland, Victoria and Western Australia public hospital employers continue to access 457 nurses.

Many disappointed nurses tell of their frustration at being unable to find employment in an occupation that is considered to be in high demand. Examples of the frustrations and disappointment felt by nurses was highlighted by "A Current Affair" in February 2013. The programme can be viewed at <http://aca.ninemsn.com.au/article.aspx?id=8611380>

For nursing , the inability of our home grown nurses to obtain employment is not only a serious waste of public monies but will also lead a decline in those taking up undergraduate nursing courses and a consequent decrease in the levels of nursing care.

Conclusion

The comparatively unfettered access to migrant labour coupled with the absence of a labour market testing regime means that the subclass 457 programme is failing to meet a key policy objective which is to provide employers with temporary migrant labour to meet short term and unforeseen circumstances.

The relative ease of sourcing labour under the 457 programme has become increasingly attractive for many employers who see the available pool of overseas workers as a cost effective solution to their workforce needs.

While the ANF supports temporary migration we do not believe the arrangements under the 457 programme meet the needs of community and without change will progressively deny locally trained nurses employment.