

# New Zealand nurses take action over staffing crisis and pay cut

Tom Peters  
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This week, nurses in public hospitals across New Zealand are refusing to work overtime shifts after the government agency Health NZ ended a temporary “winter bonus” payment of \$100 per extra shift worked.

The New Zealand Nurses Organisation (NZNO) called upon its 35,000 members in hospitals to turn down extra work while stressing that this was not a strike, but merely a request to members. The union leadership clearly felt that it had to do something to maintain control over the increasingly outraged workforce who face a grossly understaffed and crisis-ridden system, as well as soaring living costs.

Recent months have seen increasing strikes, including among healthcare workers, manufacturing workers and firefighters. Tomorrow, 7,000 university staff will strike for half a day to demand an above-inflation pay increase.

These actions are part of an international resurgence of class struggle in response to the worsening COVID-19 pandemic and out of control living costs. Rampant inflation is being fuelled by the pandemic, government bailouts for corporations and the financial system, and the US-NATO war against Russia in Ukraine.

New Zealand hospitals, which were in crisis before the pandemic, were pushed to breaking point after Jacinda Ardern’s Labour Party-led government abandoned its zero COVID policy last October. It did so on the instructions of big business, which demanded an end to all lockdowns and public health measures, which were denounced as obstacles to making money.

The government has now scrapped mask and vaccine mandates, bringing New Zealand into line with the homicidal “let it rip” policies adopted by governments in the US, Europe and elsewhere. This year, NZ’s

COVID deaths have soared to more than 2,000, from just 30 last October.

According to official statistics, 13,900 people have been hospitalised for COVID-19, the vast majority during 2022. With estimates that half the country has been infected with COVID, hospitalisations have fallen somewhat, with 111 COVID patients in hospital as of Sunday. But Ardern’s claim that the worst of the pandemic is over is a lie. Already, a resurgence of cases can be seen in Europe, and another wave will likely begin soon in New Zealand, assisted by the complete removal of public health measures.

Health NZ introduced the \$100 bonus in an attempt to push more nurses to work longer hours. In April, Health Minister Andrew Little told TVNZ there was a shortage of about 4,000 nurses nationwide.

A statement from Health NZ said the bonus payments “were an extraordinary step in response to an extraordinary situation, namely excessive staff shortages due to COVID-19 illnesses.” It claimed that “the need for additional hours is reducing as COVID-19 and flu infections drop,” adding that there were still “workforce pressures” in “some areas.”

In fact, there are many signs of a deepening crisis throughout the country. Peter Bramley, head of Health NZ in the Canterbury region, emailed staff this week saying despite the beginning of spring, there remains “unprecedented high demand for acute care throughout our health system.” On Monday, Christchurch Hospital was 92 percent full and last week it reached 100 percent occupancy, partly driven by a spike in respiratory syncytial virus (RSV) cases amongst children.

On September 30, Health NZ reported that Taranaki Base Hospital’s emergency department, with just 23 beds, was regularly seeing more than 100 patients a day, “creating a difficult struggle to find beds for them

in the hospital.”

Yesterday, *Stuff* reported that Whangarei Hospital is “dangerously” understaffed, according to nurse and NZNO delegate Rachel Thorn. The emergency department’s nursing roster had 214 gaps, totalling 1,700 hours. “I would definitely say public safety is being affected—it’s definitely more unsafe in the hospital than it should be,” Thorn said.

The overcrowding in hospitals is made worse by chronic under-resourcing of the broader health system. The College of General Practitioners told Radio NZ on Monday that people often have to wait between two and six weeks to see a doctor.

Meanwhile, according to the government’s Aged Care Commissioner, aged care facilities have a shortage of 1,200 registered nurses out of a workforce that should number 5,100. Simon Wallace, chief executive of the Aged Care Association, told the *New Zealand Herald* so far this year about 940 aged care beds had closed or were not operational, “and more are about to close.” Hundreds of elderly hospital patients cannot be discharged because they have nowhere to go.

The NZNO has refused to call strike action over the appalling conditions in hospitals or the latest pay cut. Along with all the other unions, it also ensured that there was no organised opposition to the government’s decision to scrap the previous COVID elimination strategy in favour of a criminal policy of mass infection.

Despite this, Health NZ’s Rosemary Clements wrote a threatening letter to the NZNO declaring that encouraging nurses to turn down extra shifts amounted to an illegal strike. For now, she said, Health NZ “do not wish to take a litigious approach to this issue.”

The letter provoked an outraged response from healthcare workers on social media, who denounced it as “BS,” “scare tactics” and “bullying.” On the NZNO Facebook page, one nurse wrote: “I’m sorry, how is it illegal to work only our contracted hours? My mental and physical health are not for sale.” Another said: “It’s not an exaggeration to say that most wards run short of staff every day, and every day someone is calling/texting staff begging them to come in on their days off or to do extra shifts. It’s not okay! Don’t take nurses for granted.”

Healthcare workers are being driven to fight, but they remain trapped by unions, staffed by a privileged

bureaucracy whose function is to stop workers from taking action, divide different sections of the workforce from each other, and enforce the government’s disastrous austerity and “let it rip” policies. The NZNO has a long record of imposing sellouts, like the one pushed through in 2018, despite bitter opposition from the rank-and-file; the deal failed to address the staffing crisis and left hospitals completely unprepared for the pandemic.

To unite nurses, doctors and other workers across the public and private health systems, along with teachers and others across the country, new organisations are required. The Socialist Equality Group calls on workers in every hospital to form rank-and-file committees, democratically controlled by workers and independent of the unions, to organise a real fight against the Labour government’s austerity agenda.

These committees should link up with workers in Australia, the US and other countries in an international fight for a fully-funded COVID elimination strategy, and for tens of billions of dollars to greatly expand public health services. This means taking up the fight for socialist and internationalist demands, to bring an end to the capitalist system and its subordination of human lives and health to the accumulation of profit.



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