

**Are we able to retain nurses in New Zealand in the public health
sector?**

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Abstract

New Zealand has been facing an alarming shortage amongst the nursing profession whilst having difficulty in attracting and retaining nurses (North et al., 2006; Bedford, 2003). The shortage in this profession has been an ongoing issue not only in New Zealand but worldwide. Investigating the many different reasons for a poor retention record in the New Zealand public health sector, various concerns have been identified. An integrative literature review has been conducted to be able to understand the causes of a poor retention record in New Zealand. This has ensured that multiple different sources have been analysed to gain a broad understanding as to what has been happening over a period of time. By using an integrative literature review as the key research methodology, this has established similarities and differences from different authors and articles. Additionally, it has heled understanding the different patterns that may have caused a poor retention record in New Zealand, such as different extrinsic and intrinsic factors.

Over time, there have been various internal issues evident amongst nursing staff which has been identified through seven different themes in the discussion section of the dissertation. In the past, the main issues were intrinsic issues such as long working hours, shift work, and a lack of recognition and support within the workplace. In contrast, extrinsic issues consisting of low pay and pay parity amongst the nursing workforce appear to play a greater role during the Covid-19 pandemic. Thus, both intrinsic and extrinsic issues play a role towards low retention in the nursing workforce today. Due to the pandemic, low pay and pay parity have become identified as contributing towards poor retention amongst nurses is low pay.

While the overall research question was “Are we able to retain nurses in New Zealand in the public health sector?”, there have also been many different sub-questions. The sub-questions are based around unsuccessful versus successful organisational practices that influence positive or negative retention levels. This includes intrinsic factors and organisational strategies that can contain employee turnover, as well as the major influence of the pandemic and the negative impact it brings along towards a low retention record amongst nurses in the public health sector. The research identified seven retention themes: intrinsic rewards, cost of turnover, recognition of nurses, employer branding, systems approach, pay issues, positive and negative impacts of the Covid-19 pandemic. In particular, recent research highlighted the last theme about the effect of the pandemic and how having higher pay remains a current priority amongst nurses.

When discussing pay-related issues during the Covid-19 pandemic, the included research and comments are nearly based on recent media reports. Due to the pandemic being a recent crisis, there has been limited empirical academic research available so far. On the other side, a vast range of empirical academic research can be found regarding the nursing workforce prior to the pandemic. This range of academic research has allowed a comprehensive overview of issues

and trends but has also raised several questions, as explored in the seven retention themes mentioned above.

Furthermore, when acknowledging the short-term effects of the pandemic, most reports suggest that Covid-19 has increased negative implications for the nursing workforce. However, this dissertation also opens for an opposing view to this perspective. Amongst the limited media reports available, some have suggested that the pandemic may open for radical, beneficial remedies, especially in terms of pay and pay parity. This comparison between positive and negative effects due to the pandemic can be viewed in the discussion chapter of the dissertation. At the moment, when comparing the overall negative and positive impacts of the pandemic, the dissertation concludes that it is highly evident that the negative impacts outweigh the positive impacts.

Generally, this research project has been an interesting journey investigating issues behind a poor retention record amongst the nursing workforce in New Zealand over time. It has been fascinating learning about various issues that have become embedded in this profession, despite various initiatives to deal with these issues. It highlights how the New Zealand public health sector has struggled to retain nurses over time and how staff shortages amongst the nursing workforce have increased due to the impact of the pandemic.

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Attestation of Authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

Date: 9/8/2021

Sign:

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Chapter 1: Introduction

In chapter 1 the background history regarding the research topic will be covered. By explaining the history of the nursing workforce and the issues that have been evident throughout a period of time, this will enhance the reader's insights about issues amongst the nursing workforce.

Furthermore, it should help understand the major issues that have occurred and initiatives that have been applied to accommodate those issues, whether they have been successful or unsuccessful. In addition, an overview of the contribution nurses has had towards the public health sector will be discussed. This is to acknowledge and respect how New Zealand's public health sector is highly dependable on nurses. A section discussing current and past theoretical research will be introduced. Furthermore, the main issues apparent over time will be discussed in depth to ensure the reader understands that many issues have arisen amongst the nursing workforce, hence it being an ongoing journey of reconciling diverse demands between nurses, the public health sector, and the government. Following this, the researcher's background and interest in HR and its potential contribution towards alleviating nursing workforce pressures will be provided. This will demonstrate a personal perspective about the researcher's background and how it can be related to the idea and contribution towards this dissertation. Lastly, the aim, the objectives, relevance and significance of this dissertation will be outlined to illustrate the purpose of this research project.

Introduction

My study for this dissertation has been arduous and there have been several key changes from my original starting point. My initial starting point was associated with my studies and interest in human resource management and associated practices. Originally, I was interested in exploring what motivated employees to remain and pursue a career within a particular organisation. In line with this, it was decided to focus on staff/employee retention (and its associated opposite: voluntary staff turnover) in a specific industry or vocation/profession. As the nursing profession is a very important part of New Zealand's public health sector and there appeared to be some staff retention problems (North et al., 2006; Bedford, 2003), it was decided to focus on retention amongst nurses in the public health sector in New Zealand. Thus, the final dissertation proposal (the so-called PGR1) described how the dissertation would research existing literature on this topic: "Are we able to retain nurses in New Zealand in the public health sector?"

During the review of the literature, my dissertation again started to change. First, the COVID-19 pandemic provided an unprecedented upheaval in the New Zealand health sector which prompted increased work pressure and unrest amongst nurses (Longmore, 2021). This has created a number of recent reports and media articles. My dissertation will address, therefore, the Covid-19 pandemic changes and their impact on the work of New Zealand nurses. Also, I changed my initial focus from academic journal articles – partly because of the fast-moving

changes associated with the Covid-19 pandemic – and started to focus more on reports and media articles. This generated a somewhat different understanding of low levels of retention and low pay (Australia & New Zealand; Editorial Board Reviewed; Nursing, 2019) as will be discussed in detail below.

Current/Past theoretical research

The initial interest of pursuing this research was through a personal passion for human resource studies. Understanding and learning about employee behaviour and relating it to good workplace practices is an important contribution towards positive retention according to human resource studies. Following this, different forms of theoretical approaches have been researched and applied to a section of the literature review which shows the relevance of human resource approaches to the management side of nursing. These approaches identified in the literature review clearly indicate how the influence of human resource strategies and tactics can bring in positive or negative workplace experiences for nurses. This is a crucial part of the research project as it indicates a personal interest in investigating the effectiveness of HR practices; the influence HR initiatives have towards positive managerial skills, and the importance of HR practices for employee happiness and well-being. However, it is understood that HR has a minimal amount of influence on the current issues that have been indicated in the nursing profession. This is because these are structural, organisational, and vocational issues which are out of HR's reach. This does not mean HR strategies and tactics cannot be applied from a managerial side to support these issues.

Nursing being a crucial component of the public health sector

Nurses are an essential part of the health sector of any country. There is a growing worldwide shortage in the nursing profession which has been an ongoing issue for many years, and New Zealand is no exception (North et al., 2006; Bedford, 2003). In the New Zealand context, the public health sector seems to find difficulty in retaining nurses (Kai Tiaki Nursing New Zealand, 2006). Research generated over the years gives an indication of the different reasons why nurses choose to leave their job. However, these issues may vary depending on internal factors within the organisation.

Whilst the nursing workforce is a significant contributor to the public health sector, there seems to be more importance attached to the health sector and the nursing profession due to the worldwide pandemic of the Coronavirus (Walker et al., 2016). An example of this would be how many countries have started to invest more in the health sector and in employing nurses. This has increased the worldwide shortage and, as this Dissertation will demonstrate, also increased shortages and unrest within the New Zealand nursing workforce.

Analyzing the difference between new and old research gives an indication of the changes that may have occurred over time. For instance, according to academic journals, most of the research published a few years ago focused on low levels of retention mainly due to the lack of intrinsic rewards. However, as worldwide changes have happened due to the Covid-19 pandemic, the issues amongst the nursing workforce mainly focus on low levels of pay (Wait, 2021). Pay issues have been apparent in the past; however, currently it is one of the main focused issues amongst the nursing workforce today (Broughton & Tso, 2020).

It is evident that there has been a shortage in the nursing workforce for many years (North et al., 2006; Bedford, 2003), however recently it has become more apparent, especially for nurses in their day-to-day practice (New Zealand Herald, 2018). Nurses are not coping well as identified in recent media reports (Longmore, 2021), and the government is not being helpful by making decisions that are either going against nurses' demands or rejecting the concept of fair pay that has been demanded by nurses (Bond, 2021).

Additionally, over the years there have been many speculations that the public health sector is underfunded by the government, and it needs to reconsider in a fair manner. Currently, this has been making headlines where the government needs to intervene with better funding in the public health sector to be able to help these organisations to continue to serve the community (Kai Tiaki Nursing New Zealand, 2004). It seems underfunding was an issue many years ago (NZNO, 2017) which was a result of the CHE system introduced by the 1990-1999 National-led government. However, over time other internal issues such as, shift work, long working hours, and lack of recognition seemed to have bothered nurses. However, due to the current circumstances the pay issue has risen again with stronger implications such as numerous strikes, unions, and media sources being applied so nurses can be heard (Bond, 2021). Therefore, the government may need to decide whether they should stick to freezing salaries for public health workers and carry on with the risk of losing nurses or work towards making a change in regards to fair pay for nurses which will enable them to remain within their profession and possibly attract others towards the profession which should help the current nursing shortage as well (Broughton & Tso, 2020). However, this remains a question while the battle between nurses and the government is unresolved.

Whilst the pandemic remains an issue worldwide, the workload will continue to increase in the health sector with additional medical tests and the requirement for more medical professionals (Nursing Praxis in Aotearoa New Zealand, 2020). However, at this stage, with the ongoing nurse strikes (Wiljen, 2017) and the likeliness of nurses choosing another profession, we as a country are in fear of losing more medical professionals which indicates a bigger problem with distributing the workload. It was evident in recent media reports as of 2019, that nurses are becoming frustrated and thinking about leaving their job because of the excessive workload and

pay parity (Broughton & Tso, 2020). A comparison of past and recent research (2019 onwards) shows a clear indication of perceptions changing amongst nurses, and this will have negative consequences in respect of retention.

Additionally, the high workload for nurses seems to have been an ongoing issue for the past few years. The high workload for nurses could very well be due to the shortage of nurses that has been faced worldwide for many years; hence not enough nurses to fulfil the job demands in this profession. However, a contributing factor towards the increase in workload is the pandemic currently (Broughton, 2021). This has put a strain in hiring and recruiting, the reliability New Zealand had on migrant workers, and numerous extra tests and precautions that need to be performed by nurses whilst dealing with patients (Gregan, 2021). The pandemic has had a significant impact on New Zealand's nursing workforce, for whom initiatives need to be made in order to prevent further shortage in this field.

One of the most interesting aspects discovered during the writing of the literature review was that the most scholarly articles that I decided to use in this study focused on intrinsic factors that contribute towards negative retention. I was only able to find one main academic article that focused solely on pay being an issue in the past. Due to this, I had understood that nurses were influenced by intrinsic factors which contributed towards negative retention. Therefore, my entire study focus started to divert towards intrinsic factors that influenced retention in the public health sector. In contrast, as research progressed, the realisation of pay issues and an excessive workload amongst the nursing workforce became apparent post the pandemic, hence the main concerns in this profession focused on pay.

The main current issues in nursing

New Zealand is heavily dependent upon migrant nurses (Chalmers, 2020). The pandemic has brought in travel bans and restrictions as this is not only an environmental and health crisis that is being faced by New Zealand, but a global crisis. This issue is causing a sharp correction in the process of hiring and recruiting nurses. Nurses that are currently practicing in New Zealand are facing a work overload and have to deal with a higher patient:nurse ratio. This is a significant issue as it is making the working situation worse for nurses (Eddy, 2020), hence possibly a valid reason for demanding better pay and working conditions (Australia & New Zealand; Editorial Board Reviewed; Nursing, 2019). While the pandemic remains a global crisis that has not been fully resolved, this issue may remain. Thus, there is a need to accommodate nurses' demands to enable them to remain within the profession as New Zealand is restricted from hiring and recruiting from overseas.

Additionally, in respect to the nursing workforce, pay issues are a major concern currently. This issue plays a significant role in the decisions nurses are making as this issue will have an impact on factors such as staff attendance, nurses choosing to remain or exit the profession, and career

reconsiderations of nurses (Kai Tiaki Nursing New Zealand, 2020). All of these points have adverse implications towards the nursing shortage and the current circumstances; hence the future for the health sector in New Zealand does not look promising.

As pay was not designated as a crucial factor in most of the post scholarly research that I analysed, my understanding and focus was originally not on pay and remuneration issues. However, during my research recent media reports strongly suggested that pay is of growing importance in the nursing workforce today, hence the focus of the research changed and focused more on extrinsic factors rather than intrinsic factors. Still, as discussed below, there are other factors that have a relationship and effect on the demand for better pay accommodating to the pandemic situation which are discussed below.

Firstly, an increase in tests having to be done by nurses on patients that arrive at the hospital (Longmore, 2021). This factor contributes towards the issue of work overload for nurses. Nurses are expected to perform additional tests due to the pandemic, thus the workload for nurses has increased significantly (Lopez, 2021). Nurses are complaining about this as they are already understaffed which means they already have enough work on their hands, and now the requirement for additional tests is only making the situation worse.

Secondly, dealing with limited nursing staff. A follow-on effect from the above issue regarding additional tests performed by nurses is the fact that there is limited staff and a shortage in the nursing profession which has only become worse since the pandemic (Broughton, 2021). This is where nurses are struggling to fulfil workplace demands whilst having limited staff (Lopez, 2021). Nurses have to prioritize their workplace demands over their personal lives, hence nurses are reconsidering whether they want to remain within their current career. Additionally, this could be another reason why nurses are demanding better pay. Nurses have an increase in their workload and have to accommodate to the shortage of staff, so it is only fair they are expecting to be paid better, especially since they are unsure about how long they will have to put up with the work overload.

Thirdly, an increased health and safety risk associated with the pandemic (Manchester, 2020). Nurses have to put their lives at risk to save other lives, especially with COVID-19 being highly contagious (Shuman, 2020). This could be one of the other reasons why nurses may not want to practice nursing whilst the pandemic remains an issue. Also, nurses may feel they are risking their lives and they have to sacrifice so much for their job, however the return they are receiving as income is not worth it, hence the demand for better pay for their work. This is where the consideration of a different career path may be considered by nurses as they may weigh out what works better for them, the risk associated with their job, and not having a sufficient amount of pay, or deciding to move to a new and safer career path.

What HR could contribute to staff retention and why HR has not been more successful?

Human resource management and practices deal with managing employees, hiring and recruitment, and employee well-being (Srinivasan & Chandwani, 2014). Thus, human resource managers can play a positive role in regards to nurse demands, employee well-being, management, and retention (Tanwar & Prasad, 2016). However, they have a limited amount of power. The power the human resource department has in an organisation depends on how strongly the HR department can be of influence to enhance employee retention for that organisation.

In the initial hiring and recruitment process, HR can play a major role negotiating what benefits the organisation can offer to an employee in terms of pay, employee benefits, working conditions, entitlement to breaks, rewards, and so on (Browne, 2012). However, these benefits have already been designed into the job role. Minor changes to these benefits could potentially be approved by HR representatives within the organisation, however major changes such as bargaining for a better pay need to be taken forward for further approval.

Relating HR specifically to nurses, it is evident that nurses have raised intrinsic issues in the past regarding long working hours, shift work, lack of support, and work overload (Taylor, 2018). These issues could possibly be dealt with between employees, the organisation, and the government with the adaption of HR strategies and tactics. However, due to it being a systematic industry problem, it can seldom be influenced by organisational HR strategies and tactics. This is on the basis of limited research regarding the influence and power HR has towards the health sector. Again, this puts much emphasis on the fact that HR may not be suitable in dealing with systemic, industrial or vocational problems as discussed above in respect to the public health sector in New Zealand. Also, it must be noted that dealing with both workloads and pay issues will demand substantial investments by the government which can be financially distressing for the economy.

Aim

The aim of this study is to overview the literature concerning issues facing the nursing workforce which can have an effect on nurse retention in the public health sector. Many different issues have been raised in the literature over time and thus, staff retention is not a new issue. However, the review of the literature has also revealed that the embedded retention problems have taken a more dramatic tone recently as the COVID-19 pandemic has generated workforce limitations and additional work pressure for nurses in the public health sector.

Objectives

The initial goal was to become familiar with issues surrounding nursing in the public health sector in New Zealand and understand what causes positive and negative retention trends in the nursing workforce so that these themes could be addressed:

1. Identify and understand challenges and barriers that nurses face in New Zealand which will enable gaps to be recognized whilst researching the extant literature.
2. Identify and portray the interrelationship human resource strategies and tactics can have towards positive retention in the nursing workforce that has featured in the literature.
3. Acknowledge the influence and interventions of the government towards the nursing workforce and the impact they have had towards improving retention.
4. Once a sufficient amount of contrasting and variety of research has been addressed in the literature review, a development of assumptions and themes highlighting the Dissertation's fundamental understandings are presented in the discussion section.
5. This is then concluded with limitations, recommendations, and gaps that arose during the research and writing process of the dissertation.

Chapter 2: Literature review

This chapter will focus on various studies that are available about nurse retention and nursing practices. It will provide the reader with multiple perceptions about what different authors are suggesting in terms of their research on nursing practices in New Zealand's public health sector. The purpose behind understanding and acknowledging many different studies is to be able to understand the core interest behind nurse retention as stated in the introduction and methodology chapters. As indicated in the introduction and methodology, the study of human resource management and its strategies will be applied to relate it to a personal interest area of studies.

The various sections of the literature review will cover both past and current research with a mixture of human resource theory and practices. By the application of past and current research, comparisons, similarities, and differences can be generated to understand what has happened amongst the nursing workforce over time. It will be evident that past literature focuses mainly on intrinsic issues that have occurred in the nursing workforce over the years. In contrast, relying on sources such as recent media reports and news texts post the pandemic's beginning, the main issues evident in the nursing workforce have been highlighted as work overload and low pay. It is understood that these two issues that are currently ongoing have mainly been generated due to the unexpected spread of the COVID-19 pandemic worldwide.

The key message that this chapter provides regarding the research questions is the main two issues are work overload and low pay amongst the nursing work force. These are current ongoing issues which have not been resolved. The public health sector faces a shortage of nurses and these two issues are only making the situation worse. The aim to resolve these issues is vital in order to retain nurses in the public health sector. Furthermore, different themes will be discussed in detail in the discussion chapter with recommendations. The literature review will provide an overview of the idea behind what research states, however an in-depth explanation will be provided in the discussion chapter following the literature review.

Factors considering the shortage in the nursing workforce

The profession of nursing is a crucial component in the health sector. There seems to be an alarming shortage that New Zealand is facing in attracting and retaining nurses within the profession. (North et al., 2006; Bedford, 2003). According to North et al. (2006), the contributing factors towards the issue of employee retention regarding nurses point towards the following aspects: the impact of shift work, long working hours, poor working conditions, a

lack of structure, a lack of support systems, stressful work and working environment, and a lack of autonomy. There is not only one major component that contributes towards low levels of retention (Weston & Longmore, 2020). However, many reasons may differ in terms of individual priorities, preferences, responsibilities, age, and gender.

Additionally, another contributing factor that puts a strain on low levels of retention with nurses is the age factor. Research has also pointed to the 'maturity of the nursing workforce, with many nurses being 50 years or older and expressing a desire to retire within the coming years' (North et al., 2014; Walker et al., 2018). There could be different reasoning behind this; older nurses may find it difficult to practise their job in terms of the physical end of their work requirement (Clendon & Walker, 2016). As one gets older, they may feel a sense of tiredness/fatigue due to age, thus not committing to factors discussed above by North et al. (2006).

Regarding the contributing factors that put a strain on retention, the demographic of nurses is well-known and has not changed positively over time. It has been indicated in the NZNO strategy for nursing 2018-2023 that 43% of nurses are over the age of fifty years. Secondly, only 8% of the nursing population in New Zealand is men. Thirdly, 7% of the overall nursing workforce in New Zealand is Maori whereas Maori comprise 15% of the New Zealand population. Lastly, 27% of the New Zealand nursing workforce is internationally qualified nurses (New Zealand Nurses Organisation, 2018). These findings clearly show that there is a lack of diversity in the nursing field; less than half of the nursing population is qualified at an international level.

Interestingly, research by Price et al. (2016) of recent nurses with a postgraduate qualification found that most of these nurses remained in the profession four years after their initial registration. The nurses also indicated that they saw nursing as a long-term career. However, it has been mentioned that government funding is insufficient to fund postgraduate studies in nursing (New Zealand Nurses Organisation, 2018). When comparing the funding between doctors and nurses, nurses have a low amount of funding and no increase in funding in 2017 compared to doctors (NZNO, 2017). A clear depiction of the funding is in Figure 1. It illustrates the difference in funding between doctors and nurses in 2017. Strategic actions will be implemented and monitored by NZNO to push for higher pay through the strategic opportunity due to the effect of the pandemic. Studies to date show the budget for nursing from 2019 will include training of new graduates, training registered and enrolled nurses which will support safe staffing, recruitment and retention, and employment of nurses. A figure of \$24.52 million has been assigned for an average of four years (Ministry of Health, 2019). This is a result of the underfunding that was allocated in 2017 (Figure 1). However, despite these initiatives, many

nurses are leaving their job after the first year of their qualification, which is a significant barrier in the nursing workforce today (Brook et al., 2019).

Retention and turnover correlations in the nursing workforce

The ongoing instability in the nursing workforce globally is raising questions about the issue of nurse turnover. Retention and turnover issues in New Zealand and worldwide have an impact at both an organisational and employment level. Subsequently, they affect turnover costs, turnover, the impact of turnover on patients, and nurse and system outcomes (Hayes et al., 2006). Under meta-analytic correlations, supportive leadership, communication, network centrality, and organisational commitment are the strongest predictors of what drives voluntary turnover. Other additional variables related to nursing turnover are job strain, work-family conflict, lack of control in their job, lack of rewards/recognition from the job, job complexity, and team cohesion (Nei et al., 2015). In addition to this, Nei et al. (2015) recommends that altering the job characteristics of nurses and their working conditions may reduce voluntary turnover amongst nurses. This could possibly alter turnover issues, as the demands of nurses are being heard and accommodated, thus reducing nurses need to leave. However, it is also understood that not all the demands can be met, and neither can all nurses be accommodated.

In a study, the correlation between leadership behaviour, work climate, and job satisfaction identified whether they affected nurse turnover. The study outlined that leadership behaviour was of less importance than nursing dissatisfaction; thus, it did not impact turnover. However, job satisfaction and workplace climate variables significantly increased turnover in the nursing sector (Sellgren et al., 2007). This research has another perspective to Hughes et al. (2018) which discusses the importance of the leadership role and behaviour and how it has a major effect on workplace practices and the organisational environment which affects whether the staff would choose to leave or stay. The two studies has opposing perspectives. The study that had been conducted in the past describes leadership behaviour being less influential. On the other hand, the more recent study describes leadership behaviour as having a major impact in an organisational environment. This could possibly be due to several factors, including research perspective and the changing nature of work, because of an eleven-year gap between the two studies.

Additionally, registered nurse turnover can have a drastic effect on the quality of patient care, and it can be very costly for organisations. Thus, accommodating nurse demand, bringing in autonomy, flexibility, better communication, and offering rewards and recognition may reduce nurses leaving their jobs (Gess et al., 2008). It is highly recommended for organisations to accommodate nursing staff demands to retain them in the long run, especially since there is a significant shortage in this profession.

Additionally, a quantitative and qualitative research conducted by North, et al., 2013 showed results identifying the cost per registered nurse turnover which represented half of an average salary of a nurse. The highest costs were related to temporary cover, and it had the follow-on effect of loss of productivity. The replacement of nurses who leave brought high recruitment costs (North et al., 2013). Again, this demonstrates the importance of how well nurses are managed and their well-being in the workplace. Managing nurses sufficiently should reduce the need for nurses wanting to leave, especially for workplace environmental reasons. This will save a huge amount for the organisation as mentioned by North, et al. (2013). However, acknowledging other factors such as retirement, age and health as reasons for nurses to leave may be difficult to manage.

Further initiatives are being put in place by DHBs and the New Zealand Nurses Organisation (NZNO) to protect nurse retention. An article published outlined that the workload for nurses is too much and is not sustainable; hence safe staffing must be a priority. A strategy will be developed in order to retain nurses in the public health sector. Also, strategies will be put into place to be able to attract those nurses that have left the profession to come back into practice (NZ Herald, 2018). This is a positive step as government, DHBs and the NZNO are acknowledging the nursing shortage as a problem, and have implemented strategies and tactics to help further retention in this field. Another positive aspect of putting this initiative into place is nurses that are currently not practicing may be attracted to recommence practice which would ease the shortage New Zealand faces in the nursing workforce.

As a part of a national survey, directors of nursing in the 21 DHBs across New Zealand conducted research about the nursing workforce. Twenty nurses participated in the survey. The findings of this survey highlighted that turnover was an issue in 13 DHBs, with five of them reporting a turnover rate of over 20%. However, turnover was not an issue across the entire country as five DHBs reported low turnover in the 5-10% range. They identified that they had tight controls over the recruitment of new staff, and several had a freeze on recruitment of registered nurses (North et al., 2005). Despite this research being conducted in 2005, it seems that the underlying issues of retention, nursing shortage, and turnover have not been fixed. This encounters as a threat for the nursing workforce and profession overall.

Following this, research was conducted to acknowledge turnover issues in the nursing workforce, specifically focusing on turnover costs in 2018. This study made comparisons between a few countries such as New Zealand, the US, Canada, and Australia. The findings showed, "turnover rates also varied significantly across countries with the highest rate reported in New Zealand (44.3%) followed by the US (26.8%), Canada (19.9%) and Australia (15.1%)" despite New Zealand being the smallest country (Duffield et al., 2014; Kai Tiaki Nursing NZ,

2018). One of the main reasons behind New Zealand having the highest rate could be temporary replacement of nurses, which triggers additional costs, thus the importance of nurse retention.

Further statistical analysis reflects New Zealand's ageing population, which tends to expand. There is likely to be an increase in internationally qualified nurses contributing to the nursing workforce in New Zealand. It is evident that already New Zealand's nursing workforce consists of 25% internationally qualified nurses. Out of the internationally qualified nurses, 55% come from the Philippines and 20% from India, according to a study conducted in 2016 (Mowat & Haar, 2018). Interestingly, very little is understood about how these nurses fit into New Zealand's culture and workplace environment. While analyzing the results of a survey that these internationally qualified nurses answered, the results showed that significant sacrifices were made by migrant workers to work in New Zealand. Some of the sacrifices discussed were, borrowing money to migrate, leaving family and support behind, and putting careers on hold. The positive side of migration was earning a better salary and increasing status and opportunities (Mowat & Haar, 2018). Additionally, with the immigration office closure apparent in the Philippines (Basagre, 2021) this would worsen the nursing shortage in New Zealand as New Zealand's nursing workforce already depends heavily on the Philippines as discussed above.

In the NZNO annual general meeting of 2019, the chairperson's report outlined staff turnover issues, loss of senior and emergency nurses, and the importance of acknowledging work performed by nurses (Emerg Nurse NZ, 2020). This information is not new for New Zealand's health care sector; however, it remains an issue before and during the outbreak of the COVID-19 pandemic. Also, with New Zealand being heavily dependent on migrant workers, there have been many discussions about racism in the nursing workforce. Initiatives are put into place to implement changes further and address these issues. However, making those changes is not going to be an easy step, this will require structural, systematic, and managerial changes (Kai Tiaki Nursing New Zealand, 2020).

Initiatives implemented by the public health sector in New Zealand to determine the success in retaining their employees.

Regarding the public health sector, the adaptability of cognitive and emotional approaches to retain healthcare professionals is essential. It is not only initiatives that need to be applied by the organisation, but the healthcare professionals' approach also needs to be mutual to the organisation, hence having the passion for serving the community, self-interest, and goodwill behaviour (Brunton, 2017). The organisation plays an essential role in attracting and retaining their employees depending on how well they take care of the demands of their healthcare professionals which brings in the concept of human resource management. However, to make this relationship work in the long term, healthcare professionals, particularly nurses, need to

have that passion in wanting to serve the community and the self-interest characteristic in their personality to perform their job.

Furthermore, in the public health sector, another critical determinant that enables the retention of nurses in the organisation is their managers and leaders (Govender et al., 2016). A positive manager or leader will enable the workplace to be a better place for its employees by taking care of employee needs while maintaining them to be as productive as possible. The organisation's responsibility to look into this factor to see how well their managers and leaders can attract and retain their nurses will prevent the organisation from facing excessive low levels of retention. These are basic human resource strategies and initiatives that need to be applied.

Another aspect that can bring adverse results for the public health sector organisations is the inability to adapt and reflect on HRM strategies and tactics. Organisations that face human resource challenges show a low-growth counter-part. The inability to acquire key talent and adapt the organisation's mindset will result in a negative outcome for the organisation in terms of employee well-being and retention (Srinivasan & Chandwani, 2014). Despite this study being conducted in India, it is relevant in an organisational context for a developed country such as New Zealand. New Zealand being more modern and developed, the adaptability of human resources has become increasingly practiced within organisations. The responsibility organisations have towards their employees regarding maintaining, retaining, attracting, and sustaining them has become a high priority now. Therefore, human resource initiatives, especially those that consider positive retention behaviour, should be practiced to make nurses remain within the organisation. However, it is to be noted that there are major limitations of the influence of human resource management in the public health sector. Human resource management does not have the authority to make such influential decisions.

Comparing initiatives of organisations to determine whether they are successful or unsuccessful in retaining their employees.

New rules and regulations have been put in place to protect employees and the New Zealand population; the New Zealand Public Health and Disability Act 2000 complements this action. This act requires organisations to report annually on their progress to improve public health services. For instance, this is being done by Auckland DHB, where the Cardiovascular Directorate is improving the cardiovascular service by implementing a meeting for Maori nurses to develop their professional and personal avenues (Auckland District Health Board, 2020). The reporting requirement took place to protect mainly public members so they can receive quality health care in New Zealand. The finding of this study showed that public health care organisations' quality objectives were not achieved (Brunton, 2009). The findings of this research are relevant as when measuring how successful an organisation is, its image in the eyes of the public needs to be positive.

Mental stress is another factor that comes with the job role. Having to deal with severely sick patients, elderly patients and deaths can put an immense amount of mental stress on nurses, especially if they have been taking care of the patients for a long time so they develop a relationship with the patient, making it difficult to recover from the loss. Other than this, nurses are often a target of frustrated patients, verbally abused and challenged (Buchanan, 2020), thus due to the workload as well as pressure, it is evident that nurses are finding it “tough” within their profession, and therefore consider quitting their jobs (Longmore, 2021). This puts much emphasis on the importance of support systems that are available to nurses – support systems such as managerial/head of department support, team support, and professional services support to deal with mental stress. Nurses have mentioned in research, that their profession lacks support systems, which does not assist the situation.

Furthermore, research demonstrates evidence of early attrition in the nursing workforce. Nurses retire or leave the profession well before retirement age. Hence the ongoing nursing shortage is accumulating in New Zealand. This study analyzed 285 ex nurses that were all aged less than 55 years of age. The research identified the primary reasons these nurses chose to leave their profession or opt for early retirement. The following reasons were discussed; workplace concerns, personal challenges, family issues, career factors, leaving for overseas, lack of confidence, the unwillingness to complete additional educational requirements and poor work-life balance (Walker & Clendon, 2018). The conclusion made from these findings was that there are many different reasons why nurses choose to leave their workplace; however, implementing a positive workplace environment and individualized approaches to retain staff may decrease this attrition. Additionally, Walker and Clendon (2018), put emphasis on the statement, “nursing is not a lifetime career option, unlike before.” This statement puts strong emphasis on the aspect that there has been negative change in the nursing workforce, nursing is no longer seen as an option for a lifetime career.

The influence of management and leadership on performance

An important component towards employee retention in the nursing sector is how well the organisation supports and welcomes an employee. Following one-to-one interviews to develop qualitative research on how well Maori nurses transitioned into their workplace from their learning practise experience, the findings of this qualitative research highlighted the importance of support systems in a time of change. Findings summed up how well nurses were welcomed into their workplace, the management of their feelings/emotions, and the priority of their well-being (Foxall et al., 2017). It clarifies how support systems by leadership and management roles play a prominent role in the retention of employees in the nursing sector.

Management and leadership roles directly affect the performance of nurses in their profession. Having a system where the role of leadership directs its staff positively and effectively enables a

better relationship and understanding to be gained between each other (Hughes et al., 2018). This aspect brings in the importance of relationships, communication, and interaction which provides a better understanding that nurses can develop to pursue their job specification. A report conducted by Massey University, an analysis of management competencies for fostering healthy work, in particular focused on nurses, was completed (Figure 2) (Massey University, 2019). A skilled, motivated, efficient, and competent nursing workforce is vital for the health care systems in New Zealand. A nurse's workload, professional activities, and tasks are dependent directly on the patients' health status, dependence level, and care needs. Hence, the pressure of managing human resources by distributing nurses' working time and monitoring their workload for safe and high-quality care shows how successfully the management and leadership role manages employee time (Ciarniene et al., 2019). This research proves the importance of how well nurses are managed and how the management determines employee productivity, affecting staff retention and well-being.

The findings regarding the importance of good working relationships with colleagues and leaders resonate with the role that social support at work improves employee well-being and performance and should decrease burnout and absenteeism (Frese, 1999). In addition to this, the importance of experiencing a supportive relationship with managers resembles studies that have found having supportive supervisors and senior managers means employees tend to be satisfied and happy in their workplace, which enables them to be inclined to their job (Ogle & Glass, 2014; Van Der Heijden et al., 2009). Where nurses perceive job advancement opportunities, rather than focusing on intimidating barriers, these opportunities can positively impact job satisfaction and occupational commitment (Price J., 2001). These factors help attract and retain nurses; however, they can also have adverse implications as well (Moloney et al., 2018).

Employer branding as a strategy to retain employees

The technique of employer branding is a tactic that affects employee retention. Employers should apply this tactic to attract, maintain and retain employees (Arasanmi & Krishna, 2019; Stensaker, 2007). Employer branding rewards fairly, attracts talent, helps with retention, and manages work-life balance (Maurya & Agarwal, 2018). The employer branding theory and its relation towards low levels of retention should shadow the nursing profession in New Zealand. With New Zealand having a shortage in the nursing profession, public health organisations need to have a 'good image' to maintain, retain, and attract employees. This should help towards tackling retention problems within the public health sector.

Employer branding has a clear connection towards positive employee retention (Gilani & Cunningham, 2017; Sokro, 2012). Employer branding strategy can target employees to remain within an organisation, and it can decrease compensation incentives for an employee (Bussin & Hugo, 2019). Applying such strategies to maintain their corporate image and focus on employee

retention tactics represents how successful or unsuccessful an organisation is at retaining its employees. Organisations that focus not only on the measurement of productivity and profits but also on employee-related tactics, investments, and incentives are likely to face fewer low levels of retention. Viewing employees as an asset rather than an expense should bring in different tactics to benefit both the employee and the organisation.

Following this, individuals looking for a job would choose to apply to an organisation with a good and reputable image. In this case, employer branding is vital to attract new employees from the perception they have of the organisation as an outsider. Moreover, retaining employees positively and how the organisation treats their employees internally determine positive word-by-mouth conversations to occur within and outside the organisation. This will hold more value and have a positive effect on the organisation's image.

In the context of modern organisations, attractiveness, profitability, and future operations are highly dependent on the ability of the organisation to put its employees first and recognize them as their most important stakeholders for organisational development (Verčič, 2021). With the employment environment becoming increasingly competitive, employer branding is a fast-emerging human resource strategy to attract and retain good talent (Tanwar & Prasad, 2016). The emphasis on the management of nurses and how well the organisation manages the needs and well-being of nurses may result in positive retention in the nursing profession. Managing the well-being of nurses would mean putting more attention on factors such as shift work, long working hours, working conditions (Weston & Longmore, 2020) – areas researched and highlighted as harmful workplace practices for nurses.

Nurses being an essential human resource for the health sector, the organisation must nourish their well-being and requirements to retain them. Therefore, the strategy of employer branding as a direct strategy designed to attract and retain "good talent" could be a positive initiative that public health organisations could adopt to prevent further retention problems.

Additionally, a strategic human resource key towards low levels of retention is applying the model of an employee value proposition. The questions that frequently arise while discussing this model are: How will it benefit an individual in their personal situation? What is on offer for that employee? Ideally, it is a set of offerings an organisation is willing to offer to its employees to retain them (Browne, 2012). EVP is an employee-centered approach that aligns with the benefits of its existing employees. For instance, Browne (2012) discusses the opportunity for employee growth, development, and recognition. The background behind the application of EVP is to focus and improve organisational support, organisations perceived identity, and exchange quality in enhancing value perceptions in employees (Rounak & Misra, 2020). All three aspects direct towards employee benefit and can make employees' work-life better. HRM practice can be applied strategically to improve the employee-organisation value fit to improve

retention (Presbitero et al., 2016). In the long term it should enable low levels of retention to decrease for an organisation that faces high retention problems.

EVP has a connection to the concept of employer branding as well. The application of EVP can develop the image of employer branding for an organisation (Mascarenhas, 2019). If an organisation takes care of their employees, the employee is highly likely to spread positive word of mouth about the organisation which will contribute towards employer branding as well. It can almost work together, simultaneously benefitting both the organisation and its employees in the long run.

EVP refers to creating that balance between employee job satisfaction and performance of the employee in their workplace culture. EVP creates better recruitment objectives, identifying the needs of employment, positioning employees in the correct places (Figure 4), and creating and enhancing employee value (Goswami, 2015). With relevance to the nursing sector in a developed country like New Zealand, the concept of EVP plays a vital role in both the organisation and employee's life. Numerous research studies have emphasized why New Zealand organisations are facing a shortage in the nursing sector. These areas that have been pointed out focus on a negative outcome for the nurses' well-being both at work and outside their workplace. Aspects such as long working hours, shift work, the mental stress associated with the job, lack of support, fatigue, and many more. Many of these different reasons identified can be managed through the approach of EVP. By leaders/managers acknowledging these issues and implementing a change to fix or make changes in a positive way to prevent these issues, will enable employees (nurses) to realize their value and importance within the organisation.

In an article published in Health Central, one of the main areas nurses felt unhappy about was the lack of respect and recognition they were receiving from their workplace (Health Central , 2018). They found it appalling in terms of respect, recognition, remuneration, and collegiality. This is where the role of EVP comes into place. Such organisations should consider taking an approach towards the EVP strategy, which will enable employees not to feel what has been outlined in the article. Similarly, in another article it has been outlined that, "They are feeling undervalued, underpaid, unsafe, and unsupported" in their nursing career (Taylor, 2018). The need for nurses to feel valued is a vital aspect when relating it towards the link it may have with low levels of retention.

A recent review to explore nurse turnover in a hospital environment had been conducted, the research question being, "Why do registered nurses leave the acute setting?" The critical findings from this review indicated three main themes behind it. The first theme to emerge concerning support included organisational and managerial support and the lack of appreciation and relationships with co-workers. The nurse participants felt unappreciated for their skills and knowledge, unrecognized by managers and the organisation, hence they left. The second theme

had relevance to the workload, patient acuity, inadequate staffing, and high nurse workload. Additionally, many nurses felt that the health care system was no longer patient-centered; it was treated more like a business. A nurse suggested that the complexity of patients had become more intense, and the patient: nurse ratio had increased. Thus, the workload per nurse had increased. The third theme referred to professional factors such as career, professional development, and participation in a hospital setting which led to poor education opportunities, along with limited options to upskill in the profession, resulting in choosing to leave their workplace (Ellison, 2020). All of these aspects are related mainly towards personal intrinsic factors which drive nurses towards exiting, most of these being manageable.

Understandably, the process of EVP cannot happen overnight; hence the organisation may have to implement changes, which is likely to happen over time. By implementing these changes, nurses will feel a sense of happiness, belongingness, and value within the organisation; thus, possibly reconsidering before making a decision to leave an organisation. Doing this should stabilize low levels of retention in the nursing workforce especially when issues that arise are intrinsic factors.

Application of conceptual framework of the effect of Push and Pull factors

In many countries, the public sector is under pressure from various new challenges, such as an ageing population and growing debt. Furthermore, this sector faces high demand for better and advanced services that are cost-effective for citizens. A conceptual framework of push and pull factors (Figure 3) needs to be applied in the public health sector in order to motivate nurses to remain within the organisation (Alsos et al., 2020). Push and pull factors have an influence in the decision-making process and the steps that nurses take in their career. For instance, one of the many different reasons for migrating to a new country for nurses is the push and pull factors regarding their careers as mentioned in the migration section of the literature review. Nurses seek to migrate to a different country to seek better wages and working conditions than their native country (Kline, 2003). Kline, (2003) emphasizes how developed countries continue to recruit nurses from other countries, particularly underdeveloped countries, to accommodate the shortage of nurses within the country. This shows a use of push and pull factors applied in order to employ and retain nurses.

The conceptual framework of push and pull factors and their relationship with nurse retention is interrelated. Aspects, situations and circumstances that attract a nurse to remain within their organisation will result in a positive pull behaviour within the organisation. In contrast, negative experiences, an unhappy workplace, and other factors that push nurses to have a negative perception about the organisation are practices of push factors which may encourage retention.

Currently with pay parity being in the news for nurses, a push factor for nurses can be the fact that they are not being paid enough compared to the demands of their jobs. For instance, a kiwi

nurse has spoken out and said how nurses are not happy with the pay offer which has been assigned by their DHB (NZ Herald, 2018). This is pushing nurses from wanting to work in that specific organisation, additionally this can have further implications such as considering changing their career if pay parity has not been met. Push and pull factors determine a great amount when it comes to the decisions that nurses decide to make. If the pull factors do not prove to be strong then the push factors (negative experiences) can contribute negatively towards low levels of retention for the public health sector.

The adaption of a positive learning behaviour – employers and employees working together

Organisations encourage employees to adopt a positive learning behaviour to survive in a competitive, changing workforce (Chen & Zhao, 2012). Task conflict is ideally obliging employees to scrutinize task-related issues to view ideas from different perspectives, which should initially foster learning capabilities (De Dreu, 2006); however, from an opposing perspective it also hinders an employee's learning experience (Jehn, 1995). The idea behind learning from one another is a type of managerial/leadership approach that can be applied to support employees. Learning through observation of other employees saves training and development time, and other costs. Furthermore, this learning experience can be both practical and motivating for employees. It benefits the organisation by saving time and costs and enables employees to interact and communicate with each other during this learning cycle, which helps build stronger relationships (Doston et al., 2014) while learning their jobs. The direction that this leads would mean that employees can do both; build relationships and at the same time learn their job requirements.

As discussed earlier, nurses strive for support and good relationships in their workplace (North et al., 2006). Having the opportunity to build on this aspect may result in positive attitudes nurses develop within their workplace, hence eliminating retention. A qualitative research study shows nurses having an opportunity towards career development, building good relationships within the workplace, and feeling valued within their workplace contributes towards employees wanting to remain within their workplace. On the other hand, having workplace bullying, a heavy workload, and problems with work-life balance are all negative contributors (Moloney et al., 2017). Many of these factors can be resolved if nurses have positive workplace relationships and support systems. Another substantial reason why nurses choose to leave their job is the burnout nurses face while performing their tasks (Moloney et al., 2020). This again can be controlled with good relationships within the workplace, such as, additional help from colleagues. Following this, work-life interference and a high workload are a significant threat to nursing retention; however, having good support systems can help towards this aspect (Moloney et al., 2018). It may be difficult to build good relationships with fellow colleagues in the nursing field as has been identified as toxic relationships between one another (NZ Herald, 2018).

Furthermore, previously, many nurses felt that they had conflicting expectations with their managers, which would mean they could not provide the expected comprehensive care required (Buerhaus et al., 2009). The intense and demanding nature of their work with an excessive workload led them to feel emotionally and physically exhausted within their workplace (Huntington et al., 2010). Also, many other nurses had felt bullying in their workplace by peers (Foster et al., 2004). Numerous research studies emphasize the importance of support systems, having a good relationship with peers and leaders, and the importance of communication and interaction as being heavily dependent on workplace satisfaction.

Adapting to a systems approach towards nursing productivity and retention

Strategies designed to take a systems approach towards nursing productivity that view nursing as a capital asset for an organisation rather than an expense may encounter positive nurse retention (North & Hughes, 2012). Before, nurses were a cost for the organisation, and strategies were made around nurses that considered them as a cost to the organisation. However, after the 1990s, perceptions started to change, the intention to consider nurses as assets rather than costs started to eventuate. There is a significant limitation in being able to measure nursing productivity and understanding they are human resources (Bach et al., 2008; North & Hughes, 2012). The nature of the work requirements for nurses makes it difficult to measure their productivity (Alcorn & Topping, 2009) in terms of how many patients they deal with, the quality of the relationship with their peers/patients, the amount of temperature/pressure checks they do, quantity of vaccinations they perform daily, and so on. It is not easy to measure these aspects, and if the judgment is upon these measures, it may result in being a partial verdict. Having an appropriate strategic framework in measuring nursing productivity is essential to retain nurses in the long term.

Following this, another strategy that can accommodate with the systems approach is authentic leadership which significantly improves job satisfaction directly and indirectly through an emotional dimension approach (Wong et al., 2020). The opinion of North and Hughes (2012) has similarities with Wong et al. (2020), as they both discuss the importance of having good leadership strategies to manage nurses as "assets" for the organisation. Good leadership behaviour is reflected through how well nurses are managed as well. An article indicated the shortages in the nursing workforce, especially with an increase in the workload for nurses due to the pandemic. Nurses are not being managed properly. Instead of having six nurses per ward, they are lucky if there is even five. Furthermore, nurses are expected to assist in wards they have no experience or knowledge about, and lastly nurses are using their sick leave due to feeling fatigue (Earley, 2020). This poses a major concern for the health sector, and puts high levels of risk upon nurses and patients. Thus, a systems approach and authentic leadership skills need to be established in order to apply initiatives to manage the current situation better. By doing so, the health sector will be taking care of nurse well-being and not putting their health at

risk. Acknowledging there is a current shortage and work overload in the public health sector, strategies designed must accommodate for these issues.

Another example derives from a qualitative and quantitative online survey conducted with several nurses aged 50 years and above, in which 3273 nurses responded. This survey instructed that 45% of these nurses did shift work or flexible working hours. While shift work suited many, others complained about it having deleterious effects on family, social life, physical and mental health, and the decrease of tolerance of shift work as they age (Clendon & Walker, 2013). This example demonstrates that each nurse has different perceptions, priorities, and responsibilities. The duties of authentic leadership and a systems approach can be put in place here to retain these nurses. Nurses are assets; therefore, the organisation should focus on leadership and management factors that can be applied to retain these nurses. The importance of being able to retain nurses above the age of 50 years can be worthwhile for the organisation. Mature nurses have more experience in comparison to younger nurses. Older nurses can be a good learning source for younger nurses whilst contributing towards the nursing workforce.

The theoretical approach of reciprocal role modeling and routinization

Reciprocal role modelling and routinization are approaches that characterize a role in a job. These are aspects such as, a certain way to perform tasks, a specific time routine, and a certain form to deal with events throughout the day. The theory of reciprocal role modeling and routinization has become increasingly popular in dealing with staff retention in the nursing sector. After many years of observation in hospitals, particularly in the nursing profession, a study highlighted the importance of reciprocal role modelling and routinization, which the nursing career lacks. Especially with routinization, despite having years of experience in the career or for the same organisation, there is a lack of routine, which becomes an issue for nurses (Hoare, 2016). For instance, a nurse may be assigned a specific time limit whilst they deal with a patient which should save time. However, this could have adverse effects on the quality of care towards a patient (Waterworth, 2003).

The findings of this study suggest this theory be taken into consideration to tackle this ongoing issue, especially with younger nurses. It will help overcome transition shock, may cause employee stability, and help the nursing workforce settle into their jobs sufficiently while following specific routines. It shows another attempt undertaken to help with employee retention for nurses; however, the findings of this research show it may be challenging to set “routines” for nurses due to the circumstances of their profession. For instance, it is impossible to predict how many patients will come into the hospital per day; hence a routine cannot be concreted. The application of organisational and managerial strategies needs to be implemented in order to look further into this to tackle issues associated with it.

The major dependency of migrant workers in New Zealand

New Zealand's health care systems being based on migrant workers is a concern for the New Zealand economy and the concern of what will happen if we cannot hire and recruit nurses from overseas. New Zealand's nursing workforce is 27% migrant nurses, indicating that we as a country face a shortfall of local nurses in comparison to the rest of the world that faces a shortage of 5.9 million nurses overall (Chalmers, 2020). The global crisis with the COVID-19 pandemic has already brought the realization that we cannot be too dependent on migrant workers, and we need to invest within the local workforce. Hence, the pandemic has highlighted the major dependency New Zealand has on migrant workers.

New Zealand Now (2011) recorded an inspirational story about a lady that had moved to New Zealand to pursue her career. She left her family and children behind, including a five-month old baby to develop a better life for them while working in New Zealand. This meant undergoing many sacrifices to continue her career in New Zealand. She was fortunate to have relatives here, so she had a place to reside until she found her own place. She was successful in bringing the rest of her family in New Zealand from the Pacific; however, they found Auckland too expensive for their family, leaving them with the decision to move to Wellington in order to ease to their expense. She explains her journey as tough; however, the decision for her to move to New Zealand was solely to build a better life for herself and her family. Her English was not great; therefore, she found difficulty while talking to others. The positive side was she had pursued her nursing career in the English language; therefore, she had knowledge about the language (New Zealand Now, 2011). This story is an example of what migrant workers go through when they choose to relocate; the struggle, benefits and challenges associated with it.

A qualitative descriptive approach to understand older migrant Pilipino nurses who had started to reside in New Zealand has been conducted. "Moving backward and moving forward" described how older Pilipino nurses faced challenges with adjusting to the migration process. Secondly, "engaging with New Zealand health services" meant dealing with new health care systems' challenges, lacking knowledge of New Zealand health care requirements, language barriers, and cultural indifferences. Thirdly, "a new-found home" meant adjusting to living in a new country. For these migrant workers, it meant adjusting to New Zealand in terms of their career and lifestyle was just like starting all over again (Monatyre et al., 2017). This can be viewed as problematic for migrant workers as they do not have family in New Zealand, which means there is no one to depend on, especially those that have dependent children may find it difficult to find assistance with childcare. These are just some of the barriers migrant workers may face and in the nursing field they may have an effect on the healthcare system.

Another article that can be mentioned regarding migrant nurses is one that has been published in the New Zealand Herald. Reading through this article brings out what really happens with

migrant nurses. The title of the article speaks for itself, “Migrant nurses in New Zealand face racism daily, with experts saying, 'it's time to talk'” (Russell, 2018). It mentions how migrant workers face high levels of racism in their workplace by both patients and fellow staff members. The types of comments they hear are daunting and hurtful and they cannot react to them as they have to maintain professionalism. Nurses in this article have mentioned that they have been in the nursing profession for years, but they are still not accepted and find difficulty fitting in due to aspects such as skin colour, accent differentiations, language barriers, and simply the reason that they do not look like they are from New Zealand. Russell (2018) has published this article to bring it to the eyes of public so voices that have been kept within for years can be heard. Unfortunately practices such as these promote a negative working environment for nurses, thus encouraging nurses to want to leave their job which poses a negative outcome in terms of nurse retention.

Additionally, while migrant workers undergo these challenges, there is the relationship it has with their employers. Employers face organisational challenges such as time, cost, travel, accommodation, visa requirements. In recent years, there have been numerous studies of employee behaviour, well-being, and satisfaction at work. One of the critical indicators of their well-being is job satisfaction in a new country when discussing immigrants. Work-specific determinants that contribute to an individual’s well-being are environment, job characteristics, and work-specific personal factors (Wang, 2018) emphasizing the importance of having a good work-life balance and a good workplace environment.

“Nurses feel undervalued for the job they perform”

An area required for more nurses to show interest is in the treatment of aged care. According to research, nurses' minimum interest is to take care of the elderly and assist in aged care. Considering statistics, only 1.1% (16 out of 1451 new graduate nurses) showed interest in aged care (Wait, 2016). There could be many different reasons behind this; however, some of the factors that contribute negatively to this are in aged care there is poor remuneration and staffing that prevents members from providing the quality of care they would like to provide to their patients, which leads to burnout and high staff turnover. In relevance to some informal discussions between nurses and their employers, around 30% of aged care staff leave their employer each year, and at least half of those leave the care of the elderly overall (Wait, 2016). It has a follow-on effect, as when staff leave, employers struggle with high financial costs and recruitment and training problems. The remaining staff has to take up the extra workload and take care of patients left without their initial carer. It harms nurses that choose to stay with their employer as it increases the workload (temporarily or long term depending on the employer and employee), and also has adverse effects on the patients as the elderly patients are more comfortable with their usual carer. This has been an ongoing issue which is likely to improve if better incentives are provided to attract nurses that choose to specialize in aged care.

Furthermore, there is a general perception that nurses only do temperature and health checks; therefore, nurses are lazy, and their job is portrayed as 'easy'. However, a nurse that works within Auckland, New Zealand, has described the reality as something else. The job is described as a "relentless workload and they do not stop; they have to eat on the run" (Longmore, 2021). In relevance to the circumstance today, with regards to the COVID-19 it has put an additional workload on nurses with other tests that need to be performed at the time of arrival such as, the COVID-19 swab. Another example that has an effect on nurses is statistics showing approximately 7,000 babies being born during the level 3 and 4 lockdowns (Eddy, 2020); this again proves the demand for nurses and the increase in their workload. It is not making the workload of nurses any better; it is only increasing it which is a disappointment to them (Haas, 2020). Nurses have been battling both in New Zealand and worldwide with the pandemic at an operational, clinical, and strategic level (Manning & Kriebel, 2020).

Following this, with the pandemic being an ongoing issue, nurses and leaders should prepare for issues such as high demand for critical care nursing. There is a need to prepare for training programmes for disaster preparedness, response, and recovery. Nurses need to have the ability to be leaders to develop skills in communication, business, and leadership (Shuman, 2020) to be able to remain strong in a time of pandemic.

Furthermore, the COVID-19 pandemic has drastically affected healthcare and support workers in New Zealand including nurses. Statistics from the Ministry of Health show 96 health care and support workers with COVID-19, were likely to have been infected within their workplace (Manchester, 2020). Nurses are risking their lives in order to save other lives. Longmore (2021) describes the image that the public have of nurses of having an easy job is unfair. Nurses are feeling undervalued and taken granted for while performing their jobs, despite putting their own lives in danger, especially in current times of the pandemic. Members of the public need to understand the risks nurses take to be able to provide them with a quality service.

In contrast, an article published in the New Zealand Herald during the COVID-19 crisis regarding a particular nurse explained that despite an increase in their workload and nurses had to prioritize their career, such as juggling their fitness routines to accommodate the workload but they did not feel as passionate about coming to work as they did before. Some nurses realized that during the crisis they are the frontline heroes, and this has given the opportunity for public to see who they really are; they are the backbone to the New Zealand health system (New Zealand Herald, 2020). This brings positivity to the minds of nurses and members of the public about the perception they had for nurses by supporting strike actions for a better pay and better funding.

The effect of pay in the nursing workforce

According to recent media reports and news texts it is evident the current issue amongst the nursing workforce is pay. This has become the focal point for the nursing workforce. There has been limited empirical research from the chosen scholarly articles that has been used for this dissertation, however post the pandemic pay seems to be the focal point. The pandemic has caused many constraints amongst the nursing workforce: work overload, limited dependency on migrant workers, and an increase in the shortage in the nursing workforce. Thus, the need for better pay for nurses that are currently in practice has been demanded. The current issue highlights how HRM thinking does not play a major role in fixing the pay demand, hence possibly HRM is not applicable in this specific context. In addition to this, it must be acknowledged that pay equity started to be speculated on in the 1980s, however it had various other issues over time.

Research has pointed to relatively low pay in the nursing profession, which could be another reason behind low levels of retention (Walker et al., 2016). This makes sense as it becomes questionable why an employee would choose to remain within an organisation if they are not getting sufficient pay. Additionally, it makes sense that an employee would seek growth within an organisation, while growth such as intrinsic rewards is there. Being able to retain an employee in the long run by offering them a good salary may prove to be rewarding and attractive to some. It could also mean pay may not be the only change the organisation may need to undergo; having a good pay but bad working conditions will not do the magic in many cases. Hence, the emphasis on a positive organisational working culture, good working conditions, communication, relationships, and support system is vital.

Pay issues were raised in the nurses' campaign for better employment conditions in 2019 (Australia & New Zealand; Editorial Board Reviewed; Nursing, 2019). Following this, there was a nurse's strike in Christchurch in 2020. The strike happened due to nurses being paid unfairly, the participants of the strike accounted for approximately 3500 primary care nurses. They had been asking for equal pay for over a year but their demands had been rejected, triggering the strike (Broughton & Tso, 2020). In this article many factors that have been mentioned relate to Longmore (2021) where a nurse's job is seen to be easy and their worth minimal. In addition to this, in the article statements mention that nurses may consider changing their career even though they love their jobs, but they also have bills to pay which is where the demand for pay parity comes into place.

Another recent article published in the New Zealand Herald tells us about why nurses rejected the collective agreement order. This is again largely due to the pay that is associated with the profession. Nurses are complaining that the pay is insufficient for the workload and work demand at the time of a pandemic (Wait, 2021). It seems to have been an on and off issue,

especially in the past few years. The pandemic which has caused an increase in the workload carried by nurses which is where nurses feel they should be paid more.

In contrast, Tang (2007) suggests employee motivation, satisfaction, and happiness does not have a connection to organisational pay levels (Tang, 2007). Several studies demonstrate that extrinsic rewards such as pay may have a temporary effect on employee motivation and well-being, but in the long run an employee will lose interest in it (Diener & Biswas-Diener, 2002; Scollon, Lucas & Diener, 2009). This statement is logical as employees desire good pay as a reward for their work; however, there is a point where the value of pay is not relevant. After a sufficient amount of pay, it could mean that the employees start to look towards other means of satisfaction and happiness, which is not related to financial enrichment, for example recognition. It reflects the hedonic treadmill effect, which states that employees are attracted by money/income essentially, up until their basic needs and demands are met, thereafter work well-being becomes more significant and that determines their actual happiness (Diener & Biswas-Diener, 2002). The argument for this aspect could be true, however currently regarding the nursing workforce, it seems that pay parity has not been reached; therefore, nurses are not being paid sufficiently. Broughton and Tso's (2020) article clearly indicates that nurses enjoy their jobs, however they have financial responsibilities; this gives an indication of the low pay nurses are receiving.

An indication about pay parity being a recent issue is when a New Zealand study by Boxall et al. (2003) found that pay was not the most critical retention factor as long as there were not significant organisational internal or external pay differences. This study, published in 2003, showed at that point there were no major pay issues, however recently pay has been in the frontline for nurses after the pandemic. The reason behind pay being a major issue could be due to the increase in work load the pandemic has brought. Hence, nurses may realize they have more work to do, there is a shortage in the nursing workforce, and there are restrictions with hiring and recruiting migrant workers, therefore the responsibility is entirely amongst the current nursing workforce.

Insufficient pay levels – the involvement of the government

The government's ability to deliver primary health care services to the New Zealand population is dependent on the health care professionals, such as nurses. Unless pay parity is evident, this is an additional issue that will add to the retention problems that are already evident in the New Zealand nursing workforce (Kai Tiaki Nursing New Zealand, 2006). This article discusses that pay issues are an additional retention problem as well as poor working conditions, and lack of support that nurses face in their workplace. Compared to the empirical research collated so far, there seems to be a lot more about working conditions, lack of support, shift work, and work overload that have been ongoing issues for many years. However, regarding the "pay" issue, it

seems to be a rising topic making headlines in recent years. In a recent article, it was discussed that nurses may choose to leave New Zealand due to the salary freeze that has been implemented by the government (Bond, 2021). This was speculated in a recent article; however, it has not happened yet.

An older study that was conducted in 2004 illustrates that much more needs to be done to attract the younger generation towards nursing where there is a shortage (Kai Tiaki Nursing New Zealand, 2004) that is only accumulating over the years. This has proven to be factual as the shortage has increased and is getting worse. It is difficult to attract the younger generation to pick nursing as a career option because of the negative publicity that has been generated. Some nurses have started to open up about their career and the excessive workload they are facing, which is not positive publicity (New Zealand Herald, 2018). Government interventions need to be put in place, otherwise the younger generation will be discouraged more from choosing nursing as a career.

An interesting analysis was conducted in 2005 after the new hourly rate for pay amongst the nursing workforce had changed. A nurse that had been practising since 1967 made the following comment: "...overwhelming to finally be paid what we are worth; to get recognition as the professionals we are." However, she realizes that it will be an ongoing challenge to retain their gains over other professionals' pay (O'Connor & McIntyre, 2005). This research has been outlined as firstly it recognizes that there were some pay issues around that time. Secondly, the nursing profession seems to be a profession that seems to be undervalued in terms of both intrinsic and extrinsic contexts.

Effects of the coronavirus pandemic

The COVID-19 pandemic has put the world in extraordinary circumstances. There seems to be a sense of anxiety and vulnerability regarding health across our population in New Zealand. This puts the burden on nurses to act as "heroes" for our community with their expertise in comforting and accommodating the community's demands with the skills and knowledge they have due to their profession (Nursing Praxis in Aotearoa New Zealand, 2020).

New Zealand faces a nursing shortage, and now adding to this, new graduate nurses feel a sense of discourse within their workplace with morally distressing situations they are suffering, hence considering leaving the profession altogether (Wijlen, 2017). This will prove an issue for the New Zealand health sector as not having enough nurses would mean the shortage will increase. Already New Zealand is heavily dependent on migrant nurses to fill the shortage in this sector. New Zealand cannot entirely rely on migrant workers with the COVID-19 pandemic, making the health sector look shaky.

The pandemic has helped raise the importance of the nursing service, the importance of investment in health systems, and the overall impact health care has in an unprecedented time like this (Kai Tiaki Nursing New Zealand, 2020), eliminating the negative perception about nurses and shining light on the reality and giving them a heroic image (Health Central, 2019; McConnell, 2020). Further positive research indicates, “there is gratitude that the hidden and difficult work they do is now recognized” (Kazemi, 2020). However, negative implications of the COVID-19 pandemic puts a strain on New Zealand's nursing workforce in terms of restrictions of hiring and recruiting migrant workers, increase in workload, and putting their lives at risk (Gregan, 2021). These examples indicate both positive and negative implications for nurses in the Coronavirus era.

The next step New Zealand is taking to fight the pandemic is seeking to hire and recruit highly skilled nurses to work with the nursing council to accommodate the vaccination process (Weston, 2021). It shows the nursing council's strategic planning and leadership role in fighting against the current situation. At this stage, expectations of highly skilled and experienced nurses contributing towards implementing the vaccine process are held by the health care system in New Zealand.

Chapter 3: Methodology

Personal passion

The description of the following research process indicates how a personal passion for studying human resource management led to the overall research topic and questions. This attempt to understand the interrelation and effect of human resources, HR practices, HR strategies, and HR initiatives sparked an interest in people management issues in the health sector. Besides a passion to learn about the influence of HR practices on retention within the nursing workforce, it was also found that the success of having an excellent nursing workforce could prevent many ongoing internal employee-related issues in the nursing sector. Thus, an interest in the study of human resource management prompted a desire to learn about internal employee-related issues evident in the retention issues amongst the nursing workforce.

Research Alterations

There have been several alterations regarding the research topic and questions since the development of the initial proposal of July 2020. The initial proposal focused on HR influences on employee motivation and well-being. The current, amended study focuses on nurses from the public health sector and how they are retained within their workplace. The reason behind altering the research question was so the research could have a focus on a specific sector; the nursing sector. It was also decided that the initial topic would have been too broad to carry out as a dissertation topic.

Qualitative and Quantitative research

There is a mixture of both qualitative and quantitative research applied to this project. The research topic requires findings that demonstrate the different reasons nurses choose to remain or leave their profession. These different reasons are better explained and understood with in-depth explanations. A qualitative form of research requires collecting, analyzing, and interpreting non-numerical forms of data (Silverman, 2020). Hence, the application of qualitative research to answer the sub-questions of this research project should enable better insight to other research sources due to descriptive research to analyse their data. Additionally, qualitative research helps with understanding the story behind the given findings of authors, this story helps understand the situation better. In contrast, quantitative research deals with the systematic investigation of social phenomena, applying numerical or statistical data to illustrate its findings (Watson, 2015). This project is not entirely limited to qualitative research. Quantitative research has been applied in aspects where numerical comparisons are required to understand the analysis of staff retention. Since this research focuses on making comparisons

over the years and trying to develop trends that have occurred over time, statistical analysis has been applied to understand and identify these trends. Identifying these trends is important for the purpose of this research as it helps identify the issues that have been present over time.

The main research questions to be addressed in this dissertation designed through PGR1 are:

- Why are some public sector health organisations in New Zealand more successful in retaining their nurses than others?
- How can we measure and explain the success of organisations that retain their nurses, have high retention rates, have an excellent organisational culture, manage staff in an exemplary manner, have good leadership skills, and promote positive EVP?

How has the COVID-19 pandemic influenced the nursing workforce?

- With border restrictions and travel bans, there will be a direct effect on hiring migrant nurses and retaining migrant nurses who already reside in New Zealand. What is happening regarding this?
 - What are some of the barriers due to the COVID-19 pandemic with migrant nurses and nurses generally?

When breaking down these research questions, they require in-depth explanations from the application of different sources to determine the underlying issues evident amongst the nursing workforce and the different reasons for the issues (Rowley & Frances, 2004).

Recent literature-based analysis and empirical-based research

This dissertation has a mixture of literature-based research and empirical research. Empirical-based research has been applied in the context to discuss the most recent issues amongst the nursing workforce. The reason behind applying empirical research to discuss recent issues is because it is the most appropriate form of research to discuss these issues. The reason behind this is that the pandemic is a recent issue that has had a major impact on the nursing workforce. To be able to distinguish the issues that have arisen amongst the nursing workforce due to the pandemic would require empirical research as the pandemic is a current issue. Due to the pandemic being a current issue, there is limited literature-based research in regards to it. Therefore, applying recent empirical-based research to understand the current circumstances of the nursing workforce due to the crisis is vital. In addition to this, empirical research is on the basis of actual experience, thus the reliability of this to focus on the recent issues seems suitable. On the other side, literature-based analysis is applied to discuss most of the past issues evident amongst the nursing workforce. Literature-based research helps identify past trends evident

amongst the nursing workforce on the basis of theoretical evidence. Literature-based research compares and contrasts with other sources to form its argument which enables its findings to be critically evaluated. Furthermore, the starting point to this dissertation was on the basis of a literature-based search. This helped become familiar in regards to the nursing sector which led to the research topic being formed.

Research questions to be answered through literature-based research

The research methodology applied to answer the research questions is based on a literature review. I found this was the most appropriate research methodology for this project. A literature review is open to both qualitative and quantitative forms of research with the opportunity to critically evaluate different sources (Thilakaratne, et al., 2019). The reason behind applying literature-based research is because it provides the opportunity to compare and contrast the findings of sources to answer the questions of this project. Overall, this project's structure follows a literature-based concept as it is open to a broad range of sources available. This research is not restricted to specific forms of data.

The literature search is an essential aspect that has allowed a better understanding of what is happening in the nursing field. A literature search provides the opportunity to narrow down a topic to view related articles of use to the research topic (Rowley & Frances, 2004). This literature search has narrowed many aspects of the research such as the profession, authors, year of the published articles, and the focus to scholarly peer-reviewed journals. Also, with there being numerous articles available regarding the nursing profession, applying different search keywords and selecting different publishing years has helped eliminate unnecessary articles. It has provided the opportunity to make comparisons and differentiate between articles of a vast range of years which I believe is of high importance regarding this research project.

Method explanation: integrative literature review

For the writing of this project, the methodology of an integrative literature review has been applied. The reason behind choosing this process is that it helps generate new knowledge about a topic reviewed. This is an appropriate process for this research as from a personal perspective, not having knowledge and awareness regarding the public health sector and the nursing profession; this process enables to gain insight into a new field. Furthermore, this process helps evaluate, critique, and understand what research is saying concerning this field. The process of strengthening self-knowledge; viewing evidence from different forms of research; evaluating the ideas and opinions within the research; and critiquing it with possible gaps and limitations to the research available (Torraco, 2005). Examples of this approach being applied to this

dissertation are throughout the literature search chapter of this project; the application of multiple different forms of research to compare and contrast its findings and be able to make similarities and differences between them. This shows an indication of how research is found, evaluated, and critiqued (compared to finding similarities and differences). Alongside following the methodology of an integrative literature review comes having a pragmatism guiding view. This is evident throughout this project as the majority of this research is based on the experiences of human behaviour. This indicates pragmatists guiding view as it is based on understanding human experience without the universal truth (Burbules & Biesta, 2003).

The research started with not knowing anything in regards to this sector. However, when pursuing research many surprises came in about the public health sector and the nursing workforce. Researching further into this field, it became evident that worldwide nursing is facing a significant shortage in the profession. The investigation clearly showed that New Zealand was among those countries facing a shortage in nursing, this is where this topic started to become more interesting. Looking into the shortage, questions that started to arise were how long has the shortage been there? Why is there a shortage in the field? What is happening about the shortage? What are the implications of the shortage in the public health sector? Researching these questions provided the opportunity to gain insight into the topic. An understanding started to develop to the different reasoning behind the shortage in the nursing workforce. And other issues started to pop up such as internal issues that were evident in the nursing workforce, low levels of retention, lack of recognition and support, and poor management of nurses.

Method application: Selection criteria, keywords, evaluation tables

Whilst proceeding with research an inclusion and exclusion criteria had been designed to enable a clear guideline regarding what should be researched. The inclusion and exclusion criteria helped select and eliminate research that would be relevant to this research. A summary of the inclusion and exclusion criteria is in the table below.

Table 1- Inclusion and Exclusion Criteria

Inclusion Criteria	Exclusion Criteria
Use a wide range of articles available online such as media reports, journal articles, qualitative and quantitative data and government websites. In particular, focusing on academic articles and practitioner journals.	The focus will be on academic articles and practitioner journals; however, it will exclude other articles such as, media reports from various sources.

Look at articles that provide the full text so a better understanding can be generated as to what the author is saying. For example, articles that provide a full introduction, body research, conclusion, and recommendations.	Do not use articles that display the abstract only as it limits the researcher from gaining the whole idea of the findings of the article.
Academic forms of data should be applied when researching about theoretical frameworks and strategies. For example, in AUT library, limiting the search to peer reviewed articles.	Non-academic data should not be applied especially when discussing theoretical frameworks and strategies.
The articles published that are being applied should be written in English.	Do not use texts that are published in a foreign language.
The main focus of the research should be about New Zealand; however comparisons to other countries can be made in order to see what they are doing differently. For example, regarding the COVID-19 pandemic, it is an issue that has had direct effects to New Zealand and worldwide, therefore comparisons or relevance can be made to overseas in the context when explaining how COVID-19 having an effect overseas can affect New Zealand nursing practices.	Do not use research that cannot be compared to New Zealand practices. For example, research that is only discussing China's nursing workforce, this will not have a direct relation to the research topic which is restricted to the New Zealand economy.
Specifically focus on staff retention of nurses in the health sector. For instance, issues in the nursing profession are highlighted but it should have a follow-on effect towards how it can affect retention for nurses in the health sector.	Do not discuss staff retention on a general basis in the public health sector. Also, do not apply research that does not have a follow-on effect regarding retention for nurses. Be sure to enable research that is focused on the main research topic otherwise the scope of the project becomes too broad for a dissertation and the focus gets diverted.
An application of media information should be applied, especially to follow through about the COVID-19 pandemic. Examples of media reports applied are from websites such as Stuff, NZ Herald, the Scoop, and so on.	Do not use sources that are less reliable, such as, blogs and Wikipedia.

This research will have a vast range of different sources from various years as there is some promising research available about nurse retention, which was done many years ago. This is

relevant to the research topic as it enables an understanding of the historical issues in the nursing profession which can be applied to initiate comparisons. The research could have focused solely on recent practices in the past 1-2 years; however, the aim of this research is to make assumptions to what is happening in New Zealand's economy today, whilst, accommodating what has happened in the past years as well. However, when discussing recent issues that are currently in the frontline, the application of research from the year 2019 onwards has been applied.

Keywords like “barriers” or “challenges” or “COVID-19” or “pay parity” or “retention” or “shortage” or “organisational culture” or “New Zealand” or “supervisors” and “well-being” have been applied in the literature search for the basis of research. This shows that there has been a range of different keywords that have been applied to gain insight into the nursing field. Upon narrowing the search keywords, some articles were helpful to find answers to the more significant questions of the research topic such as the issues raised post the COVID-19 pandemic. However, many articles were eliminated as they were not as valuable as others. Most of the articles that were selected are mainly from the primary source of AUT library online database such as, Scopus, BioMed Central, DOAJ, CINAHL complete, Academic Search Index, Embase, Medline, and NICE Evidence. Other search sources that were applied were Google and Google scholar. In addition to this, in the early stages of the research process the majority of articles applied was from 2000 onwards, however once enough research had been collected to understand the patterns that had occurred in the past, the focus of the search changed to recent years. When commencing research regarding the current issues, the search focused on mainly 2019 onwards as this is when the pandemic issue influenced changes through media reports and news texts.

Following this, there were many challenges faced while evaluating the data. Due to there being much-related research available online, it became challenging to eliminate research that was not as significant. This became a hindrance when organizing which data to use as it was challenging to identify those that were entirely relevant to the research topic and those that were maneuvering in another direction. Some of the research found was discussing retention in nursing at a minimum and was more focused on other aspects that had to be eliminated. Thus, organizing relevant data versus irrelevant data became high time consuming and difficult, however manageable in the end. The final decision to keep or eliminate data was by ensuring the data included major areas of the questions that have been mentioned in the table below.

It also became difficult to specifically find research that was based within New Zealand unless “New Zealand” was applied in the search engine as a keyword. Nurse shortage is a worldwide issue; therefore, there was plenty of research related to the topic area; however, it could not be

used in this research due to the New Zealand only limitation. The choices were made by analyzing and reading through different sources and cross-checking with the questions listed in the table below to see whether they could be applied.

Applying the questions listed in the table below give a clear indication of whether the research material should be used. Following this, the materials that were used in the report were summarized and recorded on a word document with its source so it could be used when writing the various sections of the dissertation without having to read the article repeatedly.

Table 2- Relevance of the research question

Questions that need to be answered when deciding whether the research material was relevant.
Does the material relate to the nursing field?
Is the research based in New Zealand or does it discuss New Zealand?
Is it current or past research?
Is the research material too old to use for the project purpose?
Is the research material showing apparent comparisons or differences with other research material that will be applied?
Is the source reliable?

Table 3- Bullet pointing research (Exemplar)

Source: Broughton, C., & Tso, M. (2020, September 3). <i>'Undervalued' and 'underpaid': Frontline nurses across the country striking for pay parity</i> . Retrieved from Stuff: https://www.stuff.co.nz/national/health/122653914/undervalued-and-underpaid-frontline-nurses-across-the-country-striking-for-pay-parity
What is it about? Bullet points of the main ideas.
<ul style="list-style-type: none"> • A strike that took place on 3rd of September, 2020 in Christchurch.
<ul style="list-style-type: none"> • The main purpose of the strike was nurses fighting for pay parity.
<ul style="list-style-type: none"> • Approximately 3500 primary care nurses participated in the strike.
<ul style="list-style-type: none"> • The decision to go ahead with the strike was a collective decision due to 12 months of ongoing negotiations for pay parity.
<ul style="list-style-type: none"> • Employers are supportive of the claim; however, they need approximately \$15 million government funding to go ahead with it.
<ul style="list-style-type: none"> • An excess in workload and not having work-family life balance due to the pressure

from the workplace.

Analysis of literature: Identification of the literature review topics and selection of the seven themes

The identification process of the literature review topics came into place after most of the research had been completed. Once most of the research had been completed and bullet-pointed into the main ideas of the publication as identified above in Table 3. The different forms of research were then categorized into literature review topics that could be applied as similarities or differences when writing about it. By doing this (table 3), helped in two main ways. Firstly, it helped organise the research so it is easier to understand and find. Secondly, it helped find interesting topics based on the articles which helped structure the literature search chapter of the dissertation.

The selection of the seven themes that are discussed in chapter 4 has been developed from the literature search. These themes were developed after writing the literature search which helped identify the main issues that have been evident amongst the nursing workforce over the years until now. The seven themes have been designed to accommodate for both past and current issues evident amongst the nursing workforce. The reason behind this is since this research accommodates both current and past issues amongst the nursing workforce to be able to understand the pattern of poor retention in the nursing workforce over time. Overall, the main current issues evident are discussed towards the end of the seven themes to leave the reader attentive to the current issues.

Limitations to the dissertation and methodology

Similar to most research projects, this dissertation has a number of limitations:

- There have been a few changes to the research topic. Therefore, the focus of the initial idea of research has changed slightly to accommodate recent issues that have appeared due to the pandemic. This brought several changes in respect of the initial proposal, as discussed above.
- Data from previous research has been applied. Thus, some articles may have different survey questions compared to others, which could mean that the results that have been collated from the surveys could vary due to different question samples, such as literature reports, and media coverage.
- COVID-19 is an ongoing issue. Therefore, the research is limited to existing coverage of nurse retention. For example, the latest literature and media reports were from June 2021. It is still unclear how New Zealand will fare under the new strains of COVID-19.

- As research is limited to primary data, the dissertation does not have any personal empirical research. This lacks one-on-one experience analyzing the visual emotions of what nurses are saying about their job and the relationship it has towards retention. These areas can make the findings of the dissertation biased.

- Lastly, pay issues have appeared strongly in media reports post the COVID-19 pandemic. Therefore, outcomes and results regarding pay issues cannot be generalized as they seem to be an ongoing issue between nurses, public health organisations, and the government which have not been resolved.

If additional time had been available for this research project, it would have been interesting to investigate empirically the issues that currently appear most important such as pay and work overload for nurses. Due to these being current issues sparked by the COVID-19 pandemic, these issues may likely change once the pandemic has been resolved.

Furthermore, if there had been a scope to pursue primary research during this project, it would have been an interesting experiment. The investigation of personal empirical research would have enabled witnessing of the visual emotions of nurses to develop a better understanding of their issues and experiences. This would potentially lead to a stronger and more solid conclusion regarding the personal understanding of nursing practices and low retention.

Chapter 4: Discussion and Conclusion

Chapter 4 follows on from the literature review and discusses the main issues and themes in detail. It identifies gaps that are evident post the literature review and expands on them such as; outlining the value of intrinsic rewards versus extrinsic, the different reasons for a poor retention record in the public health sector over time, and how the most recent issue evident in the nursing workforce contrasts with the issues that have been outlined previously. Following this, a conclusion highlighting the key findings of the integrative review of this dissertation will be made accordingly to summarize. Recommendations are made according to the issues and gaps outlined in the discussion through the different themes identified. The themes that are discussed in the discussion section illustrates both intrinsic and extrinsic perceptives. Furthermore, the overall limitations of this dissertation will be discussed with three main limitations identified in particular.

Findings from the articles discussed in the literature review are in this section. There are various different themes that have been identified through the literature review which demonstrates different reasons towards positive and negative retention amongst the nursing workforce. The most crucial and recent themes identified are discussed towards the end which is about pay issues and the effect the Covid-19 pandemic has on the nursing workforce. Both of these themes are in recent public reports which indicate the importance of acknowledging these themes as the main focus currently. Overall, the main themes that have been apparent over the years have been organized to categorize the research articles which will be discussed below.

Theme 1: Intrinsic Rewards

The first theme encountered from practitioner journals suggested well-being and happiness for nurses were highly dependent on intrinsic rewards compared to extrinsic rewards. This was evident in multiple different sources researched. Srinivasan and Chandwani (2014) discuss how the inability of managers and leaders to encounter the mindset of their employees can cause low levels of retention for an organisation. The major discussion point prior to the pandemic focused mainly on intrinsic factors that influence employee retention according to the sources that were chosen for the purpose of this report. Govender et al., (2016), Clendon & Walker, (2016), North et al., (2014), Walker et al., (2018), focus points of these authors are towards 'mature' nurses and the principal problem behind retaining these nurses is the lack of intrinsic rewards received within their workplace. It can be researched further whether extrinsic rewards are any longer valuable to matured nurses. If not, then is it more of a career development aspect where the value of extrinsic rewards is evident at an earlier stage of their career and its value fades over time as a nurse matures in their career. Most of the research that indicated intrinsic rewards

were valuable for nurses was older research that had been done a few years ago; this has varied over time which will be discussed in another theme.

Theme 2: Cost of Turnover

The costs and burden of turnover and retention were identified as another theme. Hayes et al. (2006) and North et al. (2013) describe the instability in the nursing workforce as affecting turnover costs, overall turnover, the impact of turnover on patients, and impacting nurses and system outcomes. Nei et al. (2015), emphasizes being able to tackle the issues that Hayes et al. (2006) described by altering the job characteristics of nurses and their working conditions. In addition to other burdens and costs the organisation will face, one of the most critical hindrances of nurses quitting is it will hurt patients and their care as discussed in the literature review.

Hayes et al., (2006) and North et al., (2013) discuss in-depth how retention becomes very costly for an organisation and other implications that come along with it. Cost is an immediate effect as hiring and recruiting will encounter additional costs which the organisation will have to bear. However, as much as the high costs effect the organisation, it also has additional negative effects such as the damage to organisational image and reputation with the constant change of nursing staff, especially when dealing with patients. Long-term patients become comfortable dealing with one or two different nurses as they build a stable relationship with them. When nurses change and are not there for their care, patients can become irritable and unhappy, affecting the hospital image. The organisation is unable to fix this issue with money immediately, therefore, it shows turnover and retention can have a negative effect on the organisation, not necessarily bringing in additional monetary costs, but other costs.

Theme 3: Recognition of Nurses

An exciting theme highlighted is workplace recognition and public recognition for nurses. "Nurses have an easy job" (Longmore, 2021); however, it is easy to observe from outside, not knowing the reality. Nurses feel undervalued for what they do. Longmore (2021) published how nurses describe their job as a "relentless workload" and complain about how "they have to eat on the go." As an outside observer, it may look as if nurses are only doing temperature checks and blood tests; however, they have a heavier workload than we perceive. Other than this, nurses are the ones that patients take their frustration out on, verbally abused, and challenged (Buchanan, 2020). These aspects are interrelated; this potentially is another reason why nurses decide to quit their job (Longmore, 2021) and do not consider nursing a long-term career option (Gess et al., 2008). It is evident that it makes a difference to nurses what people think about them and their job, which seems to be making nurses frustrated is how "easy" their job is perceived in the eye of an outsider, when in reality it is a relentless workload.

Wong et al. (2020), has discussed how authentic leadership has significantly improved job satisfaction directly and indirectly through an emotional dimension towards emotional

exhaustion. The opinion of North and Hughes (2012) brings in similarities with Wong et al. (2020), as they both discuss the importance of having good leadership strategies to manage nurses as "assets" or valuables for the organisation to increase their satisfaction and well-being in a positive manner which should benefit low levels of retention.

Additionally, research points towards capable areas that could help with retaining nurses. These factors include the fulfillment of feeling a sense of care within their workplace which builds on the concept where leaders/managers/employers need to make their employees feel valued, and in return, employers/leaders/managers need to feel the same by their employees which should enable them to see eye to eye (Doston et al., 2014). These factors contribute to the theme of workplace recognition for nurses.

Theme 4: Employer branding

Another evident theme is the importance of employer branding and the correlation it has towards positive employee retention (Arasanmi & Krishna, 2019). Gilani and Cunningham (2017) and Sokro (2012) clearly state the application of this strategy can influence employees to want to remain within an organisation, and it can also decrease compensation incentives for an employee (Bussin & Hugo, 2019). It is a strategy that should be applied by many different health sectors that strive to achieve positive nurse retention within their organisation. These authors discuss how an organisation should not focus entirely on employee productivity and profits, but they should be accommodating towards employee-related tactics, investments, and incentives that should reduce employee retention problems. Additionally, Presbitero et al. (2016) and Ciarniene et al. (2019) have a similar perception where the importance of HRM practices can be applied to improve retention. Many different authors emphasize applying HRM strategies and employer branding as these can be applied as tools to tackle retention and improve employee well-being within the organisation (Hughes et al., 2018). Employer branding and organisations' responsibilities contribute to positive employee retention, employee recognition, and the worthiness of nurses. Thus, the emphasis of applying employer branding as a strategic tool towards nurse retention may bring positive outcomes for the organisation.

Adding to this, EVP is a set of offerings an organisation can offer to its employees to retain them (Browne, 2012). The application of EVP is to focus on and improve organisational support, the organisation's perceived identity, and exchange quality in enhancing value perceptions in employees (Rounak & Misra, 2020). It can be a strategic tool applied by the organisation to develop value for employees. Therefore, the organisation will be performing its duties towards making employees feel valued and recognized, thus possibly decreasing the need to leave the profession. The organisation can change the perceptions of nurses by making them feel valued. Despite nurses feeling undervalued by the public, as mentioned by Longmore (2021), they will receive better feelings from the organisation.

Reflecting on employer branding, inheriting the EVP concept, it can contribute towards it as it can develop the image for an organisation (Mascarenhas, 2019). The relationship between these two concepts is similar as it promotes employee value and organisational responsibilities, which prevent low levels of retention. Goswami (2015) clearly states creating better recruitment objectives, identifying the needs of employment, positioning employees in the correct places, and creating and enhancing employee value which is exactly what both of these concepts have in common.

Theme 5: Systems approach

Another theme that has been outlined is the adaptation to a systems approach towards nursing productivity and retention. Strategies designed to take a systems approach towards nursing productivity that view nursing as a capital asset and connect nursing to the work environment and measuring patient outcomes are advocated (North & Hughes, 2012). This is a strategy that health organisations can undertake to fight against low levels of retention, especially those that face high retention. A significant limitation is measuring nursing productivity, understanding they are human resources (Bach et al., 2008), and the ability to measure their productivity is difficult (North & Hughes, 2012). This is due to the nature of the work requirements for nursing, it becomes difficult to measure their productivity (Alcorn & Topping, 2009) in terms of how many patients they deal with, the quality of the relationship with their peers/patients, the number of temperature/pressure checks they do, and quantity of vaccinations they perform daily. It is not easy to measure these aspects, and if the judgment is upon these measures, it may result in being a partial verdict. Having an appropriate strategic framework in coping with nursing workplace satisfaction and well-being is essential to retain the nurses in the long term.

Theme 6: Pay issues: One of the major current issues

A theme that is in the frontline in media reports and news is low pay in the nursing workforce. Pay issues have been raised in the nurses' campaign for better employment conditions in 2019 (Australia & New Zealand; Editorial Board Reviewed; Nursing, 2019), however post the COVID-19 pandemic it has been actively demanded by nurses. There is an ongoing battle between nurses, public health organisations, and the government to invest a generous amount of funding in the health sector, especially in pay for nurses. Whilst the pandemic is a current ongoing issue, the health sector plays a vital role in managing the health of the public. New Zealand cannot afford to lose medical staff to be able to accommodate at a time of the crisis.

In contrast, according to Tang (2007), employee motivation, satisfaction, and happiness connect with organisational pay levels is not necessarily true. Adding to what Tang (2007) states, there are multiple similar perceptions regarding pay from other authors (Diener & Biswas-Diener, 2002; Scollon, Lucas & Diener, 2009). Relating to the findings in theme one, pay is not a significant retention problem. Other issues seemed to pursue staff leaving their jobs such as long

working hours, shift work, lack of flexibility and autonomy, aging nurses, and poor management (Govender et al., 2016; Clendon & Walker, 2016; North et al., 2014; Walker et al., 2018). A New Zealand study by Boxall et al. (2003) found that pay was not the most critical retention factor as long as there were not significant organisational internal or external pay differences. However, with recent research, it is evident that intrinsic rewards have taken a halt and nurse priority is better pay. This issue has become a negative impact from the pandemic which has put strain in the public health sector and the government.

Theme 7: Positive and Negative effects of Covid-19

The pandemic has increased the workload for nurses dramatically with additional tests and extra precautions being taken. Nurses are dealing with a shortage of staff and an immense workload which is bringing in unhappy thoughts for the nursing workforce (Broughton, 2021). Having to work extra hours and cover the job tasks with limited staff is putting strain on the lives of nurses. This will cause tiredness in the workplace, possibly absenteeism, and most importantly it poses a major health and safety risk for both nurses and the patients. Additionally, past research has demonstrated that there is a link to workplace tiredness and choosing to quit the profession (North et al., 2014) which will then lead to negative retention. Overall, pay issues could be resolved between the government, nurses, and the public health sector; however, the issue regarding work overload for the nursing workforce remains an issue until there is a sufficient number of nurses that can fulfil the shortage area. This is where a long-term plan needs to be initiated by the government, health organisations, and possible tertiary education to attract and direct more individuals to choose nursing as a career.

The COVID-19 pandemic having a positive effect in the nursing profession:

While most recent reports and news highlight the negative aspects of Covid-19, including reasons for the current strike activities there has also been an increase in nurse workload. Literature shows that the COVID-19 pandemic has had a positive effect on the nursing profession. A positive effect of the COVID-19 pandemic is nurses are more in the limelight and viewed as "heroes" (Nursing Praxis in Aotearoa New Zealand, 2020). They are helping to save lives by somewhat putting their lives at risk. They are working long hours and are having a heavy workload with the extra care of patients. The public's perceptions of nurses could change and people may realize reality. Prior to the pandemic, nurses were undervalued and viewed as a waste of time and only for temperature and quick health checks (Longmore, 2021). However, the pandemic has helped initiate the importance of the nursing service, the importance of investment in health systems, and the overall impact health care has in a time like this (Kai Tiaki Nursing New Zealand, 2020). This has turned out to be a positive effect on the nursing profession. However, there seem to be double thoughts on whether it has been a positive or negative effect.

Overall, the pandemic has had both positive and negative effects on the nursing profession. It puts a strain on New Zealand's nursing profession with the restriction of hiring and recruiting migrant workers which New Zealand is heavily dependent upon. The next step New Zealand is taking to fight the pandemic is seeking to hire and recruit highly skilled nurses to work with the nursing council to accommodate the vaccination side of things (Weston, 2021) which should enable some ease to the nursing profession after a solution for the pandemic has been found. It also shows the nursing council's strategic planning and leadership role in fighting against the current situation. Furthermore, with the border restrictions and travel bans New Zealand is currently facing, it will have to seek nurses within New Zealand to accommodate the shortage it faces in the profession. Hence New Zealand will have to accept and accommodate nurse's demands to be able to recruit and retain them. It reflects the obligations organisations have to be able to retain nurses, focusing on better pay and easing the workload for nurses that are in practice.

Gaps identified

Pay having an influence towards nurse retention:

Most of the academic literature that had been chosen for this report has in the past rated pay a relatively less important issue; however a significant number of current media and public reports suggest that pay is now a major issue for nurses. Previous research applied mainly discusses other intrinsic issues as a reason for nurses to leave their job. However, with research since 2019, it has been identified that nurses have low pay in comparison to what they are worth. It is recent media reports that have articulated the focus on unfair and low pay for nurses. It could be due to the increase in workload for nurses recently after the pandemic; however, it is unclear at the moment as to whether the increase in the workload is entirely the reason. Pay issues is a gap that has been outlined despite nurses undergoing many different tactics such as strikes and reporting to media sources, it seems the government is not doing anything major about this issue which is frustrating nurses more. In addition to this, it is an ongoing negotiation between health organisations, nurses, and the government to address this issue and do something about it. Also, with the COVID-19 pandemic being a current issue putting strain on the nursing profession due to the shortage and restrictions in recruiting migrant workers, this is an issue that needs to be addressed as New Zealand cannot afford to increase the nursing shortage. Until a satisfactory agreement has been made between nurses, the government and health organisations, the gap will remain.

Molding the nurses by applying organisational strategies in order to build on positive retention to solve the nursing shortage:

Organisational strategies are applied to retain nurses and keep them happy within their workplace; however, it is not sufficient to help towards the shortage that New Zealand is

currently facing in the nursing profession. The restrictions of hiring and recruiting nurses from overseas which New Zealand is heavily dependent upon, cannot be done due to the pandemic. This has put high levels of strain and pressure on nurses in New Zealand. Thus, organisational strategies can be applied to retain those already in practices, but it is highly likely not going to be enough to fix the shortage of nurses. There is a gap in the literature regarding this aspect as we do not know how long the pandemic will go for, therefore unsure about hiring migrant workers in the near future. Further research can contribute to this gap to see whether New Zealand can utilize nurses within the country or whether they will have to hire from abroad to accommodate the nursing shortage.

Recommendations

Pay issues- The focus of pay is popping up in recent studies, with nurses not being paid enough for how much they are required to do. To prevent pay causing nurses leaving their jobs, this could be handled by seriously looking into whether they are paid the right amount for their work. If not, organisations can apply for further funding from the government to fight this problem. In addition, the government will have to look into this in a serious manner. If they do not want the shortage to increase in the nursing field, and if they would like to retain those nurses that are currently in practice then they will have to accommodate to this, otherwise this will lead to major problems for the public health sector in New Zealand. The government will need to consider major funding towards the health care systems, especially regarding nurses as they are not willing to settle for a small pay rise.

According to demand, organizing work schedules of nurses- Considering each individual nurse and looking into what their requirements are. According to research discussed in the literature review, many nurses do not prefer working overnight, whereas some prefer working overnight as it is not as busy. Therefore managing nurses the right way will prevent nurses from being unhappy with their work schedules. This initiative needs to be applied by supervisors and heads of departments that schedule the nurses to shift work. Currently, this is not posed as a major issue; however, it has been an issue evident in the past.

Reducing long working hours- Nurses complain about having long working hours, which is neither good for them nor the patients. Therefore, supervisors should take this aspect seriously as this is a health and safety requirement. Dividing nurses' time, so they are having a good amount of break between their shifts, enough sleep, and not working long hours overall is vital. Working long hours will mean nurses will feel tired and not want to go to work which may increase absenteeism. Furthermore, long hours and tiredness can cause a lack of control and attention to their job, which will be dangerous for nurses and the patients. Thus, applying the notion of safe and shorter working hours will help benefit both patients and nurses.

Managing nurses differently- It is an ongoing issue where nurses feel unhappy in their profession due to manageable factors, such as lack of autonomy, poor relationships and communication, shift work, long working hours, fatigue, and a lack of recognition. Supervisors and leaders can manage these aspects to eliminate these negative experiences for nurses. By doing so, nurses may feel happier in their workplace, helping retention. These are all internal factors of a work environment; thus, applying HRM strategies and principles may help implement these changes.

Providing incentives to nurses so they feel valued by the organisation- This initiative needs to be put in place by supervisors, managers, leaders, and staff with high influential power. Nurses constantly feel undervalued while performing their job tasks by the organisation and the public. It is challenging to make members of the public change perceptions about nurses, and it is not easy to make them behave in a certain way towards nurses. The changes need to be made within the organisation and implemented. It could be by acknowledging the work of nurses, giving nurse's recognition in front of other staff members to show what they have done, and providing incentives, both extrinsic and intrinsic rewards. It will enable nurses to feel valued within the workplace by management and other colleagues, increasing motivation and nurses' happiness at work. Again, strategies need designing according to each organisation and its internal organisational culture.

Accommodating mature nurses- The consideration that nurses in their profession for a long time are now reaching a time in their lives where they are not physically in the state to be working long hours as they become tired quickly. Also, mentally they feel exhausted if they are doing too much work according to their age. To prevent losing these nurses with high levels of experience and that are of high value to the organisation, the organisation needs to consider this and act on it. The organisation can reduce working hours for these nurses, also, initiatives such as short walking distances designated to them within the ward. There have been multiple types of research discussing how the nursing profession does not consider mature nurses. Hence, these nurses choose to leave the profession, leading to low levels of retention. Therefore, accommodating these nurses should help towards positive retention.

Limitations

This study has one main limitation as it has relied on existing research and reports and it has not conducted empirical research into retention in the health sector.

Secondly, the COVID-19 pandemic being a current ongoing issue, there is no permanent solution of it yet. Therefore, the impact the pandemic has towards travel restrictions and current nursing staff migrating to Australia will have a further effect on the public health sector. In the literature review, it is evident that nurses have already started to consider moving to Australia

from 2021 for better career opportunities. This will only increase the workload for nurses, however this remains an issue until an outcome has been reached for the pandemic.

Lastly, accommodating for older nurses has been an ongoing issue for a few years now; however, with limited research performed specifically regarding mature nurses, it seems this issue has not been resolved yet, however it is not in the frontline according to current media. Although, it is acknowledged that there may be more research available in this area which may provide more information, however due to the scope of this study it could not go in much detail about mature nurses.

Conclusion

Key initiatives that need to be implemented to prevent negative nurse retention in New Zealand are acknowledging the aspects that have been addressed by nurses that are in practice. The voices of these nurses need to be heard and addressed as the New Zealand public health sector cannot afford to lose these valuable human resources. New Zealand is facing a shortage in the nursing profession, and it is vital to nourish the demands of these nurses to be able to retain them. The findings of this study demonstrated many different aspects that contribute towards negative retention for nurses. It clearly shows academic literature identified many different factors that contribute towards negative retention for nurses. However, as the COVID-19 pandemic in the current situation, since 2019, the dissatisfaction for nurses in their profession seems to focus more on the lack of pay and the increase in their workload. Recent media reports bring in a contrast with studies that were done many years ago that focused solely on intrinsic factors. From limited scholarly research about pay issues in the nursing profession, it seems that perceptions of nurses are focused on pay currently. It is recognized that there were pay issues and pay indifferences in the past; however, it did not seem to have a major effect on the nursing workforce as it has today. As of the pandemic, there has been a lot of noise demanding better pay. It has become an ongoing issue going back and forth between the public health sector, the government, and nurses to realize that pay is a major issue currently, and actions need to be taken in respect of it. However, the government does not seem to be taking this demand from nurses seriously enough and is continuously rejecting the amount of pay increase nurses are demanding which is putting a strain on the public health sector and at the same time encouraging nurses to quit.

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Appendices

Figure 1: Shows that medical hegemony is alive and well in New Zealand (New Zealand Nurses Organisation, 2017).

The table below indicates medical hegemony is alive and well in Aotearoa New Zealand.

Allocation of postgraduate funds to doctors and nurses		
	Medical professionals	Nursing professionals
Number	15,366	50,356
Funding	\$107 million	\$14 million
Funding per person	\$6,963	\$278
Funding change 2017	5% increase	No increase

Adapted from: Kai Tiaki. Vol. 2. March 2017. NZNO.

(New Zealand Nurses Organisation, 2017).

Figure 2: Shows the framework of management competency for fostering health work amongst nurses (Nursing Council New Zealand, 2018).

(Nursing Council New Zealand, 2018).

Figure 3: Shows different push and pull factors that may determine aspects that attract and

Availability	<ul style="list-style-type: none"> Open door policy Being seen around workplace Making time for staff Listen – allow staff to be heard
Being trustworthy	<ul style="list-style-type: none"> Acting with integrity and honesty Expertise-backed decision-making and direction
Communication	<ul style="list-style-type: none"> Setting clear expectations of behaviour and performance Providing guidance and direction Overt, open, and lots of communication Explaining 'why' Constructive feedback and praise
Consistency	<ul style="list-style-type: none"> Fair and equal treatment for all staff, regardless of hierarchy Avoids biases towards certain staff Consistent behaviours, values and expectations over time
Confidence and resilience	<ul style="list-style-type: none"> Ability to have difficult conversations with staff Confidence to challenge norms and processes Protecting staff from external pressures
Dealing with work problems	<ul style="list-style-type: none"> Organising and supporting work Taking responsibility for behavioural issues Taking staff concerns seriously
Empowering staff	<ul style="list-style-type: none"> Providing opportunities for growth/development Allowing staff autonomy and encouraging ownership Encouraging participative decision-making
Fostering team cohesion	<ul style="list-style-type: none"> Creating opportunities for team building Being 'part' of the team Building relationships
Individual consideration	<ul style="list-style-type: none"> Personal investment, genuine care Flexibility to accommodate staff needs Valuing diversity Showing compassion and empathy
Reflection	<ul style="list-style-type: none"> Self-reflection Admitting fault, allowing staff to challenge Continual self-development Understanding own limits and when to seek support

Table 1: Management Competency Framework for Fostering Healthy Work in Nursing

distract employees from different organisations (Richardson, et al., 2017).

Push Factors	Pull Factors
<ul style="list-style-type: none"> • Low salary • Limited career opportunities • Lack of professional respect/autonomy • Violence in the workplace • Poor retirement benefits and practices • Poor working conditions • Tradition of migration • Rise of HIV/AIDS in the workplace* 	<ul style="list-style-type: none"> • Higher salaries • Career opportunities • Professional autonomy • Better way of life • Families already in the receiving country • Better working conditions/adequate supplies and staffing • Better resourced health systems • Provision of post-basic education • Political stability • Improved standard of living

(Richardson, et al., 2017)

Figure 4: Shows different reasons for part-time work status (Nursing Council New Zealand, 2018).

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Table 3: Reasons for part-time work status

Reason	Enrolled Nurses		Registered Nurses		Nurse Practitioners		All Nurses	
	Number	%	Number	%	Number	%	Number	%
Parental responsibilities (including no access to childcare)	144	16.3%	8,302	43.6%	37	36.6%	8,483	42.3%
Reduced hours due to high workload	220	25.0%	3,855	20.2%	34	33.7%	4,109	20.5%
Casual position	194	22.0%	2,320	12.2%	3	3.0%	2,517	12.6%
Not enough nursing work available	159	18.0%	953	5.0%	8	7.9%	1,120	5.6%
Study requirements	38	4.3%	969	5.1%	9	8.9%	1,016	5.1%
Unhappy with shift work	35	4.0%	768	4.0%	0	-	803	4.0%
Working in a non-health occupation (as well as nursing)	11	1.2%	374	2.0%	6	5.9%	391	2.0%
Parental leave	7	0.8%	374	2.0%	1	1.0%	382	1.9%
Seeking nursing work	21	2.4%	273	1.4%	0	-	294	1.5%
No access to flexible working hours	6	0.7%	211	1.1%	0	-	217	1.1%
Inadequate remuneration	10	1.1%	177	0.9%	0	-	187	0.9%
Retired/semi-retired	10	1.1%	152	0.8%	0	-	162	0.8%
Limited career structure	16	1.8%	140	0.7%	2	2.0%	158	0.8%
Working in another health profession (as well as nursing)	9	1.0%	125	0.7%	1	1.0%	135	0.7%
Overseas (at time of re-registering)	1	0.1%	63	0.3%	0	-	64	0.3%
All Responses	881		19,056		101		20,038	

(Nursing Council New Zealand, 2018)