

“That Dáil Éireann, recognising the importance of nurses and midwives and valuing the contribution that the professions have made to the health service and to Irish society, and further recognising the recruitment and retention crisis that exists amongst the professions—

accepts that:

- nursing and midwifery make up approximately 33% of the total public health service workforce;
- nursing and midwifery are predominantly female professions (greater than 91%)
- nurses and midwives are in the frontline and they carry the burden of trying to maintain a safe level of care within a reality of decreased services, decreasing staff, and increased demand;
- nurses and midwives educated in this state are among the highest educated and best trained healthcare/medical professionals in the world with an esteemed national and international reputation;
- nurses/ midwives in Ireland work longer hours per week compared with nurses in the other countries: 1.5 hours longer than nurses in Canada and the UK and 1 hour longer than nurses in Australia
- nursing and midwifery are high risk occupations in terms of aggression and physical assault
- between 01/01/11 and 27/07/16 the number of physical assaults on staff in statutory Acute Hospitals increased from 673 to 3,462 – of these 65% (2,261) of the injured parties are recorded as nursing and midwifery staff (excluding psychiatric nurses)- this equates to an average figure of 34 physical assaults on nurses and midwives a month.
- the current age profile of nurses and midwives in the HSE poses a serious challenge in terms of workforce planning, recruitment and retention with 65% of the HSE nursing/ midwifery population over 40 years of age;
- in addition there are almost 9,000 nurses and midwives over the age of 50 and many of these have an entitlement to retire at age 60;
- the 2016 turnover rate recorded in the Health Sector Staff Turnover Estimate for Staff Nurses and Midwives was 7.9%;
- the RN4CAST Study identified burnout as a serious issue within the Irish health system with the majority of nurses working in medical and surgical units across the acute hospital sector reported moderate to high levels of burnout and low levels of job satisfaction;
- a 2017 survey released by the Irish Nurses and Midwives Organisation showed that a staggering 78.1% of student nurses considered emigrating when they qualified with 81.49% of the total respondents placing pay, staffing levels, and working conditions as the major reason for considering leaving the health service;
- the female dominated professions of nursing and midwifery are low paid in comparison to other professions with the same educational entry requirements;

- in recent years due to a deterioration in working conditions and pay issues, amongst others, the situation for nurses and midwives has dramatically changed and has become characterised by a high stress working environment, poor staffing levels associated with unsatisfactory working conditions, and a poorly controlled working environment;
- nurses, midwives, and their unions have consistently reported working conditions, facilities, supports, training opportunities and pay as the causative factors for the decisions of nurses and midwives to leave the health service;
- the recruitment moratorium in the public sector was introduced in the health service two years before all other areas of the public sector;
- the blanket moratorium on recruitment, had a higher impact on nursing and midwifery than on most other grades and professions in the public health service;
- nursing and midwifery are high risk professions, with low remuneration and inadequate staffing levels, where there has been little planning for retention and recruitment;
- the recruitment moratorium and associated issues have created a recruitment and retention crisis within the nursing and midwifery professions;

Further accepts that:

- in December, 2007, there were 39,006 whole-time equivalent (WTE) nurses and midwives in the Health Service Executive (HSE) and at the end of December, 2017, that stood at just 36,777 WTE nurses and midwives;
- despite this decrease over the same period with less nurses and midwives, hospital activity has dramatically increased, despite a reduction in acute beds and an increase in attendances at Emergency Departments;
- the February 2017 Nursing and Midwifery Workforce Plan agreed to grow the total number of nurses and midwives to 37,043 WTE qualified nursing and midwifery staff by December 2017;
- rather than the nursing and midwifery workforce increasing, it is struggling to retain therefore despite recruitment the workforce growth has not met this target, and this has implications for the 2018 Nursing/Midwifery Funded Workforce Plan;
- the National Maternity Strategy (Department of Health, 2016) has determined the minimum level of growth for 2017 & 2018 is 200 WTE midwives;
- the WTE number of midwives in January 2017 was 1,461 but by January 2018 this had fallen to 1,409 leaving a requirement for an additional 252 WTE to reach the Maternity strategy 's determined level of growth;
- to deal with the shortage of nurses and midwives, the health service has an over-reliance on costly agency staff, with the bill for agency nursing running at €1.1million per week;

— unions representing nurses and midwives, including the Irish Nurses and Midwives organisation (INMO), SIPTU, and the Psychiatric Nurses Association (PNA) have been highlighting the issue of the recruitment and retention crisis amongst nurses and midwives for many years;

— nurses, midwives, and their unions have identified a number of key issues for existing and prospective staff, these include working conditions, facilities, supports, training opportunities and pay;

— pay inequality has contributed significantly to a nursing and midwifery recruitment and retention crisis that will continue to have severe repercussions for the health service unless it is urgently and adequately tackled;

— nursing is a globally recognised profession, there is a worldwide shortage of this human resource, therefore high levels of competitive recruitment practices are utilised by countries to attract nursing and midwifery personnel.

— the State is competing within the global market for nurses and midwives and failing to attract from other jurisdictions and failing to retain nurses and midwives trained here due to the issues of pay and poor working conditions;

— the Report of the Public Service Pay Commission identified problems in recruitment and retention, particularly in the health sector;

Acknowledges that:

— it is vitally important that the state continues to attract sufficient students to the professions of nursing and midwifery and develops the ability to retain those within the public health system;

— for the state to attract back nurses and midwives to the health service the Government and the HSE need to address the key issues of working conditions, facilities, supports, training opportunities, and pay;

Calls on the Government to:

— introduce recruitment and retention measures based on realistic proposals which must prioritise pay;

— agree a roadmap with unions on how full pay equality will be achieved for nurses and midwives with an implementation plan to deliver pay equality within a short timeframe across the nursing pay scales;

— thereafter, to establish an independent commission on nursing to look at all aspects of nursing including future pay adjustments, working conditions, upskilling, and career progression, amongst other areas;

— work with unions to identify innovative and progressive mechanisms/initiatives to secure and retain staff;

— target new graduates and other nursing staff by offering permanent contracts, attractive career structures and opportunities for other learning, education, and skills development.

— Louise O'Reilly, Gerry Adams, John Brady, Pat Buckley, Seán Crowe, David Cullinane, Pearse Doherty, Dessie Ellis, Martin J. Ferris, Kathleen Funchion, Martin Kenny, Mary Lou McDonald, Denise Mitchell, Imelda Munster, Jonathan O'Brien, Eoin Ó Broin, Caoimhghín Ó Caoláin, Donnchadh Ó Laoghaire, Aengus Ó Snodaigh, Maurice Quinlivan, Brian Stanley, Peadar Tóibín.