

Nursing Council of New Zealand Quarterly Data Report

JUNE 2024 QUARTER





Introduction

Welcome to the Te Kaunihera Tapuhi o Aotearoa Nursing Council of New Zealand Quarterly Data Report, for key sector and professional stakeholders. Our reports are released quarterly after each deadline for renewal of Annual Practising Certificates. This report relates to the April – June 2024 quarter.

The tables and figures in this report are based on data collected by the Nursing Council as it carries out its usual functions. They have not undergone extensive cleaning, and annual reviews or more specialised presentations of data may contain slightly different numbers. In such cases, data compiled annually or for specific purposes should be treated as the authoritative source rather than this report.

In each part of this report, we have included some contextual information and notes on how to interpret the data. At the end of the report, we provide some background on the data we hold and how we collect it. These provide key points to keep in mind when considering what the figures and information we're providing represent.

Please contact the Nursing Council if you have any questions regarding the data in this report.

Catherine Byrne Pouārahi/Pouroki Chief Executive/Registrar

Lauren Prosser Kaiwhakahaere Kaupapahere, Rangahau, me te Mahinga Director of Policy, Research & Performance



This quarter's figures at a glance

- Total number of nurses with APCs: 81,108
- Total number of nurses joining the register this quarter: 4,730
- Number of IQNs joining the register this quarter: 4,632
- Percentage of IQNs registered this quarter located in New Zealand: 24.5%
- IQNs as a percentage of all nurses with an APC: 44.7%
- Nurses with prescribing rights: 2,173
- Complaints/notifications received this quarter: **103**

Number of practising nurses

At the end of the last quarter – 30 June 2024 – there were **81,108** nurses holding annual practising certificates (APCs). (This compares to **71,583** nurses at the same time last year, an increase of 9,525 nurses, or 13%). We had 2,433 enrolled nurses with APCs, 77,876 registered nurses with APCs, and 799 nurse practitioners with APCs.

Not all nurses with APCs are actively working as nurses. Some may, for example, be between jobs, studying, taking sick or parental leave. Many internationally qualified nurses apply for registration, are registered, and gain an APC while they are overseas; this allows them to begin nursing as soon as they arrive in the country. Recent analysis of annual workforce data suggests that approximately 8% of nurses with APCs were not actively working as nurses in Aotearoa NZ when they renewed their certificate.

Table 1 shows the total number of nurses holding APCs at the end of each quarter, by scope of practice. This includes both New Zealand-qualified nurses (NZQN) and internationally qualified nurses (IQN).

Scope of practice	ce June September December	December	March	June	
Scope of practice	2023	2023	2023	2024	2024
Enrolled nurse	2,388	2,449	2,461	2,442	2,433
Registered nurse	68,494	71,345	74,439	75,474	77,876
Nurse practitioner	701	703	734	787	799
Total	71,583	74,497	77,634	78,703	81,108

Table 1: Nurses with current APC at end of quarter

The number of nurses with an APC increases when new nurses are added to the register and receive their first APC and when nurses already on the register, but currently without APCs, apply for one. It decreases when nurses choose not to renew their APC by the renewal deadline, or when a nurse loses their APC or is taken off the register for some reason (usually for disciplinary reasons or because we've been notified of their death).



Nurses renew their APCs at one of four points during the year (aligned with their birth date). The quarters above represent nurses with APCs once the final renewal date (the final day of the relevant quarter) had passed. The last quarter represents all nurses with APCs at midnight on 30 June 2024.

New IQNs join the register throughout the year, but new NZQNs can only join once they've passed the State Final Exam. This means that there is usually a spike in the number of nurses with APCs at the end of the September and December quarters, as most NZQNs sit their State Final Exam in July and November and join the register in the following months.

New nurses joining the register

Over the last quarter – from 1 April to 30 June 2024 – **4,730** new nurses joined the New Zealand register of nurses. (This compares to **3,042** nurses who joined the register in the same quarter last year).

The last quarter saw 30 new enrolled nurses and 4,700 new registered nurses join the register. Two per cent of new nurses were NZQNs and 98% were IQNs¹. Of new IQNs, 31% were registered after completing an assessment of competence (either a Competence Assessment Programme (CAP) or an Objective Structured Clinical Examination (OSCE)), 67% were directly registered without needing to complete an assessment of competence (some with conditions on their practice), and 2% were registered under the Trans-Tasman Mutual Recognition Act 1997 (TTMR).

Table 2 shows the number of new nurses who joined the register over each of the past five quarters, including by scope of practice and by whether they were NZQNs or IQNs. Over the past four quarters (i.e. the past 12 months) **16,606** new nurses joined the register. Of these, 314 were enrolled nurses and 16,292 were registered nurses. IQNs made up 85% of all new nurses.

Of the nurses that joined the register in the 12 months between 01 July 2023 and 30 June 2024, 399 identified as Māori (98% were NZQN and 2% were IQN) and 432 identified with one or more Pacific ethnicities (66% NZQN and 34% IQN).

¹ IQNs join the register throughout the year whereas NZQNs only join after passing State Final Exam. This, combined with an increased number of IQNs registered, accounts for the low percentage of NZQNs joining the register in this quarter (refer to Table 2 for figures). While a relatively small cohort of NZQNs sat the State Final Exam in March and were added to the register in April of this quarter, the largest cohorts of NZQNs generally sit the exam in July and November and are added to the register in August and December.



By scop	e of practice	June 2023	September 2023	December 2023	March 2024	June 2024
Enrolle	d nurse	19	155	108	21	30
Registe	ered nurse	3,023	4,350	4,662	2,580	4,700
Total		3,042	4,505	4,770	2,601	4,730
By cate	egory	June 2023	September 2023	December 2023	March 2024	June 2024
	<i>After an assessment</i> <i>of competence</i> ²	1,027	1,219	1,439	1,226	1,437
IQN	Direct registration ³	1,837	2,609	1,501	1,277	3,099
	Under TTMR ^₄	40	57	46	63	96
	Total IQN	2,904	3,885	2,986	2,566	4,632
NZQN		138	620	1,784	35	98
Total		3,042	4,505	4,770	2,601	4,730

Table 2: Number of nurses joining the register, by quarter

Note that Table 2 only includes nurses who joined the register; it does not include registered nurses who did not have a current APC and renewed it that quarter so they could return to practice.

Not every nurse who gains registration will be located in Aotearoa NZ. An assessment of competence for IQNs can only be undertaken in New Zealand, therefore all nurses required to complete an assessment of competence prior to registration will be located here when they join the register. However, as most IQNs begin the registration process while they are overseas, those who do not need to complete an assessment of competence are often not residing here when they gain registration.⁵ Table 3 shows the percentage of new IQNs in each of the past five quarters who were located here at the time they gained registration.

Table 3: Percentage of newly registered IQNs located in New Zealand, by quarter

	June	September	December	March	June
	2023	2023	2023	2024	2024
Percentage of IQNs registered in quarter	35.6%	31.9%	45.5%	42.2%	24.5%

The figures in Table 3 are based on the number of IQNs who reported their 'country of residence' as New Zealand when they were registered. The accuracy of this data is limited by the accuracy of information provided by the nurse. Some nurses who began the registration process while overseas may not have

⁵ Anecdotally, many IQNs will not begin immigration or international relocation plans until they have first been registered.



² 'After an assessment of competence' refers to internationally qualified nurses that, following assessment of their application by our Registrant Consultants, were required to complete an assessment of competence prior to registration. Registrants in this category who applied prior to 04 December 2023 were required to complete a Competence Assessment Programme (CAP). Registrants in this category who applied from 04 December 2024 were required to follow the Council's new competence assessment process, by completing a theoretical examination (online) and an Objective Structured Clinical Examination (OSCE).

³ 'Direct registration' refers to nurses that, following assessment of their application by our Registrant Consultants, were not required to complete an assessment of competence before registering.

⁴ 'Under TTMR' refers to Australian-registered nurses who have joined the New Zealand Register; under the Trans-Tasman Mutual Recognition Act 1997, almost all nurses registered in Australia are essentially entitled to registration in Aotearoa NZ.

updated their address details, and conversely some nurses may have initially provided a New Zealand service address despite being overseas (e.g. if they have family here).

The global nursing workforce is highly mobile, and new IQNs join our register after practising in a wide range of countries and regions. Table 4 shows the 'current' (i.e. most recent) country of registration of IQNs who joined the register in the last five quarters. In the last quarter, the **United Kingdom** was the most common country of previous registration, with 51% of IQNs that gained registration in this quarter being registered there most recently.

Jurisdiction	June 2023	September 2023	December 2023	March 2024	June 2024
United Kingdom	1,254	1,827	1,049	867	2,344
Middle Eastern countries	470	626	743	648	721
Ireland	321	559	263	199	587
India	360	370	458	415	496
Philippines	106	126	143	88	146
Australia	40	57	46	63	94
Singapore	200	155	133	134	82
USA and Canada	26	48	36	50	43
Pacific countries	54	56	60	48	36
Other countries	73	61	55	54	83
Total	2,904	3,885	2,986	2,566	4,632

It should be noted that the country in which a nurse is most recently registered is not necessarily the country in which they gained their initial nursing qualification. For example, a nurse who was initially educated in the United Kingdom may have most recently practised (and thus have current registration) in Qatar. The Council's workforce statistics series of reports include information on where IQNs gained their initial nursing qualification.

Number of internationally qualified nurses

At the end of the last quarter – 30 June 2024 – there were **36,232** IQNs holding APCs. (This compares to **27,587** at the same time last year, an increase of 8,645 nurses, or 31%). Of these IQNs, 35,772 were registered nurses, 248 were enrolled nurses, and 212 were nurse practitioners. These numbers represent 46% of registered nurses with APCs, 10% of enrolled nurses with APCs, 26% of nurse practitioners with APCs, and 45% of all nurses with APCs.

Table 5 shows the total number of IQNs holding active APCs at the end of each quarter, by scope of practice. It also shows the percentage of all nurses with APCs at that time that were IQNs.



Scope of practice	June	September	December	March	June
	2023	2023	2023	2024	2024
Enrolled nurse	249	244	237	242	248
Registered nurse	27,151	29,883	31,953	33,099	35,772
Nurse practitioner	187	186	193	208	212
Total nurses	27,587	30,313	32,383	33,549	36,232
Percentage of nurses with APCs	38.5%	40.7%	41.7%	42.6%	44.7%

Table 5: Internationally qualified nurses, by quarter

An internationally qualified nurse is defined as a nurse who completed the qualification that led to them joining the New Zealand register of nurses anywhere other than Aotearoa New Zealand. A nurse born in another country who completed a Nursing Council-accredited programme and joined the register after passing our State Final Exam is considered a New Zealand qualified nurse rather than an IQN. Conversely, a New Zealand-born nurse whose nursing qualification was gained outside the country (e.g. Australia or the United Kingdom) is classified as an IQN rather than an NZQN. Nurses who gain registration as an IQN but then later gain domestic nursing qualifications through further education or postgraduate study are still classified as IQNs.

Nurses with prescribing rights

At the end of the last quarter – 30 June 2024 – there were **2,173** nurses who had some form of prescribing rights. (This compares to **1,789** at the same time last year, an increase of 384 nurses, or 21%). Of these nurses, 799 were nurse practitioners, **1,123** were registered nurses with limited prescribing rights, and 270 were registered nurses who were only able to prescribe the emergency contraceptive pill.

Table 6 presents the total number of nurses with prescribing rights at the end of each quarter, by the type of rights they held. Nurses with prescribing rights represented 2.7% of all nurses with an APC at the end of the last quarter: all nurse practitioners, and 1.8% of registered nurses. (This compares to 2.5% of all nurses with an APC and 1.6% of registered nurses a year ago).

	June 2023	September 2023	December 2023	March 2024	June 2024
Nurse practitioner	701	703	734	787	799
RN prescriber - primary health and specialty teams	433	503	539	586	586
RN prescriber - community health	331	403	470	467	492
RN prescriber - diabetes	47	46	45	46	45
RN prescriber - emergency contraceptive pill	277	284	280	270	251
Total	1,789	1,939	2,068	2,156	2,173

Table 6: Nurses with prescribing rights, by quarter

All nurse practitioners are authorised prescribers, while registered nurse prescribers have completed advanced education and work in contexts that allow them some prescribing rights. Registered nurse prescribers fall into the four groups described below.



Registered nurses who prescribe in primary health and specialty teams are experienced nurses that have completed a postgraduate prescribing qualification, and work in collaborative teams. They can prescribe pharmacy-only and general sale items, and from a list of medicines for common and long-term conditions.

Registered nurses who prescribe in community health have completed an approved education programme. They can prescribe pharmacy-only and general sale items, and a limited number of medicines for minor ailments and illnesses. These medicines may only be prescribed for normally healthy people who do not have significant health problems.

Registered nurses who prescribe in diabetes health can prescribe pharmacy-only and general sale items, and a limited set of diabetes-specific medicines. The pathway to this type of prescribing was closed in 2017, as it has been superseded by other types of prescribing.

In addition, registered nurses who practise within the specific area of sexual and reproductive health may apply for authorisation to supply the emergency contraceptive pill (ECP). This does not grant any other prescribing rights. All other nurse prescribers and nurse practitioners are also able to prescribe the ECP.

Fitness to practise processes

Over the last quarter – from 1 April to 30 June 2024 – the Nursing Council received **103** complaints and/or notifications about nurses. This represents **0.1% of nurses with APCs** at 30 June 2024. A large proportion of these (66%) were notified by an employer or the nurse themselves. This compares to 97 complaints for the same quarter last year, which also represented 0.1% of nurses with APCs

Table 7 shows complaints and notifications received in each of the past five quarters. Over the past four quarters (i.e. the past 12 months) **387** notifications or complaints were received by the Council, representing **0.5% of nurses with APCs** at 30 June 2024. Of these, 33% were initiated by employers, 25% by the nurse themselves, 19% by health consumers, their advocates, or members of the public, 12% by colleagues of the nurse, and 13% from other sources⁶.

	Jun	Sep	Dec	Mar	Jun
	2023	2023	2023	2024	2024
Complaints/ notifications received	97	94	97	93	103
Percentage of nurses with APCs	0.1%	0.1%	0.1%	0.1%	0.1%

Table 7: Fitness to practise complaints and notifications, by quarter

The Council's fitness to practise processes are described in detail on our website and in our annual report. Grounds for complaints and notifications include competence concerns, code of conduct actions, and the health status of a nurse affecting their fitness to practise.

⁶ Percentages may not total 100 due to rounding.



Some notes on our data and this report

This quarterly report presents 'headline' data about the nursing workforce. The focus is on the types of nursing data where we may see meaningful changes from quarter to quarter. It is not intended to replace the data in our annual report or other workforce publications. A breakdown of ethnicity and gender is not included in this report and will continue to be reported annually and in our major workforce reports.

Data that is usually only collected from nurses once a year, such as where nurses work or their employment setting, will continue to be provided through separate reports.

How does the Nursing Council get its data?

The Council's main data source is the New Zealand register of nurses. Maintaining the register is a core statutory function. As well as listing the names, scopes, and registration numbers of every nurse, the Register holds additional data recorded at various times during a nurse's career.

Registration data is provided when a nurse first enters the register. It is often updated if a nurse changes their scope of practice and, where applicable, can be updated at any time by a nurse choosing to update their records. Nurses are also asked to check some of this information (like their gender and ethnicity) when they renew their APC. This core data includes information such as:

- name, registration number, and the scope(s) for which the nurse has registration
- gender and ethnicity
- date of birth and the date that the nurse joined the register
- name, year, and granting institution of the nursing qualification(s) they possess⁷
- some specific additional information, such as if a nurse possesses some prescribing rights or any conditions on their practice.

Workforce data is collected each year when a nurse renews their APC. Providing this information is voluntary but over 90% of nurses choose to provide it. This information includes:

- where a nurse mainly practises
- what area of nursing (e.g. primary health care, emergency and trauma, nursing education) a nurse practises in
- what type of employer they work for (e.g. Health New Zealand Te Whatu Ora, a Māori health service provider, a government agency)
- the number of hours a nurse usually works in a week.

Workforce data provides a snapshot of the workforce – it is not 'real-time' data. Over a year nurses can work in multiple jobs, different regions of the country, and for different amounts of time in a week.

⁷ Qualifications leading to registration in a scope or otherwise affecting practice – such as a Bachelor of Nursing or a Diploma of Enrolled Nursing – must be recorded. Other qualifications, such as a PhD or research-based masters degree, can be included but are not required.



Workforce data does, however, provide a broad picture of where nurses are working, what they are doing, and how this changes over time.

The Nursing Council also collects additional information for specific purposes. For example, nursing schools must report to us annually on the programmes they offer, we record some information about nurses who undergo fitness to practise processes, and we record requests we receive for verifying whether a nurse is registered or not.

Defining 'on the register' vs 'practising' vs 'active'

There are a few different ways to define who is a nurse in Aotearoa NZ. For data purposes there are three major populations of nurses: nurses who are 'on the register', 'practising', or 'actively practising'. These aren't legal definitions, but ways to think about who we're talking about when we report information.

Being **on the register** means that a nurse is on the New Zealand Register of Nurses. This includes every living person who has ever been registered as a nurse and can therefore apply for an APC. As being removed from the register means that someone cannot work as a nurse until they are reinstated, people are generally only removed from the register for the most serious competence or conduct transgressions, at their own request, or when they die.

This means that any time most of the nurses 'on the register' are not practising as nurses. The register has more than 150,000 nurses on it, while just over 80,000 nurses currently hold APCs. And some of these nurses may not have practised for decades. Because of this, the Nursing Council rarely reports information on this population.

Being a **practising nurse** means having a current APC, which allows people to work as a nurse in Aotearoa New Zealand. An APC lasts for one year. Because the nursing profession is so large, nurses don't renew their APC all at once, but instead at one of four points during the year: by 31 March, by 30 June, by 30 September, or by 31 December.⁸

It's important to remember that not every nurse who holds an APC is actually working as a nurse. Some might be between jobs or studying, others might be taking parental leave or on long-term sick leave. Some nurses may be overseas when their renewal time comes around but decide to retain a New Zealand APC because they intend to return here.⁹ Recent analysis of annual workforce data suggests that approximately 8% of nurses with APCs are not practising as nurses when they renew their APC.

Our workforce statistics series of reports provide data on **actively practising nurses** (also referred to as 'active' nurses or 'actively practising' in Aotearoa NZ). This consists of practising nurses (i.e. those with APCs), but we remove nurses who told us, when they last renewed their APC, that that they weren't working as nurses (e.g. they were unemployed, studying full-time, or on parental leave), or told us that they were working overseas. These reports are available on our website at <u>this link</u>.

⁹ We allow nurses a short grace period during which they can renew their APC without practising in Aotearoa NZ.



⁸ The particular APC renewal point for a given nurse is determined by their birthday.