

WORKFORCE STRATEGY GROUP

ALL DISTRICT HEALTH BOARDS

END OF YEAR UPDATE 2016

AS 2016 COMES TO A CLOSE, WE ARE PLEASED TO REFLECT ON A HIGHLY SUCCESSFUL YEAR FOR THE WORKFORCE STRATEGY GROUP.

The Workforce Strategy Group (WSG) first met in March 2016, and started to strategise the future direction of workforce planning and development across and beyond the DHBs.

Workforce is an exciting area of work, but challenging. It is about our people - who are at the core of the sector and critical to ensuring patients and whanau receive the care and support they need.

When we started the year, the WSG outlined the workforce vision for 2025. It is patient centric care being delivered in the community, and this being achieved through a more flexible

workforce - working in collaboration with professional bodies and union partners.



The first areas of focus for WSG are: looking at developing a more flexible medical imaging workforce, identifying our future leadership talent, and working with our Ministry of Health colleagues on the future of how vocational training funding is invested.

Underpinning all of this, is having ready access to reliable and consistent workforce data. A key success for the WSG was the launch of the workforce visualisation tool. All DHBs can now access dynamic DHB workforce information. The next step is to build the workforce picture beyond the DHBs.

The WSG looks forward to 2017, and working with our stakeholders and partners to progress workforce development across the sector.

Ngā manaakitanga

**Julie Patterson (Chair WSG)
& Allison Plumridge
(Director Workforce
Information & Projects)**

WSG 2017 MEETING DATES

16 February 2017	Planning Day	Auckland
25 May 2017	F2F all day meeting	Wellington
20 July 2017	1 Hour Teleconference	
17 August 2017	F2F all day meeting	Wellington
14 September 2017	1 Hour Teleconference	
16 November 2017	F2F all day meeting	Wellington

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LEADERSHIP DEVELOPMENT

On 8 December 2016, the WSG obtained agreement from the DHB Chief Executives and Chairs to implement a shared approach to talent management and leadership development utilising the public sector framework.

Earlier in the year, the GMsHR Group recognised that there was an opportunity to broaden the focus from the development of future CEs and senior leaders within the health sector; to an approach that went beyond the health sector to encompass the broader public sector.

The WSG agreed there would be significant benefits to DHBs and the wider public sector from a common approach, and therefore sought CE approval in September to progress exploring with the State Services Commission (SSC) and the Ministry of Health (MoH) how this might work.



This initiative will be a partnership between the DHBs, the State Services Commission (SSC) and the Ministry of Health.

DHB alignment with the shared approach to leadership development currently in operation across the core public sector will deliver:

- ⊕ The ability to share a common language and approach across and beyond the health sector to the broader public sector;
- ⊕ An enabling framework that aligns well to the 20 DHBs Leadership Domains;
- ⊕ Access to, and participation in a broad talent pool across the health and public sectors;

- ⊕ Access to a wide variety of development opportunities across the health and public sectors;
- ⊕ Access to a wide range of talent and leadership resources and toolkits;
- ⊕ Access to a contestable market of training providers with resources developed to support the framework;
- ⊕ An approach that accommodates current leadership development programmes and encourages alignment over time; and
- ⊕ Support from the SSC for implementation.

The programme will be led by the GMsHR Group and governed by the WSG. Next steps involve setting up a programme structure within the DHBSS Workforce Team to manage implementation. This structure is planned to be in place in the first quarter of 2017.

PGY1s

Increases in the number of medical graduates leaving medical school will continue over the next six years until they plateau in 2022. It is expected that DHBs will continue to accommodate the increased numbers of medical graduates without any loss in training experience.



The WSG has been considering potential improvements to future planning; to assist DHBs and to provide assurance to other stakeholders that sufficient PGY1 placements will be available to accommodate increases in graduate numbers.

The WSG considers that DHBs' planning should be guided by some nationally agreed principles. These include for each DHB's allocation of graduates to be based on an agreed allocation methodology that is simple, fair and equitable.

The WSG looked at a number of allocation methodologies, but

considers more work is required to achieve a sustainable solution. This will involve some scenario planning and including the impact of Community Based Attachments, so that an agreed methodology can be in place for the next significant increase in 2018. A working group will be formed in early 2017 to progress this.

In the interim, the DHB CEs have agreed that the 2017 allocation will be primarily based on the 2016 approach; but with adjustments to ensure there are equitable placements across each region. Regional numbers will be advised and the Regional CE Chairs will work with their colleagues to ensure placements are identified.

DATA VISUALISATION TOOL

The data visualisation tool went ‘live’ in October 2016 and has been very well received by the DHBs.

Going Live:

5 Visualisation Tool
Key Usage Statistics
Since October 2016



Of DHBs are using the tool

Top 5 DHB Users

Hawke’s Bay
Capital & Coast
Northland
Bay of Plenty
MidCentral

Average session is 19 minutes



652

Times DHB users accessed the tool

Top 4 Worksheets viewed in the HWIP App

- Workplace at a glance
- Cumulative increase in FTE & population
- Age comparisons
- % of staff over 55 years

The data visualisation tool has also been used to share workforce information with service managers and executive teams within the DHBs; with very positive feedback received, including:

“It is very easy to use so, well done to the development team,”

“We can see use in the tool for putting together proposals and other strategy papers,” and

“We love it!”

You can contact your DHB Analyst for a demonstration of the tool.



The tool has now been made available to the regional training hubs to provide them with easily accessible workforce information to inform regional workforce and service planning.

Further analytics will be developed within the tool as feedback is received from ‘users’. Additionally, the project will move into phase two next year - which will involve adding further national data sources to the HWIP database.

Lots more work to do!!!

The Imaging Workforce in New Zealand

WORK IS BEING UNDERTAKEN ON THE IMAGING WORKFORCE IN NEW ZEALAND BY THE WSG IN PARTNERSHIP WITH THE NATIONAL DHB DIRECTORS OF ALLIED HEALTH (DAH) GROUP AND HEALTH WORKFORCE NEW ZEALAND.



The imaging workforce of New Zealand has been recognised as a priority workforce, which could benefit from consideration of opportunities for improvement and development, with the ultimate goal of improving patient outcomes.

There is recognition of the need to

engage with wider stakeholders to get a broader understanding of the workforce delivering imaging services and the challenges they face.

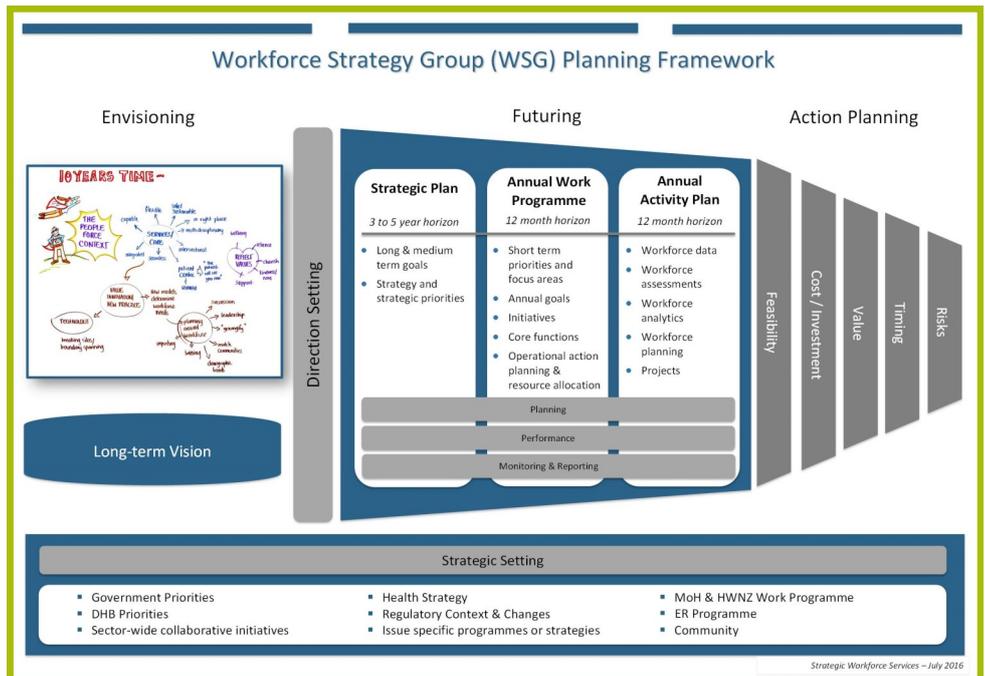
A Hui with key stakeholders has been organised for early 2017, to consider the opportunities, challenges, and a way forward

together in progressing the long term development of the imaging workforce in New Zealand. Invitations and a discussion paper articulating the key issues are being sent out in December 2016.

The Imaging Workforce Hui will provide a forum for good discussion and planning for future development of this workforce.

ROLE OF THE WSG

On behalf of the 20 DHB CEO Group, the Workforce Strategy Group (WSG) will develop the workforce strategic direction and ensure an integrated approach to workforce activity amongst DHBs.



PURPOSE

- ⊕ Ensure that Workforce Strategies developed reflect Government and sector priorities
- ⊕ Engage with the CEO Group to achieve collective operational mandate
- ⊕ Provide strategic direction for the development of key workforces across the DHBs
- ⊕ Link with key stakeholders to drive and effect change
- ⊕ Ensure a sector lens when considering workforce matters
- ⊕ Provide governance for the agreed work plan activity
- ⊕ Lead communications on workforce activity
- ⊕ Prioritise workforce development actions/plans and oversee and endorse the annual plan for the Strategic Workforce Services (SWS) Programme
- ⊕ Maintain and develop key stakeholder networks to support delivery of the workforce programme

WORKFORCE STRATEGY GROUP MEMBERS

- Julie Patterson (Chair) - CE Whanganui DHB
- Sally Webb - Chair BoP DHB
- Helen Mason - CE BoP DHB
- Nick Chamberlain - CE Northland DHB
- Nigel Trainor - CE South Canterbury DHB
- Dot McKinnon - Chair Wanganui and MidCentral DHBs
- Dale Oliff - COO, Hutt Valley DHB
- Sam Bartrum - GM Planning, Outcomes, Integrated Care & District Hospitals, Northland DHB
- Helen Pocknall - DoN Hutt Valley DHB
- Hugh Lees - CMO BoP DHB
- Martin Chadwick - DAH CM DHB, Chair of DAH Group
- Hector Mathews - Executive Director Māori and Pacific Health, Canterbury DHB
- Michael Frampton - GM People & Capability Canterbury and West Coast DHBs, Chair National GM HR Group, Regional Chair Southern
- Beth Bundy - GM HR CM DHB, Deputy Chair GM HR Group
- Fiona Michel - Chief of People & Capability ADHB, Regional Chair Northern
- Greg Peplow - Director People & Performance Waikato DHB, Regional Chair Midlands
- Donna Hickey - GM People and Capability Capital & Coast DHB, Regional Chair Central
- Mick Prior - GM Strategic Workforce Services, DHB Shared Services
- Margareth Attwood - Manager Policy, Advice & Regulation, HWNZ
- Doug Martin - Director, Martin Jenkins



For more information, please contact:
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Full size PDF versions of diagrams are available at:
<http://www.centraltas.co.nz/strategic-workforce-services/workforce/workforce-strategy-group>