Increasing Māori participation in our workforce continues to be a focus for the WSG

We are all aware of the issue but what are we collectively doing about this? This is the challenge to us all across the health sector and plays a key role in the strategic imperative of reducing inequalities.

It is fundamental to us delivering better health care and improving patient outcomes.

Discussion at the WSG November meeting focused strongly on actions that will make a difference in this area.

How will we know if we are succeeding in increasing Māori representation? Having robust workforce data is key to this. Through the Health Workforce Information Programme (HWIP) we have a good view of the percentage of Māori across the DHB workforce groups. Below and on page 3 we highlight the current stats. We will be working with the DHBs via the General Managers Human Resources Group and Tumu Whakarae to ensure that we encourage employees to provide this information and highlight the importance of doing so.

Using targets was also discussed as a way of mandating change. The discussion lead to viewing proportionality as perhaps a more reflective way of achieving change. With robust workforce information we can track how we are trending in terms of achieving this. Alongside this, is the need to ensure cultural competency of the whole workforce.

A practical step for DHBs, or employers generally, is ensuring that unconscious bias is removed from the recruitment process. Recruitment criteria can also focus on the best suited candidates in terms of meeting, or being representative of their communities. The WSG will focus on developing practical advice to assist DHBs and working with them to monitor progress.

Leadership & Talent continue to be a focus and we are working with DHBs on the implementation of the shared framework for talent management and leadership development, which was developed by the State Services Commission (SSC).

Working together across the sector, is important to ensure we maximise our resources and are clear on roles and responsibilities.

Health Workforce New Zealand (HWNZ) is our strategic partner and we have committed to working more closely together. This includes aligning work programmes and working to each other’s strengths.

The WSG has its planning day on 1 March 2018, where we will further refine our key actions in these areas.

In September 2017, Strategic Workforce Services (SWS) met with the Dean of Physiotherapy and the Associate Dean Māori at Otago University. The discussion included current university initiatives targeted at Māori students, as well as Otago University’s perspective on how the DHBs could do better to attract Māori to the health workforce.

Universities in New Zealand are investing considerable effort to promote and support Māori students into/through Health Sciences foundation courses. A major factor restricting the universities’ ability to produce Māori graduates is the pipeline from secondary education. It is evident that there needs to be targeting of secondary students as young as at Year 9 level; and the provision of continuing support through Health Science academies or similar initiatives.

There is also the suggestion that DHBs consider how they can provide culturally supportive environments, and investigate ways to align local HR policies with national strategies to eliminate potential contributors to any unintended bias arising during the recruitment process.

Sharing of initiatives already underway would be great. What strategies does your DHB or organisation have to increase your Māori workforce? Please let us know via Sam.Valentine@tas.health.nz
Workforce Assessments

The workforce assessment process provides a structured, evidence based approach to assessing health workforces, whilst considering the wider contextual factors which impact on the New Zealand health system. It has formed the baseline data gathering for operational information on workforces. It is also used to identify where further investigation of particular workforce issues is required, and to provide summary advice to inform workforce development activity.

Completed Reports are available at https://tas.health.nz/strategic-workforce-services/workforce-assessment-reports/

**Midwifery**

The DHB Midwifery workforce assessment is progressing well, with strong engagement from participants across the 20 District Health Boards.

The first phase of the workforce assessment is complete and involved surveying DHBs to collect information about the DHB employed Midwifery workforce. This was followed by consultation with the associated DHB lead groups to test and explore the preliminary analysis of workforce domain ratings yielded by the survey. Qualitative analysis of the survey responses is underway.

In parallel, SWS is undertaking analysis of related quantitative data. This involves working with some large and varied data sets (NMDS, HWIP and Census data) to examine patterns, unknown correlations, trends and other useful information relating to the DHB Midwifery workforce. This information will be integrated into the final workforce assessment report.

Once a draft workforce assessment report is produced, the key findings and recommendations will be discussed with the relevant DHB lead groups and presented to the WSG.

SWS will also engage with HWNZ, the Maternity Strategic Advisory Group (MSAG) and the National Maternity Monitoring Group.

For further information please contact: Kamini.Patter@tas.health.nz

**Audiology**

Based on the recommendation of the DHB Directors of Allied Health (DAH) Group, the WSG has approved the DHB Audiology Workforce as the next Allied Health, Science & Technical workforce to undergo a workforce assessment. This will be the first assessment of the DHB Audiology workforce.

Initial investigation indicates that this is a relatively small workforce with potential vulnerabilities in the area of retention. There may be potential for increased and improved use of the non-regulated care and support workforce.

This workforce assessment will commence in the first quarter of 2018.

For further information please contact: Sam.Valentine@tas.health.nz

**The Medical Imaging Workforce Action Group**

Following a sector wide consultation process, the Medical Imaging Workforce Action Group has confirmed seven workforce development and improvement work streams, which aim to:

1. Examine factors that restrict or enable the sectors capacity to provide training positions;
2. Review employment arrangements and identify factors that enable or restrict service provision;
3. Identify and share best practice examples of flexible training arrangements;
4. Develop demand modelling for the medical imaging workforce;
5. Determine the volume, reasons for and impact of unnecessary ordering of imaging studies;
6. Examine and compare international models of training with the current NZ model and
7. Assess the feasibility to re-design the NZ training model.

Group representatives are engaging with their networks to progress each of the work streams. An update is being prepared to provide more comprehensive information, including a summary of the purpose and goals for each work stream.

For further information please contact: Rory.Barton@tas.health.nz

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**THE EVOLVING WORKFORCE ASSESSMENT PROCESS**

The Workforce Assessment process was initially developed to inform and support MECA bargaining. While workforce assessments continue to input into employment relations activities and bargaining strategy development; since 2015 the focus has broadened to identify and address wider workforce issues based on need.

**Changes include:**

- Workforces identified as being focus areas within the New Zealand Health Strategy;
- Feedback from DHB Lead Professional Groups and/or Health Workforce New Zealand (HWNZ) Taskforce Groups; and
- Workforces with potential vulnerabilities signalled by Health Workforce Information Programme (HWIP) data.

The classification framework within the workforce assessment process has been reviewed and refined to ensure the tool continues to be fit for purpose. Primarily the changes involve ensuring that different scenarios resulting in the same classification, are consistent with the actuality of the workforces involved.

There has been significant expansion in the use of non-DHB data sources, which has enhanced analytics capability. This includes working with large and varied data sets from HWNZ, regulatory authorities, training providers, the MoH’s National Minimum Data Set (NMDS) and Statistics New Zealand.

The WSG has agreed an approach to progressing actions that result from workforce assessments. Workforce assessment recommendations may require action from a range of stakeholders such as education providers, regulatory authorities, private providers, government agencies and other sector participants. The DHB lead professional group, which inputs into a workforce assessment, will advise and facilitate how recommendations are progressed into workforce development actions.

*Knowledge is power, but has little value unless it can be easily accessed and put into practice - Melany Gallant*
In light of discussions around Māori participation in the DHB workforce, a HWIP view of ethnicity data reported by DHBs (DHB employed workforce) has been extracted from the September 2017 HWIP Quarterly Report.

Reporting on ethnicity is complex and relies on the full and accurate capture of ethnicity data at the individual level. As noted on page 1, we will be working with the DHBs via the General Managers HR and Tumu Whakarae to ensure that we encourage employees to provide this information, and highlight the importance of doing so.

Workforce Visualisation Tool & Workforce Data Quality Improvement Workshops

In November 2017, the first in a round of regional workshops was held in Auckland for the Northern Region DHBs (Northland, Waitematā, Auckland and Counties Manukau). These workshops focus on demonstrating and discussing the workforce visualisation tool, and workforce data quality improvements.

The HWIP team provided a refresher on the functionality of and the metrics within the visualisation tool, across each of the Apps now available - workforce (DHB employed workforce data), GMsHR KPIs, Data Quality and Data Completeness. There was emphasis on the importance of the quality and completeness of the quarterly workforce data submitted - as this underpins the usefulness of the tool.

The workshop was well attended and generated good discussion and input from all participants. Some good suggestions were provided by participants, to further improve the Apps.

Advanced Choice of Employment (ACE) Nursing Graduate Recruitment

The goal is to turn data into information, and information into insight – Carly Fiorina
We need to invest in a way that makes sure we’ve got the workforce we need in the future - Jeanne Shaheen