

Briefing for decision

Recognition of Service – Health Workforce

Date due to MO: 15 January 2026 **Action required by:** N/A

Security level: IN CONFIDENCE **Reference:** H2025073919

To: Hon Simeon Brown, Minister of Health

Consulted: Joint briefing with Health New Zealand:

Proactive release: This **title** is proposed by the Ministry of Health for proactive release:

Contact for telephone discussion

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Jen McKay	Interim Head of Organisational Culture and Development, People and Culture, Health New Zealand	

Minister's office to complete:

- Approved Decline Overtaken by events
-
- Needs change Seen
- See Minister's Notes Withdrawn

Comment:

Briefing for decision

Recognition of Service – Health Workforce

Security level: IN CONFIDENCE **Date:** 15 January 2026

To: Hon Simeon Brown, Minister of Health

Purpose of report

1. This briefing provides advice on formal awards to recognise service for the health workforce. It includes an assessment of existing approaches, whether there are any gaps, and potential options for additional service recognition awards.
2. This advice follows correspondence from a member of the public seeking the introduction of a Long Service and Good Conduct Medal for doctors, nurses, and other eligible health workers.

Summary

3. Recognition of service awards are a useful way to acknowledge people's contributions. Awards can support employee and sector level retention and engagement when used alongside other service recognition employment practices, and in conjunction with employment standards such as pay and conditions.
4. Service recognition approaches for the health workforce range from formal honours systems to professional body awards to practices such as workplace appreciation and patient acknowledgement.
5. In New Zealand, our national system of formal awards is the Royal Honours. Between 2020-2024, 237 members of the health workforce received Royal Honours including clinicians, leaders, and community workers (around 13 per cent of all awards during this period).
6. New Zealand's approach to recognising service for the health workforce is mainly in-line with other jurisdictions and other New Zealand public sector dominated workforces.
7. At Health NZ, service recognition approaches vary to cater for a workforce that is large, diverse, and mobile. Health NZ deliver service recognition at a national and local level, with district and team-specific acknowledgements to ensure recognition is meaningful in different contexts. s 9(2)(f)(iv)
8. We considered options, including a new award, but found these unnecessary at present. Introducing a new award is likely to duplicate existing systems, incur costs, and is not recommended given current workforce pressures.

9. We recommend keeping the current approach of status quo to recognise service and continuing to strengthen consistency and visibility of recognition practices within Health NZ.

Recommendations

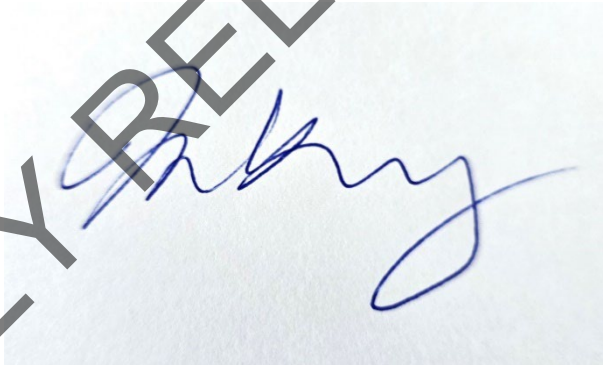
We recommend you:

- a) **Note** that there is good coverage of formal awards and recognition approaches available to health workers; **Noted**
- b) **Agree** that a new award for health workers, or expanding current awards, is not needed at this time; **Yes/No**



Allison Bennett
Group Manager, Health System Settings
Strategy and Policy
Ministry of Health

Date: 15 January 2026



Jen McKay
Interim Head of Organisational Culture and
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Date: 15 January 2026

Hon Simeon Brown
Minister of Health
Date:

Recognition of Service – Health Workforce

Context

10. You were referred correspondence by the Cabinet Office from a member of the public seeking consideration of whether the health workforce requires additional forms of service recognition, specifically a proposed Long Service and Good Conduct Medal, similar to that awarded to the uniformed services e.g. police.
11. Your office requested advice from the Ministry of Health (the Ministry) and Health New Zealand (Health NZ) on existing approaches to recognise service for the health workforce, how these compare with other countries and sectors, and whether there are any gaps and options for consideration.
12. This paper looks specifically at formal awards and at a range of employment practices commonly used to recognise service.

Recognition of service can improve engagement and retention in conjunction with other factors

13. Recognition of service is the acknowledgement and appreciation of individual or team contribution and dedication to an organisation, community, or country. It helps people feel valued and connected to their workplace.
14. Formal awards are often used to recognise service contribution. In addition to formal awards, there are other ways to recognise service – these are mainly embedded in employment practices and can vary across employers.
15. Recognition of service at an organisational level can boost employee engagement and can help to strengthen an employees' sense of belonging. Evidence indicates that service recognition at an organisational level works best as a reinforcing factor alongside other employment conditions such as pay, workload, leadership quality, and job security, rather than as a stand-alone driver of workforce outcomes.¹
16. When all factors are combined and done well, it can support improved retention and well-being across a workforce.

Current approaches to recognising service

In New Zealand the honours system is used for national awards

17. In New Zealand, the Royal Honours system is a longstanding formal national framework, including the Order of New Zealand and the New Zealand Order of Merit, used to recognise a small number of individuals for exceptional service (but not long service).

¹ <https://www.gallup.com/workplace/349484/state-of-the-global-workplace.aspx>
<https://www.gallup.com/workplace/285674/improve-employee-engagement-workplace.aspx>
<https://www.deloitte.com/global/en/about/recognition.html>

18. The Honours Unit in the Cabinet Office administers the honours on advice from the Prime Minister. Anyone can nominate a person they think is worthy, meaning this approach is sector-agnostic. Between 2020-2024, 237 members of the health workforce received Royal Honours including clinicians, leaders, and community workers (around 13 per cent of all awards during this period).
19. In other countries, health workers are similarly recognised through their National Honours system.
 - a. In the United Kingdom, around 7-8 per cent of the Order of the British Empire and British Empire Medals are awarded to health workers annually, including doctors, nurses, and allied health professionals.
 - b. In Australia, health workers are recognised each year through the Order of Australia and related medals for contributions to clinical care, health policy, and public health, making up approximately 6-7 per cent of all recipients.
 - c. In Canada, health workers feature in the annual Order of Canada and Meritorious Service Decorations, typically representing 3-4 per cent of all recipients.

In New Zealand we have a range of approaches to recognise the health workforce

20. In New Zealand, formal approaches to recognition of service for the health workforce include:
 - a. Professional body awards – for example, the New Zealand Primary Healthcare Awards | He Tohu Mauri Ora, organised by The Health Media Ltd, recognises excellence and innovation in primary care. Healthcare providers are eligible for these awards including general practice, pharmacies, and Māori and Pacific providers.
 - b. Organisation and employer-led awards – for example, the Minister of Health Volunteer Awards, administered by Health NZ, to recognise volunteers in health services across hospital and community settings. Overall, these approaches deliver strong coverage across the health system and are well-suited to the workforce's size, diversity, and mobility.
21. Health NZ utilises long service acknowledgements, excellence and leadership awards, and quality improvement recognition at national and local levels. Health NZ also use formal and informal acknowledgments of staff and teams, including thank you cards, poster bouquets, sharing team and individual achievements.
22. Other health service providers use similar practices including employer- and organisation-led initiatives, team and peer recognition, cultural practices, tokens of appreciation and patient acknowledgement.
23. Together, these approaches deliver strong coverage across the health system and are well-suited to the workforce's size, diversity, and mobility.

Our recognition of the health workforce aligns with comparable countries

24. Other countries also use formal awards to recognise excellence and contribution for their health workforce specifically. Australia, Canada, and the United Kingdom have formal awards administered at national, sector, and regional level by government health departments and professional bodies.

25. Examples include the Victorian Public Healthcare Awards and the Canadian Nurses Association Awards. These are similar to New Zealand's Primary Health Care and Minister of Health Volunteer Awards.
26. The National Health Service (NHS) has long service awards at a local Trust (regional or organisational) level to recognise health workers individually and improve both performance and quality of care. The New Zealand equivalent award is Health NZ's long service acknowledgements and excellence awards.
27. The NHS also has a formal Staff Recognition Framework – a nationally administered and consistent framework dedicated to recognition for health workers. This scheme provides consistent national recognition across the health workforce and is made possible by the NHS's centralised structure and was embedded on 12 October 2023, established under the Health and Care Act 2022.

28. s 9(2)(f)(iv)

29.

30. New Zealand's recognition of the health workforce aligns with public sector dominated workforces. Other public sector dominated workforces in New Zealand also use varied approaches to recognise service. Education organisations and schools provide long service certificates and internal awards for teaching excellence, and the National Excellence in Teaching Awards recognise teaching quality and leadership.

31. The uniformed services (e.g., Police, Defence Force, Fire and Emergency) are different to most public sector dominated workforces in terms of service recognition. They have been delegated a specific sub-category honour for long service.

32. For example, members of the armed workforce who serve for the required period and have a record of good conduct and character are recognised by a long service and good conduct award. This award is governed by a New Zealand Royal Warrant in the New Zealand Defence Force Long Service Awards Regulations 2020 and sits within the Royal Honours system.

33. This is appropriate to their specific workforces, services, and traditions. The medallic culture of armed workforces' centres on formal awards and protocols that recognise and symbolise military personnel service, sacrifice, bravery, and longstanding good conduct. This differs from the education, social and community, and health sectors.

Analysis and recommendations

We have considered potential service award options to strengthen recognition

34. We have completed an options analysis to consider if an additional service recognition award is required. We considered the following options:
- A) Introduce a new award by creating a Long Service Medal for doctors, nurses, and other eligible health workers. This currently does not exist.
 - B) Expand service recognition through existing national frameworks – such as a specific Royal Honours category (or delegate an honours sub-category, similar to that of the uniformed services) for the health workforce.
 - C) Maintain the status quo and continue delivering the current mix of honours, awards, and employment practices.
35. Options A) and B) offer additional approaches to enable opportunities for recognition of service for the health workforce, particularly at a national level. However, these options may be poorly received at this time due to current workforce pressures being raised publicly by health workers and unions. s 9(2)(f)(iv), s 9(2)(g)(i)
36. The Honours Unit within the Cabinet Office provides advice on the appropriateness of new awards or sub-categories. They have advised us that they do not recommend that it is a priority to introduce a new award for the health workforce at this stage. They noted it is unclear whether options A) and B) would bring further benefit and may create duplication given the range of awards in place.
37. Options A) and B) carry cost implications. A low-cost medal could cost \$50 per recipient, as per the Cabinet Office's current costing for Defence Force medals. If applied widely and annually to 10 per cent of the health sector (around 200,000 workers), this could cost an estimated \$1 million, in addition to administration costs.
38. As outlined above, Option C) maintaining status quo through the current mix of honours, awards, and employment practices provides good coverage and aligns with international practice. It also avoids duplication and ensures recognition remains relevant and accessible.
39. Given the above, we consider establishing a new award is not needed at this time. We recommend Option C) maintaining the status quo, using our current set of service recognition awards to support the health workforce.

More can be done to recognise service through consistent employment practices

40. Continuing to use broader employment practices to recognise service for the health workforce is likely to be more suitable at this time than introducing a formal award.
41. However, there are further opportunities to ensure the consistency, reach, and visibility of these employment practices are implemented in the health system.
42. s 9(2)(f)(iv)

s 9(2)(f)(iv)

[Redacted]

- 43. As noted earlier, service recognition is most effective when combined with other employment factors such as pay, conditions and opportunities for progression.
- 44. As such, Health NZs initiatives are intended to sit alongside and reinforce the Health Workforce Implementation plan 2025/2026 which prioritises improvements in workforce pay and conditions.

Next steps

- 45. The Ministry and Health NZ will continue to support the use and visibility of existing approaches to recognition of service for the health workforce across the system. s 9(2)(f)(iv)

[Redacted]

ENDS

PROACTIVELY RELEASED