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| Health Workforce Webinar series Issues and opportunities for the Māori Health workforce | 7 November 2022 |

The following questions were asked during the **‘Challenges and opportunities for the Māori Health Workforce’ webinar** that took place on 7 November 2022.

### Equitable funding of our RN, RM and Social Workers is vitally important.  How do we ensure that our kaupapa Māori health providers have equitable funding to offer and retain their nursing / Māori health workforce?

* + It’s a great challenge for us at Te Whatu Ora, Te Aka Whai Ora and Manatū Hauora - there’s been historical underfunding issues.
	+ We’re working with our Māori providers as we review all contracts and try to ensure there is better pay equity for all kaimahi.
	+ The first step towards this is the recent announcement from Hon Andrew Little of $200 million in ongoing funding to increase pay rates for community-based nurses and lower paid healthcare workers.
	+ We welcome this announcement and the difference it will make to many Māori kaimahi, the Māori providers who employ them, and the communities they awhi and care for. Read more on this announcement https://www.beehive.govt.nz/release/government-takes-action-pay-parity-healthcare-workers
	+ In addition to this announcement, Te Aka Whai Ora recently announced new funding for primary and community providers that will provide additional support for them and their workforce. Read more <https://www.teakawhaiora.nz/news/te-aka-whai-ora-announces-71-6-million-funding-package-to-support-maori-providers-invest-in-te-ao-maori-solutions/>

### Will there be training in understanding Māori language for non-Māori speakers and providers?

* + The Te Aka Whai Ora DCE - Matauranga Māori will be starting before the end of the year. A key part of their work will be on tikanga and language opportunities for our kaimahi in the coming New Year.

### How can we access those who are in training to work part time in kaupapa services gaining skills and expertise, and a desire to return to services, especially when places like Te Whatu Ora and Corrections pay more?

* + Yes, pay equity is a major issue for our providers and this will have to be addressed and we are currently working on this.
	+ We will have further updates at our provider updates too as we progress options.

### What is going to happen when the current workforce is culturally unsafe? In my profession (dietetics) our regulatory authority is extremely culturally unsafe and has no insight into this. This makes it difficult to entice Māori to join the profession.

* + Yes, this is an issue throughout our health system and many others.  That was my reference to making sure that when we can lift the number of our people in the training programmes, we must ensure the spaces and places they go to work in are safe, culturally and organisationally.
	+ We will have equity measures that all parts of our system are accountable too.

### Can providers be funded to support staff to move from non-regulated to regulated work?

* + Implementing career pathways with flexible approaches for learning and skill development to enable kaiāwhina Māori to build capability is a key area of focus for Te Aka Whai Ora. This includes developing pathways, for example through staircasing, to enable development from non-regulated to regulated roles.
	+ Te Whatu Ora is in the development stages of this work.

### Can investment be coordinated regionally?

* + An operating model is under consideration by Te Whatu Ora

### How are we going to make sure that Te Whatu Ora will support whānau to use mātauranga Māori wellbeing in their care plans, e.g., birthing? In our area we have issues with RN RM and support personnel eroding the knowledge that our whānau have while birthing within their houses - this is an issue, as we encourage whānau to embrace tikanga, then tell them it is not able to be utilised.  Our colleagues in Te Whatu Ora need to do a lot of work in the cultural safety space in order for whānau to be safe and feel safe?

* + Cultural safety training is the responsibility of the whole system including Whatu Ora, Te Aka Whai Ora, regulatory authorities, and colleges.  Te Aka Whai Ora is also focused on growing mātauranga Māori visibility and action. mātauranga Māori visibility and action. This includes upskilling the Māori health and disability workforce to ensure they can demonstrate and foster mātauranga Māori capability and cultural safety in the workspace.

### In terms of pay parity.... with regards to the undervaluation or unrecognition of cultural capital that Māori staff are 'expected' to undertake or perform, should we use pay advancement rather being equal to those unable to provide such responsibilities?

* + Te Aka Whai Ora agrees with and supports the widely used definition of pay parity as meaning the same pay for the same job, regardless of who the employer is or the sector an employee works in. Te Aka Whai Ora is commencing mahi to understand the differences in funding provided to Māori health and disability providers compared with other providers across the sector.
	+ Information collected through this mahi will provide important insights into existing pay disparities and will be used to inform future pay parity discussions and developments.
	+ The undervaluation or recognition of the cultural capital/capability that a person brings to a role is a separate issue and not within the scope of the pay parity mahi. Cultural capital/capability relate more to an employee’s knowledge, skills and experience.
	+ If Māori cultural capability is ‘expected’ or a requirement/part of a role, then this should be reflected in a role’s job description with appropriate recognition of these skills through higher remuneration or advancement.

### Is it possible for Te Whatu Ora and Te Aka Whai Ora to mitigate losses of Māori "health" workers from other sectors including Education, NGO, providers of health e.g., GP services?

* + The Māori Health Workforce Action Plan is focused on growing the workforce across the spectrum of services provided by Māori health and disability kaimahi, including those delivering health and disability services across agencies.
	+ The Plan includes a focus on growing and retaining the existing Māori health and disability workforce through initiatives such as career development and mentoring/coaching programmes.

### Will our interests as kaupapa entities be leading workforce for ourselves rather than building a workforce for the current model?

* + Te Aka Whai Ora is committed to growing capability and capacity within the Māori health workforce and build a workforce and system that recognises and reflects Māori values and models of care.
	+ Extensive consultation has already been completed with whānau, hapū, Iwi, the health and disability sector and associated stakeholders to identify key priorities for the Māori health workforce development initiatives in the future, and this mahi will continue through ongoing engagement and partnership with a range of stakeholders including Iwi Māori Partnership Boards and local Māori communities. This includes supporting workforce development initiatives that are informed by Iwi/Māori communities workforce priorities, and which are delivered and led by them.

### Māori staff are often isolated and are at times viewed as activists or rogues. This is usually a result of systemic racism. Our Māori staff do not have a safe place to express these challenges, have these collated, have them assessed and then have them addressed. Can some consideration be placed on this? 'Datix' and its process is not safe.

* + Ao Mai te Rā: the Anti-Racism Kaupapa is a Ministry of Health initiative to support the way the health system understands, reacts and responds to racism in health. Eliminating all forms of racism, including systemic racism, is critical to achieving health equity and the vision of pae ora – healthy futures for all New Zealanders.
	+ Ao Mai te Rā is a comprised of two phases that will be implemented over the lifespan of Whakamaua: the Māori Health Action Plan 2020-2025. Phase one is a discovery phase focused on:
		1. building collective responsibility for addressing racism at all levels of the system
		2. building a shared understanding and shared language for what racism is and what effective anti-racism action looks like
		3. building an evidence-based anti-racism maturity model that supports individuals and institutions to take pragmatic steps towards anti-racism practice.
	+ Phase one will give us a better understanding of our current and future state, including identifying where pockets of best practice may already be operating. It will also help determine what effective or good anti-racist practice looks like in the health system.
	+ Phase two is focused on the design and delivery of new anti-racism solutions. The Ministry has adopted this approach because the way we frame and understand racism and the practical application of anti-racism in phase one will directly impact the types of anti-racism solutions we develop in phase two.

### Will Te Aka Whai Ora have the ability to improve the data gathering, monitoring, and overall reporting of the Māori health workforce?

* + The Māori Health Workforce Action Plan has identified data and evidence as a key priority area for action to improve the accuracy and reliability of data on Māori health and disability workforce as well as implementing Kaupapa Māori monitoring and evaluation frameworks to assess progress, inform decision making and drive improvements.

### Does the Māori workforce development plan include developing a Mataora workforce?

* + The Māori Health Workforce Action Plan includes Mātauranga Māori visibility and action as a key priority area, with a focus on developing a health and disability system that reflects Māori values and models of care.
	+ This includes developing career pathways into traditional hauora Māori roles as well as increasing awareness of and access into these roles.

### Where there has been notable improvement in workforce numbers and the percentage increase of Māori kaimahi - significant investment has been made (i.e., the medical workforce).  How bold will Manatū Hauora, Te Aka Whai Ora and Te Whatu Ora be in redistributing this investment so other key workforce have an equitable share of the putea?

* + Completely committed to improving all parts of the pipeline e hoa and will make sure we improve the overall investment across the board with the stepping up capabilities for our kaimahi are there.

### In terms of internship placements and supporting Māori tertiary health students, is there funding available for Providers/PHO's to support these placements to ensure efficient clinical exposure, particularly in primary care? Mindful of how busy clinics and services are at the moment, so the added workload, training and orientation to students by nurses may not be ideal.

* + We are currently reviewing the Health Practitioners Competence Assurance Act and expect to consult with the sector in the first half of 2023.

### Is the training workforce support a place for our Māori Women's Welfare League?

* + Absolutely and I would love to have a kōrero and connection with our Māori women’s’ welfare league.

