# Video transcript - Update on our work so far - 10 November 2022 - Health Workforce NZ webinar series

Kia ora Koutou Ko Maree Roberts tōku ingoa ko ate DDG strategy, policy and legislation and Manatu Hauora.

Thank you all for taking part in this webinar.

We really appreciate you making the time to spend with us on this important mahi.

Before we go any further, I'm going to start with an opening karakia.

This is one that we have for the Ministry of Health.

Whāia, whāia, whāia,

Ngā uaratanga o te Manatū Hauora.

Ko te manaakitanga

Ko te kaitiakitanga

Ko te whakapono

Ko te kōkiri ngātahi

Kia tae atu tātou ki pae tata, ki pae tawhiti, ki

​​​​​​​Pae Ora.

Kia tūturu ka whakamaua kia tīna, tīna!

Haumi e, hui e! Tāiki ē!

So this webinar was part of a larger piece of work that Manatu Hauora is running in close collaboration with Te Whatu Ora and Te Aka Whai Ora called the Health Workforce Strategy.

All questions and feedback from this webinar, the Health Workforce Dialogue event that is on in Parliament this Saturday 12th November and our targeted engagement will all feed into an overarching health workforce strategy.

Please use the Q and A button to ask any questions you might have and use the thumbs up button on questions that you want to be put forward.

You can start by putting your questions in from now and we will answer them towards the end.

For any questions we don't go to, please be sure that we would know that we will get to them following this webinar.

If you want to contribute any feedback to our work alongside this webinar, the Ministry of Health now has a new platform called Tatou.

It's a platform where you can contribute ideas and comments on how to address some of the workforce challenges you are facing.

The conversations currently being had on Tatou are really helping us to ensure we're considering a diverse range of perspectives held by the health workforce.

All feedback sent by Tatou will also be used to guide the Ministry's Overarching Health Workforce strategy.

So we'd like to ask you and your colleagues to visit Tatou.health.govt.nz.

Thank you.

Shortly I'll be handing over to our Director General of Health, Diana Sarfati who will be giving us a brief overview of Manatu Hauora's role after the Pae Ora reforms and how the three health agencies are working together to support the development of our health workforce.

I'll then be providing an overview of the strategic landscape for health as a result of Pae Ora and what we aim to achieve with the Health Workforce Strategic Framework to the end of the year.

Alison Bennett beside me will then lead you all through our thinking on how health workforce regulation can inform - enable the improvements that will fall out of that strategy.

Engagement opportunities like this webinar are really important to us to ensure that the strategic direction that we set is supported by the whole workforce.

However, I wanted to just take a moment to recognise and acknowledge that the workforce has been under significant pressure for some time.

The health workforce has been experiencing this pressure and it has only been increased by Covid-19 and winter illnesses.

Addressing health workforce challenges and ensuring we have a sustainable, skilled and well supported health workforce is a top priority for us and as you know, Te Whatu Ora and Te Aka Whai Ora are working to alleviate some of those pressures in the short to medium term, however, Manatu Hauora is leading on on the work for a medium to longterm planning strategy and policy.

I will now hand over to Di, who will speak about the Ministry's role in the reform system.

Thanks so much, Marie.

And Allison.

Kia Ora Koutou, thank you so much for making the time to come along to this webinar.

Clearly, workforce pressures and workforce issues is one of the most pressing issues facing the health system at the moment.

And that's true not only in New Zealand but globally.

This is a global issue and it's one for which there is no easy fix, but one that we're all really focused on working on and addressing.

Of course, in New Zealand we have an additional level of complexity, I guess, in that we are going through a significant reform process, but that reform process creates a lot of opportunity in the space as well.

So the system, as it's being structured now provides a basis to be able to respond in a way, in a more systematic way that may have been possible in the past.

It may be a little bit confusing, though, about who's doing what in relation to health work.

So I'm just going to very briefly outline the respective roles of the three agencies.

So, Manatu Hauora, the Ministry of Health, is the head steward of the health system as a whole, including the health workforce.

And so that means that our role is to provide strategic directions and to convene across the system to make sure we're heading in the right direction.

So that's things like making sure we've got the right regulatory and legislative settings that might impact on our ability to bring in or to trade, to deploy or to retain our workforce.

So it's kind of making sure the context is right and we've got a strategic view of the issues.

Te Whatu Ora is, of course, our primary delivery organisational mechanism and their goal is to work with the sector to identify where additional workforce might be required to develop workforce priorities and to keep moving forward in an operational sense.

Te Ake Whai Ora has a really important role, so that's a Maori Health agency - authority, I think I should say, Te Aka Whai Ora has a really strong focus on Maori health workforce development.

So they're developing a Maori health workforce strategy and they will be interested in working with both organisations to ensure a really strong focus on Maori health workforce.

All of three organisations are working really closely together and that's the strength of the current structure that we have a national view.

We can be working at a strategic policy, legislative, operational, clinical, all of those levels simultaneously to look at the scope of health workforce, the size of health workforce, the diversity of health workforce and how we can move forward.

So, great opportunities.

I will now hand back to Maree and Allison but thanks very much again for coming and I really look forward to hearing people's thoughts and ideas as we move forward.

Thanks so much.

So the health reforms set a new strategic direction for the health system and this year saw the enactment of the Pae Ora Act.

This act is a central part of the health reform process and as you can see here, the purposes of the act are to protect, promote and improve the health of all New Zealanders, achieve equity and health outcomes among New Zealand's population groups and build towards Pae Ora healthy futures for all New Zealanders.

The Pae Ora Act also sets out principles and objectives which are outlined here, including equitable access to services, equitable levels of service and equitable outcomes, engagement with Maori, opportunities for decision making by Maori, choices of services and protection and promotion of health wellbeing.

As you can see, the government set out its priorities in the Interim government State Policy Statement, which was published earlier this year, and developing the health workforce of the future was one of these priorities.

The Pae Ora Act requires six strategies to be made from July 2023 as part of the Pae Ora health reforms Manatu Hauora is leading the development of these six strategies.

These strategies will set out our health service priorities and system improvement over the next five to ten years.

In addition, there will also be a health outcomes framework that will sit alongside the strategy and set out the outcomes for people and for the system that will drive our focus and monitor our success in the future.

Manatu Hauora is also leading the development of a health workforce strategic framework to enable system change and prioritise decision making for the medium term.

Because workforce is a key component of all of these strategies, we are aligning the workforce strategy with all of the others.

We are aiming to set common expectations across all strategies on areas where consistency is critical.

We've put in place oversight arrangements with Te Whatu Ora and Te Aka Whai Ora to ensure visibility on progress and input into the detail of those strategies.

We've designed a coordinated programme of engagement on the health strategies and we're working with both entities to coordinate that engagement programme so that feedback is shared and issues are appropriately based when necessary.

And this is really important because as we go through this process of engagement, it's likely that people will raise things that are more about service enhancements or issues that are with the current system.

And we need to be able to feed those directly back to the appropriate agencies for action.

Things that would not be addressed within a strategic framework.

In terms of our engagement process, we just want to reinforce that people are at the heart of our health system.

We can't deliver the right services or achieve the right outcomes without putting people, communities and whanau at the centre of our planning.

We need to listen to all users of the health system, including people who we don't normally hear from, who don't see themselves reflected in the health system or are not well served by it.

We have specific obligations to Maori and we must also listen to the voices of people we know have experienced poorer health outcomes in this system.

So the Strategic Framework for Health Workforce Reform in December will provide the foundations to enable system level change and prioritisation of decisionmaking in the medium term.

There will be further work and engagement in 2023 to deliver a health workforce strategy alongside engagement and development of the Pae Ora strategies and the current review of workforce regulation that we're going to talk about shortly.

The workforce strategy for 2023 will provide a longterm ten to 15 year view of the system shifts that are required.

Just to be clear, we are going to have a health workforce approach framework before by the end of this year, and then we are going to have a health workforce strategy aligned into the other Pae Ora strategies in 2023.

Health strategies play an important role in a reformed health system.

At the simplest, our health strategies are about setting that long term direction for health and identifying priorities for change.

We envisage our health strategies, including the workforce strategy, will set the vision for health and describe what we want to see over the medium term.

They will describe the change needed to achieve that vision, drawing on assessment of the current state of health outcomes.

And they will set out priority areas in which action will be necessary to deliver that change.

They will also identify the types of actions or steps that government will prioritise to realise that ambition.

Health strategies provide the overarching direction and roadmap for change.

They inform and influence the decisions that government and the health system takes on what priorities they should undertake, when to take them and how to invest in them.

I think it's just worth noting that health strategies should not commit to a full suite of actions or require entities to undertake particular activities at a given date.

That is the role for the Government Policy Statement, as we have noted, which sets out government's requirements for entities in a three year period.

And then the New Zealand Health Plan Te Pae Tata, which sets plans and service for service improvements.

So engagement on those follows the strategy.

So there is a process, a logical process, that says we set the vision, we look at what the priorities are and then we set those actions in the New Zealand health plan.

So our workforce strategic framework.

Our framework will look at health workforce issues differently than in the past.

We're not just focused on the pipeline or workforce, but rather considering broader things such as availability.

Do we have enough?

Accessibility. Are they in the right place? Acceptability and responsiveness. Are they the right worker for that patient? Productivity.

Are workers motivated and empowered? And quality. Are they competent to do the work?

This framework takes into account New Zealand's unique population and circumstances.

I'm now going to hand over to Alison to talk about health regulation.

Thanks, Maree.

So, legislation and health legislation is a really critical lever for us in terms of how we want to shift the system and manage some of those health workforce challenges that we've been experiencing in the system.

It's also an amazing opportunity for us to actually look at how we can ensure that other complementary pieces of legislation actually enact Pae Ora too.

So one of the primary pieces that we have in the health workforce base is the Health Practitioners Competence Assurance Act, or commonly known as the HPCA.

And this is where we ensure that there is quality and safety of our health practitioners and they are competent and fits practise.

So we have the responsible authorities, there are 18 of those and they are really where the regulation of that health workforce comes into act and they really enact the HPCA as it stands.

And some of the responsibilities are really in terms of overseeing registration, setting scopes of practise, accrediting education providers and defining professional standards.

Now, as Di said, this is not just a unique situation for New Zealand but actually across the world.

Health regulation is a tricky matter and also in terms of health workforce shortages and other kind of challenges that they are experiencing.

So who has offered some guidance on occupational regulation which is outlined there?

And I would like to stress that we will take on board that guidance.

But actually, what is really important for us is that actually our legislation is fit for purpose for in New Zealand, and that means upholding Te Tiriti and other obligations.

That means that we can drive actual changes for New Zealanders.

Now, the Minister has asked us to have a look at the health workforce regulation and ensure that it meets the Pae Ora ambitions, but also that actually we have the skills and capabilities required for New Zealand.

And this means that we will kind of look at actually our whole regulatory environment.

And this is very much tied to that strategic framework that Maree set out earlier and looking around how we can use our legislation to drive better health outcomes.

We have heard and we've been listening, and I'd like to really stress that we're building on work that has actually gone before us, that we want a more responsive system, and that actually we need to reflect new models and models of care that are required in New Zealand.

So we need to be more coordinated, flexible and transparent with that in mind.

So when the team are going to undertake their review of the act, some of the things that we're going to be looking into is how we encourage new models here.

And that's to say that making sure that we can meet those attributes that Maree called out, such as acceptability and accessibility from New Zealanders.

Making sure that we maintain our focus on safety, but that it's proportionate to risk and that we are considering all those elements and that the framework is very much an enabling legislation.

What we also want to do is making sure that we are offering the best possible care to people across New Zealand.

And so that we're not actually the legislation is not a restricted element in terms of the provision of that care.

And also ensuring that we are capitalising and enabling innovation within our system and not having to change the law each time.

And of course that we are upholding our commitments and our obligations under Te Tiriti o Waitangi.

So we've kind of touched on this a little bit and this is what we are really wanting to achieve with this review is to understand where those silos are, where we're not getting as much flexibility as we need and where actually innovation is being constrained.

I think what we are really wanting to build on is our experiences in Covid-19, where we put in place new roles such as the COVID vaccinators which really capitalise on people out there across New Zealand that weren't traditionally in health roles and enabling them to actually vaccinate our population.

And we're looking around where we can actually also kind of capitalise on those different models of care and different practitioners, but also whilst ensuring that they are equipped and competent to provide the appropriate health care to meet our needs.

Another really critical importance is ensuring that we have the appropriate enabling system so that may be in terms of digital systems and other and also allowing for which is focused on upholding our obligations to kaupapa Maori models of care also and also enabling actually collaboration in that legislative space.

So there is really that the health workforce is part of the system as all the professional groups and service providers.

This also enables us to maximise the competence in the system and that's really where our ambition lies.

So where do we go from here?

I think this is really important that we are listening and that we are taking direction from the people that experience this on a day to day.

And this is where you all come in handy and so posing opportunities for us to take on board and also identifying issues where we can kind of go and explore and figure out in the review process how we may manage those.

This piece of work is very much tightly coupled with their work in the strategic development of the strategic framework.

And I think these two pieces will very much go forward side by side.

So this is where we kind of open it up for questions from you all and hopefully we will be able to have Marie and I will be able to answer them.

So we have a question here from Siobhan who wants to know is there a specific pieces of work that will address the health workforce straddles with several sectors like Health, Education, Disability and Justice and she's the example of speech language therapist.

Yeah, great.

Should we take that one, Marie?

So we've got this wonderful hopefully I'll answer that question directly.

We have this wonderful opportunity where Te Whatu Ora and Te Aka Whai Ora have stood up at Health Workforce Task Force where there are a number of initiatives that kind of look to drive and manage real critical workforce issues and projects.

That is coupled with the Strategic Framework Development which actually bridges all those elements from very much from a commissioning standpoint, a legislative standpoint, and also thinking about how we can really relieve some of those pressure points.

So we will absolutely be looking at this across from a system perspective, but also driving activity through where we can quite quickly through that Health Work taskforce. is a good question that we need to make sure that what we are doing in the system is lined out into those other connected systems.

So, for example, as I think the question posing the question said how it links to social welfare, the social workers, how we move into the education system.

So it is definitely our intent to make sure that there is work done to look at those interfaces with those other systems.

We have a question here from Kenny from the Medical Council, wants to know what work is the Ministry of Health and Ministry of Health doing with immigration to improve any barriers that settings may have on the international pipeline?

Yeah, great.

We have quite a close relationship with our colleagues at MBIE and through Immigration and so we're constantly working with them to review those immigration pathways to ensure that we have the right people coming through our doors and to remove any barriers that may have.

So we are working very closely with them and that is both from a Manatu Hauora perspective, but also the Task Force has a very specific focus on that too.

We've got a question here from Heneriata who wants to know how the three agencies are going to ensure that assessors of recertification and registration are culturally competent, to ensure that registrations are adequately assessed on the Yeah, great.

I think we've got a lot of work to do to ensure that we've got the right mechanisms in place to ensure that our workforce is culturally competent and it is certainly very much a priority for us.

So we'll be making sure that it is something that we are addressing regularly and through collaboration with our three entities.

So the question here from Moira wants to know about the strategies that are not the populations that are not specifically covered by the Pae Ora population strategies.

Is there going to be strategic work to include with this population?

Yeah, absolutely.

So the New Zealand Health Strategy is our core or anchor strategy, so that covers our aspirations for the entire health system in all populations and ensuring really important principles like equity for all populations are embedded into a strategic direction.

We have another one here fromHe wants to know what emphasis on safety will remain in the legislation and will it be will the safety of the public stay central to the gap?

Absolutely.

I mean, safety is the number one, number one practise that remains the big rock of what we're trying to achieve here and it's not something that we can trade off.

Absolutely.

Yeah, we're getting a number of questions on that one.

I think one of the questions that we're getting a lot through our engagement is how this regulatory review would be different to the 2019 review.

Great.

So I guess with the reform of the Pae Ora act, we need to make sure that we are building on what did occur in that review and ensure that actually it meets our context as of today and that we are taking to enable the system to work really well within the viewer Pae Ora.

So very much building on what was done and not starting from scratch, but certainly actually putting it within the context of where we are today.

Awesome.

Another question on Michelle about patient safety.

Just removing the barriers and reviewing legislation sounds very positive, but patient safety must be at the forefront of all workforce planning to help you ensure that.

Yeah, I think that's absolutely right.

I think hopefully our intention is that we engage with the people that are actually delivering care and so making sure that we are kind of looking across the board range of stakeholders to help us ensure that patient safety is number one.

And I think that transparency and engagement is really critical to this strategic framework development and also the legislative review.

Yeah, I mean, I think also it's not just about the work that we're doing in the strategies and the regulation.

Safety is an underlying principle through the Pae Ora Act and through the principles and objectives there.

And as we are going through this reform process, it's been something that's been top of mind, I think, for everyone.

The three agencies, the chief executives meet regularly and safety is one of the things that they are always thinking about.

There's also a Health Leadership Forum and they have safety and for most of their minds and the work they're doing.

So it's just important that it's not just this part of it, but it needs the whole system to make sure that it's a big solution.

Marama would like to know what sort of time frames we're looking at.

Great.

So the strategic framework for health workforce, we're aiming for the end of the year to have that drafted and then following the development of the Pae Ora strategies, we can start working on that much longer term view around the House workforce strategy, which we are aiming for by the end of next year.

The review of the HPCA will follow a similar pathway with advice to Minister early next year.

Gemma, like to know, are there plans to regulate kaimahi and other workers who are not registered under HPCA?

Yes, that is a really great question and I think we will be looking at that criteria by which health professions are subjected to statutory occupational regulation, but regulation will continue to be risk based on risk, but we need to think about all the broader range of regulatory mechanisms to ensure for potential implementation.

Awesome.

Melza wants to know more about cultural competency, which talked about and how that's going to be achieved practically and how we measure it?

Yes, that's a really good question.

I think that what we need to say is that we don't have all the answers here and we're at the beginning of the work, so we're expecting to be able to engage with the workforce and take guidance from you about where you see those things going.

Absolutely.

So, yes, we're open for a good discussion on those really important initiatives.

Robin wants to know she didn't see anything related to making practicing more attractive and retaining staff.

Also, is it covered in this work or is it somewhere else?

Absolutely, and thanks for that question.

I think what we haven't spoken about today is the variable other system leaders that we're considering under the strategic framework and I think retention, ensuring that we have great places to work and that is a very attractive place for people to work, is absolutely key.

And I think this is where our partnership with really comes to play.

So I think we will be absolutely focusing on things we can do in that space.

Joan has a question about the HPCA, makes the point that it is quite an enabling piece of legislation.

So is there a particular aspect of the act that we consider problematic and that's preventing us from doing what we're trying to achieve?

In any review of legislation, we want to make sure we don't throw out the good stuff.

The principles of that act are still valid and we want to make sure that we keep true to those.

I think the thing that has changed is the context in which we are doing this and we're always looking to make sure that our regulation is future focused and that it's flexible and can adapt to the changing environment of new models of practice and allowing people to do that.

So we are really keen to hear from the workforce about what parts of that act are really important to them and what they want to keep, whilst having a conversation about how we can make this as modern and flexible as possible and allow for that future state.

Thanks, Joe's asking about our reliance on internationally trained health practitioners.

Are there going to be any targets set to increase the proportion of practitioners training in Aotearoa?

Great question.

I think what we really need is that a workforce that represents us as New Zealanders and so we will be looking at all those opportunities and are an important contributor to our workforce, but we do need to make sure that we do have a representative workforce and also that kind of blends into the cultural appropriation.

So there are really important things that we don't have that we will need to identify ways forward on.

Yeah, I mean, the details of the here and now of that balance is something that I think the Te Whatu Ora are probably thinking about, but it's not something that we would play out within a regulatory or a strategic environment.

David Also from Medical Council wants to know about the HPCA review, whether there'll be a consultation draft of the amendment bill to enable feedback to ensure we get the best outcomes.

Consultation is a critical part of this, so I'm following our initial advice.

Obviously we'll be engaging through to that point and then we will go through a period of consultation.

Yeah.

And I think it depends on how we go forward as to what it is that we're consulting on.

So we don't want to commit into something until we know what it is that we want to consult on.

But we're committed to the consultation programme.

Absolutely.

Tina is asking about models of care and do we have examples of models of care that could be enabled by the changes?

So I think what we're doing is we need to ensure that we're working very closely with Te Whatu Ora and Te Aka Whai Ora and how they're commissioning services and various models of care.

We will need to draw on other live experiences where we can enable that through the legislation, but I think examples where in rural health settings, health practitioners do more.

How can we ensure that practise is safe and of good quality, but also enabled by the legislation?

The question here on might be a bit premature about the structure of whether changes might be, would we be setting up formal funding structures for all scopes of practices to assist with the training and registrar?

I think, as I was saying in the description about the strategic process and then setting regulation in that that then flows into Te Pae Tata, the New Zealand Health plan.

And that's the place in which we can look at where government wants to prioritise and action things out of this.

So decisions about where funding is should be led by this process, but will be enacted out through the budget processes, ending through the question here from Michelle.

Again, the reviews and strategy in theory sound positive, but regulation plays an important part, if not the most important part, of ensuring competency and patient safety.

Engagement of regulatory bodies is essential as a health work or force representative associations and society.

I think just making that point again that we want to keep patients safety at the core of the new reflation.

Absolutely.

Thank you, michelle, there yeah, you're making a really good point and I think that what we're saying is.

That we're coming here today to talk about this because we're right at the beginning of the process and what we're really wanting to do is hear from you, who we should be talking to, what is really important for you, how you see this playing out in regulation.

It's only any good my experience of regulation if it actually works for the people it's working for.

So we are designing it for the workforce, for you, then it's not going to work.

We've had a lot of questions in our engagement about the decision making of the regulators and the timeliness of those anything that we're going to be able to do.

Yeah, I think that's one of the things that we need to look at and to ensure that the process is agile and flexible and looking at that decision making will be a key part of this.

Yeah.

And I don't want us to get too tied up in the fact that regulation is just the only answer.

While it's important as a bottom line, absolutely.

We need to make sure that we've got it and we've also safety in the system, that we are in a really exciting time in terms of we've got a health reform going on right now and we've got a chance to embed new ways of working into the system and that can happen now.

And I think when I was in my presentation, I was saying we want to make sure that we have this process that can feed in here and now to the way that Te Whatu Ora and Te Aka Whai Ora are designing these services and the way they are commissioning services.

So we don't want to wait for the regulatory process to go through to have those changes.

A lot of those things about how we work are not about the regulatory environment, they are about how we design our services and how we commission.

Is that it?

Well, thank you very much.

If you've got thoughts and feelings as you proceed through your day and even over the weekend, brushing your teeth is where I have my good ideas.

Please go to tatou.health.govt.nz, which is up on the screen there, have a look through the ideas and opportunities that people have put forward and see whether you total call them or feel that there is flight amendments or comments that you'd like to make on them, or support for them or even add your own ideas and opportunities and really welcome you to engage on that platform and otherwise.

Really thank you very much for attending.

I'm going to pass over to Marie to close us out today.