DRAFT
Northern Region
Workforce Planning and Development
Strategic Plan
INTRODUCTION:

To support the vision of “mental health and wellbeing is everyone’s business” the Ministry of Health (MoH) released “Rising to the Challenge” – The Mental Health and Addiction Service Development Plan – December 2012.

Rising to the Challenge provides an impetus for mental health and addictions services to increase national consistency in access, service quality and outcomes for people who use services, for their families and whānau and for communities.

The success of the vision for mental health and addiction services moving forward will be reliant on the skills and motivated workforce. Strong leadership and commitment to implementing change and active engagement of a systems wide approach with greater integration across health, justice, education and social services is required.

BACKGROUND

The shift to a whole of system, nationally consistent approach to workforce development will support the achievement of Blueprint II and Rising to the Challenge as will focusing on the Ministry of Health imperatives outlined in the Mental Health (Alcohol and other Drug) Workforce Development Framework (MoH 2002).

The Five strategic imperatives\(^1\) are:

- Workforce development infrastructure
- Organisational Development
- Recruitment and Retention
- Training and Development
- Research and Evaluation

The five strategic imperatives remain relevant from 2013 and in addition the Ministry of Health has clear expectations that health and disability services will increasingly demonstrate effectiveness in terms of:

- Value for money
- Service Integration
- Reduced health inequalities (and)
- Service Access

These four expectations feature prominently in “Rising to the Challenge” and to support a nationally consistent approach with local solutions, Health Workforce New Zealand works closely with Te Pou (National Workforce Development Centre) to provide resource and support to the four regions (Northern, Midland, Central and Southern).

The role of Regional Workforce Planning Lead (RWPL) was established in May of 2013 to align with the MoH’s Rising to the Challenge – Service Development Plan expectations and support regional leadership.

The Regional Workforce Planning Leads are charged with working regionally to:

\(^1\) Tauawhitia te Wero, Embracing the Challenge, National Mental Health and Addictions Workforce Development Plan 2006 – 2009

2 | P a g e
• Support building a strong and enduring workforce for the delivery of mental health and addiction services to all people; and
• To foster a culture of continuous quality improvement in which information and knowledge is welcomed and used to enhance recovery and service development.

In the Northern Region, this is being supported and progressed through the development of a Regional Governance Group.

NORTHERN REGION SNAPSHOT

Total Northern Region Population

Northern Region Population n=1582887

Northern Region Population by Ethnicity

Northern Region Population by Age
International research indicates there is an increasing demand on changing the way mental health and addiction services are delivered. Identified issues include:

- Workforce shortage with a need to build both capacity and capability
- The prevalence of indigenous models of service delivery
- Participation and involvement of service users and family/whānau at all levels of service delivery.
- Evidence based programmes and practice
- Increasing devolution of funding to support early intervention through primary care services
- Tighter regulation of professional registration
- Preference for a multi-disciplinary approach to service delivery
- Greater demand on services
- Greater demand for efficiencies
- Greater demand for collaboration and inter-sectoral co-ordination

These issues are reflected in the New Zealand setting also.

The New Zealand Mental Health and Addictions sector has made huge progress since the development of the Blueprint.

Moving forward – 2014 and beyond, the sector is being asked to deliver services in an increasingly fiscally tight environment with greater community demand and higher acuity levels than services have been catering for.

The development of the workforce across the sector is required to support the changes that are being demanded of services in the next decade.

Government priorities are outlined in a number of strategic documents.

**Blueprint II:**

There focus is on four population groups and a whole of life cycle approach:

- People with low-prevalence conditions and/or high complexity
- Infants, children and youth with high-prevalence conditions
- Adults with high-prevalence conditions
- Older people with high-prevalence conditions

Blueprint II in addition focuses on services working collaboratively, providing seamless and consistent services

**Areas impacting on mental health and addictions sector.**

- Housing
- Income
- Education
- Employment
- Justice
**Ministry of Health priorities:**

As a part of the wider government strategy to develop a better performing public sector, the Ministry of Health have been focusing on the development of a health sector that is increasingly more innovative, efficient and focused in terms of delivering against New Zealander expectations.

Priorities for the mental health and addictions sector are:

- Youth Mental Health Project
- Vulnerable Children Work stream
- Driver of Crime programme with a focus on Conduct Disorders and Alcohol and Other drugs
- Youth Forensics Services Development
- Suicide Prevention Action Plan Implementation
- Whānau Ora Initiatives
- Welfare Reforms

**Rising to the Challenge:**

The primary focus of the Rising to the Challenge plan is to assist health services across the spectrum, from health promotion through primary care and other general health services to specialist mental health and addiction services, to collectively take action to achieve four overarching goals. The arching goals are summarised in this table.²

<table>
<thead>
<tr>
<th>Overarching goal</th>
<th>Results we wish to see</th>
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<tbody>
<tr>
<td>A</td>
<td>Increased value for money</td>
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<td>B</td>
<td>Enhanced integration</td>
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<td>C</td>
<td>Improved mental health and wellbeing, physical health and social inclusion</td>
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<td></td>
<td>Disparities in health outcomes addressed</td>
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<td>D</td>
<td>Expanded access and decreased waiting times in order to:</td>
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<td>- avert future adverse outcomes</td>
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<td>- improve outcomes</td>
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1 Rising to the Challenge: The Mental Health and Addiction Service Development Plan 2012 – 2017, MoH, pg 5
iii. our growing older population

• support their positive contribution in the home and community of their choice

Regional Health Plan:
Workforce priorities within the Northern region are informed by key strategic documents including Blueprint II and The Mental Health and Addictions Service Development Plan – Rising to the Challenge. The Northern Regional Health Plan workforce objectives include:

- Enabling workforce flexibility and affordability to manage rising demand
- Building and aligning capability of the workforce to deliver new models of care
- Growing the capacity and capability of the Maori and Pacific workforce
- Building a workforce that engages effectively with the community it serves
- Promoting advanced practice roles and working at top of scope
- Adopting a stronger regional HR approach.

Workforce priorities for 2014 – 2015 focus on identifying requirements to deliver the adjusted and/or enhanced models of care in:

- Youth Forensics, including application of additional FTE
- Eating disorders service
- Acute perinatal and infant mental health services

MINISTRY OF HEALTH KEY WORKFORCE PRIORITIES 2012 – 2017

National workforce plan:
Health Workforce New Zealand are developing a document which aligns current workforce activity with priorities outlined in Rising to the Challenge and other key strategic documents with a view to supporting achievement of the objectives.

This will support identifying:

- Workforce skills and competence required in order to deliver the plan taking into consideration:
  - New ways of working to make best use of the workforce
  - New roles to complement existing staff groups
  - Future services, and changing demography and future demand for services
- Education, training and development requirements
- Strategies to recruit and retain people in the workforce, including strategies to address any specific workforce shortages
- Mechanisms for the Ministry of Health to track progress in implementing the workforce plan.
DISTRICT HEALTH BOARDS SHARED STRATEGIC PLAN FOCUS

Regional:
- Strengthening regional collaboration
- Improving primary-specialist integration
- Better use of resources/value for money
- Care closer to home

Shared District Health Board strategic priorities 14/15 year:
- Increased integration/collaboration with Primary Health
- Workforce development
  - Co-ordination/excellence/expansion/extension
  - Service User Focus
  - Resilient, competent and effective
  - Recruitment and retention
### Northern Region Health Plan Specific 15/16

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<thead>
<tr>
<th>Action</th>
<th>Governance Group Lead</th>
<th>Strategic Alignments/Notes</th>
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<tr>
<td>1. <strong>Develop a regional Suicide Prevention Training Framework</strong>&lt;br&gt;Areas to be addressed:&lt;br&gt;• Training requirements&lt;br&gt;• Training availability&lt;br&gt;• Networking and collaboration&lt;br&gt;• Whole of systems approach – how is primary care/education/justice/CYF’s etc factored into a training framework</td>
<td></td>
<td>Regional linkages and approaches are required to make any Training Framework effective. There is support and resource from a variety of avenues available and these should be explored to ensure the whole of system approach. Project Brief Developed</td>
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<tr>
<td>2. <strong>Identify workforce requirements to support the implementation of:</strong>&lt;br&gt;• Emerging frameworks for a Youth Forensics Model of Care&lt;br&gt;• Acute Perinatal and Infant MH Service Options&lt;br&gt;• An adjusted Eating Disorders Model of Care</td>
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<td>3. <strong>Identify and implement agreed recommendations from the Maori Mental Health and Addiction Workforce Stocktake</strong></td>
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<td>4. <strong>Supporting Growth of the non-regulated workforce</strong>&lt;br&gt;• Develop an awareness campaign to support the new Careerforce qualifications framework targeting the non-regulated workforce development process – alignment with scholarship access</td>
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<td>5. <strong>Supporting the growth of the Maori and Pacific Workforce</strong>&lt;br&gt;• An awareness campaign is developed and implemented regarding access for maori to scholarships and supports available through national Workforce Development Centres and other regional health initiatives</td>
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<td>6. <strong>Developing Competency and working to top of scope</strong>&lt;br&gt;• Develop and publish a framework that support mental health and addictions staff to work to top of scope</td>
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<td>7. <strong>Supporting NGO workforce capability</strong>&lt;br&gt;• Develop and deliver Regional workshops to NGO’s in line with Getting it</td>
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<td>Note: Currently working with two NGO’s but this requires a more regional approach. Alignment with Navigate and Profile work plans</td>
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<td>Right approach and support NGO’s with the development of a strategic workforce development plan.</td>
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<td>8</td>
<td>Work with DHB’s and NGO’s to review the More than Numbers stocktake data and use this to inform strategic workforce development within the Region.</td>
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**More than Numbers Specific Activity**

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<th>Theme: Workforce (General)</th>
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<td>• Assess whether the distribution of roles across the DHB and NGO services reflects the needs of the population now, and in the future, taking into account future anticipated needs. Include the impact of current vacancy.</td>
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<th>Theme: Workforce and Service challenges</th>
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<tr>
<td>• Identify specific recruitment and retention issues relating to Maori and Pasifika staff in clinical roles</td>
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<td>• Support all Northern Region DHBS to have a strategic Maori and Pacific strategic recruitment strategy</td>
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<th>Theme: Knowledge and skills</th>
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<td>• Assess whether the workforce and service challenges reported in the survey have a negative impact on service delivery</td>
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<td>• Apply the skills and knowledge analysis to individuals to ascertain whether the organisational management perspective reflected in the survey is also an on-the-ground perspective</td>
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<td>• Work towards reporting on staff competency level for mental health and AOD services</td>
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<td>• Support the 2015 Te Pou and Matua Raki workforce census to assess these levels</td>
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<th>Theme: Peer Support</th>
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<td>• Develop a regional strategy to build the peer support workforce</td>
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<td>• Develop and support a regional approach to the utilisation of the Peer Workforce Competency Framework</td>
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| Theme: Ethnicity of the Workforce | Northern Region Health Plan | |

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| • Develop a standardised approach to the identification of workforce ethnicity across all DHB's  
• Collect Ethnicity data from the four DHB's which includes current staff and provides for new staff data collection  
• Focus systemic data collection on:  
• Ensuring all DHB's are asking the right questions  
• Ensuring ethnicity data collection is not optional  
• Collection data of current staff for who this information is currently missing  
• Processes for extending data capture into primary and community care setting | | |

### Alignment to other NRA and DHB activity

| Supporting the Growth of the Maori and Pacific Workforce:  
Collect ethnicity data systematically, by:  
• ensuring all DHBs are asking the right question  
• ensuring the ethnicity question is not optional  
• Systematically collecting ethnicity data of existing employees for whom this information is missing  
• Extend data capture into primary / community care | Data collection issues have been identified through a variety of avenues including the Maori stocktake collection and the More than Numbers stocktake. These issues are not specific to Mental Health and have been identified in the Regional Workforce implementation plan | Alignment to MTN ethnicity of the workplace |

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