Health Workforce New Zealand
Enabling and sustaining our future health system!

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The NZ Health Workforce

• Our most valuable....... and most expensive resource (70% of total healthcare costs i.e. >$12b annually ).

• .....by definition....**strategic** in nature, but our current interventions tend to be single-point and tactical in nature.

• Exacerbated by the fragmentation and lack of alignment in our sector.

• A very small part of an ‘international workforce’ and thus subject to the vagaries of events of global significance.

• Further exacerbated by its own layering, complexity and diversity.

• Surely...... the **FUTURE** of our future health system
Health Workforce NZ

Two Operating ‘Arms’

- Workforce Investment and Training
  - Funding of post graduate professional training ($180m) for all workforces
  - Sector planning for workforce maintenance and sustainability
  - Manage the various in-place programmes and interventions

- Workforce Development.
  - HPCA Act Management
  - Development of future workforce
  - Workforce data and intelligence
Our Role

- Fund postgraduate professional health training
- Develop ‘extension of scope’ professional opportunities
- Assess workforce needs, suitability for purpose, and lead future planning.
- Work closely with stakeholders (training organisations, employers, unions, associations, etc.) to develop a coordinated approach to resolving workforce challenges.
- Provide workforce coordination, and where appropriate, leadership.
- NOT be ‘all things to everybody’!!!!!!!!!!!!!!
- Advise Minister, DG, DHB’s and the wider sector on WF issues.
Recent modifications to Our Role

• Extend scope to include all the health workforce and leadership/management

• Move to multiple-source, data-based intelligence analysis and assessment of workforce needs

• Setup structured programmes of work for each professional ‘cluster’

• Ensure wide stakeholder participation in programme oversight and governance

• Establish a small action-oriented work group for each programme

• Spend time with stakeholders (and health employees!)
HWNZ workforce taskforces and work programmes

- Medical
- Nursing
- Allied Health
- Midwifery
- Kaiāwhina (care and support workers)
- Managers and Leaders

Interdisciplinary priorities:
- Aged care
- Cancer Steering Group
- Maori workforce
- Mental health
- Pacific workforce
- Primary care
- Other Ministry of Health initiatives
Some of the Issues

• Data, intelligence and wisdom!

• Multiplicity and confusion of contract/stakeholder management

• Myths and legends

• Lack of focus of wider stakeholder group on workforce issues and impacts.

• Fission of the sector!

• Traditional thinking (professions, training orgs, employers, etc)

• Absence of coordinated ‘new models of care’ thinking and planning

• Assumed powerlessness
The bits we need to challenge and fix

- Models of Care
- Prioritisation
- Galvanising and aligning the virtual resources of the sector
- Simplifying, removing, cull and bury.
- Resistance to change
- Tight – Tight - Tight micromanagement tendencies
- Perennial busyness
- “Changing the wing while flying the plane”
- Duplication and preciousness
The bits we need to challenge and fix

• Our Victorian models of doctor-centric, white middle class, factory based delivery of healthcare.

• Out of date employer expectations on employees

• Unrealistic employee expectations on employers

• Healthcare versus wellness care

• The cross-sector drivers of true community wellness (education-social sector-health-justice).

• Traditional expectations and rights that we have to healthcare.

• We need more money!
NZ Healthcare costs vs GDP
US Healthcare costs vs morbidity/mortality
Current initiatives

- Workforce Taskforces
- Maori and Pacific Workforce Programmes
- Increased focus on proactive intervention (PGY1’s, RCGP’s, Deans)
- Stakeholder meetings (DHB’s, CEO’s and Chairs, Associations, RA’s, etc.)
- Increased focus on contracts, contracting and contract management
- Health of the Health Workforce Report
- Numerous others (e.g. Data and Intelligence Programme, Primary Care Model of Care, etc.)
Current initiatives

• Increase focus on data, analysis and intelligence, and getting this information to employees.

• Resolve or mitigate individual health workforce priorities/issues.

• Enhance stakeholder participation in, and ownership of, workforce development initiatives.

• Challenge paradigms and develop new models of care, fit for future purpose.

• Think nationally but act regionally

• Get ready for the post-GFC global economic correction that is certain to come.

• Actively working with TEC to enable sound strategic education investment.
The Future

- NZ has an enviable, world class, healthcare sector
- Comprised of dedicated and committed healthcare workers
- Our training and study-support systems are some of the best in the world (easily the best in terms of value for $ cost).
- We are a very small workforce operating within a global economy.
- There has to be enough money (because there is no more!), but we do need to do things differently ("sacred cows make the best hamburgers")?
- Recognise that there is a) not one size fits all and b) no silver bullet solution
- Divide and fall, or synthesise and succeed?
The Challenge

How can we, working together, develop an informed, planned approach to a sustainable health workforce, with promising career opportunities, that is delivering the best healthcare possible?