

## New roles, new workforce

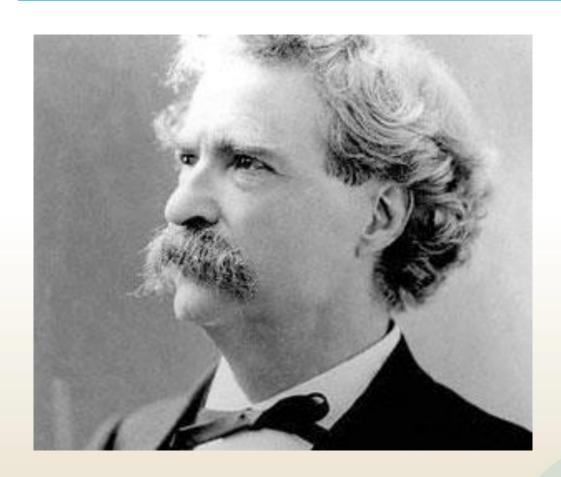
Presentation to "Shifting Care Closer to Home: how do we transform"

Te Papa, Wellington. 28 February 2018

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### **Statistics**





#### Health workforce forecasting

#### **Mark Twain:**

"Most people use statistics like a drunk man uses a lamppost; more for support than illumination...."



### The first leg of the stool





# Risks of being solely profession specific in our workforce planning

- Assuming that the model of care and scope of practice will remain the same in the future
- Slipping into focusing on individual professions in isolation of the context of care and collaborative practice within and across teams or locations;
- Allowing professional lobbies to drive investment;
- Failing to recognise the contribution of the unregulated and NGO workforces that are difficult to capture
- Having little consideration of the attrition, retention and distribution of our workforce;
- Reinforcing our unmet health need with access and equity issues remaining unaddressed.



### The second leg of the stool





#### Needs based workforce planning

- puts people and health need at the centre
- age, gender, ethnicity,
- deprivation,
- rurality score, DHB region
- available number of GPs and nurses in a practice,
- copayment price
- avoidable hospitalisations case weights (\$211 million in 2016)



#### Then overlay the workforce perspective

- examine relationships between ASH events/patients and workforce availability
- work to identify where access needs to be improved
- identify where models of care are working well
- or where the model (or barrier to care) is not working so well and whether this calls for:
- new models of care
- greater integration and collaboration across and within sectors, disciplines and communities
- make the most of our regulated and unregulated workforces to work to the full extent of their scope and work together to improve access and health outcomes.



# The third leg of the stool: fit for purpose training and retaining our workforce





#### Questions to regularly ask ourselves

- Is the existing model of care fit for now and the future?
- What do consumers and patients actually want from their practitioner and health services?
- Are educational and vocational training pathways aligned with the needs of the health sector?
- Do we have the skill mix, competencies and diversity we need to meet our population's needs?
- Are we making the most of our available workforce?
- Does the way we fund and contract encourage the most effective workforce and service practices or do we create unintended consequences?



#### More questions.....

- How do we attract and keep health practitioners?
- How to attract them to where we need them the most?
- Do we understand the patterns of attrition?
- What are we doing to build health literacy and self-care?
- Are we supporting the development of roles that are more preventative in focus but more difficult to measure?



## **Health Workforce New Zealand – Partnering with the sector**

- Workforce forecasting and needs-based workforce planning
- Development of New Zealand Health Workforce Strategy with the sector
- Legislation to extend prescribing powers and scopes of practice
- Funding \$187 million training and workforce development
- \$10 million Vocational Funding Innovation Fund to support training and workforce development to foster primary care collaboration with a focus on addressing inequalities and improving health outcomes
- Strengthening training pathways, system capacity, maximising the use of technology, remote and virtual care
- Supporting and retaining our workforce, attraction and support in hard to staff areas



#### **Workforce planning framework**

- Define the problem
- Conduct the impact analysis
- Scope the project
- Horizon scan and analysis (include what are the barriers we have to overcome)
- Identify the drivers for change
- Identify intended goals and benefits of change
- Map potential service change
- Plan for the proposed workforce change
- Monitor, review and refresh the forecast.



## www.moh.govt.nz/our-work/healthworkforce

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