Maori Health Workforce Strategy

October 2005
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**Introduction**

This Strategy is a framework to bring focus and momentum to the development of the Maori health workforce in MidCentral District over the next six years. The Strategy is also designed to align with national and regional Maori health workforce initiatives.

The Strategy’s action plan “The First Part of the Journey” contains five goal areas and initiatives which attempt to meet current Maori health workforce aspirations while also laying the foundation for longer term development for the Maori health workforce in the sector.

The Strategy encourages and values ownership by iwi/Maori and mainstream stakeholders of Maori health workforce development while recognising MidCentral District Health Board’s (MidCentral) role as facilitator and enabler of the Maori health workforce.

Ultimately the Strategy aims to ensure that the capacity and capability of the current and future Maori health workforce is able to respond to the Maori health needs in MidCentral District and therefore improve Maori health outcomes.
Section One: Setting the Scene

Seeking improved services and quality of care within the health sector will require a planned approached to investing in change that will be gradual. At the heart of change is the consumer who requires care.

Planning forward means reviewing existing key national and district strategies. This Strategy has examined current and past information to signal the direction that it expects to move in to develop the Maori health workforce.

This section considers the views nationally and locally. It builds in the comments made at the District’s stakeholder forums and summarises the key gaps in workforce planning that are important to this Strategy.

1. OVERVIEW

The development of the Maori health workforce is a strategic priority for improving local responsiveness to Maori consumers and Maori service performance in MidCentral District. It is also regarded as a key issue by both Maori and mainstream health providers of the primary and secondary care sectors. As a result, this Strategy was collaboratively developed by MidCentral and local stakeholders having recognised the mutual benefits in a cross sectoral approach to local Maori health workforce development. The Strategy is therefore also intended to be collectively owned, driven and applied in both primary and secondary health care sectors, and by MidCentral and mainstream and iwi/Maori health providers.

2. A REVIEW OF THE LITERATURE

Health workforce planning in New Zealand is characterised by an overall paucity of robust information on health workforce needs. This is a difficulty faced by national and local Maori and mainstream health workforce planners generally. This Strategy has referred to what literature is available on local health workforce and population needs below. Advice from stakeholders’ institutional knowledge also underpins the Strategy.

MidCentral’s District Strategic Plan 2002-2012 was informed by a health needs assessment conducted in 2001. Key shortages for the Maori health workforce were identified as was the overall conclusion that Maori living in the District suffer poorer health status than non Maori and therefore have the highest health needs of any ethnic
MidCentral’s population is characterised by slightly larger than average percentage of Maori (estimated 17% in 2001) although this is forecast to increase markedly in the next 20 years.

2.1 National Maori Health Workforce Development

Nationally, Maori health workforce development is a key strategy for supporting Maori participation in the health sector. The Maori health workforce faces challenges given changing disease patterns, infrastructure and health sector changes, disparities in health status and increasing shortage of appropriately skilled workers.

The following short summary of national Maori health workforce literature provides background that informs the alignment of this Strategy to a broader national Maori health workforce development approach.

District Health Boards New Zealand’s (DHBNZ) Workforce Plan, the Maori Health Workforce Initiative and the Health Workforce Advisory Committee have made high level recommendations to the Minister of Health to progress Maori health workforce development by:

- Including requirements for Maori capacity building in workforce plans
- The development of “preferred employer criteria”
- Requiring the ongoing education and development of existing Maori health practitioners
- Considering second chance health education initiatives, including work experience and internships for Maori.

He Korowai Oranga–Maori Health Strategy contains a broad overarching Maori health workforce objective to:

“increase the number and improve the skills of the Maori health and disability workforce at all levels”.

Raranga Tupuake, the draft national Maori health workforce development plan sets the overall direction for a coordinated and consistent approach to the development of the Maori health workforce at a national level. Raranga Tupuake contains 15 key objective areas. It requires regional and local Maori health workforce plans to be cognisant of the objectives that work towards Whanau Ora.

The Central Region Maori DHB Managers Draft Maori Health Workforce Development Plan 2002-2005 is a regional District Health Board response developed before Raranga Tupuake. It provides a most useful framework to inform this Strategy. Three key
drivers were identified in that plan:

- **Building capacity** by using robust information that informs targeted approaches in line with national and local workforce need
- **Strengthening capability** through the investment in the growth of Maori workforce in the areas that have been identified as high need
- **Commanding competence** that grows people to respond to the high acuity and emotional needs of whanau and influence the improvement of coordinated care.

The drivers are underpinned by key initiatives as follows:

<table>
<thead>
<tr>
<th>Capacity</th>
<th>Capability</th>
<th>Competence</th>
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<tbody>
<tr>
<td>Establish a regional benchmarking tool</td>
<td>Invest in growing capability in the areas of high need</td>
<td>Foster Maori leadership regionally</td>
</tr>
<tr>
<td>Develop a Maori workforce profile</td>
<td>Develop a strategy that promotes central region as the employer of choice</td>
<td>Identify the training needs of the current workforce</td>
</tr>
<tr>
<td>Develop a prioritisation framework</td>
<td>Share human resource capability regionally to fully utilise and retain critical mass</td>
<td>Coordinate the access to education and development opportunities</td>
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<td>Determine levels of responsibility</td>
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### 2.2 Local Health Workforce Planning

MidCentral’s Workforce Needs Assessment noted that:

- General national workforce statistics for most professional groups nationally were incomplete or out of date. Local workforce statistics are therefore few and far between and even less so for the Maori health workforce
- There are identified skill shortages of Maori General Practitioners (GPs) and nurses, Maori community workers and diabetes specialist nurses
- Short to medium term investment is required in Maori community health workers particularly for health promotion/early intervention and long term planning investment for Maori GPs and nursing. More Maori community workers are needed to encourage use of existing medical and dental services among Maori.

The assessment also noted that MidCentral’s Primary Health Care Strategy forecasts a move away from specialised, focussed health care to a greater emphasis on multi disciplinary primary health care teams. The assessment found that the iwi/Maori
health providers’ team approach fits well with the required interdisciplinary focus of primary health care teams. Consideration should be given to developing this model with iwi/Maori health providers.

MidCentral’s Workforce Development Strategy provides three key priority areas:

- workplace information
- coordinated relationships
- building strategic capacity.

Specific links to this Strategy include:

- a commitment to the agreed initiatives under the regional Maori health workforce plan
- continued support for cultural safety training and Treaty education
- support for attendance of staff at targeted Maori health programmes at Massey University.

MidCentral’s Primary Health Care Strategy goals significantly impact on the configuration and requirements of MidCentral District’s future workforce. A Maori specific outcome in that strategy is:

“Services for Maori by Maori will be enhanced through the transfer of specialist skills and knowledge from the secondary to primary sector.”

In addition, changes to Maori participation in governance and service delivery arrangements across the primary health care sector through the following objectives have foreseeable implications for the Maori health workforce:

- Ensure all providers are able to provide appropriate and effective primary health care services to Maori
- Increase, over time, the scope of primary health care services provided for Maori by Maori
- Ensure active Maori participation in primary health organisations at governance and provider levels and through community involvement. Also ensure active Maori participation in sector planning and policy.

The strategy also refers to specific Maori outcomes, of which one requires the significant reduction in diabetes, heart disease, respiratory illness, cancer and depression and improvement in oral health. It requires a coordinated, district wide plan for the prevention and management of these diseases. Maori health needs impact on the management of all high health priority areas.
2.3 Capturing the Views of Maori and Mainstream Health Providers

MidCentral Iwi/Maori Health Providers’ Issues and Expectations

The benefit of a local Maori health workforce strategy is that it can more readily capitalise on its closeness to Maori structures, such as whanau, hapu, iwi, marae and runanga by utilising them to help achieve broad Maori health outcomes. The structure and composition of MidCentral District’s iwi/Maori community and the wider community also presents an opportunity to provide a unique local approach Maori health workforce planning and development. MidCentral is fortunate to consist of strong marae based iwi, whose social, economic and political structures are operating and led by exemplary Maori health leadership. It also has the emerging presence of matawaka health organisations.

Iwi/Maori health providers’ expectations for MidCentral District’s Maori health workforce need to be considered in this Strategy. Their key issues are summarised under the following topics:

**Strategy:**

- A strategy needs to survive structural change. Local iwi have a culture of long term planning and have already seen the benefits of taking a robust, considered long term strategy for iwi. Concerns are centred on whether the term of the Strategy will assist longer term Maori health workforce goals.
- Maori health workforce is perceived as unregulated and fractionalised eg, the labour market of Maori health workers driven by high demand.
- Working together and collaboratively is needed to ensure ownership of the Strategy by all while maintaining mana of each roopu or organisation. For example, a process to develop strategy requires inclusiveness of matawaka health providers.

**Recruitment:**

- Recruitment is the foremost problem for iwi/Maori health providers. Skilled workers are in high demand–particularly skilled Maori nurses–and in rural areas like Dannevirke.

**Te Ao Maori Perspective:**

- Iwi/Maori health providers’ participation in strategy development is reserved because of concern about the watering down of iwi values, tikanga and kawa, Maori concept of health
- Iwi/Maori providers’ aspirations for their health workforce may have different objectives and expect some support for these in the Strategy
- The Maori health workforce needs a critical mass which is able to converse in
Maori with kaumatua, to cope with increasing kohanga reo, kura and kura kaupapa numbers and, to be able, for example, to operate on marae.

*Broader Organisational Maori/Treaty Responsiveness:*

- Although goodwill and commitment exists there is uncertainty about the willingness of any organisation to implement this Strategy effectively
- This Strategy needs to complement existing Maori health initiatives such as the Director of Nursing, Maori.

*Training:*

- The need for flexibility and fluidity in the provision of training needs between organisations—recognition of shared learning contributes to increased workforce knowledge
- The need for increased access to secondary care training, including exposure in larger workplaces for Maori providers regionally and nationally
- The need for training on the Treaty of Waitangi that is relevant and of good quality
- The need to focus on the spiritual health of Maori workforce.

*Mainstream Providers Aspirations*

Participation by mainstream providers in delivering this Strategy is consistent with the cross sector approach to developing the Maori health workforce. Mainstream providers participated in the development of this Strategy with great enthusiasm.

A significant Maori health workforce operates within mainstream health organisations; significant in terms of critical mass, and mix of skills, experience and competencies.

Many issues expressed by Maori providers have been echoed by mainstream providers.; in particular, recruitment, training and organisational capacity to respond to Maori consumer needs. Issues specific to mainstream providers relate to the responsiveness of their organisation to Maori employees. The general themes arising from the mainstream health provider feedback have been incorporated into the action plan.

*Relationships with the Education and Other Sectors*

Locally, the Maori health workforce is beginning to develop relationships with relevant local training agencies. There is little evidence however at this stage of alignment between course programming by local education institutions for Maori students and future Maori health workforce needs.

Opportunities do exist for MidCentral District to capitalise on the presence of significant Maori health education sites such as Te Putahi-a-Toi at and Te Rau Matatini
at Massey University. Opportunities for shared learning between health providers and
Maori health analysts and academics exist, which can assist with branding MidCentral
District as a centre of excellence for Maori health research and practice.

MidCentral District is also uniquely characterised by the location of Linton Army Camp
within its boundaries. The potential to explore collaborative efforts to address some
Maori health workforce issues by engagement with the New Zealand Army nursing and
other personnel have been raised by key informants. The Strategy provides an
opportunity to further explore this potential with the New Zealand Defence Force.

3. SUMMARISING ISSUES AND IDENTIFYING THE KEY STRATEGIC THEMES

During the development of the Strategy a number of gaps were identified. In summary
they include:

- Poor collection of workforce data and information
- Poor workforce planning (recruitment/retention) and development
- Lack of available training programmes (under/post graduate) to develop
  workforce skills/competency
- Lack of available workforce to meet sector/community demand
- Poor coordination of workforce requirements (service integration/
  coordination/efficiency)

A number of key themes have also been identified. They form the basis of the Strategy's
goals and actions:

- Develop investment pathways that support Maori and mainstream health
  service provision
- Develop relationships within the local, regional and national health sector and
  between Maori and non Maori providers
- Develop relationships across sectors eg, Defence Force, tertiary training
- Improve information collection, research and analysis
- Improve workforce planning across MidCentral District and Central Region
- Build technical and cultural capacity, capability and competence
- Develop effective recruitment and retention strategies
- Provide ongoing training with a particular focus on transferring skills to the
  primary care sector
- Implement relevant human resource practices and procedures
- Undertake monitoring and evaluation of progress
• Take the opportunity to meet short to medium Maori health workforce objectives within the existing health structure and associated strategies while addressing wider Maori health workforce aspirations
• Take the opportunity to build on existing strengths in MidCentral District that will distinguish the it from others, eg, current academic Maori health expertise.

These themes are underpinned by Whanau Ora and the feedback from the Strategy development process.
Section Two: The Road Ahead

The vision, mission, principles, values and outcomes that underpin this Strategy are important ingredients to providing leadership and direction to the sector. The purpose of this section is to provide a link between the national and regional context and the local context.

1. MOEMOEA (VISION)

A health workforce that experiences wellness will contribute to wellness for the organisations that support them. In turn, those organisations will contribute to the wellness of Maori. Therefore the vision for this Strategy begins with the individuals in the Maori health workforce and expands into the organisations, both Maori and non-Maori, and ultimately this will bring wellness to Maori.

Oranga Wairua, Oranga Kaimahi, Oranga Tari, Oranga Maori
Wellness in spirit, wellness for the workforce,
Wellness for the organisations, wellness for Maori

2. KAUPAPA (MISSION)

It is the mission of this Strategy to facilitate the attraction, recruitment, retention and training and development of a technically and culturally competent Maori health workforce to meet the aims and aspirations of Maori within MidCentral District.

Growing and developing a technically, culturally competent and caring Maori health workforce

Cultural competence consists of three key components:

- Ko wai e tu ake nei: Knowing yourself
- Matatau koe i nga tikanga: Knowing your place
- Matatau koe i nga whanau whanui: Knowing your community.
3. **PRINCIPLES**

The following principles underpin this Strategy and will guide the sector:

- **Te Ao Maori**: Promote the Maori world view including whanau, hapu, iwi and other Maori structures
- **Kotahitanga**: Facilitate cooperation and collaboration within the health sector and across sectors
- **Local ownership**: Encourage individual and collective ownership by Maori and non Maori to minimise competition
- **Disease state management**: Develop an infrastructure to support other MidCentral strategies
- **Centre of excellence**: Establish incubators for Maori health workforce development
- **Increasing opportunities**: Encouraging investment and service development opportunities for Maori so health services are accessible
- **Increasing technical (including clinical) and cultural competence of service providers**: Promoting and developing training opportunities so that management and clinical staff are able to increase the range of skills they offer
- **Rangatiratanga**: Achieving and maintaining our destinies as Maori/a community.

4. **NGA TIKANGA (VALUES)**

The following values underpin this Strategy:

- **Te Reo Maori me ona Tikanga**: Valuing te reo Maori and its customs
- **Whanaungatanga**: Building effective partnerships and relationships
- **Manaaki, Awhi and Tiaki**: Supporting and caring for others
- **Te Tiriti O Waitangi**: Valuing our commitment and giving the Treaty life.
5. **NGA PUKENGĀ (OUTCOMES)**

The following outcomes are sought from the implementation of this Strategy:

- **Comprehensive collection, analysis and utilisation of workforce information**
  
  **Purpose** Workforce planning and development reflects Maori health workforce needs based on robust information
  
  **Measure** Needs analysis and planning tools reflect Maori health workforce needs.

- **Expanded capacity, capability and competence of the workforce**
  
  **Purpose** Incremental development of a technically and culturally competent Maori health workforce that is in the right place, at the right time
  
  **Measure** Maori health workforce meets minimum employment standards and benchmarks.

- **Targeted training and development for the workforce**
  
  **Purpose** Maori health workforce development in health priority areas
  
  **Measure** Maori health workforce is developed in health priority areas.

- **Enhanced workplace environment**
  
  **Purpose** Whanaungatanga underpins the culture of the organisation
  
  **Measure** Staff satisfaction surveys reflect improved satisfaction.

- **Effective relationships**
  
  **Purpose** A centre of excellence is established that results in a high quality Maori health workforce
  
  **Measure** The Maori health workforce exists within a competitive environment.
Section Three: The First Part of the Journey

Five goals have been identified to achieve the vision, mission, principles, values and outcomes.

<table>
<thead>
<tr>
<th>Goal 1</th>
<th>Workforce information collection and analysis</th>
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<tr>
<td>Goal 2</td>
<td>Workforce capacity, capability and competence</td>
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<td>Goal 3</td>
<td>Workforce training and development</td>
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<td>Goal 4</td>
<td>Workforce environment</td>
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<tr>
<td>Goal 5</td>
<td>Development and Maintenance of effective</td>
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<td>relationships</td>
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Each goal will be reached by the implementation of particular strategies over the next six years. Specific actions have been determined for each strategy.

He Korowai Oranga and Whakatataka propose whanau ora as the pathway for change. To achieve this requires moving Maori and mainstream providers to a “strengths based model” by working together and capturing Maori knowledge to plan successful programmes for the future. This will involve developing investment opportunities to support Maori and mainstream health providers to achieve a standard that sustains Maori communities and ensures they have access to health services.

The goals and actions that follow provide a number of challenges for MidCentral, Maori and mainstream health providers and the community, as local solutions for local problems are sought.

Implementing the framework will require the sector to work with Maori communities to bring about change in whanau, and follow the principles of the Treaty of Waitangi.

<table>
<thead>
<tr>
<th>Partnership</th>
<th>Working together with iwi, hapu, whanau/family and Maori communities</th>
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<tbody>
<tr>
<td>Participation</td>
<td>Involving Maori at all levels including planning, development and the delivery of health care programmes and services</td>
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<tr>
<td>Protection</td>
<td>Striving for equal levels of health as non Maori and caring for the cultural concepts and values of Maori</td>
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GOAL ONE: WORKFORCE INFORMATION COLLECTION AND ANALYSIS

Background

The collection and analysis of Maori health workforce information is critical and will contribute significantly to the development of robust strategies to increase participation of Maori in the health sector. To date, the collection and analysis of health workforce information has been limited, especially for Maori.

This goal seeks to improve the collection and analysis of Maori health information to:

- identify Maori health workforce needs
- inform Maori health workforce planning
- monitor Maori health workforce development.

Links to National and Regional Context

- Ministry of Health–Raranga Tupuake: Maori Health Workforce Development Plan
- Central Region Maori DHB Managers Action Plan 2002-2005
- MidCentral’s Workforce Development Strategy.

Six Year Strategies

1.1 Improve the quantity and quality of Maori health workforce information
1.2 Participate in national and regional health workforce planning initiatives
1.3 Coordinate the collection and sharing of information within the District
1.4 Develop robust planning and monitoring tools

A link between a strategy and an action is identified in the column “Link to Strategy”.
<table>
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<tr>
<th>ACTIONS</th>
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<th>BY WHOM</th>
<th>LINK TO STRATEGY</th>
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</table>
| **G1.1** Identify the current state and future aspirations for Maori health workforce development, in particular:  
  - Complete a stocktake by surveying Maori and mainstream health providers about their Maori workforce needs/requirements (eg, FTE load, recruitment/retention policies)  
  - Complete a comprehensive needs analysis of the Maori health workforce targeting areas like disease state management areas (including a forecasting model for demand and supply) and population health | Dec 2005 | MidCentral | 1.3 |
| **G1.2** Develop robust information systems, in particular:  
  - Develop a process for collecting workforce ethnicity data across the District  
  - Review HR policies and develop a set of guidelines that will support Maori health workforce planning, recruitment and development across the District | June 2005 | MidCentral | 1.1 |
<p>| | Dec 2005 | MidCentral | 1.2 |</p>
<table>
<thead>
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<th>LINK TO STRATEGY</th>
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<tr>
<td><strong>G1.3</strong> Maximise the sharing of information across the District, in particular:</td>
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<tr>
<td>• Improve access to workforce information via MidCentral’s website</td>
<td>June 2006</td>
<td>MidCentral</td>
<td>1.3</td>
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<tr>
<td>• Improve current reporting to MidCentral by the collection of workforce data</td>
<td>Ongoing</td>
<td></td>
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<tr>
<td>• To facilitate networking amongst providers, enhance existing forums to discuss Maori health workforce issues and solutions</td>
<td>Ongoing</td>
<td></td>
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<tr>
<td><strong>G1.4</strong> Develop monitoring and evaluation systems and tools, in particular:</td>
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<td></td>
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<tr>
<td>• Benchmark Maori health workforce indicators</td>
<td>Dec 2006</td>
<td>MidCentral</td>
<td>1.4</td>
</tr>
<tr>
<td>• Develop a framework to measure workforce progress</td>
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<tr>
<td>• Evaluate progress to identify future areas for development</td>
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**DHB MEASURES**

To ensure that there is good information being collected and distributed to the sector, MidCentral will:

- Conduct a Maori health workforce survey every two years to better understand the health sectors awareness to Maori health development and were the gaps are, to support planning
- Review and monitor workforce developments through quarterly reporting systems that are provided by health providers.

**MOH INDICATOR**

<table>
<thead>
<tr>
<th>STR - 02</th>
<th>Progress in the development of Maori workforce and providers</th>
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<tr>
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<td>- Progress with plan to develop and promote the development of DHB and contracted providers’ Maori workforce</td>
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GOAL TWO: WORKFORCE CAPACITY, CAPABILITY 
AND COMPETENCE

Background

Developing the ongoing capacity, capability and competence of the Maori health 
workforce will contribute to the establishment of incentives to recruit and retain the 
health workforce. This will strategically position MidCentral District to meet the 
ongoing needs of the community. While attrition amongst individual providers is to be 
expected, the aim will be to ensure attrition from the District is minimised, thereby 
maintaining strategic capacity, capability and competence in the District.

This goal seeks to establish the MidCentral District as a centre of excellence with health 
workforce incubators across the District to create incentives for the health workforce to 
remain in the District and where possible to market the District to the health workforce. 
The results of this goal will strategically position the District as a centre of excellence 
for Maori workforce development.

Links to National and Regional Context

- Health Workforce Advisory Committee, New Zealand Health Workforce– 
  Framing the Future (2003)
- District Health Boards’ New Zealand–Health Workforce Plan
- He Korowai Oranga, National Maori Health Strategy 2002-2005 and 
  Whakatataka, Maori Health Action Plan 2002-05
- Ministry of Health–Raranga Tupuake: Maori Health Workforce Development 
  Plan
- Central Region Maori DHB Managers Action Plan 2002-2005
- MidCentral’s Workforce Development Strategy.

Six Year Strategies

2.1 Facilitate the establishment of MidCentral District as a centre of 
excellence for Maori workforce development
2.2 Develop incentives to maximise cooperation and collaboration and 
minimise competition
2.3 Increase the numbers in the Maori health workforce with a focus on 
disease state management areas

A link between a strategy and an action is identified in the column “Link to Strategy”.

<table>
<thead>
<tr>
<th><strong>ACTIONS</strong></th>
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<th><strong>BY WHOM</strong></th>
<th><strong>LINK TO STRATEGY</strong></th>
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</table>
| **G2.1** Identify areas of strategic advantage for Maori health workforce development through sector planning, in particular:  
• Review existing national/regional workforce policies and practice to support future planning  
• Evaluate the health sector to determine what strategies and investment will be need to support the development of a capable Maori health workforce | Ongoing | MidCentral | 2.1 |
| **G2.2** Develop incubators to facilitate the establishment of a centre of excellence with a focus on disease state management areas and population health | June 2008 | MidCentral | 2.2 |
| **G2.3** Develop closer relationships with the Nursing School at Massey University and UCOL | June 2008 | MidCentral | 2.2 |
| **G2.4** Establish closer training links between MidCentral Health and Maori/mainstream providers who manage acute cases in the community | June 2009 | MidCentral | 2.3 |
| **G2.5** Identify priority areas for increasing the non clinical workforce (including community based workers) and develop strategies for each priority area, in particular:  
• Examine options for career pathways and development  
• Develop closer training links with other sectors to diversify the existing skill based of the workforce  
• Evaluate recruitment and retention policies | July 2006 | MidCentral | 2.3 |
<table>
<thead>
<tr>
<th>ACTIONS</th>
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<th>LINK TO STRATEGY</th>
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<tr>
<td>G2.6 Investigate and develop strategies to increase the number of clinical employees in disease state management areas and related roles, in particular: - Develop career opportunities and developmental pathways for clinician wanting a change in career - Develop a strong peer review and support network that encourages career change and development</td>
<td>July 2006</td>
<td>MidCentral</td>
<td>2.3</td>
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| DHB MEASURES | Developing a competent and capable workforce requires investment over time. Being able to measure these developments will mean MidCentral will: - Have established a Maori capacity funding in the MidCentral District to support Maori workforce development - Increase the number of Maori working (qualifications and skills) in the health sector with a focus on disease state management areas (Clinical and non-clinical roles) - Record the total number of Maori FTE and service allocation in the District |

| MOH INDICATOR | STR - 02 | Progress in the development of Maori workforce and providers - Progress with plan to develop and promote the development of DHB and contracted providers’ Maori workforce |
GOAL THREE: WORKFORCE TRAINING AND DEVELOPMENT

Background

Consistent and coordinated workforce training and development across the district will contribute to the establishment of incentives to recruit and retain the Maori health workforce and minimise competition. However, to maximise use of resources, training and development initiatives will focus on priority areas with a particular focus on disease state management areas.

This goal seeks to support the establishment of training and development incubators across the District. These incubators will be based within and across a number of sectors and will provide leadership in priority areas of training and development.

Links to National and Regional Context

- Ministry of Health–Raranga Tupuake: Maori Health Workforce Development Plan
- Central Region Maori DHB Managers Action Plan 2002-2005
- MidCentral’s Workforce Development Strategy.

Six Year Strategies

3.1 Support the development of a culture of coaching and mentoring (tuakana/teina relationship)
3.2 Develop incentives to support training and development of the Maori health workforce
3.3 Develop incubators to support implementation of the MidCentral’s Primary Health Care Strategy

A link between a strategy and an action is identified in the column “Link to Strategy”.
<table>
<thead>
<tr>
<th>Actions</th>
<th>By When</th>
<th>By Whom</th>
<th>Link to Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop coaching and mentoring frameworks (eg, peer support groups, buddy systems, grandparenting) for workforce groups, in particular:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Support the Primary Care Nursing Innovation project developments</td>
<td>Dec 2006</td>
<td>MidCentral</td>
<td>3.1</td>
</tr>
<tr>
<td>• Work with mainstream and Maori health providers to develop a system/framework of peer support through the sharing of cultural knowledge and quality (clinical/non clinical) assurance</td>
<td></td>
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</tr>
<tr>
<td>Investigate and establish strategies that support Maori recruitment to the health sector – including programmes that target priority areas that support whanau, hapu and iwi health development – in particular:</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>• Internships with PHOs and MidCentral Health</td>
<td>Dec 2007</td>
<td>MidCentral</td>
<td>3.2</td>
</tr>
<tr>
<td>• Education scholarships and bonding initiatives</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Investigate the development of:</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>• A cultural competency framework for clinical/non clinical health professionals</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>• A pricing framework to support the level of resourcing required for Maori to develop appropriate cultural training competence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>June 2007</td>
<td></td>
<td>MidCentral</td>
<td>3.2</td>
</tr>
<tr>
<td>Develop funding strategies to support release time while ongoing education is being undertaken</td>
<td>June 2006</td>
<td>MidCentral</td>
<td>2.2</td>
</tr>
<tr>
<td>ACTIONS</td>
<td>BY WHEN</td>
<td>BY WHOM</td>
<td>LINK TO STRATEGY</td>
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</tr>
<tr>
<td>G3.5 Investigate training opportunities for intersectoral/intrasectoral learning, in particular: • Establish relationships with the education and social services sectors • Establish training links with sector training agencies such as education and social services</td>
<td>June 2008</td>
<td>MidCentral</td>
<td>2.2</td>
</tr>
<tr>
<td>G3.6 Hold a Maori health workforce development conference for MidCentral District</td>
<td>Dec 2007</td>
<td>MidCentral</td>
<td>2.3</td>
</tr>
</tbody>
</table>

| DHB MEASURES | Competency and capability within the workforce requires investment and training opportunities. Being able to measure these developments will mean MidCentral will: • Establish a resource fund to support the development of a coaching and mentoring (tuakana/teina relationship) programme • Establish increased funding support for training and development opportunities in the Maori health workforce (eg, post graduate studies, scholarships etc) • Support networks or incubators to manage the implementation of MidCentral’s Primary Health Care Strategy |

| MOH INDICATOR | STR - 02 Progress in the development of Maori workforce and providers • Progress with plan to develop and promote the development of DHB and contracted providers’ Maori workforce |
GOAL FOUR: WORKPLACE ENVIRONMENT

Background

A healthy and supportive workplace environment will contribute to the attraction, recruitment and retention of the Maori health workforce. Therefore initiatives to create a positive and inclusive workplace environment for the Maori health workforce should be implemented.

This goal seeks to ensure the physical and emotional workplace environment supports Maori health workforce development.

Links to National and Regional Context

- This is a local initiative.

Six Year Strategies

4.1 Physical surroundings support a Maori world view
4.2 Whanaungatanga underpins the culture of the workplace

A link between a strategy and an action is identified in the column “Link to Strategy”.

<table>
<thead>
<tr>
<th>ACTIONS</th>
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<th>BY WHOM</th>
<th>LINK TO STRATEGY</th>
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</thead>
<tbody>
<tr>
<td>G4.1</td>
<td>Develop guidelines to:</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Support networking opportunities to support Maori working in the health sector</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Create a physical environment that supports kaupapa Maori and enables/encourages Maori utilisation of health services</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Ongoing</td>
<td>MidCentral</td>
<td>4.2</td>
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</table>

4.1

4.2
<table>
<thead>
<tr>
<th>ACTIONS</th>
<th>BY WHEN</th>
<th>BY WHOM</th>
<th>LINK TO STRATEGY</th>
</tr>
</thead>
</table>
| **G4.2** Review existing workforce practices and planning documents to ensure that there are effective strategies that support Maori health workers in a way that is Maori and meets employer expectation, in particular:  
• Complete health service provider surveys on workforce development and policies  
• Review health service provider Maori health workforce plans  
• Monitor quarterly reports submitted by health service providers | July 2009 | MidCentral | 4.2 |

<table>
<thead>
<tr>
<th>DHB MEASURES</th>
<th></th>
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</table>
| **To develop a culture that is responsive to the needs of its community, MidCentral will:**  
– Develop and implement guidelines that will support clinical and non clinical working environments so that they are supportive of a Maori world view  
– Monitor and evaluate contract services  
– Complete a district wide customer survey every two years | |

<table>
<thead>
<tr>
<th>MOH INDICATOR</th>
<th>STR - 02</th>
<th></th>
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</thead>
</table>
| **Progress in the development of Maori workforce and providers**  
– Progress with plan to develop and promote the development of DHB and contracted providers’ Maori workforce | |
GOAL FIVE: DEVELOPMENT AND MAINTENANCE OF EFFECTIVE RELATIONSHIPS

Background

Effective relationships within the health sector and across sectors will enhance and promote Maori health workforce development. In particular, the development and maintenance of strategic relationships between the health, education and Maori sectors to maximise supply and demand opportunities is critical.

This goal seeks to ensure relationships within the health sector and across sectors are maximised for the benefit of attracting, recruiting, retaining, training and developing the Maori health workforce.

Link to National and Regional Context

- Ministry of Health–Raranga Tupuake: Maori Health Workforce Development Plan
- MidCentral’s Workforce Development Strategy.

Six Year Strategies

5.1 Promote working relationships within the health sector and across sectors
5.2 Market the health sector as an opportunity for future employment

A link between a strategy and an action is identified in the column “Link to Strategy”.

<table>
<thead>
<tr>
<th>ACTIONS</th>
<th>BY WHEN</th>
<th>BY WHOM</th>
<th>LINK TO STRATEGY</th>
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</thead>
<tbody>
<tr>
<td>G5.1</td>
<td>Investigate opportunities for intersectoral working relationships (eg, private educators; Child, Youth and Family) and share information</td>
<td>Ongoing</td>
<td>MidCentral</td>
</tr>
<tr>
<td>G5.2</td>
<td>Maximise community relationships and information sharing with whanau, hapu and marae by attending forums where Maori meet (eg, Wananga, church, marae, kura etc)</td>
<td>Ongoing</td>
<td>Maori and mainstream providers</td>
</tr>
<tr>
<td>ACTIONS</td>
<td>BY WHEN</td>
<td>BY WHOM</td>
<td>LINK TO STRATEGY</td>
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</tr>
<tr>
<td>G5.3</td>
<td>Develop relationships with whanau, hapu, iwi and marae to enable the sharing of information using Maori forums</td>
<td>Ongoing</td>
<td>MidCentral Maori and mainstream providers</td>
</tr>
<tr>
<td>G5.4</td>
<td>Investigate the development of working relationships with specialist sectors (eg, NZ Army)</td>
<td>June 2008</td>
<td>MidCentral</td>
</tr>
</tbody>
</table>

**DHB MEASURES**

To build strong relationships within the health sector and with other key government agencies, MidCentral will:
- Participate in intersectoral forums on a regular basis
- Evidence and evaluate these relationships through information sharing between the participating agencies
- Establish joint venture relationships/projects covering the District

**MOH INDICATOR**

| STR – 02 | Progress in the development of Maori workforce and providers
- Progress with plan to develop and promote the development of DHB and contracted providers’ Maori workforce |
BI B L I O G R A P H Y

Central Region Maori District Health Board Managers Draft Maori Health Workforce Development Plan 2002-2005

Centre for Social and Health Outcomes Research and Evaluation (SHORE) and Te Roopu Whariki, Massey University Workforce Development to Support a Population Health Approach in Primary Health Organisations (PHOs) Final Report December 2003

Manawhenua Hauora Rangitaane, Ngati Raukawa, Muaupoko, Ngati Kahungunu Te Kaupapa Tuatahi–Minimum Specifications for a Pilot Primary Health Organisation (PHO) October 2002

MidCentral District Health Board Primary Health Care Strategy for MidCentral District–Consultation Document 30 September 2003

MidCentral District Health Board District Strategic Plan July 2002-2012

MidCentral District Health Board District Annual Plan July 2003-2004

MidCentral District Health Board Investment Plan 2003-2004


Ministry of Health He Korowai Oranga November 2002

Ministry of Health Whakatataka: Maori Health Action Plan 2002-2005

Ministry of Health Mental Health (Alcohol and Other Drugs) Workforce Development Framework

Recommendations to the Minister of Health 2003 The New Zealand Health Workforce–Future Directions


Waikato District Health Board Maori Health Workforce Plan 2004

Wellington School of Medicine Public Health Consultancy An Assessment of Health Needs in the MidCentral District Health Board Region October 2001
ACKNOWLEDGEMENTS

MidCentral wishes to thank the following people who helped develop this Strategy.

Maori Provider Workshop Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stephen Paewai</td>
<td>Chief Executive Officer</td>
<td>Rangitaane O Tamaki Nui A Rua</td>
</tr>
<tr>
<td>Aroha Ellwood</td>
<td>Manager, Health Services</td>
<td>Te Runanga O Raukawa Inc</td>
</tr>
<tr>
<td>Virginia Jones</td>
<td>Manager, Health Services</td>
<td>Best Care (Whakapai Hauora) Charitable Trust</td>
</tr>
<tr>
<td>Delwyn Te Oka</td>
<td>Manager, Health Services</td>
<td>Te Wakahuia Manawatu Trust</td>
</tr>
<tr>
<td>Glenn Haitana</td>
<td>Advisor</td>
<td>Te Wakahuia Manawatu Trust</td>
</tr>
<tr>
<td>Dale Phillips-Tuivaga</td>
<td>Manager/Nurse</td>
<td>He Puna Hauora Inc</td>
</tr>
<tr>
<td>Mahalia Paewai</td>
<td>Manager, Health Services</td>
<td>Rangitaane O Tamaki Nui A Rua</td>
</tr>
<tr>
<td>Dennis Emery</td>
<td>Chief Executive Officer</td>
<td>Te Runanga O Raukawa Inc</td>
</tr>
<tr>
<td>Kim Whaanga</td>
<td>Manager</td>
<td>Te Whanau Manaaki O Manawatu Trust</td>
</tr>
<tr>
<td>Oriana Paewai</td>
<td>Maori Health Advisor</td>
<td>MidCentral Health</td>
</tr>
<tr>
<td>Hare Arapere</td>
<td>Manager, Kaupapa Maori</td>
<td>Enable NZ</td>
</tr>
</tbody>
</table>

Tertiary Education Sector

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Te Ata Munroe</td>
<td>Te Rau Matatini</td>
<td>Massey University</td>
</tr>
<tr>
<td>Ann Woodgyer</td>
<td>Nursing Lecturer</td>
<td>UCOL</td>
</tr>
<tr>
<td>Te Aira Henderson</td>
<td>Maori Educator</td>
<td>UCOL</td>
</tr>
<tr>
<td>Kath Hoare</td>
<td>Nursing Department</td>
<td>UCOL</td>
</tr>
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## Mainstream Provider Workshop Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Brad Grimmer</td>
<td>Chief Executive Officer</td>
<td>MASH Trust</td>
</tr>
<tr>
<td>Yvonne Stillwell</td>
<td>Nurse Educator</td>
<td>MidCentral Health</td>
</tr>
<tr>
<td>Sue Wood</td>
<td>Director of Nursing</td>
<td>MidCentral Health</td>
</tr>
<tr>
<td>Chiquita Hansen</td>
<td>Director of Nursing, Primary Health Care</td>
<td>MidCentral District Health Board</td>
</tr>
<tr>
<td>Leigh Hikawai</td>
<td>Director of Nursing, Maori</td>
<td>MidCentral District Health Board</td>
</tr>
<tr>
<td>Joe Anson</td>
<td>Team Leader</td>
<td>MidCentral Health</td>
</tr>
<tr>
<td>Anne Amoore</td>
<td>Group Manager</td>
<td>MidCentral Health</td>
</tr>
<tr>
<td>Cheryl Benn</td>
<td>Independent Nurse</td>
<td>Independent Midwives</td>
</tr>
<tr>
<td>Maureen Agar</td>
<td>Team Leader</td>
<td>Plunket Society</td>
</tr>
<tr>
<td>Dean Chapman</td>
<td>Manager</td>
<td>St Dominic’s</td>
</tr>
<tr>
<td>Debbie Davies</td>
<td>Clinical Nurse</td>
<td>Manawatu Independent Practice Association (MIPA)</td>
</tr>
<tr>
<td>Francis Guthrie</td>
<td>Project Manager</td>
<td>MIPA</td>
</tr>
<tr>
<td>Andrew Orange</td>
<td>Pharmacist</td>
<td>MIPA</td>
</tr>
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</table>
## GLOSSARY OF MAORI WORDS

<table>
<thead>
<tr>
<th>Word</th>
<th>Translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iwi</td>
<td>Tribe, bone, race, people, nation, strength</td>
</tr>
<tr>
<td>Kaumatua</td>
<td>Old man, elder, adult</td>
</tr>
<tr>
<td>Kawa</td>
<td>Protocol of dedication</td>
</tr>
<tr>
<td>Kohanga Reo</td>
<td>Language nest, Maori preschool</td>
</tr>
<tr>
<td>Kotahitanga</td>
<td>One, united</td>
</tr>
<tr>
<td>Kura Kaupapa</td>
<td>Maori immersion school</td>
</tr>
<tr>
<td>Marae</td>
<td>Meeting area of whanau or iwi, focal point of settlement</td>
</tr>
<tr>
<td>Tikanga</td>
<td>Customs, obligations and conditions</td>
</tr>
<tr>
<td>Whakatataka</td>
<td>To be turned and also the name for the national Maori Health Action Plan</td>
</tr>
<tr>
<td>Whanau</td>
<td>Delivery, to give birth, extended family</td>
</tr>
</tbody>
</table>