

Position Description

Position:	Registered Nurse	
Reports to:	Clinical Resource Nurse/ Service Manager/Charge Nurse (as applicable)	
Professional Accountability:	Director of Nursing	
Role Relationships:	<ul style="list-style-type: none"> Pharmacists Occupational Health & Safety Customer Relations Nurse Educators Clinical Nurse Specialists PDRP Coordinator Allied Health Staff General Practitioners Service Manager Patient Safety & Clinical Effectiveness Infection Prevention & Control 	<ul style="list-style-type: none"> Nursing Staff Resource & Link Nurses Nurse Clinicians PHOs Practice Nurses Clinical Executive Medical Staff Nurse Practitioners Operations Executive Hospital Coordination Unit Maori Health Providers
FTE:	As negotiated	

Organisation Context

MidCentral District Health Board (MDHB) is undergoing a transformational change programme to firmly establish itself as a high performing health system that meets the current and future demands of its communities.

A key component of the transformation change programme is the implementation of the Integrated Service Model – the vehicle by which MDHB will implement the DHB’s strategy (displayed at Appendix B). At maturity, the Integrated Service Model will deliver an integrated health and social care system that ensures individuals, patients, family/whanau and communities are the centre of everything we do.

The transformation will provide an improved service experience and a work environment where staff feel valued and empowered to carry out their work with excellence.

<i>Compassionate Ka whai aroha</i>	<i>Respectful Ka whai ngākau</i>	<i>Courageous Ka mātātoa</i>	<i>Accountable Ka noho haepapa</i>
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Role Purpose

The nurse works in partnership with patients and their families/ whanau, and collaborates with the multidisciplinary team, to provide quality nursing care that is safe, cost effective and in accordance with the Nursing Philosophy, professional and organisational standards, policy and procedure.

Essential Qualifications And Requirements

- Registered General/ Obstetric Nurse or Registered Comprehensive Nurse with current practising certificate.
- The successful appointee must meet the statutory and organisational requirements for working with children, as per the Vulnerable Children Act 2014 and MidCentral District Health Board policy, including a satisfactory police check and other safety checking processes
- Professional portfolio at level 2 or level 3

Performance Development

This will occur in accordance with the performance development process, with review against the agreed performance development plan at 3 and 12 months.

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Position Competencies

There is a programme available for appointees to meet competencies where a need for further development is identified. For the purposes of selection essential competencies have been identified, and decisions will be made based on the ability of applicants to meet these.

ACCOUNTABILITY/ RESPONSIBILITY	COMPETENCIES - refer to attached for Professional Development and Recognition Programme Level specific performance criteria
Standards of Care	<ul style="list-style-type: none"> • Completes timely systematic holistic assessments to determine actual and high risk problems. • Analyses assessment data and determines, verifies, prioritises and documents nursing diagnoses and outcomes. • In partnership with the person, develops an individualised plan of care to achieve the desired outcomes. • Implements and co-ordinates the interventions to deliver the plan of care. • Evaluates and systematically records progress toward attainment of desired outcomes and revise the plan of care as necessary.

Nursing Council of New Zealand Generic Competencies –

Competent Level 2

DOMAIN 1. PROFESSIONAL RESPONSIBILITY

This domain contains competencies that relate to professional, legal and ethical responsibilities and cultural safety. This includes being able to demonstrate knowledge and judgement and being accountable for own actions and decisions, while promoting an environment that maximises client safety, independence, quality of life and health.

<p>Competency 1.1. Accepts responsibility for ensuring that his/her nursing practice and conduct meet the standards of the professional, ethical and relevant legislative requirements.</p>
<p>Competency 1.2 Demonstrates the ability to apply the principles of the Treaty of Waitangi/ Te Tiriti o Waitangi to nursing practice</p>
<p>Competency 1.3 Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by nurse assistants, enrolled nurses and others</p>
<p>Competency 1.4 Promotes an environment that enables client safety, independence, quality of life and health</p>
<p>Competency 1.5 Practises nursing in a manner that the client determines as being culturally safe</p>

DOMAIN 2: MANAGEMENT OF NURSING CARE

This domain contains competencies related to client assessment and managing client care, which is responsive to the client's needs and which is supported by nursing knowledge and evidence based research.

<p>Competency 2.1: Provides planned nursing care to achieve identified outcomes.</p>
<p>Competency 2.2 Undertakes a comprehensive and accurate nursing assessment of clients in a variety of settings</p>
<p>Competency 2.3 Ensures documentation is accurate and maintains confidentiality of information</p>
<p>Competency 2.4 Ensures the client has adequate explanation of the effects, consequences and alternatives of proposed treatment options</p>
<p>Competency 2.5 Acts appropriately to protect oneself and others when faced with unexpected client responses, confrontation, personal threat or other crisis situations</p>
<p>Competency 2.6 Evaluates client's progress toward expected outcomes in partnerships with clients.</p>
<p>Competency 2.7 Provides health education appropriate to the needs of the client within a nursing framework</p>
<p>Competency 2.8 Reflects upon and evaluates with peers and experienced nurses the effectiveness of nursing care</p>
<p>Competency 2.9 Maintains professional development</p>

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DOMAIN 3: INTERPERSONAL RELATIONSHIPS

This domain contains competencies related to interpersonal and therapeutic communication with clients, other nursing staff and interprofessional communication and documentation

Competency 3.1 Establishes, maintains and concludes therapeutic interpersonal relationships with client
Competency 3.2 Practises nursing in a negotiated partnership with the client where and when possible
Competency 3.3 Communicates effectively with clients and members of the health care team

DOMAIN 4: INTERPROFESSIONAL HEALTH CARE & QUALITY IMPROVEMENT

This domain contains competencies to demonstrate that as a member of the health care team, the nurse evaluates the effectiveness of care and promotes a nursing perspective within the interprofessional activities of the team.

Competency 4.1 Collaborates and participates with colleagues and members of the healthcare team to facilitate and coordinate care
Competency 4.2 Recognises and values the roles and skills of all members of the health care team in the delivery of care
Competency 4.3 Participates in quality improvement activities to monitor and improve standards of nursing

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Nursing Council of New Zealand Generic Competencies – Proficient Level 3

It is expected that you have met all the competencies at Level 2, but evidence for these does not have to be presented within your portfolio. If you have completed the Level 3 CPDP within your area of practice this would meet many of the Level 3 competencies specific to your area of practice.

<ul style="list-style-type: none"> DOMAIN 1. PROFESSIONAL RESPONSIBILITY <p>This domain contains competencies that relate to professional, legal and ethical responsibilities and cultural safety. This includes being able to demonstrate knowledge and judgement and being accountable for own actions and decisions, while promoting an environment that maximises client safety, independence, quality of life and health</p>	
NCNZ Competency	MDHB Indicator NB Evidence must be specific to current area of practice
Competency 1.1 Accepts responsibility for ensuring that his/her nursing practice and conduct meet the standards of the professional, ethical and relevant legislative requirements	Reflect on the application of ethical principles used in your nursing practice including your support and education of colleagues in legislative and professional requirements and ethical decision making
Competency 1.2 Demonstrates the ability to apply the principles of the Treaty of Waitangi/ Te Tiriti o Waitangi to nursing practice	Consistently demonstrate knowledge and application of Treaty of Waitangi principles in your nursing practice and support others to integrate processes appropriate for Maori, e.g. whanau hui, karakia, whakawhanaungatanga
Competency 1.3 Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by nurse assistants, enrolled nurses and others	Reflect on your role as a experienced/ proficient RN and shift leader, including delegation, direction, monitoring and evaluation of nursing care by others including your education and support of colleagues to undertake new clinical skills and accept greater responsibility
Competency 1.4 Promotes an environment that enables client safety, independence, quality of life and health	Provide evidence of consistency in your identification and management of risk and reflection of your practice to enable your effective education and support of others to ensure client*/ colleague safety and risk reduction, including knowledge and practice of medication administration, evidence based treatments and interventions
Competency 1.5 Practises nursing in a manner that the client* determines as being culturally safe	Consistently ensure that culturally appropriate skills are used in communication with clients*, practising in a way that respects each clients identity and their right to hold personal values, beliefs and goals, supporting and educating colleagues with this

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Client * = client, patient, customer, resident, turoro, whanau, family, community, tangata whaiora, carer, legal representative, colleagues, student
Whakawhanaungatanga △ = seen as a process of getting to know each other

- **DOMAIN 2: MANAGEMENT OF NURSING CARE**

This domain contains competencies related to client assessment and managing client care, which is responsive to the client's needs and which is supported by nursing knowledge and evidence based research

NCNZ Competency	MDHB Indicator NB Evidence must be specific to current area of practice
Competency 2.1 Provides planned nursing care to achieve identified outcomes	Show evidence of consistency in the planning of evidence based individualised, holistic complex client*care, in partnership and collaboration with client*and the health care team - demonstrating the use of professional frameworks in your reflection and rationale
Competency 2.2 Undertakes a comprehensive and accurate nursing assessment of clients* in a variety of settings	Consistently demonstrate timely, systematic and holistic assessment skills in partnership with complex clients* educating and supporting colleagues in effective use of assessments tools / methods of nursing diagnosis
Competency 2.3 Ensures documentation is accurate and maintains confidentiality of information	Consistently ensure your nursing documentation is accurate, legible and objective as per organisational process, ensuring client confidentiality is maintained in nursing practice, educating and assisting colleagues with this
Competency 2.4 Ensures the client* has adequate explanation of the effects, consequences and alternatives of proposed treatment options	Demonstrate consistent application of MCH / organisational client* informed consent process in your nursing practice, ensuring the client* makes an informed choice, educating others with this
Competency 2.5 Acts appropriately to protect oneself and others when faced with unexpected client responses, confrontation, personal threat or other crisis situations	Reflect on your leadership, prioritisation and co-ordination of an unexpected client* response and client* care during an emergency / acute situation, including support of colleagues

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Competency 2.6 Evaluates client's progress toward expected outcomes in partnerships with clients*	Provide evidence on how you consistently apply clinical reasoning and reflective processes to analyse clinical decisions made in the evaluation/ revision/ effectiveness of your nursing practice demonstrating partnership and a safe outcome for the client*
Competency 2.7 Provides health education appropriate to the needs of the client* within a nursing framework	Provide evidence of consistency in complex discharge/ transfer/ rehabilitation / palliative care that you coordinate, demonstrating partnership and health education given to the client*, educating and supporting health team members with this
Competency 2.8 Reflects upon and evaluates with peers and experienced nurses the effectiveness of nursing care	Demonstrate that you are consistently proactive in seeking evidence based professional development opportunities to extend own and others practice through presentation / facilitation of formal education sessions/ case reviews within area of practice. e.g case study, quality projects. Please include a copy of presentation and evaluations
Competency 2.9 Maintains professional development	Reflect on your role as an effective preceptor / IV or PDRP assessor / link nurse for your area of practice, thus supporting and encouraging colleagues with professional development

Client * = client, patient, customer, resident, turoro, whanau, family, community, tangata whaiora, carer, legal representative, colleagues, student.

Complex~ = care of the client with a complex condition – involved, complicated

Case study ** It is highly recommended that a case study be used as evidence for Domain 2 & 3. This can be presented as an educational session to colleagues. Presentation of your case study to colleagues is not compulsory, but presentation of at least one formal educational session is within the last 12 months is.

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- **DOMAIN 3: INTERPERSONAL RELATIONSHIPS**

This domain contains competencies related to interpersonal and therapeutic communication with clients, other nursing staff and interprofessional communication and documentation

NCNZ Competency	MDHB Indicator NB Evidence must be specific to current area of practice
Competency 3.1 Establishes, maintains and concludes therapeutic interpersonal relationships with client*	Consistently demonstrate the establishment/maintenance and conclusion of a therapeutic partnership with the client*, maintaining professional boundaries in your nursing practice and assisting team members with this
Competency 3.2 Practises nursing in a negotiated partnership with the client* where and when possible	Confidently and consistently advocate for and support clients*, recognising and supporting the clients* personal resourcefulness, demonstrating partnership
Competency 3.3 Communicates effectively with clients* and members of the health care team	As a proficient nurse in the health care team, reflect on your effective contribution and communication skills and how you challenge and address unsafe health care / practice, demonstrating application of MCH / organisational standards ^o and evidence based practice

Client * = client, patient, customer, resident, turoro, whanau, family, community, tangata whaiora, carer, legal representative, colleagues, student
Standards^o = Philosophy, policies, procedures, protocols, standards and guidelines

- **DOMAIN 4: INTER-PROFESSIONAL HEALTH CARE AND QUALITY IMPROVEMENT**

This domain contains competencies to demonstrate that as a member of the health care team, the nurse evaluates the effectiveness of care and promotes a nursing perspective within the interprofessional activities of the team

NCNZ Competency	MDHB Indicator
Competency 4.1 Collaborates and participates with colleagues and members of the healthcare team to facilitate and coordinate care	Reflect on your contribution within your area of practice to change management, problem solving and conflict resolution, empowering colleagues in information sharing to maintain continuity and enhance coordination of client* care

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<p>Competency 4.2 Recognises and values the roles and skills of all members of the health care team in the delivery of care</p>	<p>Reflect on a collaborative team approach you have used to maintain continuity and enhance coordination of client* care, including the communication of client* information to health care team</p>
<p>Competency 4.3 Participates in quality improvement activities to monitor and improve standards of nursing</p>	<p>Demonstrate how you incorporate quality improvement principles in your nursing practice and your contribution to quality involvement within your area of practice including support and encouragement of others</p>

Client * = client, patient, customer, resident, turoro, whanau, family, community, tangata whaiora, carer, legal representative, colleagues

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MidCentral District Health Board Core Competencies

Key Competency	Performance Measure
<p>Health and Safety Apply Health and Safety knowledge and skills to all work practices to ensure compliance with the Health and Safety at Work Act 2015 and any subsequent amendments or replacement legislation</p>	<ul style="list-style-type: none"> • Is familiar with all policies and procedures as they affect the work environment. • Ensure that safe working procedures are practised and no person is endangered through action or inaction. • Is aware of and can identify hazards and take action accordingly, including preventing or minimising the adverse affects of hazards. • Is able to apply MidCentral District Health Board's emergency procedures, including use of safety equipment and materials. • Ensure that all incidents including near misses are reported within the required timeframe using the District Health Board's incident reporting system. • Actively participate in the District Health Board's health and safety programmes, through input into meetings and feedback through committee structures.
<p>Treaty of Waitangi Has Treaty of Waitangi knowledge and application</p>	<ul style="list-style-type: none"> • Has knowledge and understanding of the Treaty of Waitangi and its application in Health in terms of the articles and principles. • Attends the MDHB Treaty of Waitangi education.

Physical Attributes

Under the Human Rights Act 1993 discrimination based on disability is unlawful. MDHB will make all reasonable efforts to provide a safe and healthy work place for all, including persons with disability.

Every effort has been made to outline requirements clearly. If a potential applicant has uncertainties about their ability to fulfil these physical requirements, enquiry should be made whether it would be possible to accommodate a particular issue by obtaining advice from Occupational Health & Safety/ Infection Prevention & Control Team.

- Ability to move about and undertake necessary duties within wards/departments at Palmerston North Hospital campus including moving around in the community as necessary.
- A high degree of physical capacity is required as the work is physically demanding, involving standing, walking, sitting, stretching, twisting, bending and lifting/moving weights up to and above 15 kilograms frequently.
- Ability to walk up steps/stairs.
- Ability to sit at a desk for long periods with associated mental concentration and repetitive activities that accompany administrative tasks.
- Manual dexterity sufficient to drive and operate a variety of specialised equipment used within clinics, including syringes, specimen collection, together with safe administration of drugs and use of clerical items including personal computers.
- Visual ability sufficient to read, write/record, operate equipment, safely administer medications, monitor equipment and patient status enabling accurate performance of essential job duties.
- Hearing and speech sufficient to communicate clearly with patients and co-workers, monitor patient status and equipment, recognise impending emergencies relating to patients and equipment and hear emergency alarm.
- A high degree of mental concentration is required.
- Ability to wear face masks and rubber gloves for protection against infectious disease.
- Skin should not be fissured, scaly, cracked on hands, forearms, face or neck.
- Skin condition should allow frequent contact with water, soap/disinfectant soap, chemicals and latex rubber.
- Absence of a health condition which could increase appointee's susceptibility if exposed to infections or radiation or cytotoxic drugs more frequently than in daily living.
- Freedom from infection of colonisation with MRSA.
The appointee's health condition should not result in undue hazard to the worker, client or others as a result of exposure to blood, body fluids/waste or infectious disease (Note MidCentral DHB/s Policy for Work Restriction of Staff with Communicable Disease especially Skin Appendix. Compliance with "New Zealand Nurses Organisation HIV/Aids Policy"). Note: This means the nurse should not have a blood borne condition which could be transmitted to patients as part of work activity, e.g. performing invasive procedures, if they have HIV, Hepatitis B or C.
- Must be able to function under rapidly changing and demanding conditions.

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Registered Nurse – Scope of Practice

(under the Health Practitioners Competence Assurance Act 2003)

Registered Nurses utilise nursing knowledge and complex nursing judgement to assess health needs and provide care, and to advise and support people to manage their health. They practise independently and in collaboration with other health professionals, perform general nursing functions and delegate to and direct enrolled nurses and nurse assistants. They provide comprehensive nursing assessments to develop, implement, and evaluate an integrated plan of health care, and provide nursing interventions that require substantial scientific and professional knowledge and skills. This occurs in a range of settings in partnership with individuals, families, whanau and communities. Registered Nurses may practise in a variety of clinical contexts depending on their educational preparation and practice experience. Registered Nurses may also use this expertise to manage, teach, evaluate and research nursing practice. There will be conditions placed on the scope of practice of some Registered Nurses limiting them to a specific area of practice according to their qualifications or experience.

The qualification for new entrants into this scope is an approved undergraduate nursing degree or equivalent. Current registered nurses and registered obstetric nurses will be registered in this scope under the HPCA Act.

The following table outlines how registration under the Nurses Act translates to the new Scopes of Practice.

Registration under the Nurses Act 1977	Scope of Practice under the HPCA Act 2003 (effective from 18 Sep 2004)	Conditions
Registered Comprehensive Nurse	Registered Nurse	
Registered General & Obstetric Nurse	Registered Nurse	May practise only in general and obstetric nursing
Registered Psychiatric Nurse	Registered Nurse	May practise only in mental health nursing
Registered Psychopaedic Nurse	Registered Nurse	May practise only in settings which provide services for consumers with intellectual disability
Registered General Nurse	Registered Nurse	May practise only in general nursing
Registered Obstetric Nurse	Registered Nurse	May practise only within a maternity facility under the direction of a midwife or medical practitioner

Conditions of Appointment

EMPLOYMENT AGREEMENT

The Collective Agreement which covers the work of this position is the District Health Boards/ NZNO Nursing and Midwifery Multi-Employer Collective Agreement (Collective Agreement) which applies to employees appointed to roles that are covered by the Collective Agreement and who are members of the New Zealand Nurse Organisation (NZNO) union.

NATURE AND TENURE OF APPOINTMENT

The appointment will be subject to the conditions contained in this schedule, MidCentral District Health Board's policies and appropriate legislation.

Permanent Employment

The appointment is permanent but may be terminated by four weeks' notice in writing by either party. In the event of the appointee being found to have breached the organisation's code of conduct or other policies, the appointment may be terminated without notice.

Casual Employment

The nature of the relationship is a casual "as required" employment relationship. Work is of an intermittent or irregular basis, and is not continuous. Each casual engagement is a separate period of employment and a separate contractual arrangement. MidCentral District Health Board is under no obligation to provide work to the appointee, and the appointee is under no obligation to accept work.

SALARY

The commencing salary for the appointment will be within the "Registered Nurse and Midwife Salary Scale", as specified in the Collective Agreement that applies at the time the position is taken up, pro rata to hours worked, with movement through the salary steps being by annual increment.

Salary is proportionate to hours worked. All salary payments will be made by direct credit to a nominated bank account in the appointee's name (or jointly including the appointee's name).

HOURS OF WORK

- Permanent Hours**

Hours of work will be as agreed with the successful applicant.

- Casual Basis**

Hours of work will be on an as and when required basis.

If the appointment is full-time the employee shall not engage in any other business or occupation without the prior consent of the Organisation. If an appointee is engaged in other business or occupation when taking up a full-time appointment with MidCentral District Health Board, and wishes to continue to participate in this other business or occupation, this must be disclosed to the hiring manager prior to accepting the appointment.

TREATY OF WAITANGI

MidCentral District Health Board is committed to its obligations under the Treaty of Waitangi. The appointee will be expected to incorporate the principles of the Treaty of Waitangi in their working practices.

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EQUAL EMPLOYMENT OPPORTUNITIES

MDHB is committed to the principles of Equal Employment Opportunities and all recruitment activities are conducted in accordance with these principles.

SMOKE FREE ENVIRONMENT

MidCentral District Health Board provides smoke-free workplaces that protect the health and comfort of employees, patients/ clients, contractors, volunteers and visitors. All buildings, grounds and vehicles owned, occupied or leased by MidCentral District Health Board are smoke-free. Employees are expected to promote smoke-free lifestyles and act as role models when working with patients/ clients and in the community.

CODE OF CONDUCT

MidCentral District Health Board has a Code of Conduct that sets out the standards of performance and conduct required of employees. Employees of MidCentral District Health Board are also required to act with a spirit of service to the community and meet high standards of integrity and conduct as set out in Standards of Integrity and Conduct - a code of conduct issued by the State Services Commissioner.

‘SHARED APPROACH TO WORK PRINCIPLES’

Developing a shared approach to working together

It is important that MidCentral District Health Board has a healthy and safe working environment in which all employees feel their contribution is valued and appreciated. The actions and behaviours below are intended to provide a guide and assist us all to develop and maintain this environment.

To be happy and proud in our work we will:

- Care for and support each other to have a safe work environment;
- Treat each other with trust and respect, recognising cultural and other differences;
- Communicate openly, honestly and act with integrity;
- Enable professional and organisational standards to be met;
- Support each other to achieve, and acknowledge contributions and successes.

MidCentral District Health Board does not tolerate bullying, harassment, or inappropriate behaviour in the workplace environment.

CONFIDENTIALITY

All employees are responsible for the security of confidential and sensitive information which is held by MidCentral District Health Board. All employees have a responsibility to comply with the requirements of the Privacy Act 1993 and the Health Information Privacy Code 1994 and any subsequent amendments.

It is a condition of employment for all employees that confidential or sensitive information is only accessed, used or disclosed as necessary to meet their employment or contractual obligations and in accordance with the relevant legislation, their professional obligations, and any other obligations imposed by law. Note: This does not preclude the sharing of clinical information among health professionals involved in the care or treatment of the individual on a “need to know” or consultancy basis.

Confidential information concerning a patient or client who is receiving or has received services provided by MidCentral District Health Board may not be accessed by employees not involved in the care or treatment of the patient or client, and also may not be disclosed to unauthorised persons,

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except for those specific cases defined in relevant legislation and as per MidCentral District Health Board's Confidentiality Policy.

HEALTH DECLARATION

Shortlisted applicants will be required to complete a Health Declaration form and provide this to the hiring manager. They may also be required to undergo a medical examination as part of assessing their ability to fulfil the requirements of the position.

DECLARATION OF CRIMINAL CONDUCT AND OTHER INFORMATION

Shortlisted applicants will be required to complete a Declaration of Criminal Conduct and Other Information form and provide this to the hiring manager.

POLICE CLEARANCE/ CHECK(S)

Some appointments at MidCentral District Health Board are subject to a Police Clearance which requires the applicant to complete a New Zealand Police Vetting Service Request and Consent Form. Additionally, overseas police checks may need to be applied for by the appointee if they have lived in any country other than New Zealand for 12 months or more within the last 10 years.

Shortlisted applicants will be advised of the requirement to undergo a New Zealand Police Clearance, and provide overseas police clearance/s, as required.

Notwithstanding the police clearance process upon appointment, in future all MidCentral District Health Board employees may be required to undergo police and/ or other vetting procedures, and all staff will be required to participate in this process.

MidCentral District Health Board reserves the right to withdraw any offer to the appointee, or if the appointee has commenced work, terminate employment, if any adverse information arises out of the police check/s.

VULNERABLE CHILDREN ACT 2014

Due to the this role having contact with children and MidCentral District Health Board's commitment to child protection, shortlisted applicants will be subject to 'safety checks' in accordance with the Vulnerable Children Act 2014 before any offer of employment is made. These checks are required periodically for existing employees in accordance with the relevant legislation.

APPLICATIONS

Applicants are required to complete an official form of application, providing names and addresses of three confidential referees* – one being the current or most recent employer or educator, and attaching a CV and cover letter. Copies of recent testimonials or any other information considered pertinent to the position may also be included. You can choose to submit your application via our online process or in writing. To apply online, please visit the "Vacancies" page under "Working at MDHB" on our website: www.midcentralthb.govt.nz.

Hard copy application forms are available by contacting Human Resources on +64 6 350 8850 or email vacancy@midcentralthb.govt.nz. If returning by post, your application should be addressed to **Human Resources, MidCentral District Health Board, Private Bag 11036, Palmerston North 4442.**

**Referee reports obtained or provided are subject to Section 27 (1) (c) of the Official Information Act 1982 and Section 29 (1) (b) of the Privacy Act 1993 and shall not be released or their contents disclosed to the applicant or to any person not directly involved in MidCentral District Health Board's appointment and review procedures.*

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MidCentral DHB's Values and Behaviours

All employees of MidCentral District Health Board will adopt the values and demonstrate the behaviours related to them of being Compassionate, Respectful, Courageous and Accountable - in the following ways:

COMPASSIONATE - KIA WHAI AROHA

- Is responsive to the needs of people, whānau and the community.
- Strives to deliver beyond expectations and go the extra mile.
- Shows concern for others and offers proactive and timely assistance and support to others.
- Is empathetic and mindful of others and sensitive to their feelings.
- Creates an environment where others feel safe and supported, encouraging them to contribute and share their views and perspectives.

RESPECTFUL – KIA MĀTĀTOA

- Shows politeness, admiration and honour to others and does not cause offence.
- Actively listens when someone is speaking and shows value for other peoples' perspectives.
- Genuinely engages and listens to others and considers their views while making decisions.
- Is inclusive of diverse perspectives and the cultural beliefs of others and actively seeks to improve own knowledge.
- Recognises team member strengths and development needs, and coaches them to maximise their potential.

COURAGEOUS – KIA WHAI NGĀKAU

- Speaks up when things are not right.
- Is adventurous in search of feedback and is open to feedback.
- Puts organisational interests ahead of their own.
- Speaks up when they have to contribute or when other's behaviour is inconsistent with the DHB's values.
- Champions innovative ideas in the team, and on behalf of the team.
- Is willing to question accepted approaches and processes and open to challenge.

ACCOUNTABLE – KIA NOHO HAEPAPA

- Acknowledges and assumes responsibility for their actions and does not blame others when things go wrong.
- Strives for excellence and delivers high quality care that focuses on the needs of the consumer and

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whānau.

- Is innovative and strives for quality and excellence.
- Following through on conversations – saying what you will do and doing what you say.
- Is able to intervene effectively when progress against budgets, plans or projects is off track.
- Is committed to rapid resolution of complaints, problems and issues.

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Appendix B – MidCentral DHB’s Strategy

WE ARE COMMITTED TO

Ka ū tā mātou mahi



WE ARE ABOUT

Better health outcomes, better health care for all

Ko tā mātou mahi

He whakapai ake i te hauora hei oranga mō te katoa

WE WILL BE

Compassionate Respectful
Courageous Accountable

Ka pēnei mātou

Ka whai aroha Ka whai ngākau
Ka mātātoa Ka noho haepapa

INDIVIDUALLY AND TOGETHER

WE WILL

Achieve quality and excellence by design

Connect and transform primary, community and specialist care

Partner with people and whānau to support health and wellbeing

Achieve equity of outcomes across communities

He mahi takitahi hei toa takitini

Kia kounga, kia hiranga te hoahoa

Kia mahi tahi me te tangata, me te whānau hei tautoko i te hauora me te oranga

Kia tūhono e pai ake ai te atawhai tuatahi, te atawhai hapori, te atawhai ngaio

Kia tōkeke ngā hua mō ngā hapori katoa

WE WILL ACHIEVE THIS SUCCESS THROUGH OUR

People Partners Information Stewardship Innovation

Ka eke angitu mātou mā

Ō mātou iwi Ō mātou hoa mahi Te whakamōhio Te tiaki Te auaha