

# Sector Update from the Office of the Chief Nursing Officer



**May 2018**

## **Office Update**

Jill Clendon continues to act as Chief Nursing Officer. Any recruitment decisions with regard to a new Chief Nursing Officer will be made by the Director-General of Health when appointed.

The Government has identified four medium-term priority areas in health. These are mental health, primary health care, equity and child wellbeing (note: the Department of Prime Minister and Cabinet (DPMC) is leading the child wellbeing priority area with Oranga Tamariki). The Ministry has also identified five system issues for immediate focus. These are maternity care, drinking-water regulation, the DHB performance framework, electives and capital asset management.

The Ministry is working closely with the sector to respond to these system issues and to deliver on the Government's priorities for health. This includes identifying senior officials, clinicians and sector experts to own each priority area, and agreeing joint work programmes and governance arrangements with sector partners.

## **Māori Nursing Workforce**

Ramai Lord and Jane Bodkin hold responsibility for progressing the Office's programme to grow and support the Māori nursing workforce. In the last few months the Office has met with a number of Māori nursing leaders from various organisations to build understanding and collaboration. A small hui was held in late February with the National Nursing Organisation Māori Caucus and a hui involving a wider group of Māori nursing leaders is planned for June.

Ramai and Jane also spoke at the Te Ao Maramatanga Māori Caucus Biannual Wānanga at Maraeroa marae in Porirua in which Māori mental health nurses engaged in providing valuable feedback on growing the Māori nursing workforce.

## **Growing the Māori and Pacific mental health nursing workforce in the 3DHB group**

The 3DHBs (Capital and Coast, Hutt and Wairarapa district health boards) Mental Health and Addictions and Intellectual Disability Services (MHAIDS) had 25 new graduate nurses starting the Nurse Entry to Specialty Practice (NESP) programme in January 2018. The new graduate nurses on the programme reflect the diversity of people accessing services. There are 5 who identify as Māori and 5 as Pacific.

When selecting the NESP nurses, the recruitment team paid particular attention to recruiting locally and developing a diverse workforce. Here are some of the processes and practices 3DHB MHAID are applying to grow the Māori and Pacific NESP workforce: Māori and Pacific nurses sit on the NESP interview panel; all applicants who identify as Māori who chose mental health across the three DHB's as their first or second preference through the ACE process are interviewed; and Māori NESP nurses have access to cultural supervision on top of the fortnightly supervision they receive as part of the NESP programme and can attend regular Māori nurses' meetings and hui.

Māori mental health nurses already working for the DHBs are very involved in leadership and support activities providing mentorship for new graduate Māori NESP nurses, teaching in the Whitireia undergraduate and postgraduate programmes (including enrolled nursing and BN Māori programmes) and as part of advisory groups to Whitireia's nursing programmes.

## **Nursing Workforce – New Graduates**

### **New Graduate Employment Data**

Last year, TAS (the group who provide our ACE data) introduced new reporting processes and timelines in recognition of the way data remains dynamic during a recruitment intake. For example, applicants continue to change preferences, withdraw or accept job offers throughout the process. Reports are now based on two key points in the recruitment process when stable and reliable data is available – just after the electronic match (the Algorithmic Match report) and once the intake closes (the Intake Summary report).

The most recent report is available on the TAS website:

<https://tas.health.nz/assets/SWS/Workforce/ACE-Nursing-Reports/2017-EoY-Algorithmic-Match-Report.pdf>.

Future reports will be available here: <https://tas.health.nz/strategic-workforce-services/workforce/ace-nursing-reports/#Reports>

When looking at the Match Report for the November 2017 recruitment round, it is important to note it only includes results from the electronic (algorithmic) match, whereas previous match reports included both electronic and manual match results. This means care is needed when comparing results with previous years, as data may not be directly comparable.

The November 2017 Match report tells us that the percentage employed in the electronic match was higher than last year and more positions were available (913 positions compared to 784 last year). This has resulted in more applicants being employed sooner.

A recent update (indicative data only) on the November round, which includes results from both the electronic and manual match, shows that approximately 61% of applicants were matched in November and a further 215 (16% of the 1357 applicants) have since been employed from the talent pool (as at 29 March 2018).

This means that with three months to go in this round before the talent pool closes, just over 77% of graduates have been employed, up by at least 6% compared to last year.

The final Summary report on the November 2017 recruitment round is expected in July.

## **Enrolled Nurse Workforce**

### **Enrolled nurses and the General Medical Subsidy (GMS)**

In 2014 changes were made to the Health Cards Entitlement Regulations and the Primary Health Care Services Agreement to enable a broader range of health practitioners (including enrolled nurses) to provide general medical services (GMS) as part of the general practice team. For more information on GMS see here:

<https://www.health.govt.nz/our-work/primary-health-care/primary-health-care-subsidies-and-services/general-medical-services>

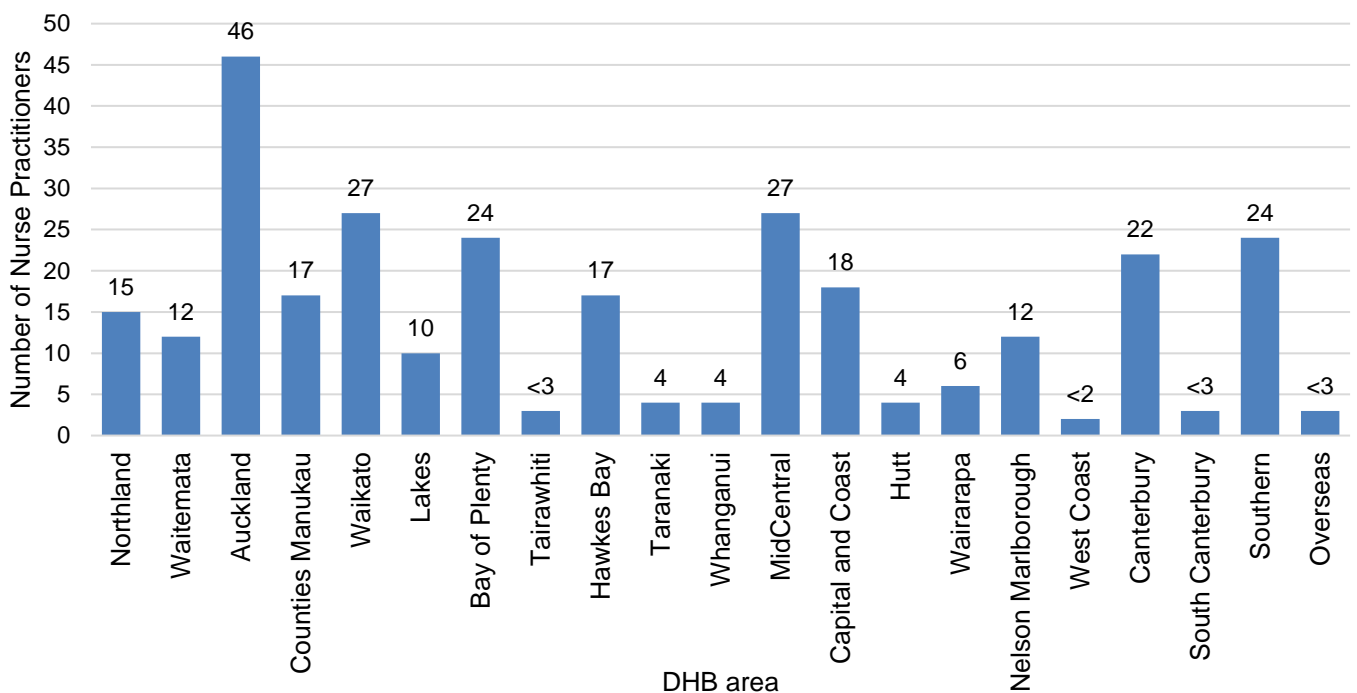
There have been some issues associated with enrolled nurses claiming GMS and the Office is working with the Digital Information and Technology and Finances teams at the Ministry to ensure that the systems and processes enable enrolled nurses' claims to be processed.

## Nurse Practitioners

The graph below shows the distribution of the 300 nurse practitioners in New Zealand by DHB. Note the accuracy of the data depends on the accuracy with which nurse practitioners fill in the fields on their Annual Practising Certificate. The numbers with the < symbol are ensuring we are keeping with the principles of the Privacy Act which require that statistics not be published in a form that could reasonably be expected to identify the individual concerned.

### Preliminary number of Nurse Practitioners in 2018 by district health board (DHB) area\*

Notes: Data was sourced from the Nursing Council of New Zealand (as at 31 March 2018)



## Cremations Regulations 1973

The Burial and Cremation Amendment Act 2016 (enacted in January 2018) enabled nurse practitioners to complete burial certification. Amendments have now been made to the Cremation Regulations 1973 to enable nurse practitioners to certify cremation.

<http://www.legislation.govt.nz/regulation/public/2018/0047/latest/LMS14402.html>

## Online death certification

The new online service for medical practitioners and nurse practitioners to complete medical certificates of cause of death and cremation forms is now LIVE. This is a joint Department for Internal Affairs (DIA) - Ministry of Health initiative, led by DIA.

This is the first version of the Death Documents service - future releases in 2018 will provide greater functionality and integration with other systems including the Health Practitioner Index and National Health Index. Information about future plans can be found under Upcoming features on the Death Documents Welcome page:

<https://deathdocs.services.govt.nz/welcome>

In conjunction with the launch of the online Death Documents service the pages containing information about the Burial and Cremation Act and guidelines for cause of death certification on the Ministry's website have been updated:

<https://www.health.govt.nz/our-work/regulation-health-and-disability-system/burial-and-cremation-act-1964>

Note that the reference to 'Cremation Certificate of Medical Practitioner' will be changed to include nurse practitioners once amendments to the Cremation Regulations come into force.

GPs and clinicians who provide hospice care have been the first users of the product. There has also been some successful use in three hospitals (Middlemore, Wellington and Timaru), which we are keen to expand.

An online video showing step by step instructions is currently being developed to assist health practitioners to complete certificates online. A link to this will be provided on the Death Documents website.

### **Nurse Practitioner Training Programme**

Health Workforce New Zealand (HWNZ) asked the nursing sector for feedback on the Evaluation of the Nurse Practitioner Training Programme. Submissions closed on 27 April. A number of submissions have been received. The Office and HWNZ will analyse the submissions and feedback will inform decision making with regards to the future of nurse practitioner training. The submissions will also be discussed at the next Nursing Advisory Group meeting.

### **Older Persons Health and Home and Community Support Services**

Four regional workshops were held in March and April as part of sector engagement to help design a framework for the purchase and delivery of home and community support for older people. Feedback was sought on draft core principles for future models of care (including that services will be person centred, flexible, integrated, equitable, responsive to Māori, future focused, and sustainable).

Consultation with the sector is ongoing as this work progresses. Next steps are the drafting of a National Framework for testing and evaluating. Work is also underway to develop potential outcome measures for home and community support services.

Kathy Glasgow is working with the HOP teams on this work and is the key contact from the Office for more information.

### **Primary Health Care**

Interviews have taken place for a Chief Advisor, Primary Health Care in the Office of the Chief Medical Officer. This position was advertised as a generic clinical position and a wide range of applications were received from across the professions. Jill Clendon was on the interview panel. We hope to make an announcement on an appointment in the next few weeks.

We are awaiting budget announcements to give direction for the implementation of new primary care funding and any primary health care review. The Office is working with the sector to identify the most appropriate ways of providing input into the review from the nursing profession.

### **Mental Health**

## **Implementation of amendments to the Mental Health (CAT) Act 1992 and Misuse of Drugs Act 1975**

Jane Bodkin has been working closely with the Office of the Director of Mental Health on implementation of the amendments to these two Acts that were part of the Health Practitioners Statutory References (to Medical Practitioners) Bill. There have been a number of sector queries related to changes to the Mental Health (CAT) Act. A letter responding to queries has gone to the Directors of Mental Health Nursing and the Directors of Area Mental Health. Updated guidance on the Mental Health Act will also address some of the queries. This should also be on the Ministry's website shortly.

A new Guidance document *Prescribing Controlled Drugs in Addiction Services* written for pharmacists, nurse practitioners and registered nurse prescribers in Opioid Substitution Treatment is almost complete and should be published on the Ministry's website shortly.

### **Three New Clinical Advisors**

Three new Clinical Advisors have been appointed in the Office of the Director of Mental Health. Jane Bodkin was on the interview panel. The new advisors come from Nursing, Clinical Psychology and Drug and Alcohol Counselling. They will have specific portfolios around forensics, addictions and Māori mental health among other things. The new Clinical Advisors will significantly increase the multi-disciplinary clinical capability in the Ministry in mental health and addictions.

### **Mental Health Inquiry**

The Ministry is supporting the Government Inquiry into Mental Health and Addiction. We have established a working group with representation from the Ministry and DHBs focused on ensuring improvements continue to progress while the Inquiry is underway, as well as considering the implications of the potential findings. The Inquiry is due to produce a report by 31 October 2018.

Work is also continuing on providing children in Christchurch and Kaikoura with mental health support, and an announcement on this is expected toward the end of April.

### **Therapeutic Products Bill**

Work is underway to draft a new Therapeutic Products Bill that will in time replace the Medicines Act. The new legislation will regulate activities relating to medicines (including cell and tissue products) and medical devices. This piece of legislation is large and complex. It will be of high relevance to nursing as it covers prescribing, administering, dispensing medicines and standing orders. Jill Clendon and Jane Bodkin are giving clinical advice from a nursing perspective into the policy work. There will be opportunity for the nursing sector to give input as the work progresses. The Office will keep you informed of progress.